A Study of Parents' Perspectives toward Cross disability Early Intervention Services offered to their Children with Disabilities at CDEIC Mumbai

[1]Ms. Niharika Singh, [2] Mrs Punam Mhatre
[1]*Lecturer (C), Department of Education, AYJNISHD(D), Mumbai*
[2]*Teacher and Co-ordinator, CDEIC, AYJNISHD(D), Mumbai*

***Abstract* - The establishment of CDEICs in India was a step towards realising the dream of early identification and intervention of children with disabilities. This is a flagship program which encapsulates 28 CDEICs at various National Institutes and Composite Regional Centres under the aegis of the Department of Empowerment of Persons with Disabilities, MSJ&E. These centres are equipped to provide identification, therapeutic, counselling and school readiness services under the same roof and boast the involvement of parents as the primary stakeholders.**

This research aimed to evaluate the efficacy of these services in addressing developmental delays and supporting children's holistic growth. A comparative study was also conducted to examine the shift in perspectives of parents who had enrolled their children in the CDEIC at its inception and three years later. This research states the effectiveness of these services in addressing developmental delays and supporting children's holistic growth. The population for the study included 85 participants, comprising parents of children availing of services at CDEIC, Mumbai. A mixed-method approach was used to combine quantitative data collected through a structured rating scale and qualitative insights from focus group discussions. Statistical data analysis provided an evidence-based understanding of the services' impact and identified areas for improvement.

Findings from this research will help to inform policymakers and practitioners about parental satisfaction, perceived outcomes, and recommendations for enhancing service delivery. By integrating parental perspectives, the study also underscores the critical role of stakeholder feedback in refining early intervention programs, ultimately contributing to the betterment of services for children with disabilities in India.

Keywords: **Parental perspective, Cross Disability Early Intervention Centres, Children with disability**

I. INTRODUCTION

Early childhood is universally recognised as the most critical period for human growth and development, during which the foundations of physical, cognitive, linguistic, social, and emotional functioning are laid (Bailey Jr, 2002). For children with disabilities (CwDs), this phase, the critical period, becomes even more significant, as timely identification and structured intervention can substantially reduce developmental delays and enhance long-term outcomes. Extensive national and international research has consistently demonstrated that early intervention not only improves functional abilities in children with disabilities but also promotes inclusion, independence, and quality of life across the lifespan (Majnemer, 1998). Consequently, early intervention has emerged as a cornerstone of contemporary disability rehabilitation and inclusive education frameworks.

In India, efforts to strengthen early identification and intervention have gained momentum over the past two decades, supported by progressive legislation, policy reforms, and national programmes. The United Nations Convention on the Rights of Persons with Disabilities (UNCRPD) provides the global rights-based framework that guides policies, programmes, and practices related to persons with disabilities, including children (Chan, 2025). The enactment of the Rights of Persons with Disabilities Act (RPwD), 2016, stated the importance to ensure early identification, intervention, and support services for children with disabilities. Similarly, the National Education Policy (NEP), 2020, underscored the importance of early childhood care and education (ECCE), foundational literacy and numeracy as prerequisites for achieving sustainable educational outcomes. These policies very clearly state the importance of early identification followed by intervention to ensure better development. It also focuses on the future that holds independent and better living for these Children with Disabilities.

Despite these policies, the status of early intervention services in India has traditionally been uneven. Many early intervention centres work on a single-disability framework, offering limited diagnostic and therapeutic services. Parents of children with multiple or profound disabilities have often been found to struggle. They have to balance between multiple institutions to access diagnostics, therapies, counselling, and educational support. This staggered system often results in delayed intervention, increased financial and emotional burden on families, and reduced continuity of care. For parents, particularly those from financial and social limitations, such challenges can act as significant barriers to a sustained intervention process.

In response to these gaps, the Department of Empowerment of Persons with Disabilities (DEPwDs), Ministry of Social Justice and Empowerment in accordance with the SIPDA Scheme, took the command. They conceptualised and established Cross Disability Early Identification and Intervention Centres (CDEICs) in 2021 as a flagship initiative. These centres were designed to function as comprehensive, family-centric programmes providing a wide range of services to children with disabilities from zero to six years of age under one roof. The establishment of CDEICs marked a historic shift from disability-specific models to a cross-disability approach. These centers help in recognising the heterogeneity of developmental needs among young children and the necessity of coordinated, transdisciplinary support systems.

