

MULTI-SECTORAL APPROACH IN CBR

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Introduction

Whilst the architects of Community Based Rehabilitation (CBR) conceived of the approach as involving all sectors of the society the majority of early attempts to translate the philosophy into practice grew out of health based programmes. However the goal of CBR is to contribute towards the empowerment of persons with disabilities, facilitating an independent life style in which they participate in all aspects of community life. Multisectoral collaboration is therefore imperative if such a goal is to be achieved, as no one sector alone, can achieve such a broad objective. The breadth of the challenge necessitates a partnership between all the various sectors ie ; health, education, labour, vocational, housing, welfare, sports and agriculture, in collaboration with NGOs, Disabled Peoples Organisations (DPOs), and the traditional and religious leaders within the community.

Rationale for a multi-sectoral approach

In many ways the needs of persons with disabilities are the same as their able-bodied peers. Such needs cut across all sectors. Moreover the community represents disabled persons of all ages, at different stages of life different sectors come into play. No one sector can begin to respond to the comprehensive needs involved in the rehabilitation process. CBR programmes should seek to meet the needs of disabled persons of various aetiologies and of all ages. If the initiating group does not have the expertise to address the needs of a specific target group they should seek out the relevant partners to develop a more comprehensive approach.

Problems in achieving a multi-sectoral approach to rehabilitation

The one factor that unites disabled people throughout the world is the low priority they are given within their countries. Where a response has been forthcoming it is often limited in effectiveness because of the lack of collaboration between government departments. A unified response has not been forthcoming for a variety of reasons including:

- lack of political commitment which is reflected in the absence of a national policy on disability issues
- rigid Ministerial demarcations which prevent collaboration as different sectors vie for resources
- ministries have often developed an inertia of their own characterised by a fixed way of doing things
- poor communication between ministries
- competition between sectors, each of which wants to be perceived as the 'lead' body
- lack of a tradition of collaboration where the emphasis has instead been on vertical training which emphasises particular professional orientations

Difficulties in Establishing a Multi-sectoral Approach: Mongolia CBR Programme

In Mongolia, the national CBR programme was started in 1990 under the Ministry of Health. A CBR coordinating committee was created, formed by a representative of the Ministry and three doctors.

After some time, the team realised that there were different government ministries as well as donor agencies, working for rehabilitation programmes for disabled persons and that some kind of coordination was needed. It was decided to organise a meeting of all the concerned organisations and departments working in the field of disability in 1994, to bring all the activities under a single coherent strategy. This would serve to avoid overlapping and duplication of activities, as well as, avoid destructive competition. In this meeting, the following organisations participated: Ministry of Health and Italian NGO AIFO which work together for the national CBR programme; Ministry of Special Education (MOSE) and the Danish agency DANIDA, which are operating for training of teachers and special education for disabled children; UNICEF and the British NGO SCF, which work at pre-school level and mother and child care centres. This has been the first step towards a multi-sectoral approach in the CBR program

The challenge of establishing a multi-sectoral approach in rehabilitation

An essential element in promoting a multi-sectoral approach is the creation of a National CBR Co-ordinating Committee. Where such committees have been effectively established a foundation has been established for collaboration between the various sectors. This has been the experience in societies as different as the highly populated country of Viet Nam in Asia and the sparsely populated island of Rodrigues in the Indian Ocean.

4.1 Development of a National Policy

An essential goal of the CBR Co-ordinating Committee would be to develop a National Policy on disability. Within such a policy disability issues would be regarded as an integral element of all government departments. Within the sphere of health disability would be seen as one element to address within a comprehensive primary health care programme. In a similar way, the adoption of a policy of inclusive education would promote a philosophy in which schools explore ways to respond to the diversity of needs of all children. Such a National policy would also inspire training centres to accept disabled persons on their courses. The Co-ordinating body will be able to draw on the UN Standard Rules as a guide to developing a multisectoral approach.

Such approaches would not therefore depend on the vision of gifted and creative individuals but would be considered to be the basic responsibility of all sectors. A National Co-ordinating body can play a key role in translating these hopes into reality. In Viet Nam for example the Co-ordinating Committee assisted in the formal endorsement by the National Government of CBR as an integral part of the Primary Health Care approach.

