

CHAPTER ELEVEN: MANAGEMENT OF CBR

Management consists of all the efforts to ensure smooth functioning of the programme. This includes policy-making, planning, training of personnel, implementation at all levels, provision of resources, monitoring and evaluation¹.

In the conventional system, the limited management that exists is centralised and often applied from the top downward. If the government is involved, it might make plans, get involved in the training of personnel, and introduce development projects at the district and the community level. The governments usually see communities as grateful and rather passive recipients of what they in their benevolence have organised. As a result, there might not be much local involvement. If NGOs are the providers of services, they normally limit themselves to managing their own centre.

As long as the rehabilitation services consist of a handful of institutions, the system can easily be managed centrally. But when one tries to involve communities in service delivery, larger resources are needed, both centrally and in the periphery. Central direction is no longer adequate, as it induces a certain degree of passivity in the population. People often take the view that they just have to wait for the government to come and provide a service for them. This becomes frustrating, for governments in most developing countries will have large initial difficulties managing even the most essential services.

One of the key features of the CBR programme is decentralisation. But this is not enough. There is no guarantee that this process by itself will lead to community development. Decentralisation must be accompanied by a change of attitudes. The government and its civil servants should see themselves not as the leaders and decision-makers but as partners in development, supporting the population, listening to what the community wants to do and facilitate its implementation.

1. DECENTRALISATION

Decentralisation implies that the responsibility for the functions of an organisation, along with the authority for carrying out these functions and the subsequent accountability, is delegated to those at the periphery of the organisation. (See Box 11.1.)

Box 11.1

DECENTRALISATION: TRANSFERRING POWER TO THE PEOPLE

The main constraint to development in many countries is not the lack of resources. It is the inertia of governments in planning for, implementing and undertaking the day-to-day decision-making and management of centrally operated programmes. They are ineffective because of the sheer complexity of trying to do everything at the national level. If the resources at the community level were better used, the constraints would be much smaller. Thus governments would do well to adopt a policy aimed at preparing, encouraging and actively engaging local leaders and people in decentralisation and accepting that, in fact, this implies a transfer of power to the people.

There are several steps in achieving decentralisation: functions can be assigned successively to provinces, to districts, and to communities. These steps may be seen as a continuous process, aiming at reaching the highest possible degree of authority, autonomy and responsibility at the most peripheral point in an organisation.

Decentralisation in regard to government is generally supposed to be an admirable goal. It evokes the image of benign local leaders or service providers, easily accessible to the people, capable of taking the right decisions, of delivering the action needed, or of providing services quickly, without being slowed down by a central bureaucracy. This is of course only partly true. The quality of decentralisation depends on the quality of those who are locally responsible.

Decentralisation can never be complete. Central governments need to keep key functions under control in one way or another, for instance, by controlling their own inputs (financing), processes (applying consistent administrative processes) and outputs (results). And some specific responsibilities (such as foreign affairs, defence or external trade) are necessarily centralised.

To decentralise too much power could create a problem. In various parts of the world, notably in rural communities, some local leaders already exercise a high degree of social control. To avoid a monopoly of power, one must make sure that it is

being *shared through community participation*.

Decentralisation requires *competence* on the part of those who are going to carry out the functions locally. Training programmes leading to the desired competence must be set up before decentralising. Adequate supervision is another condition. Where there is a shortage of competent staff, decentralisation should proceed cautiously and gradually.

In the following, four aspects of decentralisation will be discussed one by one:

- services
- administration
- provision of resources (financing), and
- policy-making.

Decentralisation of services

In a totally centralised system, all services are provided in one place, as a rule in the capital city. This system makes services inaccessible to and expensive for, most of the users, who have to travel to receive them. As with institution-based rehabilitation, service coverage will be limited to a low percentage of the population.

The logical first move away from centralisation would be to decentralise the services requiring only a minimum of competence. However, exactly which services require the least competence, might prove difficult to say. Why? Because of the tendency to unnecessarily complicate services delivered by professionals, especially when they have successfully acquired expensive equipment.

Consequently, demystifying apparently complex technology so that lay people understand what and how they can do things on their own, will be an early step toward delivery at the community level.

One should start trying to decentralise the most routine, high frequency services. It is more economical to deliver such services locally, as it means less travel for the disabled people receiving them. It should further be noted that many components of rehabilitation are best carried out locally. These include training in mobility, ADL, communication and behaviour. Opportunities for

schooling, informal vocational training and jobs should preferably be found locally. Human rights conflicts should be mediated in the community. The prerequisite for social integration of disabled people is a decentralised system building on local initiatives. It is important to maintain continuous technical supervision of services delivered by non-professionals.

Once it has been decided what to do at the family and the community level, one will establish the referral levels in response to the experience needs. Some services should be given at the district level, while others might require facilities at the provincial and national levels. Low-frequency services, in particular those that are very costly and not very urgent, can be assigned to the central level.

Decentralisation of services is facilitated by standardisation. Standard procedures are more reliable and easier to remember. Standardisation simplifies the training of community workers and the supervisor's tasks of checking and reporting on the service delivered. One should not interfere, however, with local initiatives to "invent" new procedures or to modify existing ones. Community workers and families should be encouraged to individualise and experiment with the technology.

