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**COMMUNITY-BASED  
REHABILITATION**

**CBR**

**WITH AND FOR  
PEOPLE WITH DISABILITIES**

**DRAFT**

**JOINT POSITION PAPER**

**2002**



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*International  
Labour  
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## ***Introduction***

Approximately two decades have passed since the concept of community-based rehabilitation (CBR) was presented as a strategy for improving the lives of people with disabilities. In this strategy community leaders work with disabled people, their families, and other concerned citizens to provide equal opportunities for all community members with disabilities.

In 1994 the competent services of ILO, UNESCO and WHO produced a "*Joint Position Paper on CBR*" in order to promote a common approach for the development of CBR programmes. During the seven years since the first paper was issued ILO, UNESCO and WHO have had more experiences working together in countries, as well as opportunities to work independently with countries in support of CBR. Because UNICEF has also had many country experiences in promoting and supporting CBR programmes focusing on children, this paper is now put forward by all four agencies.

The purpose of this paper is to continue to promote and support CBR and its objectives as part of the ongoing efforts that are needed to achieve social inclusion and equalization of opportunities for people with disabilities. We also wish to clarify for policy-makers and programme managers the approaches for implementing CBR, to promote increased participation of Disabled People's Organizations including organizations of their family members in CBR programmes, and to encourage increased collaboration and co-operation among all governmental and nongovernmental services and groups that can contribute to the success of CBR.

We present this joint paper because, despite the progress made in the past two decades, there are still many individuals with disabilities who do not receive basic rehabilitation services and who are not enabled to participate equally in school, training, work, recreation or other social activities. We recognise that women and girls with disabilities often have fewer opportunities than others. Efforts must continue until all adults, youth and children with disabilities achieve equal rights and thereby have the same opportunities as other citizens in their societies.

Although we speak particularly to developing countries, where services for people with disabilities are to be strengthened and expanded, the concept of CBR is valid and crucial for all countries.

## ***CBR***

### **Definition**

CBR is a strategy within general community development for rehabilitation, equalization of opportunities and social inclusion of all children and adults with disabilities.

CBR is implemented through the combined efforts of people with disabilities themselves, their families and communities, and the appropriate health, education, vocational and social services.

## **Major Objective**

The major objective of CBR is to ensure that people with disabilities are empowered to maximise their physical and mental abilities, have access to regular services and opportunities and become active, contributing members of their communities and their societies. Thus, CBR promotes the human rights of people with disabilities through changes within the community. CBR aims to include people who have disabilities from all types of impairments, including difficulty hearing, speaking, moving, learning or behaving. CBR also includes all age groups: children, youth, adults and older people.

## **Evolution of Concepts in CBR**

Although the definition, major objective, and principles of CBR have not changed since 1994, there has been an evolution of concepts in CBR. Increasing emphasis on human rights and community participation helps to clarify the essential elements and approaches for implementing this strategy. Hence, it is clear that while CBR focuses on the rights of people with disabilities, it can also be a strategy that addresses the human rights of all citizens in the community. Having taken this important development into consideration, the word "rehabilitation" is perceived as a medical term and does not reflect the CBR concept. We therefore feel that a clarification is needed.

### *Human Rights*

The International Bill of Human Rights is comprised of the Universal Declaration of Human Rights; the International Covenant on Economic, Social and Cultural Rights; the International Covenant on Civil and Political Rights; the Convention on Rights of the Child; the Convention on the Elimination of All Forms of Discrimination Against Women; and the World Programme of Action Concerning Disabled Persons

This International Bill of Human Rights forms the basis for the United Nations Standard Rules on the Equalization of Opportunities for People with Disabilities, which states: "The principle of equal rights implies that the needs of each and every individual are of equal importance, that those needs must be made the basis for the planning of societies, and that all resources must be employed in such a way as to ensure that every individual has equal opportunity for participation."

CBR promotes the rights of disabled children, youth, women and men to live within their communities; to enjoy health and well being; and to fully participate in educational, social, cultural, religious, economic and political activities. CBR emphasizes that girls and boys with disabilities have equal rights to schooling, and that women and men have equal rights to opportunities to participate in work and community activities.

We also recognise that CBR benefits all people in the community, not just those with disabilities. For example, when the community makes changes to facilitate access for people with disabilities, it makes life easier for others in the community who were not recognised as having disabilities. If the community clears walkways and makes them smooth for wheel chairs to move easily, or for people who are blind to walk on them, the walkways are also easier for older people, and for people pushing carriages or carts. If larger print is used for signs, the messages are easier to read.