4.2 Clarification of the respective roles of various sectors

A second major objective for the Co-ordinating Committee would be to clarify the respective roles of the various sectors involved in the field of disability. The Committee would press for specific commitments to the goals of CBR on behalf of various ministries. This commitment to CBR would be manifested in terms of the assignment of specific personnel, dedicated budgetary allocations for

recurrent expenditure of CBR, and in-service training of staff along the lines suggested by the CBR philosophy. The problem of competition between various government agencies for scarce resources may be overcome if the budget is spread between ministries rather than having any one Ministry with the full responsibility for the budget. Another challenge for the Committee would be to co-ordinate the work of the NGOs to avoid duplication and parallel programmes.

4.3 Create a mechanism for effective collaboration between various sectors

Inter-Ministerial rivalry could be overcome by requesting a body higher than the implementing body to take charge of the co-ordinating role. This has been achieved in Viet Nam through the monitoring role of the Vice Chairperson of the Peoples Committee which oversees the rehabilitation work of the various government agencies. In a similar way, a proposal is in train in India to establish a Commission for Rehabilitation in the Prime Minister's Office. The person, or body, identified would therefore need to be influential enough to command the respect of the various agencies involved, and, at the same time, have sufficient time to devote to the Committee. This collaborating role could also be effective in encouraging a measure of consistency in the various sectors in terms of ensuring that the individual identified for the Committee attends the meetings regularly.

Other approaches have been adopted in other countries. In some cases a 'lead' ministry has been identified. However, a disadvantage of such an approach can be that it serves to confirm divisions between Ministries and allows other government agencies to abdicate their responsibilities. In other countries co-chairmanship between the major Ministries involved has been suggested as one way to consolidate the feeling of joint ownership of the Committee. In other cases it may be necessary to create a post to ensure the proper functioning of this co-ordinating agency. A major objective of the Committee will be to examine existing legislation, identify gaps and initiate change. The Committee would therefore need to be composed of persons capable of exercising influence on the respective agencies to effect change.

Multi-sectoral Cooperation in Cape Verde

In Cape Verde the Mother and Child Care Programme, organised under the Ministry of Health, is very successful. The immunisation of children has more than 90% coverage rate, while in 1978, this coverage rate was only 10%. The health posts network is well developed and the health workers make home visits to persons living in more isolated areas.

The CBR programme team, representing the ministries of Health, Social Affairs and Education, has trained the health workers in the CBR approach.

When the mothers and children come to the health centres for the visits, simple questionnaires are used to check if the child's development is normal. If the child has an apparent delay in development or a disability, the health workers use the appropriate training package from the WHO manual, in discussing the child's capacities and problems, train mothers about how to stimulate the child, etc. They meet regularly, every three or four weeks at home or at the health centre.

The training of health workers by the CBR team, has been carried out through a one week long formal course. This is followed by visits of the CBR team to the health centres, once a month in the beginning and then, two or three times in a year, for on-the-job training. Enough courses have been organised so that there is at least one health worker in each health centre, who is trained in CBR approach.

At the same time, information campaign for social workers has been started, to involve them also, in the the CBR programme.

All these activities can be considered as the "preparatory phase" for the national CBR programme.

4.4 The development of a common Plan of Action

One of the major contributions to be played by the Co-ordinating Committee is the articulation of a unified plan. A number of countries have chosen to organise a National Conference on disability to help foster a multisectoral commitment to disability. In Eritria and Guyana such conferences, addressed by Ministers and Heads of Government, and attended by a wide cross-section of the population, have been held to clarify roles and responsibilities in the field of disability.

The Co-ordinating Committee would help to ensure a regular flow of information between different government agencies to help facilitate a comprehensive approach to rehabilitation. The creation of multi-disciplinary training programmes would also contribute to the development of a common focus to rehabilitation. The Committee would also examine ways in which disability issues could be included in wider community development initiatives in such areas as womens groups, youth and leisure. As such CBR would be perceived not as a `separate programme' but as a perspective and philosophy of care that would be integrated into all community development initiatives.

Multi-sectoral approach in West Java Region of Indonesia

The West Java CBR programme was started in Bandung municipality in 1985 by a team composed of: Society for the care of disabled children (YPAC-Bandung), Bandung community based health organisation (DSB), Family welfare movement (PKR) and seven Government Ministries (Health, Social Affairs, Education, labour, social welfare & housing and Community Development).

