INDICATORS FOR CBR PROGRAMMES
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INTRODUCTION:

All the programmes of CBR carry out some kind of monitoring and evaluation of activities. This includes some indicators to assess and analyse the activites and functioning of the programme
(process indicators), as well as, indicators to verify the effects of the programme on the target groups (outcome indicators).

In addition, all programmes use some indicators related to the baseline situation of the target groups for the planning of activities like for example, the number of disabled persons in a population.

However, there is a wide variation between the indicators used by CBR programmes in different countries and among different projects in the same countries. This lack of standardisation of indicators, makes it very difficult to compare the activities of different CBR programmes at national and international levels.

More often, programmes use process indicators like number of training courses held or number of meetings held, which do not provide complete information about the quality of activities.

Outcome indicators, which can provide qualitative information about the effectiveness of the activities are used less frequently and where used, are mostly related only to the medical component of the activities. This is also because, even if social and community activities are an important part of the CBR programmes and it is difficult to find objective ways to measure such activities.

The group identified the following aspects related to the indicators, as being the most important:

- Need for identifying some standard indicators, to be used by all CBR programmes, which are simple to measure and which reflect the multi-sectoral nature of CBR programmes.

- Need for identifying one or a few key indicators, which can provide a general assessment of the effectiveness of CBR programmes.

2. DISCUSSION METHODOLOGY:

The participants were divided into two groups and were asked to analyse the possible indicators for CBR programmes. One group examined all the possible indicators related to the four major participants connected with the CBR programme (disabled persons, families of disabled persons, community and goverment). The second group discussed the same issue looking at the main sectors involved in CBR programmes (general information about disabled persons, medical aspects, education aspects, occupational aspects and community aspects).

3. POSSIBLE INDICATORS FOR THE MAJOR PARTICIPANTS OF CBR PROGRAM

The group looked at the possible indicators related to the major participants of CBR programmes, that is: disabled persons, families of disabled persons, community and goverment. All the possible
 indicators were examined to see if they would be: easy to collect; objective; and broad/multi-sectoral.

3.1 Indictors related to disabled persons:

No.of disabled persons improving in skills / Total no.of disabled persons in the programme

This indicator would give information about: dedication of family members; commitment of disabled persons; commitment of volunteers/local supervisors; general functioning and quality of programme; value of training.

3.2 Indicators related to the families of disabled persons:

No. of D.P. & family members active as volunteers / No.of households with disabled persons

This indicator would provide information about: participation of disabled persons and their families in the programme; awareness of the programme in the target group.

3.3 Indicators about community:

(a)
No.of volunteers who drop out / No.of volunteers trained

This indicator would provide information about quality of: community participation; training; awareness campaign; referral system support; CBR team work.

(b)
No.of pupils spending time with disabled children / No.of pupils

This indicator was suggested by Lesotho CBR programme to assess their "child to child" component of CBR programme. It was felt that the data needed for calculating this indicator will be difficult to collect and it would be subjective.

(c)
No.of D.P./parents involved in D.P.O./parents organisations / No.of households with disabled persons

This would provide information about: empowerment of disabled persons; social and political participation; success of awareness campaigns.

(d)
No.of D.P.participating in family productive activity / No.of disabled persons

It was felt that the data needed to calculate this indicator will not be easy to collect and it may be difficult to separate productive from non-productive activities. This indicator would show: self-sufficiency; social participation; validity of programme.

(e)
No.of D.P.participating in religious activities atleast 4 times per year / No.of disabled persons

This would provide information about: social participation and integration in the community. Some

of the participants questioned the usefullness of this indicator and felt that it was not appropriate.

(f)
No.of volunteers in CBR programme / Total population

This would show: commitment of community; level of awareness.

(g)
No.of D.P.active in social & polititical movements / No.of disabled persons

This would provide information about: active involvement of disabled persons in the society; empowerment of disabled persons. However, some participants felt that it is not an appropriate indicator because of the difficulty in having objective data.

(h)
No.of married disabled persons / No.of disabled persons

This would provide information about: equalisation of opportunities; quality of life. For this indicator also, some participants questioned it's usefulness.

3.4 Indicators about government:

(a)
No.of employed disabled persons (receive salary) / No.of disabled persons of employable age

This would provide information about: self sufficiency; integration; contribution of disabled persons in local development.

(b)
No.of disabled children in schools or education / No.of school age children

This would provide information about: equalisation of opportunities; social integration; changes in attitudes towards disability.

(c)
No.of community rehab. workers paid by Govt. / No.of disabled persons

This would provide information about: commitment of govt. institutions to the CBR programme; level of collaboration with existing infrastructures.

(d - 1)
No.of D.P. sent to CBR program by referral system / No.of disabled persons

(d – 2)
No.of D.P.sent to Referral system by CBR / No. of disabled persons

It was felt that the number of persons referred to the CBR programme by the referral system would be

a better indicator for the awareness and acceptance of CBR programme. To assess the involvement and functioning of referral system, more commonly, we measure the number of disabled persons referred to the referral system.

(e)
Life expectancy of D.P. in programme area / Life expectancy in general population

This was felt to be a very broad indicator to assess the overall situation of diabled persons and about the equalisation of opportunities. It was however felt that it would not be easy to measure.