## *Inclusive Communities*

The term "inclusive" is now commonly used with reference to education provisions that welcome all children to participate fully in regular community schools or centres of learning, including children with disabilities. The principle of "inclusion" is also being applied to health and vocational services, cultures and communities.

The concept of an inclusive community is particularly relevant to CBR. Although CBR contains the term community, the focus has been on disabled people and what the community can do to promote their inclusion. The name "inclusive community" puts the focus on the community itself. The community looks at itself and considers how policies, laws, and common practices affect all citizens. The community takes responsibility for tackling existing barriers to participation of disabled children, men and women. For example, many people in the community may have beliefs, attitudes, or prejudices that limit the kinds of opportunities that are open to disabled people. There may be physical barriers, such as the presence of stairs rather than ramps, or the lack of accessible public transport, limiting the participation of people with disabilities in routine activities of the community, including employment.

By placing the emphasis on the community, the term "inclusive community" has the advantage of focusing on all citizens and treating them equally, again reinforcing the fact that the rights of all people, including those with disabilities, must be guaranteed.

## ***Developing CBR***

We continue to support the broad approaches for developing CBR programmes: the participation of people with disabilities and their representatives at all stages of the development of CBR; the formulation and implementation of national policies to support the equal participation of people with disabilities; the establishment of a system for programme management; and the multisectoral collaboration of governmental and nongovernmental sectors to support communities as they assume responsibility for the inclusion of their members who have disabilities.

## **Participation of People with Disabilities**

During the past two decades, in almost all countries, Disabled People's Organizations (DPOs) and organizations of parents with disabled children have been established and strengthened. Women with disabilities have started to form their own branches within the DPOs, as well as forming their own organizations. This has led to a significant increase in the participation and influence of all people with disabilities at local, national and international levels.

There have also been significant changes in the concepts of disability and rehabilitation. Rehabilitation is now viewed as a process in which people with disabilities or their advocates make decisions about what services they need to reduce limitations in their activities. The limited participation in education, work and social activities experienced by disabled people is no longer viewed as a result of their impairments, but primarily as a

result of societal barriers to their participation. The rights of people with disabilities to have the same opportunities as others in their communities and societies are well recognised. Many of these changes are the direct result of the increased activity and influence of people with disabilities, who now have central roles in monitoring the implementation of internationally accepted guidelines, such as the U.N. Standard Rules on Equalization of Opportunities for Persons with Disabilities.

CBR programmes have always had the goal of promoting the participation of people with disabilities, but when CBR was initiated more than two decades ago, people with disabilities were not participating as planners and managers at national and district levels. Some community committees included people with disabilities, but others believed it was their responsibility to carry out activities for disabled people rather than with them.

Now it is regarded as essential that programmes related to disability issues are planned and implemented with disabled people and their representatives. DPOs have the right and the responsibility to identify the needs of all people with disabilities, to make their needs known, and to promote appropriate measures to address the needs. CBR programmes can assist in forming and strengthening DPOs.

### **National Policies**

National policies and local government involvement are essential elements of CBR programmes. The manner in which communities are linked to the national level varies, depending on the administrative structure of the country and the particular ministry that promotes CBR. However, national policies are needed to guide the overall priorities and planning for a CBR programme. The implementation of these policies requires adequate resource allocation.

The national government establishes policies and legislation relevant to disability, possibly including a specific policy for CBR. International instruments and declarations relevant to disability may form a basis for national policies: United Nations Standard Rules on the Equalization of Opportunities for Persons with Disabilities; ILO Convention 159 and Recommendation 168 concerning the Vocational Rehabilitation and Employment of Disabled Persons; UNESCO Salamanca Statement and Framework for Action on Special Needs Education; WHO Alma-Ata Declaration establishing rehabilitative care as part of PHC; and UN Convention on Rights of the Child, especially Articles 2 and 23.

National policies may also take account of regional proclamations concerning disability, such as the Proclamations of the Asian and Pacific Decade of Disabled Persons and the African Decade of Disabled Persons, or the Arab Proclamation on Disability.

### **Programme Management**

CBR takes place at the community level. Nonetheless, it has an organizational framework at national and intermediate levels to ensure the most efficient and effective collaboration possible among the many sectors that contribute to a CBR programme.