CDEICs aim to deliver integrated services encompassing early identification, therapeutic services, parental counselling, and school-readiness programmes. These services are implemented by a transdisciplinary team comprising special educators, therapists, psychologists, medical professionals, counsellors and Divyang mitras. The objective is not just to address deficits but to enhance developmental potential, minimise disability related complications, and prepare children for transitioning to an inclusive educational setting. Significantly, it emphasises parental involvement, empowerment, and partnership. It acknowledges parents as primary stakeholders in the rehabilitation and educational journey of their children with disabilities.

Among the 28 CDEICs established across the country, the Cross Disability Early Intervention Cum Preparatory Centre in Mumbai is recognised as a model centre by DEPWD, MSJE, GoI. It also holds particular significance due to its urban context, diverse population, and high service demand. Mumbai, as a metropolitan city, presents unique challenges and opportunities in the delivery of early intervention services. While access to specialised professionals and advanced infrastructure is relatively higher, families often face constraints related to time, transportation, cost of living, financial constraints and psychosocial stress. Understanding how parents perceive the quality, accessibility, and effectiveness of services offered at CDEIC Mumbai becomes crucial for evaluating the real-world functioning of this model in an urban Indian setting.

Parental perspectives play a central role in determining the success of early intervention programmes (Edwards et al., 2017). Parents are not only the primary caregivers but also active participants in therapeutic and educational processes. Their perceptions reflect on the utilisation of the provision of the mandated services, adherence to intervention plans designed for each child, long-term engagement with professionals, successful transition of the children and follow up post transition . Research indicates that when parents perceive services as responsive, supportive, and effective, they are more likely to collaborate actively with professionals and reinforce intervention strategies within natural home environments (Woods et al., 2011). Conversely, dissatisfaction or unmet expectations can lead to reduced participation and discontinuation of services.

While existing studies have examined parental satisfaction and perspectives regarding early intervention services in general, limited research has explored parental perspectives across all four core service domains: intervention, therapeutic, counselling, and school-readiness, within a single integrated framework. Furthermore, there is a paucity of location-specific studies focusing on metropolitan CDEICs such as Mumbai, where service delivery dynamics may differ from other regions. Addressing this research gap is essential for generating context-specific insights that can inform policy implementation, service enhancement, and professional practice.

In essence, understanding parental perspectives is not merely an evaluative exercise but a reflective process that contributes to continuous quality improvement. Parents' voices offer grounded, experiential knowledge that complements professional assessments and policy intentions. As CDEICs continue to evolve as a national model for early intervention, research-based evidence drawn from parental experiences will play a pivotal role in sustaining and enhancing the impact of these centres. The present study is an attempt in this direction, focusing on the lived experiences of parents whose children are beneficiaries of the CDEIC Mumbai and contributing to the growing body of literature on inclusive, family-centred early intervention services in India. Such insights are critical for strengthening parent-professional partnerships, refining service delivery models (Hohfled et al.,2018) and ensuring that the vision of CDEICs, i.e. shaping strong futures for children with disabilities, is effectively realised in practice.

II. REVIEW OF LITERATURE

Pagolu and Rao (2020) conducted an observational study of children at the District Early Intervention Centre (DEIC), Visakhapatnam, for a period of one year. Children referred to DEIC were screened by the paediatricians per Rashtriya Bal Swasthya Karyakram (RBSK) norms. The information of the children who attended the DEIC, such as age, sex, source of referral, diagnosis, treatment given and outcome, was tabulated and analysed. On analysis of developmental delays and disabilities, language delay was the most commonly screened condition seen in 941(14.31%) children. 917 children have hearing impairment (13.95%), learning disorder in 704 (10.71%) children and neuro motor impairment in 584 (8.88%). Vision impairment was seen in 505 (7.68%) children, motor delay was seen in 462 (7.02%), and cognitive delay was seen in 205 (3.11%). There were 68 (1.03%) cases of behavioural disorders (Autism) that were treated with multi-modal therapy, including sensory integration. The researchers concluded that promotion of early intervention services is most beneficial for improvement in the health status of children.