Decentralisation of administration

In a totally centralised system, all administration is carried out at the head office, situated as a rule in the capital. Such a system is time-consuming and expensive. In a fully decentralised system of administration, all decisions and actions would be taken in the community.

Advocates of a centralised system point to uniformity of approach as the reason behind their preference. Civil servants can carry out a high volume of standardised administrative procedures. They are easier to supervise, and any inconsistencies in their work are easier to correct when the system is totally centralised. Where the same tasks are carried out by a multitude of civil servants in many separate places, rather than at the head office under the supervision of one single manager, the results are likely to differ.

Those who propose a decentralised system claim that it is more effective and gives better justice to the ordinary citizen than centralisation. The central system has very little feedback from the public. Hence there is a great risk that faulty procedures and injustices may go uncorrected owing to a lack of awareness at the central office.

Further constraints that hold back citizens from approaching the civil servants are the impressive size of the system, the difficulty of finding out who is responsible for what, and the social gap between ordinary rural people and civil servants living in the capital. In a decentralised system, these constraints and the inertia of the centralised system can be reduced.

There is no ideal solution to this dilemma. A compromise has to be found, the final goal being to attain the highest possible degree of administrative decentralisation through a gradual, step-by-step approach.

The first functions to decentralise should be those of high frequency, with no or few economic implications, such as a large number of decisions on servicing of staff. Provincial and district managers, who mainly utilise locally provided resources, should gradually be given authority to handle all routine decisions.

The extent to which functions can be decentralised will depend on the competence of the local staff, on the quality of supervision, and on the source of the budget. All managers should receive appropriate training.

As regards the budget of the CBR programme, it is suggested that local communities pledge resources for the local services. It would be normal to expect community leaders to take all local decisions concerning locally funded programme components.

A decentralised administration may some times imply that the central government will have its fingers everywhere and interfere with every minor, local decision. Increasing local influence should counterbalance this tendency.

In a mixed system, the central administrative responsibilities of a CBR programme could be

limited to a few central functions. These could be: planning of the national programme; training and employment of intermediate level professional personnel; responsibility for the referral services at the national level, co-ordination, monitoring, and evaluation. The remaining procedures and decisions will be carried out locally.

Decentralisation of the provision of resources

A community, a district, a province, or a central government may provide resources for a rehabilitation programme. These may include: funds, personnel, equipment, transportation, buildings, statistical services, research, information, other contributions in cash or kind. In some countries, the central government collects taxes and returns a proportion thereof to provinces, districts or communities to pay for locally run programmes.

A community may have various other methods of financing locally established services or programmes. In addition, there might be contributions in kind. For instance, a community might be able to mobilise voluntary community labour for various development purposes, such as making roads, building schools or irrigation dams or wells. In addition, such existing resources and procedures could contribute to the rehabilitation sector. Communities may have the legal authority to finance decentralised programmes by taxes collected and spent locally². Where this is the case, one might speak of "decentralised provision of resources".

Decentralisation of policy-making

The previous section has brought us very close to the concept of political responsibility. More often than not, central governments decide and impose all sorts of development programmes on communities.(Box 11.2.³) Rarely consulted, communities may show a growing resistance to some of these programmes. But with the central government, NGOs or foreign donors financing such programmes, communities have had very little reason to refuse them. This has given rise to problems: development projects without grassroots are not sustainable. (Box 11.3.⁴).

Rather than taking all decisions on policies centrally, delegating political responsibility for community programmes to the communities proper should stimulate development. They should decide what is a priority for their own people. Thus, should a particular local service be needed, the community members would decide on its implementation and raise contributions from their members to pay for all or part of it. The central government might contribute financially to local programmes or ask donor agencies to do so. In this way, the external provider of funds might, for instance, share the costs by paying for building material for a school and by supplying technical know-how, while the community will provide the necessary labour. Or, in the case of CBR, these organisations might support the costs of training programmes and the phasing in of the services. However, donors should not finance the future maintenance cost. The community will retain the "ownership" of the programme, its members initiating, organising and managing their own programme.

Box 11.3

**FROM THE WORLD BANK:
DETECTING THE GRASS-ROOTS**

"Institution-building [in Africa is often advocated by development agencies] in a one-sided, macro-biased manner. Undue attention is channelled to the strengthening of national-level agencies and central macro-organisations, while institution-building at the grass-roots is chronically neglected.

"Many development programs have failed to achieve post-program sustainability precisely because they neglected to build up local organizational capacity. Only if local populations assume an increasing responsibility for program-assisted activities, during implementation and especially following completion, can development programs be sustained. Such responsibility can be fostered by increased degrees of autonomy and reliance on grass-roots beneficiaries' organizations."

Box 11.2

**BREAKING OUT OF OLD PATTERNS
AND GENERATING
NOVEL WAYS OF DOING THINGS**

While dealing with environmental issues, "The Manila Declaration on People's Participation and Sustainable Development" contains a number of remarks that parallel those made in favour of CBR:

"Current development practice is based on a model that demeans the human spirit, diverts people of their sense of community and control over their own lives, exacerbates social and economic inequity...