### *National to District Level*

If CBR is initiated by government, one ministry usually takes the lead and then provides the organizational framework. This is often the ministry responsible for social affairs, but sometimes it is the ministry for health. Sometimes the ministry for social affairs is linked with labour, health, or local government and community development. Of course, it is possible for any ministry to initiate CBR, including the ministry responsible for local government. Although one ministry initiates and co-ordinates CBR, the involvement of the ministries for labour, social affairs, education, and health, is considered essential to the success of CBR. These ministries collaborate not only with each other, but also with all ministries that deal with issues relevant to eliminating barriers to the participation of disabled people, e.g. ministries for housing, transport, and rural development. The ministry for finance is often not involved in CBR development, though it can be very helpful in implementation.

Each country decides how to manage its CBR program at different levels. Some countries may have co-ordinators, and perhaps committees, at all administrative levels. Experience has shown that the district level is a key point for co-ordination of support to the community. Therefore, it is particularly important to have district managers, and perhaps district committees, responsible for CBR.

The **CBR Programme Managers** usually work in the ministry that provides the organizational framework for the programme. For example, if the ministry for social affairs is in charge of CBR, the district social welfare officers will probably have CBR as one component of their work. If the ministry for health is in charge, the district officers for primary health care may be responsible for CBR. Ideally, some of the district level managers will be men and women with disabilities. The duties of a district level CBR programme manager, supported by intermediate staff, include supervising the training and the activities of community workers; monitoring the programme activities; co-ordinating the community committees within the district; and acting as liaison between the communities and the district level representative or committee for CBR.

### *Community Level*

Because CBR belongs to the community, one approach for implementing CBR is through the leadership of the community committee headed by the chief of the village or the mayor of the town. This committee, perhaps called a **community development committee**, guides the development and affairs of the community. Such a committee is well suited to act as coordinator of the many sectors, governmental and nongovernmental, that must collaborate to sustain a CBR programme. For example, the community development committee can collaborate with the education sector to promote inclusive education, with the ministry of transport to develop a system of accessible transport for people with disabilities, and with voluntary organizations to form a group of volunteers who will take care of disabled children one half day each week so their mothers can do errands outside the home.

Community action for equal participation of disabled children and adults varies a great deal among countries and also within a single country. Even with the guidance of a national policy indicating that communities should take responsibility for the inclusion of their citizens with disabilities, some communities may not identify this as a priority for their

development. Or, the members of the community development committee may decide that CBR requires special attention and so they establish a separate committee linked to the community development committee. Such a CBR committee would be comprised of a representative from the community development committee, people with disabilities, family members of disabled people, and other interested members of the community.

The committee for CBR will take the responsibility for responding to the needs identified by disabled people in the community; raising awareness in the community regarding the needs; obtaining and sharing information about support services for disabled people that are available outside the community; working with the sectors that provide support services to strengthen and coordinate those services; and working within the community to promote the inclusion of people with disabilities in schools, training centres, work places, leisure and social activities. In addition to these tasks, the committee may have to raise funds to support its activities.

**Community CBR workers** are a key component of CBR programmes because they provide precise information to disabled people about what they can do to improve their abilities to take care of themselves, to communicate, or to move around. The community CBR worker is also the person who provides information about services available outside the community, and acts as liaison between the families of disabled people and the programme manager.

It is the community CBR worker who provides information to disabled people and their families, e.g. advice about basic functional rehabilitation activities, construction of simple assistive devices to improve independence in daily activities, use of sign language, or use of a walking cane by a person who is blind. The community CBR worker also acts as an advocate for people with disabilities by making contacts with schools, training centres, work places and organizations to promote accessibility and the inclusion of community members with disabilities. Without this information and advice provided by the community CBR worker, disabled people and their families may not be actively involved in a CBR programme.

Community CBR workers may be employed within the sector that provides the framework for CBR. They can also be volunteers working in cooperation with other community workers who are employed.

### **Multisectoral Support for the Community**

A community committee for CBR should include community members who have disabilities and their representatives, as well as others who are knowledgeable about the general issues concerning disabled people. The committee members will know how to solve many of the problems in the community, but sometimes they will require additional information from the experts in the education, labour, health, social and other sectors. For example, family members may seek information about how to improve the function of a disabled person in the home; volunteers and community workers will need training in order to assist people with disabilities and their families; teachers may need to have training to effectively include children with disabilities in their classes; and business people will need advice on how to adapt workplaces so that people with disabilities can work.

Hence, information exchange is a key component of CBR. All sectors should support CBR by sharing information with the community, collaborating with each other, and strengthening the specific services they provide to people with disabilities.