Prabhu, Roshni and Shukla (2021) conducted a study to assess the functioning and infrastructure of DEICs, as well as beneficiary feedback. An observational checklist based on norms was used to assess facilities and staffing patterns, and a semi-structured questionnaire was used to collect beneficiary feedback in Raigarh and Raipur. The results revealed that DEIC Raipur was deficient in staff and infrastructure. Of all referred cases, only 38.9% and 31.5% reached DEIC Raipur and Raigarh, respectively. DEIC Raigarh deserves special mention. It has a specialised orthotics unit, a "sensory garden," and a disability rehabilitation centre. The study further revealed that beneficiaries faced many difficulties at DEIC despite having the necessary referral forms. 73.4% of parents said loss of daily wages was a deterrent to attending DEIC repeatedly for follow-up. The study concluded that staff and infrastructure were deficient in DEIC Raipur. DEIC Raigarh had a well-equipped rehabilitation centre and could be developed as a 'Model DEIC'. Beneficiary feedback was below satisfaction.

Bennett (2012), chose the topic 'parental involvement in early intervention programs for children with autism' for her research study. The study aimed to describe the perceptions of mental health professionals and practitioners on the parental involvement in early intervention programs for children with autism. Interviews were completed with eight mental health professionals and practitioners to better understand the importance of parental involvement, the role parents play within an early intervention program, and the impact parental involvement or lack thereof can have on the child's success and their success in the early intervention program. The data was collected through the completion of eight unstructured interviews within two months. The researcher used content analysis to analyse the data collected. The findings indicated lack of parental involvement is detrimental to the child's development and progress within an early intervention program

III. METHODOLOGY

A mixed method study, with explanatory sequential design, was conducted by the researchers abd data was collected at CDEIC, located at AYJNISHD(D), Mumbai. A convenient sampling method was utilised to select 85 parents, whose CwDs were availing or had availed all the services for at least six months or above from the aforementioned CDEIC. The rating scale developed in English & Hindi, by the researchers and validated with the support of field experts, was used for data collection from the parents

who gave consent to act as participants in the present study. The developed rating scale consisted from the participants were then evaluated based on of 5 sections namely A, B, C, D & E. Items in section-A were developed to collect demographic details while the remaining 4 sections were developed to collect the parental perspectives on (i)screening and identification services, (ii) therapeutic services, (iii) counselling services and(iv) school readiness services offered to CwDs at CDEICs. Likert's 5-point scale (very good/ good/ acceptable/ poor /very poor) was used for rating. The finalised rating scale consisted of 40 items for rating. Consent letters were obtained from the selected participants, and the rating scale was given to each of Likert's 5-point scale. The participants' total scores were entered into the Excel sheets. Descriptive statistics were used for data analysis. A focus group discussion with 5 leading and probing questions was carried out with 10 parents. The data was transcribed and triangulated to develop the emerging themes.

IV. RESULT

The demographic details of the parents who participated in the study revealed considerable variation across age, educational qualification, disability status of the children, and year of enrolment at the CDEIC. Considering the age of the parents, it was observed that 40% (n = 34) of the parents belonged to the age range of 20–30 years, 50% (n = 43) were in the age range of 31–40 years, 8% (n = 7) were in the age range of 41–50 years, and the remaining 2% (n = 1) were in the age range of 51–60 years. With respect to the educational qualifications of the parents, it was found that 17% (n = 14) had education below Class X/SSC, 3% (n = 3) were educated up to the HSC level, 38% (n = 32) were graduates in different fields of study, and 25% (n = 21) possessed postgraduate degrees. Analysis of the disability conditions of the children indicated that 19 parents had children with Autism Spectrum Disorder (ASD), 17 parents had children with speech disorders, 15 parents had children with hearing impairment (HI), 10 parents had children with multiple disabilities (MD), 8 parents had children with Cerebral Palsy (CP), 8 parents had children with Attention Deficit Hyperactivity Disorder (ADHD), while 4 parents each had children with Down syndrome (DS) and intellectual disability (ID). The study further revealed that 68% (n = 58) of the total parents enrolled their children with disabilities at the CDEIC during the year 2021. The remaining 32% (n = 27) enrolled their children between the years 2022 and 2024, of which 14% (n = 12) enrolled in 2022, 11% (n = 9) in 2023, and 7% (n = 6) in 2024.