"We are concerned that foreign assistance ... too often contributes more to the problem than to its solution. It places the initiative and responsibility in the hands of the foreigners rather than in the hands of the people ...

"There is a current need for a fundamentally different development model based on an alternative development. Authentic development enhances the sustainability of the community ...

"A people-centered development seeks to return control over resources to the people and their communities to be used in meeting their own needs ...

"A people-centered development seeks to broaden political participation, building from a base of strong people's organisations and participatory local government ...

"It seeks to build within people a sense of their own humanity ... Those who would assist the people with their development must recognize that it is they who are participating in support of the people's agenda, not the reverse ...

"The future of all people depends on a basic transformation in thought and action, leading people to discover their essential humanity and to re-create their relationships with one another. It is pragmatism more than idealism that makes the change possible."

A necessary precondition for decentralised policy-making is for the government to improve public education and information to enable people to understand the importance of the decisions taken by them.

The government may assist in setting up the appropriate local organisation, where this is missing or insufficient in scope. Community leaders and administrators could be trained to upgrade their competence in making policy decisions, handling of financing, and local administration. The outcome of decentralisation depends largely on the quality of the trained local leadership. The reduced role of the central government would be to provide technical and managerial supervision, as well as coordination of the local activities. However, they should avoid pushing their "pet" projects, this usually only serve to create powerless local "puppets".

Partnership

With this we may eventually reach a system building on partnership between the communities and the government. The latter will see it as their main function to respond to and to facilitate local initiatives. The role of the government and of its local administrative network is no longer to direct but to co-operate and to become partners in development. Action in the community and government support becomes complementary and linked to each other.

Macro- versus micro-level

There are a number of development agencies, such as the World Bank, that have been involved in some very large-scale projects carried out at the "macro-level". In Box 11.3, some reflections from the World Bank as to the futility of this single-level approach are quoted, and full involvement of the "micro-level" in all development programmes is recommended. The prerequisite for sustainability of a development project is the autonomy and competence achieved at the grass-roots level during the development period. This experience has been applied for many years by a large number of small development agencies.⁵

2. MANAGEMENT OF CBR AT THE COMMUNITY LEVEL

The basic approach of CBR is to "learn from the people". In no other area is this more essential than in that of management. There is now some experience of how a CBR programme can be set

up step by step. The information gathered so far is, of course, very diverse and culture-dependent. The steps suggested below may be useful for planning purposes, but there are many other ways of going about it⁶.

Step 1 Awareness-building (sensitisation)

People in the communities of the developing countries need to be informed that:

- disability is common (although to some extent hidden);
- there are simple methods of training and educating disabled people that can be applied where they live and that will lead to more independence and better social integration;
- they need not wait for external initiatives or for special institutions to be set up, for they can achieve a good deal through a community action programme of their own (how to do this, too, should be explained, including the obligation to provide resources from the community).

The important principle is that community members should discover the fact that it is possible for them to transform the conditions in which most disabled people live; and that they could and should acquire the skills and take the action needed.

Here a few words of explanation should be added as to **when** and **how** to build awareness/sensitise. Many mistakes have been made as to the **when**.

Awareness-building should be undertaken only if services can be set up immediately. In Box 11.4 examples are given to show how registration of disabled people and surveys raise expectations, and how they lead to frustration and loss of credibility when there is no action in sight.

How to create awareness depends on the local culture. In each country, there is normally plenty of experience to build on, both in terms of successes and failures. This experience could be disseminated and applied both nationally and locally.

Examples of national-level techniques are radio and television programmes and articles in newspapers. Radio programmes will reach large numbers of people. Their content should be carefully structured. Some countries' radio stations feature regular weekly or monthly programmes on the topic of disability. In some of these, people are advised as to the causes of disability and how to prevent them. Others present interviews of disabled people who tell of their frustrations and successes. Once a CBR programme starts, radio and newspapers can be used to inform people about it. Listeners can be invited to mail questions, which will then be replied to in the radio programme. (see **4 D** project, Chapter 10).

Another way of information is to visit the communities, which indicated their interest; this allows larger groups of local people to attend, including disabled persons and their families.

Local techniques for awareness-building are of great importance. Community leaders, teachers, local committees, disabled people (Box 11.5) and their families can help. Some countries have tried with good result: theatre, songs, poetry (Box 11.6⁷), story-telling, puppet theatre, and other ways and means. Religious leaders, politicians and others too can give a helping hand.

Box 11.4

AWARENESS-BUILDING WITHOUT SERVICES CREATES FRUSTRATION

In one African country, an intensive effort was made to identify, assess and register all disabled children under 15 years of age. Considerable funds were spent in a two-phase study. In the first phase, a team of health/education/vocational experts went to the field to screen entire population groups, and in the second, specialists carried out thorough examinations. The end result of this exercise was to register close on 10,000 "severely" disabled children. Ten years later, no action had been taken to set up any programme to provide training and education for these children. Parents had filed endless requests and had eventually given up in frustration. In the meantime, interminable internal debates had been going on about which ministry should do what, what sort of co-ordination should be set up, what technology to use, etc.

In an Asian country, a large-scale survey was started, in the course of which several thousand disabled people were identified, diagnosed and turned into statistics. The survey staff promised these people on identification that services would be provided but, ten years later, next to no such services had been created.