#### *Support from the Social Sector*

Although the government's responsibility for social affairs varies among countries, issues commonly addressed include disability pensions, support for special equipment for disabled people, housing, vocational training, and co-ordination of referrals for individuals who require services from other sectors. If the social affairs ministry initiates CBR, social welfare officers may be managers of the programme.

A ministry for social affairs may not have personnel below the district level, but it is common that the staff posted in the district are very familiar with social and economic conditions throughout the district and also knowledgeable about resources within the district, including those in the nongovernmental sector. This information is very useful in a CBR programme, particularly for obtaining job skills training and work opportunities for men and women with disabilities. The staff from social affairs can advise individuals with disabilities as well as staff from other ministries regarding community resources.

#### *Support from the Health Sector*

The health sector promotes inclusive Primary Health Care (PHC) services, providing basic health care interventions for all persons of the community, including disabled children, youth, adults and elderly. This means that PHC provides routine services like health checks, vaccination, to all people with disability. In addition, PHC personnel provide support to CBR through advice on methods to limit the progression of disabilities, and refer to appropriate rehabilitation services when needed. To ensure that this occurs, it is necessary to train PHC personnel.

The health sector will also strengthen the rehabilitation referral services for supporting PHC personnel and for providing specialized interventions with the aim of maximizing the independence of people with disability, for living in community.

Health care and rehabilitation personnel will also be available to present health education programmes relevant to disability, to counsel disabled people and their families, and to confer with teachers and social workers, when a special issue is raised by a disabled person or family members.

#### *Support from the Education Sector*

The education sector makes an important contribution to CBR by helping regular schools to become more inclusive. This involves, for instance, adapting the content and methods of teaching to meet the needs of all children rather than expecting them to adapt to a rigid curriculum. In this way, the schools will be able to meet the needs of not only children with disabilities, but also the 10 to 15 percent of the children who are already in the schools and who experience difficulties and barriers to learning. The regular education system will take responsibility for the education of all school-aged children, including children with disabilities who, in some countries, have been the responsibility of the social or health sector or NGOs. Depending on the context, children with multiple or severe disabilities

who require extensive additional support may be taught within special units, but can also be taught in regular classrooms. Special schools may be effectively used as resources for regular schools in promoting inclusive education

The education sector will, for example, adapt the initial and in-service training of both regular and specialised teachers in response to the new roles in the inclusive school, as well as ensure that buildings are physically accessible. The education sector will also take responsibility for the educational assessment of children with disabilities, which some countries have viewed as a medical responsibility.

#### *Support from the Labour Sector*

The local business community is more actively involved in providing skills training and work opportunities for persons with disabilities. Ministries for labour or other competent ministries may provide special services to assist men and women with disabilities to acquire vocational skills, find jobs, or initiate their own income-generating activities.

In labour sector there is a growing emphasis on inclusive job training and employment. Women and men with disabilities are increasingly included in regular skills training programmes and seek work either in the local job market or through self-employment.

Sheltered work in separate centres has now become a transitional option for some, but not all, disabled persons. Some disabled people attend sheltered workshops for a while, until they are ready to move on to other, more integrated forms of employment. Those unable to hold down a job on the open labour market, either with or without supports, continue to find employment in these workshops, which are undergoing change to be more in line with the current labour market situation.

#### *Support from DPOs*

As noted above, national and local DPOs should be involved in planning and implementing CBR programmes. Members of DPOs can initiate discussions and promote actions to eliminate barriers to equal participation. They can also serve as resource people to advise other NGOs and the government services regarding the specific needs of disabled people and the most appropriate ways to address those needs.

Adults and youth with disabilities can also provide advice and support to each other, and to parents of disabled children, regarding opportunities and resources that will help them to achieve full participation in school, work and social life. Most importantly, DPOs can participate in implementing CBR and at the same time strengthen their role as advocates for the rights of all children, youth and adults with disabilities in their communities and countries.

#### *Support from NGOs*

Most communities have a variety of nongovernmental organizations (NGOs) and groups that can contribute to a CBR programme. These may include for example, humanitarian organizations, women's and youth groups. Some of these may provide services to disabled

people, while others can make special efforts to include people with disabilities in their activities.

National and International NGOs in the framework of Governmental policy, can also make significant contributions to the development of CBR e.g., by initiating CBR, by training CBR programme managers, and by helping to strengthen the services within the various sectors that contribute to CBR.

### *Support from Other Sectors*

The business community can provide valuable support to CBR by providing on-the-job training and hiring people with disabilities. If there are opportunities for members of the community to obtain small grants or loans to start their own business, the business sector can ensure that these opportunities are extended to community members with disabilities.

