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INTRODUCTION

2 Certification and certificate are two terms which stakeholders have always sworn by. 3 Hence, professionals certifying them are also, undoubtedly, in great demand. Every one requires 4 certification of their skills/services from higher authorities to prove their identity or credentials 5 or to avail remuneration for their services. According to the ideas and changes induced by the 6 present government, the process of getting our own documents certified from a gazetted officer 7 is now simplified to great extent.

This decision has brought relief to the public as certification/attestation by the gazette 8 officer or notary is one of the common hassles faced by the stakeholder. This change has affected 9 10 the documentation process and fast forwarded it, making it easier, henceforth, saving much time, energy and money of millions of Indians. This view has to be taken up further by the 11 professionals in the health sector. Professionals issuing the certificate should understand the 12 agony faced by Persons with disability (PWD) and their caregivers in acquiring a certificate of 13 disability. Persons with disability (PWD) having speech-language and hearing disorders are 14 evaluated for their level of functioning and skills, such as hearing, language, speech, reading, 15 writing, social etc. by Speech-Language Pathologists and Audiologists. However, based on their 16 findings, medical professionals such as ENT /members of the medical board are authorized to 17 issue certificate for hearing disability, autism, mental retardation, learning disability etc. This is a 18 19 peculiar situation, wherein a professional who has evaluated the person with disability is nowhere authorized to issue the certificate for the test findings and end results based on his 20 21 clinical, academic and research expertise. This situation also holds good for Clinical 22 Psychologist, Physiotherapist and other allied health care professionals.

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1 What the act says?

2 As per the Persons with Disability (PWD) Act (1995) and the guidelines illustrated at the website of the office of the Chief Commissioner for PWD, New 3 Delhi 4 www.ccdisabilities.nic.in/page.php?s=reg&t=pb&p=guide others retrieved on 13.09.2014, disability certificates are to be issued by a medical authority. Further it states that, "medical 5 authority" means any hospital or institution specified for the purposes of this Act by notification 6 7 from the appropriate Government. In pursuance of this, State Governments/UT administrations 8 are required to notify the medical authorities to issue a certificate of disability. The same term "competent authority" at present has not been illustrated under the revised Right based Disability 9 10 Act (2011). 8

The Persons with Disability Act (1995) was based on the American with Disability Act 11 (ADA) while the revised Right based Disability Act (2011) is based on the guidelines of United 12 Nations Conventions for the Rights of Persons with Disabilities (UNCRPD), to which 13 Government of India is a signatory body. If the basis of these acts is closely studied, it is obvious 14 that these acts are based on the social model rather than the medical model. More importantly, 15 the International Classification Function, ICF (2001) provides strong basis to the UNCRPD. As 16 per the ICF (2001) more emphasis is given on the social factors rather than the medical basis of 17 disability. The question raised here is on the feasibility of the disability certification issued by the 18 19 medical professional, when the speech, language, hearing, physical, psychological status of the 20 PWD are not thoroughly assessed by them. The medical professionals refer to the tests 21 administered and reports issued by the Speech Language Pathologist and Audiologist, Clinical Psychologist, Physiotherapist and other allied health care professionals as the basis to certify 22 23 these conditions. It is natural to doubt, if this is a double standard followed by the medical

professional or is it the double standard used by the authorities while framing these acts. PWD 1 (Speech-Language and Hearing, Psychological conditions, Physical and other health conditions 2 leading to disability) and their caregivers are the ones who move from pillar to post to get the 3 4 certificate of disability. Speech- Language Pathologist and Audiologist, Physiotherapist and Clinical Psychologist are clinically and academically competent to diagnose and treat various 5 conditions which falls under their purview as stated in the PWD Act (1995) and revised Right 6 7 based Act (2011). All these professionals have been thoroughly trained and competent enough to differentially diagnose and know the status of conditions which cause/lead to disability. 8

9 Certificate of Disability

10 This article is not aimed to question the competency of any medical professionals, but to address a common issue and concern. Persons with speech-language, hearing, loco motor, and 11 psychological conditions are assessed for their functional skills rather than the medical issues. 12 The certificate of disability is issued keeping in mind various factors like-functional status, 13 activity, participation, general and specific issues stated by PWD and his family, observations 14 made by professionals. Most of these are based on the motor/functional condition/skills rather 15 than the medical aspect. At the end of the day, the certificate claims to recognise the 16 physical/functional condition of the PWD which "disables" him and cannot be medically treated, 17 not the "medical" aspect which could be treated or managed by medical professionals. The 18 19 various medical conditions lead to one time impairment (such as loco-motor, hearing, speechlanguage etc.) which in most cases cannot be reversed. However, the functional outcome of these 20 21 conditions secondary to various medical issues can be improved. This improvement in physical, psychological, speech language and hearing skills helps in improving the overall growth and 22 23 independence of the PWD in the society. This is one of the reasons for the certificate of disability