4. INDICATORS BASED UPON DIFFERENT SECTORS INVOLVED IN CBR PROGRAMMES:

This discussion did not examine all the possible indicators related to the different sectors involved in CBR programmes and was limited to indicators: related to the outcome of CBR programme; which may be easy to measure at national level; and which provide the most significant information about the effectiveness of the activities concerned sector. It was felt that out of this group of indicators, it may be possible to identify some possible "key" indicators.

The group also analysed how the changing of the denominator could change the type of the information that can be revealed by an indicator. The main indicators identified were as following:

4.1 Genenral indicators about disabled persons:

* About numbers of disabled persons:

(a)
Number of disabled persons in the country or province or area / Total population in the country or province or area

This information would be useful for the planning of services and resources. While the information about the number of disabled persons in a limited area can be considered reliable, at national level, often this information is expressed, mostly as an estimate. Lack of consensus about what consitutes a disability, often limits the use of this indicator for comparisons at international level. However, in many countries, the data needed for calculating this indicator is easily available from census figu

* About age distribution of disabled persons:

(a)
No.of disabled children in 0 to 5 age group in a country or area / Total no. of disabled person in a country/area

This would help in finding out if a specific age group of disabled persons receives proportionate amount of resources in a programme and for planning of activities. Such indicators can be calculated

for different age groups.

(b)
No.of disabled children in 0 to 5 age group in a country or area / Total no.of children in 0 to 5 age group in a country or area

Such information can help in asking for a bigger share of resources for specific services or infrastructures for a specific group of disabled persons.

* About kind of disability:

(a)
No.of persons with a specific disability in a country or area / Total no.of disabled persons in a country or area

Again such information can help in planning of services and resources, so that these are distributed in an equitable manner.

Apart from the above-mentioned indicators, some other data was discussed like geographical distribution, ethenic distribution, number of married disabled persons, etc. However, these other data were considered to be less important.

4.2 Indicators about CBR committees:

It was felt that for the CBR committees, only process indicators (number of meetings, number of mebers, numbers of sectors involved, etc.) are faesible and these indicators did not provide qualitative information about the functioning of these committees.

However, use of a check-list to control the participation of different components of the community in the CBR committees (for example, are disabled person's organisations are present in the committee, are different goverment ministries represented in the committee, etc.) can be useful.

4.3 Indicators about medical component of CBR programme:

(a)
progress in A.D.L of disabled persons in the programme / Maximum possible progress in A.D.L. of D.P.

For measuring the progress in the activities of daily living of the disabled persons in the programme, the form provided in the WHO manual should be used, which allows the grade the progress in numbers. Over a period of time, a positive change in this indicator will show the effectiveness of: training of L.S./volunteer; commitment of L.S./volunteer; rapport between the L.S./volunteer and the disabled person and family; effectiveness of referral system; etc. However, it must be kept in mind that many disabled persons will never acheive the maximum possible score and thus, after an initial increase, this indicator may not show any change.

(b)
No.of disabled persons with functional self-sufficiency in program / Total number of disabled persons in the programme

Once again, this can be measured in numbers, by using the form for the assessment of functional self-sufficiency provided in the WHO manual (form II) and grading the answers.

(c)
No.of disabled persons referred to district or province / Total number of disabled persons

An increase in this indicator may show that there is awareness/collaboration with the referral system but may also mean that that the quality of training provided to L.S.volunteers is not adequate so that more persons are referred.

4.3 Indicators for the educational aspects:

(a)
Disabled children going to primary school / No.of disabled children of school going age

The group felt that this was a broad indicator reflecting: community participation; teachers involvement and training; attitude change; functional self-sufficiency; provision of orthopaedic appliances; effectiveness of media campaigns, etc. However, information about going to school may not indicate if the disabled children are effectively integrated and do not merely sit in a corner in the class. Still, this may be used as a "minimum quality indicator" which means that majority of good, multi-sectoral CBR programmes should be able to show an increase in it's value, over a period of time.

Some other variations of this indicator can also be useful like for example: number of disabled children who do not complete the primary school compared to the number of non-disabled children who do not complete it; number of children with mental disability going to primary school compared to other disabled children; etc.

(b)
Disabled children going to the secondary school / No.of disabled children of secondary of school going age

This would reflect better the integration of school children in the education system but this has to compared with similar information from the non-disabled children of secondary school going age. Again, variations of this indicator can consider: school drop-out rates; school going for specific types of disabilities; etc.

For both the above indicators, calculation of disabled children completing the primary or secondary school may provide better information about the effectiveness and impact of the programme.

4.4 Indicators related to occupational aspects:

(a)
No.of economically self-sufficient disabled persons / Total no.of disabled persons

The main difficulty with this indicator is the definition of economic self-sufficency.

(b)
No.of employed disabled persons / Total number of disabled persons of employable age

5.CONCLUSIONS:

A number of possible indicators were identified during the discussion. These need to be field tested to see if the data required to calculate an indicator is easily available and if it is reliable. Then, it will be neccessary to verify, if the changes in the value of an indicator are associated with a correspon ding change in the programme. Lastly the numerical values of the indicator will need to be standardised.

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