The data obtained from the rating scale administered to 85 parents of children with disabilities were analysed using descriptive statistics. The results are presented according to the four domains of services assessed: screening and identification services, therapeutic services, counselling services, and school-readiness services. Parental responses to items 1–10, which assessed screening and identification services, indicated that 61.73% (n = 52) of the parents rated these services as *excellent*. Additionally, 33.33% (n = 28) rated the services as *good*, and 4.94% (n = 4) rated them as *average*. None of the parents rated the screening and identification services as *poor*. Responses to items 11–20, related to therapeutic services, showed that 65.43% (n = 56) of the parents rated the services as *excellent*, while 24.69% (n = 21) rated them as *good*. A smaller proportion, 9.88% (n = 8), rated the services as *average*. No parent rated the therapeutic services as *poor*. Analysis of items 21-30, which examined counselling services, revealed that 60.49% (n = 51) of the parents rated these services as *excellent*. Furthermore, 37.04% (n = 31) rated the services as *good*, and 2.47% (n = 2) rated them as *average*. None of the parents rated counselling services as *poor*. Parental responses to items 31–40, assessing school-readiness services, indicated that 58.02% (n = 49) of the parents rated these services as *excellent*, while 40.74% (n = 35) rated them as *good*. A very small proportion, 1.23% (n = 1), rated the services as *average*. None of the parents rated school-readiness services as *poor.*

The thematic analysis of the focus group discussion showed that most parents had positive views about the services provided at CDEIC Mumbai. Parents shared that early screening helped them identify their child's developmental difficulties at the right time. Many parents noticed improvement in their children's communication, behaviour, attention, sitting tolerance, social interaction, and independence after regular intervention.

Parents appreciated that different services such as speech therapy, occupational therapy, counselling, and special education were available under one roof. They also spoke positively about the caring and

supportive behaviour of the staff and professionals. Parent empowerment programmes, group therapy sessions, and opportunities to interact with other parents were found to be helpful.

Parents further shared that school readiness activities, summer camps, and festival celebrations helped improve their children's participation and social skills. However, a few parents suggested that more therapy sessions and additional staff members would further improve the services.

V. CONCLUSION

The present study focused on the perspectives of parents toward early intervention services offered to their children with disabilities at the Cross Disability Early Intervention Centre (CDEIC), Mumbai, with specific reference to screening and identification, therapeutic, counselling, and school-readiness services. The findings indicate that the majority of parents perceived all four service domains positively, with most rating them as excellent or good. These results strengthens the significance of early identification and on-time intervention during the crucial early years of development. It highlights the effectiveness of providing comprehensive, transdisciplinary disciplinary services under one roof. (King, et al., 2009; Bell, A., 2010). The positive parental responses further reflect satisfaction with the quality of professional support, infrastructure, and coordinated service delivery adopted by the CDEIC model.

The study also underscores the importance of a family-centred approach in early intervention programmes. (Mohammed, A. et al., 2025) Parents, being the primary caregivers and active partners in the intervention process, are well-positioned to evaluate the usefulness and impact of services received by their children. While the overall findings are encouraging, the presence of a small proportion of average ratings across some service domains suggests the need for continuous monitoring, periodic programme evaluation, and quality improvement. Strengthening human resources, enhancing therapy frequency, and ensuring consistent counselling and parent empowerment initiatives may further improve service delivery. In conclusion, the study affirms that CDEICs serve as an effective and inclusive model for early intervention in India, contributing meaningfully to the developmental progress of children with disabilities and supporting families during the critical early years.

VI. RECOMMENDATIONS OF THE STUDY

The study suggests that CDEICs should improve testing facilities and fill vacant staff positions to provide better services. More therapy sessions and outdoor activities can also help children in their overall development. Parents should be given regular information about government schemes like UDID. CDEICs can also take feedback from parents to improve their programmes. Researchers can do more studies on child development and the working of CDEICs. Parents should stay connected with teachers and professionals and attend empowerment programmes regularly. Parent networking and support at home can also help children learn and grow better.

VII. LIMITATIONS

Standardization of the developed tool was not carried out due to a paucity of time. So the standardization of the tool could be done. A pilot study was carried out only on two parents of a CDEIC. The study was carried out in the CDEIC at Mumbai, so the generalizability of the results can not be done on all CDEICs. More such research studies can be done across the 28 centres to see the effectiveness of the programme.

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