In yet another Asian country, no fewer than three surveys had been conducted - one by an NGO, one by the Ministry of Health, and the third by the Ministry of Education. When the Education Ministry went out to do their survey, they met with widespread refusal among the population - people had seen enough surveys and did not care for yet another. What they wanted was practical help - not registration.

In several CBR programmes, it is the ILS who builds awareness through information/sensitisation meetings or local visits. One approach is to send a message via the local radio station, inviting people to come for an information day about disability/rehabilitation. Another example is to invite a number of local leaders for information and discussion. The ILS can then to present a few disabled persons who have been successfully trained at home and in the community, and explain the expected result of CBR.

Step 2 Animation

I take "animation" to indicate the process through which a community decides to initiate a development programme. This decision should not be the result of outside pressure. Programmes that are the result of political pushing or interference are unlikely to be successful. "Interference" can also take the form of financial incentives that create too much temptation, especially in the absence of community participation in resource

Box 11.5

A LESSON IN THE SCHOOL

In this small town of a South American country, I encountered a severely disabled local businessman. He told me the story of his life, the problems he had been up against initially, and how he went into business, first lost some money, but then learnt his lesson. Though confined to his wheelchair, he travelled a lot by car.

Once a year he went to the local school, where he gave a lesson to all fourth graders. On that occasion he invited the children to ask him questions, which they did, after some hesitation. In the course of the ensuing dialogue, he explained to them the problems he had to cope with when he was small, and he pointed out to them that there were many disabled persons who were faced with other people's negative attitudes toward them. At the same time, he conveyed the message that a disability in no way must interfere with one's success in life. This the children had no trouble to understand, for after all, he was the richest person around.

For six years now he had regularly given this lesson. The teachers told me that it had helped considerably to change attitudes in the community.

provision. Another example of interference is when the results of rehabilitation are described in over-optimistic or unrealistic terms.

Before deciding on setting up a local CBR programme, the community needs to know what it has to do. This includes conducting local management and giving some of its own resources. They also need to understand what the expected outcome is likely to be and how what the authorities will provide, such as training, technical supervision, administrative support and referrals.

The mechanism through which animation takes place depends on local tradition and culture. In some societies, the local leaders, whether elected or appointed, have a great deal of influence, while in others there will be extensive consultations with community members. Decision-making could be influenced by disabled members of the community or their families and by personalities outside the leadership structure. Animation should be allowed to take its time; a CBR programme is no quick fix

6Box 11.6

POEM*Little friends*

*Around my garden and around my home
you are fighting, and then
you become friends again.
Pushing my wheelchair,
you bring happiness to my world.*

*Though I cannot enter your world,
mine is filled
with buds of wishes.
They will bloom
in your lovely world.*

*Do not take me to my dark world!
It is surrounded
by four walls.
Take me far,
far away little friends.*

*Though my foot lacks the strength
to kiss mother earth,
my weary life gets happiness
from your smiles flowering.
They fill my lonely world.*

and will require a long time to implement. Communities may feel reluctant to do the programme until they have seen others do it - or they might say no.

The reasons for rejection may be several, among them: other, more pressing priorities, negative attitudes, beliefs and superstition, or else an inappropriate way of building awareness. Action to improve the quality of life for disadvantaged groups may not be a community's first development priority. Most of them will find it necessary to start local efforts with the digging of a well, increasing food production, setting up some small-scale industry to earn more money, providing primary health care and schooling. When all this is well on its way, and only then may the time have come for taking care of the disabled people in the community.

Realising that a CBR programme may not be a priority, one might choose to approach communities that already have had experience and have seen success of other development programmes. This will facilitate implementation since one can draw on the existing managerial structure in such communities. Ideally a local rehabilitation committee will be integrated in a general development committee.

Once a community is decided to start a programme, there may be certain formalities. The district administration should be informed and, in some cases, formal permission obtained.

Step 3 Community mobilisation

The fact that, following a period of animation, a community decides to set up a CBR programme may not necessarily mean that there will be a programme. To start with, one will have to define the resources that need to be mobilised.

These include, for example:

- a community worker who, after training, is willing to do the job of a CBR local facilitator. After training, the LF will work full time to serve a population of 5,000 people living in a limited area. In rural areas, most hands are needed during certain months of the year, for planting and harvesting. If the LF takes part in this, the CBR work has to be suspended, which normally does not pose many problems. In some parts of the world, the local facilitators will work as volunteers without being remunerated; in others, some compensation, or a salary, will be needed. The community should mobilise this compensation.
- provision of funds for training costs. If the training takes place outside the community, the community worker may need a daily subsistence allowance to cover the costs of food and lodging. Such costs are sometimes paid by the government or by external donors. Where this is not the case, they have to be met by community funds.
- Communities may decide to assist disabled members, for instance to pay for schooling

costs (e.g. uniforms, books), contribute to the cost of job training by subsidising informal local apprenticeships, or help to pay for braces, eyeglasses, or transport to referral centres.

Each community has to decide what it wants to do and how it will raise the necessary funds. There are a number of ways in which resources can be mobilised. Some communities receive governmental contributions, perhaps channelled through a district or a province administration. These funds rarely suffice to finance everything a community wants to develop.