The programme is coordinated by the wife of the Mayor of Bandung, who is also the head of Family welfare movement. Till now, the CBR team has been able to manage the CBR programme with local resources only (funds from local district authority and the communities).

After the success of the programme, the CBR team has been joined by two more Government sectors (Information and Religion). A similar team has been set-up at sub-district level. All the programme activities like, planning, implementation and evaluation, are carried out under the multi-sectoral approach.

Endorsement of the philosophy of 'Schools for All'

The CBR movement is greatly reinforced by the UNESCO initiatives in Education which promote the philosophy and practice of inclusive schools. The UNESCO pack, 'Special Needs in the Classroom' compliments the WHO Manual on CBR and helps teachers to re-examine their role and practice. The UNESCO materials will contribute to an improvement of the learning environment for all children. The materials will prove to be a catalyst on a number of levels. By encouraging a more reflective approach on the part of the class teacher the process of a more flexible, child-centered approach to the curriculum is promoted. The approach encourages a broader role for existing staff in the area of special education. In Ghana for example special education staff are now employed in a peripatetic role serving as multi-disciplinary resource teachers in support of the regular teacher. The CBR approach can provide the stimulus to begin a review of relevant legislation and a reform of the school curriculum.

Skills acquisition and work

The terms 'skills acquisition' and 'work' are used rather than 'employment' as often formal employment is not a realistic concept for many persons in developing countries. The CBR process would seek to integrate disabled persons into the existing system.

The CBR programme would begin with an analysis of what is available to the able bodied persons in the community. The goal would then be to get these on-going systems to accept persons with disabilities. In terms of skills acquisition it could, for example, examine possibilities of obtaining apprenticeships with master craftsmen. In Malawi this opportunity has been facilitated by providing the craftsmen with materials, such as wood, tin or cloth depending on the particular trade, in exchange for taking on a disabled person as an apprentice. In the home the goal might be to more effectively integrate the person with a disability into the daily activities of home life, such as cooking, cleaning and looking after the animals. At other levels the CBR programme would seek opportunities to promote part time work, self employment and income generation activities depending on the severity of the disability.

Involvement of disabled persons at all levels of the CBR process

An essential element of the philosophy of CBR is the involvement of disabled persons in all aspects of the programme, as decision makers, resource persons and trainers at all the stages of planning, management and evaluation. Persons with disabilities are not passive clients of CBR programmes, rather they are active members of the process. CBR programmes in Mauritania and Zanzibar bear eloquent testimony to this philosophy in being initiated and managed by persons with disabilities themselves. The disabled community in other parts of the world have been slower to assume this leadership role. In such cases the CBR programme will need to nurture and facilitate this role. The experience in Ghana has revealed the need to commit resources in a tangible way in the form of a budgetary allocation for transportation and translations into sign language and braille. Philosophical statements alone will not achieve the goal of the empowerment of persons with disabilities.

In many countries the disabled persons movement is weak and fragmented, training is therefore needed to develop and strengthened Disabled Persons Organisation in areas such as management, communication skills, financial systems, project planning, monitoring and evaluation. In a similar way, in the case of work with children the parents need to be regarded as equal partners and a key resource group.

Involvement of disabled persons in a CBR programme: Uganda Experience

At the national level, the National Union of disabled persons works in close collaboration with the Government for the CBR programme.

At district level, the Foundation of persons with disabilities, collaborates with the district rehabilitation officer and the community development officer for different activities like, identification of staff for training, selection of income-generating projects for the disabled persons, etc.

At sub-county (village level), community development assistants, should work in close cooperation with disabled persons (animators) in identification of other disabled persons, in training of parents of disabled persons, in forming income-generating cooperatives, etc. The Uganda CBR programme has discovered that in areas where such collaboration is present, the programme activities are much more successful

Role of Disabled Persons in Burkina Faso CBR Programme

In the province of Bobodioulasso, the CBR programme has been able to work together with a number of organisations of disabled persons. Through this collaboration, disabled persons play a very important role in the programme, specially in activities related to community awareness and in motivating the local population. For this, a theatre group has been formed and through their plays they have been able to create awareness and to reinforce the positive image of the disabled persons, in the families and different community groups.

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