CBR Guidelines
Management

30 years of evolution & practice

Guiding force

1. Basic needs
2. Well being
3. MDG
4. CRPD
Different examples of CBR
Led by civil society

Different examples of CBR
Led by MSW
Different examples of CBR
Led by MOH

MOH

NGO/DPO

MSW

MOE

ML/E

Different examples of CBR
Led by Local Government/Municipality

MOH

Local Municipality

MSW

MOE

ML/E

NGO/DPO
Who initiates CBR???

Community initiated CBR
- Greater sense of ownership
- More appropriate
- More possibilities of empowerment
- Better chance of sustainability

Government initiated CBR
- Well resourced
- Easier to facilitate multi-sectoral involvement
- Referral support
- Larger reach
- Larger benefits

Both approaches have been successful and both have merits and demerits.

National CBR Programme – I. R. Iran

Ministry of Health

Ministry of Interior

Ministry of Welfare & Social Security

Ministry of Education

State Welfare Organization

Deputy for Rehabilitation

Head of CBR & CBR Experts

Planning and Developing Rural Welfare

Chief Expert of Rural Welfare

Provincial Deputy for CBR with CBR Experts

CBR Station in City with CBR Teams

Rural Welfare Unit

Local Educated Facilitator

Rural CBR Team

Rural Welfare Unit

Health Workers Bevers

Health Unit at City Level

Rural Health Centre

Rural Health House
Planning a CBR programme

- Planning is the first essential function of CBR management.
- It is a crucial aspect of any development activity.
- The planning process has two aspects:
  - **Philosophy**
  - **Management** – Converting philosophy into practice and managing it

Philosophy

- Understanding the realities - good intentions are never enough
- Lateral thinking – look beyond/partnership
- Change agents
- Participatory management
- Sustainability – community mobilization/ownership
- Community-Based Inclusive Development
- **Twin-track approach**
Twin-track approach

- Health condition
- Impairments

Disability

Environmental Factors

Personal Factors

Contextual Factors

CBR

System Inclusive
- Health
- Education
- Livelihood
- Social

Assist/Facilitate
Create services for people with disabilities and their families/community

Twin-track approach

CBR
Management Cycle

- Evaluation
- Situation Analysis
- Implementation and Monitoring
- Planning and Design

Situation Analysis

Where are you now?
- Collecting facts and figures
- Stakeholder analysis
- Problem analysis
- Objectives analysis
- Resource analysis
Situation Analysis

• Determine the needs of people with disabilities and their families and the conditions in which they live;
• Assess the resources that are available or required to improve the situation (resource mapping becomes more relevant if it is related to the needs identified);
• People with disabilities themselves and their families/community are very important resources.
• Identify key stakeholders and foster their commitment by involving them from the beginning

Planning & Design

Failing to plan = Planning to fail
– Plan together with key stakeholders
– Identify key priorities
– Prepare a SMART programme plan
– Develop a GANTT Chart
Planning & Design

• **Setting priorities:** Priority setting involves deciding what needs to be done and in what order of importance.

• **Programme goal or vision:** This is the overall, long term, end result envisaged.

• **Objectives:** the medium term directions of the programme, developed to achieve the goal or vision.

• **Indicators:** (criteria for performance) should be developed

• **Activities:** For each objective a sequential list of activities is developed with quantitative targets and time lines.

Planning & Design

• **Risks and assumptions:** it should be considered in every planning process.

• **Monitoring and Evaluation:** how the programme will be monitored and evaluated

• **Costing and Budgeting:** this deals with the question of what money is needed to implement the activities, so as to reach the objectives.

• **Partnerships:** finally, the programme plan identifies mechanisms to build partnerships within the community.
Implementation & Monitoring

Putting your plans into action

- Develop detailed work plans
- Mobilise and manage resources
- Carry out planned activities

Monitoring your progress

Implementation & Monitoring

From individual to group

- Many people with disabilities and their families feel that they are the only ones facing a particular problem.
- Once people with similar problems meet, they can come to realise that they have common problems and that there are common solutions.
- Being together helps to minimize isolation and to increase mutual support. Feeling of togetherness is a prerequisite for group empowerment.
- Self-help groups (SHG) or Disabled people’s organisations (DPO) are the foundation of any model CBR programme
Implementation & Monitoring

- Capacity building of different levels of stakeholders is an ongoing activity for the sustainability of the CBR programme.
- This takes many forms:
  - exposure visits,
  - exchange programmes,
  - annual events, etc.
  - continued training

Evaluation

Where do you go from here?
- Assess current or completed activities
- Learn from successes and failures
- Make decisions about the programme
- Continue the management cycle
An example from the CBR Guidelines

Mobility India is running CBR programmes in three different locations with three different starting strategy:
1) the urban slums of Bangalore;
2) a periurban area (Anekal Taluk) about 35 km from Bangalore;
3) a rural area (Chamrajnagar District) about 210 km from Bangalore.

Learning from evaluation

• initiate activities that benefit the whole community, not just a few disabled people;
• involve key stakeholders at all levels of the management cycle;
• perform a proper situation analysis before starting a CBR programme;
• make a solid investment in initial planning, ensuring that clear indicators are developed;
• develop partnerships with key stakeholders, partnerships with local government are essential;
Learning from evaluation

- recruit CBR personnel from local communities and giving preference to people with disabilities, particularly women;
- ensure that capacity building is an ongoing process and inclusive of everyone, e.g. people with disabilities, their families, community members, service providers and local leaders or decision-makers;
- sharing successes and failures with others.

Thank you