In some countries, communities have their own means, as they can raise local taxes. Examples are: per-capita contributions, taxes on income, on land, on crops or commodities produced; on marriages; or through local health insurance or essential drugs schemes; contributions to local services like water supply and garbage disposal. Other sources include funds collected at feasts, on religious occasions, in fund-raising drives, at auctions; or donations; and fees for services delivered. There might be contributions in kind, such as voluntary labour. In one community, the leader explained to me that there were 19 different ways his community obtained income.

The mobilisation of community resources may be slow and stepwise. No programme can get off the ground as long as there is no local facilitator, but the extended resources mentioned above can perhaps wait for a while. It is important that the community understands that once a CBR programme is started, it has to be maintained. CBR is there to stay⁸.

Step 4 Community organisation

Each community will need a management structure to plan for the programme, supervise the programme's quality, mobilise resources, establish links with authorities and technical expertise at the district, and evaluate the programme.

In many communities certain development structures - committees or similar - are already in place. If so, it is preferable to use these. Other communities may need guidance in how to set up an appropriate managerial structure. Appropriate

training should be provided for those who undertake the management. Local government ministries and NGOs may have valuable experience in how to set up and train local managers. There are examples of countries where a large number of national NGOs have formed a union to provide joint managerial courses.

The community organisation should include disabled people and their families. Many of them have ample experience of what is needed in terms of training and what its outcome should be, and could provide social support. These people may have formed their own local organisation. If so, this organisation should be regularly consulted. Whenever an opportunity for managerial training offers itself in the community representatives of the disabled population should be included.

Step 5 Implementation

Once the community management structure has been established, the local facilitator should be chosen, trained and put to work.

After the initial survey, the LF should start working with a small group of disabled people. There is a tendency to try to do everything at once, but having 10 to 15 disabled children and adults to take care of is tough for a beginner. As the LF becomes more experienced he or she may expand the group. Most functional training of disabled people can be completed within nine months. Schooling, ability training and jobs require less intensive but regular guidance. To build a system for legal protection is not an easy task. Once established, the work-load may diminish. A long – for some several years – follow-up of the CBR participants is needed to maintain achievements and prevent deterioration.

It is important that the ILS and, the MRT regularly visit the communities for technical guidance. Many programmes that do not have an ILS suffer in quality, and motivation may become hollow after a while. All referrals should be discussed with the ILS. There is often a tendency to send virtually everybody for a referral at once.

Experience has shown that about 70 to 90 per cent of all disabled people participating in the CBR programme manage quite well without referrals.

The ILS should not intervene in the local management of the programme and should not give orders to the community. The role of the ILS is to inspire and encourage the communities and the LFs to find their own solutions and to build up their own experience; he or she should guide when there are problems and praise them for work well done. The ILS will motivate the LFs to keep proper records, and will check them regularly.

The ILS should meet regularly with the local committee and provide advice and trouble-shooting on request. Again there should be no pushing on his or her part. Rather, he or she should motivate and inspire everybody to continue and provide the information necessary to this end.

Step 6 Building-up referrals

The ILS and the LF should visit and discuss referrals with potential providers of resources at the district level. These resources include: the district hospital (for diagnosis and treatment), the school authorities (for placement of disabled children in secondary and higher education), the social authorities (to help with social and economic as well as private problems disabled people are having), labour or employment officials (for placement in integrated vocational training and jobs), the legal authorities (to set up mediation processes for settling human rights conflicts), and local NGOs.

The ILS may approach those provincial and national authorities and NGOs likely to be able to help. Examples of referral facilities are: resource centres for children with special educational needs, professionals for vocational measures, medical specialists and orthopaedic workshops. The specialists should be informed that the community is able to continue the programme for the disabled person at home after the referral period

Step 7 Evaluation at the community level

It is important that communities thoroughly evaluate (Box 9.9) the outcome of the programme:

- *relevance*: did the disabled people and the families feel that the programme is meeting their needs?
- *effectiveness*: did the disabled persons included in CBR improve their functional ability, education, income and social integration; are their rights better protected?
- *efficiency*: have the resources provided by our community, and supplemented by the government, been used in the most efficient way?
- *sustainability*: are we as a community able to continue this programme using our own local resources, assuming that the government will go on providing training technical supervision and access to referral services?
- *impact*: have the attitudes of non-disabled people changed for the better? Are disabled people participating now more than before in social activities? Are they better represented and listened to? Are the disabled people and their families comfortable with the technology? Has the physical environment become more accessible to people with moving difficulties?

The community itself should take an active part in this evaluation; it may wish to engage the services of an outside consultant.⁹

3. MANAGEMENT OF CBR AT THE CENTRAL LEVEL

Principles

As explained earlier, a CBR programme is a multi-level system. The levels above the community need to manage:

- the personnel at the intermediate level, such as the ILS and the mobile resource teacher; public or NGO-operated services, such as referral centres, health facilities, educational, social and vocational structures or law-enforcement bodies - all of which will be involved to some degree in the CBR system;
- various educational institutions involved in the training of rehabilitation personnel or in the

- orientation, information and sensitisation of concerned personnel in various sectors;
- rehabilitation components integrated in national, province, and district administrations. These plan for, contribute resources to, and deliver decentralised services, and provide support to community projects.