to state whether the disability is of temporary or permanent nature. Also, for the same reason, the certificate of disability has to be renewed either annually or once in five years. Over these years, Speech-language pathologist, clinical psychologist, physiotherapist and other allied health professionals are putting their heart and soul in providing services for improving the skills of PWD. It is difficult to understand that when allied health professionals can independently assess and treat the conditions, what makes them less competent to issue the certificate?

Medical profession is a noble profession which saves lives of several thousands of people.
The skills of medical professionals are used to save lives and also to provide quality medical
services to the needy. Moreover, they deal with critical and life threatening medical conditions.
Meanwhile, PWD and their family have to wait for hours or at times, days or weeks to avail the
certificate. It is better to maximally utilize the services of medical professionals for their
expertise in providing medical intervention and some of their burden can be shared by allied
health professionals.

14 Authority or Service

Moreover, it appears that at least sometimes the issue of certificate of disability is 15 considered as an 'authority' rather than a service. The assumption that medical professionals are 16 more competent than the allied health professional; it's a myth and clearly reflects the authority 17 rather than the service silver line. The medical professionals issuing certificate of disability are 18 19 not registered under the Central Rehabilitation Register of Rehabilitation Council of India (RCI). This again points to the work done without license for PWD. In all the developed countries it is 20 21 mandatory for the professional issuing the certificate to undergo formal training for certifying the disability. They can be either medical or allied health professionals. In India, allied health 22

professionals are trained at graduate and post graduate levels to understand, assess, treat, and
 calculate the severity of disability and also advocates for the rights of persons with disabilities.

Therefore, it will be ideal if, the disability certificate is issued by the concerned allied 3 4 health professional/ medical professionals where ever applicable. Allied health professionals are the independent professionals; they compliment the medical professional in improving the 5 6 quality life for persons with various disabilities whose activity and participation has been 7 restricted due to one or the other impairments. Further, giving the right to issue certificate of 8 disability will make allied health professionals more responsible and the blame game can be avoided to a great extent. PWD and their caregivers need not move from one professional's table 9 10 to the other. There are certain conditions which can be certified by one professional, while other can be certified by a team of allied health professional and or medical professionals. It is 11 important to recognize the competence of the allied health professionals and to provide them a 12 free hand for issuing disability certificate. This will pave way for easy access to certification and 13 inclusiveness of both the medical and allied health professional as well as to the needy persons 14 with disability and their family members. 15

16 Allied Health Professionals

Further, there are national Institutes (Hearing, Visual, loco- motor and multiple disability) having their regional centres in different parts of the country and also reputed Institutes such as All India Institute of Speech and Hearing, All India Institute of Physical Medicine and Rehabilitation under Ministry of Health and Family Welfare which aim at providing quality services to the public and training for the professionals. In such organizations a team of allied health professionals is available under one roof. The services of these professionals are more accessible to the stakeholders with one or the other disability. It is also true that in some

organizations medical professionals serve as consultant for specified days and duration. Thus, it 1 becomes even more difficult for the stakeholders to obtain reports and certificates. This 2 movement of stakeholder from one organization to other organization causes unnecessary travel, 3 4 time loss, economic loss, and physical and mobility burden on the stakeholders. As more than one professional may be required to certify a condition and because these professionals are 5 available at different places, it leads to misuse of the stakeholders by the touts resulting in 6 collection of bribe and other favors from the family members or the stakeholders. As the person 7 is suffering from disability, the present system creates a further mental, physical and economic 8 barrier. Further, if there are lesser channels which are easily accessible, it can lead to better 9 10 accessibility for the stakeholders.