Newspapers, radio, television and the internet can provide the public with information about disability issues, and also present a positive image of individuals with disabilities at school, work or in social settings. All CBR stakeholders can work closely with the media to identify priorities and to provide pertinent information.

### *Collaboration for Support to the Community*

CBR will not work if each of the sectors mentioned above works in isolation. Collaboration is needed among the government support services, DPOs, and other nongovernmental groups. The following example suggests the types of collaboration that may occur.

A social welfare officer may identify an older child who has never been to school, and who has difficulty learning and moving. The officer will work with the family to convince them to contact the health services and the school. The health services will assess the situation to determine if something could be done to improve movement. The school will assess the child's learning needs to enable the teachers to meet these needs. If the child needs braces, for example, and there are no resources to pay for them, the social welfare officer may request assistance from other sectors, including NGOs.

Support services that consider the "whole person", and not simply the delivery of a special service, will more likely collaborate with each other. Collaboration with other resource groups in the community is necessary because services alone cannot provide disabled women and men with employment or social acceptance.

### ***Sustainable CBR Programmes***

Countries' approaches for implementing CBR have varied a great deal, but their experiences have identified some common factors that affect the sustainability of CBR programmes. These include: 1) the recognition of the need for a CBR programme based on a human rights approach; 2) the willingness of the community to respond to the needs; 3) the availability of resources and support, from outside the community; 4) multisectoral collaboration, including collaboration with DPOs and NGOs; 5) the presence of community

workers; and 6) the integration of CBR within government with allocation of adequate resources.

### *Recognition of the Need*

When a new CBR programme is initiated not all communities believe that they should have such a programme. A community must recognise that the need exists before it starts CBR activities. The programme manager from the district level must work with each community to clarify this issue. The manager will ensure that it is disabled people themselves, and their families, who define their needs. During community meetings all needs can be discussed and the community can decide whether it wants to address the needs in a co-ordinated way through a community committee for CBR.

### *Community Response*

If the community decides to address the needs of disabled people, the process of establishing a CBR programme can begin. The community development committee will decide if it will take charge of the programme, or if a special committee should be formed. Then decisions can be made about the selection of community workers and volunteers for CBR, and their training can take place. As the committee begins its work for CBR, priority needs will be determined and actions will begin to address those needs. Throughout this process, disabled people and their families will be actively involved. This process of agreeing and planning by the community is essential.

### *Availability of Resources and Support*

If there is a government policy at national level that promotes community efforts in favour of people with disabilities, and if this is matched with adequate resource allocation, efforts for CBR can be strengthened. For example, the government can provide programme managers at district level; strengthen services for people with disabilities; and collaborate with the private sector to ensure that job opportunities are available to people with all types of disabilities.

### *Multisectoral Collaboration*

The various sectors that support the community in a CBR programme each have an important role to play. It is very important for all ministries, as well as all nongovernmental sectors, to realise that in CBR all sectors work in partnership. Although one ministry provides the organizational structure, all sectors are equally important when activities are carried out to promote the full equalization of opportunities for people with disabilities.

### *Community CBR Workers*

Maintaining the commitment and motivation of the CBR worker is one of the major challenges of community leaders and CBR programme managers. Some incentive, such as regular in-service training, an annual award for the best worker, certificates of appreciation, or the provision of uniforms, may be offered to the volunteers. This will depend on the customs of the country and the community.

Sometimes people with disabilities and their family members have become CBR workers because they are particularly concerned about the needs of all community members who have disabilities. These workers have proved to be very committed to CBR.

### *Integrated CBR Programmes*

An integrated CBR programme with strong links to governmental structures has a greater impact compared to a CBR programme working in isolation. In the absence of governmental support, small CBR projects started by local community groups or NGOs can exist, but their impact may remain limited. If small projects can be linked with governmental services, they are more likely to have sustainability and continuity.

### ***Conclusion***

CBR serves as an effective strategy for increasing community level activity aimed at inclusion and the equalization of opportunities for people with disabilities.

This position paper underlines the continued commitment of ILO, UNESCO, UNICEF and WHO to CBR and to the human rights of people with disabilities.

We emphasise the importance of the participation of people with disability in planning and implementing CBR programmes, and the necessity for increased collaboration among the sectors that provide the services used by people with disabilities.

All sectors are invited to adopt CBR as a policy and strategy, to provide support for a nation-wide CBR programme, and to create the conditions for multisectoral collaboration in order to advance CBR within community development.



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