Three principles should be applied:

Firstly, that the government takes the leading role in the management of these components of the rehabilitation system. So far, many governments have played an insignificant or a symbolic role in providing management of services, etc. for their disabled citizens. This has created the impression that governments consider the work not worthwhile and to be left to charities. This reinforces people's beliefs in the same direction. Efforts must be made to change governments' and people's perceptions. There is no justification for any government to keep aloof from efforts to provide services for disabled people.

Secondly, that the government, at least in the early phase of development, tries to designate one ministry or authority as responsible for setting up a mechanism for co-ordination and consultation that will satisfy all partners involved.

Once development is well under way, the various other ministries, for example, education, health, justice, labour, social affairs, development and local government can do their part. The experience during an early phase of too many divergent ideas and a variety of ways of implementing, and as a consequence a large number of "administrative reasons" for delaying services is extremely negative.

The ministry in charge of management needs to set up a satisfactory mechanism for co-ordination, and in this, all ministries and authorities and NGOs concerned should be involved. Partnership should also be established with representatives of all organisations of and for disabled people. It is useful for them to form a union or a federation.

Thirdly, that NGOs reorient their work to become partners of the planned system, implementing projects or services that are within the framework of acknowledged policies and guidelines.

In the past, many NGOs have set up their operations in an ad-hoc way, without much planning and without much guidance from the government. Some NGOs are technically specialised for certain types of work. Their contribution should be designed for it to fit into the government's plans. It would be desirable for international NGOs not to go to a country with a preconceived idea of what they want to do. Instead, they should ask the government and the communities how they can be most useful.

For the development of the central management, a step-by-step approach is proposed.

Step 1 Surveying interest

At an early phase, the government should assign an appropriate person or a team to contact communities with a view of finding out their ideas about disabled people and the extent to which they may be willing to undertake local action. One might develop some printed material to be sent to a sample of communities, and then visit them for discussions. Once there appears to be enough interest and willingness to commit local resources, one might proceed to set up a CBR programme.

Step 2 Reviewing existing rehabilitation, and possible networks of public services to implement a programme

The government will identify the public service network (health, education, social services or similar) to be used in the future. Any such network may be incomplete, so information on its eventual extension will have to be sought. Agreements have to be signed so as to ensure that the personnel concerned will have both the time and the necessary resources to carry out their roles for CBR at the district level. The necessary human and technical resources for managerial support in the future should be available at the provincial and national levels. Existing personnel in centres and institutions should be contacted, and their role within the network should be outlined. If needed, agreements regarding their eventual reorientation and co-operation should be formalised.

Step 3 Calculating costs

At this point, some cost calculations may be useful with a view to estimating the budget requirements for the government. (see Chapter 12).

Step 4 Setting up an administrative structure

All programmes need a national manager. This person could work part-time and have other functions besides. A better solution is to employ someone full-time for CBR, given the considerable workload involved in initiating and maintaining a community-based programme. The national manager needs support from the provincial and district levels. As many functions as possible should be delegated to these levels. Hence their staff need to be informed and trained. The national manager and those who carry out decentralised administrative functions need transport, and other resources, which should be identified and supplied.

Step 5 Training of personnel at the intermediate level

Next follows the training of the ILSs. Their training and subsequent placement at the district level are, in our experience, the best entry points for a CBR programme. The national manager will participate in the first training course for ILSs. An expatriate with experience of CBR may teach this course. Subsequent courses could be conducted by the national manager or by a suitable national. An in-service training programme should be set up and maintained.

Step 6 Implementation

Once ILSs have passed their examinations, they may start work at the community level while based at the district level.

The national manager should carefully guide the early implementation phase. It is necessary to ensure that the development of the programme is based on community involvement, and that it does not become a conventional delivery system with the ILS providing the entirety of the services. At the end of a given evaluation period, certain adaptations that take account of the experience

gathered during that period will be necessary. Later on provincial managers may be employed.

"Post-graduate" orientation should be given to all concerned professionals (such as health workers, doctors, teachers, etc.) should be given at an early phase. Later on, CBR should be part of their undergraduate courses.

Step 7 Monitoring and evaluation

The ILS and all the managers involved need to check that a reporting system is set up and maintained. One such system is proposed in TCPD. With this system in place, it will be possible to monitor the development of the programme. Evaluation should be carried out regularly, and should involve all partners

Step 8 Formulating a national plan

After an initial period of trial and error, it should be possible to formulate a national plan¹⁰. It should be pointed out that no national plan should be made without a thorough study of what the communities see as their needs and what they are willing to provide. All national plans have to be revised periodically. Such a plan should not be seen as a straitjacket for the future, but as a direction of how to proceed with the work.

Step 9 Maintaining motivation

Probably the most important role for a manager is to maintain motivation among all those involved, not only at the "grass-roots", but also at all other levels. The manager needs to develop a support network of politicians, important persons, local leaders, NGOs, external agencies and so on, in order to maintain the resource base. Many activities are needed to keep these groups motivated.

These include media information, seminars, personal meetings, invitations to follow the field programme, and other initiatives.