Most of the professionals working in other government, private or NGO running 11 professional courses in Allied health services have been trained in the pioneer Institutes, who are 12 either heading or working in different organization across the country. Therefore the quality of 13 education more so in the certification of disability is never even compromised. Thus, considering 14 the fact that neither stakeholders nor the professionals are having any benefit, it will be ideal if, 15 the certification of disability is also entrusted to allied health care professionals. Further the 16 conditions which are totally medical in nature should be taken care by the medical professionals. 17 Other conditions may be certified by the allied health professional or team of professional who 18 19 are registered with RCI. Table 1-5 illustrates the scope of different professional for certification of various disabilities. 20

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Sl No	Type of disability	Domain of disability to be assessed	Validity of certificate	
1.	Hearing Impairment	Hearing acuity	Once in five years	
2.	Hard of Hearing	2 aring acuity	Once in six months	
3.	Speech	Speech, articulation, voice, fluency, or the	Varies from six month to once	
	impairment	impairment of language comprehension	in five years	
		and/oral expression or the impairment of the		
		use of a spoken or other symbol system		

21 Table 1 Proposed certification disabilities by Speech language Pathologist and or Audiologist

1 Table 2 Proposed certification of disabilities by Clinical Psychologist

Sl No	Sl No Type of disability Domain of disability to be assessed		Validity of certificate
1. Intellectual		Intellectual skills	Clinical Psychologist
	Disability		

Table 3 Proposed certification of disabilities by Medical Professionals

Table 51	ble 5 Proposed certification of disabilities by Medical Professionals					
Sl No	Type of disability	Domain of disability to be	Professional for	Validity of		
SINO		assessed	certification	certificate		
1.	Blindness Vision		Ophthalmologist	Once in five years		
2.	Low-vision			Once in an year		
3.	'Hemophilia'	clotting ability of blood	Paediatrician or	Once in five years		
	remophine		Physician (Any one of	once in nice years		
4.	Thalassemia	Reduced or absent amounts of	them depending on the	Once in five years		
		haemoglobin	age of the person)	once in nive years		

Table 4 Proposed certification of disabilities Jointly by Allied Health and Medical Care Professionals

Sl No	Type of disability	Domain of disability to be	Professional for joint	Validity of
51 10	Type of disability	assessed	certification	certificate
1. Chronic neurological Neurological status Ar		Any three professionals	Once in five years.	
	conditions	Mobility – Motor	Neurologist	However
		movement Intellectual	Physiotherapist	Neurologist
		Communication	Clinical Psychologist	signature is
			Speech language	mandatory along
			Pathologist and or	with any other two
			Audiologist	
2.	Deaf blindness	Vision and Hearing	Ophthalmologist	Once in five years
			and Speech language	
			Pathologist and or	
			Audiologist	
3.	Leprosy cured'	Mobility	Physiotherapist	Once in five years
			and Orthopaedic surgeon	
4.	Locomotor	Mobility	Physiotherapist	Once in five years
	Disability		and Orthopaedic surgeon	
5.	Mental illness	mood, thought, perception,	Psychiatrist and Clinical	Once in an year
		orientation or memory	Psychologist	
6.	Muscular Dystrophy	Mobility and strength of	Any two i.e Neurologist	Once in a year,
		muscles	Physiotherapist	however in later
7.	Multiple Sclerosis'	Mobility and muscular skills	and Orthopaedic surgeon	stages once in five
				years even
				permanent
				certificate can be
				issued.

able 5	5 Proposed certification of disabilities Jointly by Allied Health Care Professionals					
Sl	Type of disability	Domain of disability to	Professional for joint	Schedule for renewal of		
No	Type of disability	be assessed	certification	the certificate		
1.	Conditions / Autism Spectrum Disorders Social skills Intellectual skills and any abnormal behaviours		Speech language Pathologist and or Audiologist an Clinical Psychologist	Once in five years		
2.	Multiple disabilities	Other than deaf blindness any combination of more than two disabilities Such as Speech Language, Hearing, Motor, Intellectual	Any three professionals Physiotherapist Clinical Psychologist Speech language Pathologist and or Audiologist			
3.	Specific Learning Disabilities	Academic, communication and intellectual skills	Clinical Psychologist Speech language Pathologist and or Audiologist	Once in a year.		

1 Table 5 Proposed certification of disabilities Jointly by Allied Health Care Professionals

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CONCLUSION

It is suggested that the certificate should be issued by the professionals holding a post 4 5 graduation in their respective profession. Also, it is mandatory that the professional is registered with the Rehabilitation Council of India. Then, it may be hoped that medical and allied health 6 professionals will have equal role and responsibility in issuing the disability certificate. Each 7 professional is competent and qualified to issue certificate in their respective domain. The system 8 needs to provide opportunity and create self-confidence measures, which can help them in 9 serving and being more responsible towards their services. Moreover, this will be in support to 10 the idea of Government of India to reduce the channels, thereby granting easy access to service 11 for persons with disability and to their family members/caretakers. 12

Address for Correspondence: Dr. S.P.Goswami, Professor of Speech Pathology, Dept. of
 Speech Language Pathology, All India Institute of Speech and Hearing, Manasagangothri,
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