4. CO-ORDINATION AND CO-OPERATION AT THE NATIONAL LEVEL

Development of services for disabled people is an area that brings together a wide spectrum of partners, for instance:

- **Governmental ministries/authorities**

Community Development
Education
Finance
Health
Labour
Social Affairs, and sometimes:
Civil Affairs
Defence (Veterans)
Justice
Local Government
Planning

- **National non-governmental organisations**

Organisations of and for disabled people (often divided into groups separately representing various disabilities)
Religious organisations
Professional groups
Development NGOs

- **International development organisations**

UN agencies
Bilateral (government to government) development organisations
NGOs

Finding the appropriate way of co-ordinating the work of all partners in a more cost-effective and better-planned fashion than today is a delicate task. A national co-ordinating body is needed¹¹.

There is no blueprint for how to co-ordinate, and each country has to find its own ways of addressing this significant problem.

A number of proposals are available in UN documents¹² (reproduced in Box.11.7 and 11.8).

- The first decision to take is whether the *co-ordinating body* is to be an *advisory or an executive organ*. With strictly advisory bodies, the available experience is rather mixed. If executive, it will need its own budget and a managerial structure for implementation.

- There should be *approved and clear policies and a detailed and budgeted national plan* that describes what the country wants to do. (Box 11.7) Very few countries have formulated policies and plans. It may be appropriate to provide an initial project for training the national personnel in planning techniques. This is presumably better than the alternative of sending for an expatriate expert. At present, many countries ask for assistance in formulating a proposal for a plan from an international expert. Such outsiders have made the sad discovery that most of these plans are later shelved and never see the day of implementation.

Box 11.7

POLICY ORIENTATION OF DONOR AND PROGRAMME COUNTRIES

The following basic questions represent characteristics of a good policy orientation regarding disability. The checklist is progressive towards an inclusive approach. Should the required characteristic not be evident, proposals for balancing positive action could be made.

1. Has the donor agency/programme recipient accorded high priority to the social dimension of development?
2. Has the donor agency/programme recipient taken into account the need to pay special attention to the most vulnerable or poorest population groups, such as women and children in difficult circumstances, persons with disabilities, refugees, among others?
3. Has the donor agency/programme recipient included persons with disabilities as a group to be considered and addressed by a specific policy component?
4. Has the donor agency/programme recipient included consideration of disability issues as an integral issue for the policy mainstream?

- *A mechanism for establishing full co-ordination* between all the partners. This must have its starting-point within the government itself. It would be useful to choose a particular ministry as the one responsible for all questions relating to policy-making, planning and implementation.

Other ministries would contribute the resources under their respective supervision. It will be necessary to set up a permanent procedure for maintaining a dialogue among all partners.

When this has been done, the government should discuss the policy options with national organisations of disabled people and professional groups. These options should be reviewed with the inter-ministerial co-ordinating groups, the NGOs, and the donors implementing programmes for disabled people. Their future specific roles should be decided in accordance with the national plan, the aim being to optimise the resources all organisations have at their disposal.

- *A follow-up mechanism* should be set up. The government will need to evaluate the work done and to see to it that its intentions are being followed. Should an existing NGO service require restructuring, the government could provide what is needed in terms of managerial assistance, if necessary.

- *External development agencies should, through the national co-ordinating body, receive proper guidance to ensure that their resources are used for the purposes described in the national plan, as well as to encourage long-term commitment.* The government may wish to avoid a situation where all of a sudden they have to "take over" a service for disabled people that was neither planned by them nor conform to existing policies and plans. There are cases where governments learn for the first time of an NGO activity when the donor advises them that the responsible expatriate manager is about to leave, or that the NGO in question has run out of external funds.

International NGOs who wish to provide resources for a specific component should, first of all, discuss the activity with the government. This should conform to existing national policies and plans. A clear project document should be written, outlining their future obligations, resources to be provided, a timetable for their work, and how they expect their services to be eventually continued with the use of national resources. The government should make NGOs cost-conscious and personnel-conscious. External NGOs should concentrate on capacity-building, and managerial services, such as co-operation with legislation and

plans. NGOs should not finance any part of the local service delivery system, this creates dependency and harms sustainability. The government should say "no" to NGOs who want to enter the country and start an activity that does not fit with government policies.(Box 11.8)

Box 11.8.

APPLICATION OF RAPID DISABILITY ANALYSIS TO DEVELOPMENT COOPERATION PROGRAMME DOCUMENTS

1. Has the disability relevance of the programme and its components been studied and have appropriate conclusions been drawn?
2. Has the programme specified to what degree the problems to be addressed by the components are disability-relevant? Has it been noted that in all target groups there may be persons with disabilities as well? Are conclusions reflected in the contents and organizations of the components?
3. Have all important stakeholders been involved in the programme negotiations? Is there a division of labour and mechanisms for coordination, particularly between governmental and non-governmental bodies and organizations?
4. Do the development objectives reflect the recent international commitments and instruments in the social and economic sectors? Are they designed in the spirit of "A Society for All" that endeavours to involve all people in development as agents and beneficiaries?
5. Are the programme components, activities and results accessible to people with functional limitations?
6. Have the vulnerability of disabled people and disability dimension been taken into account in programmes and projects? Have any balancing measures been included in the programme?
7. Have the resources of disabled people and their organizations been noted and will disabled people be effectively involved in components concerning them? Have additional empowering components been included?
8. Has the sustainability of results for disabled people been ensured by continuous and systematic policy-backing, involvement of disabled people and a sustainable resource flow?
9. Is the programme non-discriminating and does it support the objective of "development for all"?
10. Will follow-up measures be sensitive to disability issues and involved disabled people to an appropriate degree?

- *Co-ordination at district and provincial levels* is also needed and is normally much easier to achieve, as staff working at these levels are much closer to each other and to the problems.

- *Co-ordination should aim at economising resources at all levels.* All organisations involved need to co-operate with each other in order to avoid duplication of services; to distribute them more evenly over the country, especially to rural areas; and to share use of cost-intensive services, professional personnel, equipment, means of transport and communication.

- Another area for co-operation could be the *joint training of expatriate and national personnel.* This training should be streamlined and standardised. Criteria to evaluate the competence of national personnel and expatriates alike should be set up. Ways must be identified of how all those presently working in private institutions can be integrated in the system that is eventually to be operated by the government.

5. SUMMARY

The managerial capacity and procedures to undertake rehabilitation programmes varies widely. The advice above is not rules or a rigid system. The experience of carrying out general development programmes following the series of steps proposed is extensive and mainly positive. By contrast, experience with these approaches in CBR programmes is limited, and time is needed to adapt and refine the managerial process. Even when proven effective in one country, managerial processes cannot easily be copied in another.

Some communities may fail in motivating their members to maintain the programme. Just as we must allow communities to say no to the programme, we should allow them to fail and shut down an effort for which they were inadequately prepared or for which they did not receive the central support necessary. This is no different from some European countries where the statistics showed that fifty per cent of all newly registered commercial enterprises fail within the first three years. We are still happy for those that succeeded.

Similarly, some governments may fail after a while. There might come some crisis and then usually programmes with a social content are curtailed. They may become obliged to restructure the economic system by application of an austerity programme. A failure should not be seen as the end of the efforts to provide services for disabled

people. Failures should be analysed and, as a result, ways of avoiding them may be better known. Also, at some later opportunity, the same country or community may arrive at a phase that lends itself better for a CBR programme.

COMMENTS AND REFERENCES

¹Several detailed documents on management have been produced by the Disability Action Group, UNDP. Annual courses are held by the International Association for CBR.

²An example of this is India, where recently the final local elections were held in accordance with the Raj Panchayat Act. The Act gives authority to all local councils to raise taxes

³Source: Declaration adopted at the Inter-Regional Consultation on People's Participation in Environmentally Sustainable Development, Makati, Metro-Manila, Philippines, 1 - 10 June 1989.

⁴M.M. Cerner in "IDA Monographs on Development Anthropology", Westview Press, Boulder, Colorado, USA, 1986.

⁵The development of appropriate technology at the micro level is often constrained by incompatible macro-level policies and programmes. In F. Stuart, H. Thomas and T. de Wilde (Eds): *The Other Policy*, Appropriate Technology International, London 1990. The conclusion is that "macropolicies affect micro-level decisions, by manipulating economic incentives and constraints, such as the money supply, interest rates, currency exchange rates and the availability of credits for different sectors and even sub-sectors. Direct public investments in infrastructure and human resource development and the tying of foreign aid frequently favour the selection of inappropriate technologies. Proposed reforms ... would remove the hostility toward appropriate technology prevalent in many countries and the bias in favour of large-scale capital-intensive industry."

G. Benello, R. Swann and S. Turnbull: *Building sustainable communities*, The Bootstrap Press, New York, 1989.

⁶See also: *Training in Community Participation*, Report of an African Regional Workshop for Programme Staff. Prowess Africa, Abidjan, Cote d'Ivoire, 1989.

P. Oakley: *Community involvement in health development*. WHO, Geneva, Switzerland, 1989.

⁷The author is Wimal Bandara from Sri Lanka, a wheelchair user about 35 years old with severe muscular dystrophy. Many of his poems, including the one above, have been published in newspapers and read or recited on radio. The translation has been provided by R. Tiroler.

⁸ for examples see Chapter Fourteen.

⁹T. Jonsson: *OMAR – Operations Monitoring and Assessment of Results in Rehabilitation*, UNDP, Geneva, 1996.

¹⁰See guide on the national planning of rehabilitation UNDP, Geneva, Switzerland, 1996.

¹¹Guidelines for the Establishment and Development of National Co-ordinating Committees on Disability or Similar Bodies, published by UNCSDDHA, Vienna, Austria, 1991 U.N., Vienna, Austria, 1991. A recent resolution of the UN General Assembly "Calls upon Member States to establish national coordinating committees or similar bodies on a permanent basis and to provide them with the necessary staff and resources during and after the Decade, bearing in mind that their structure and methodology of work should be in conformity with the circumstances of the countries in which they are situated."

¹²R. Wiman: *The Disability Dimension in Development Action*, ISBN 951-33-0248-2, Gummerus, Saarijarvi, Finland 1997.