

Community rehabilitation and empowerment of people with disabilities. An empirical study of samanvitha self-help & advocacy model in Kollegala block of Chamrajnagara district, Karnataka state

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Abstract

The paper examines the role of Samanvitha, an initiative for differently able people under the principle of Self-help and advocacy group model. Margadarshi a local NGO is working for Community Based Rehabilitation (CBR) on Persons' with Disabilities (PWD) in Kollegal Block of Chamrajnagara district of Karnataka state. Management of CBR, The initiatives for CBR, Components of CBR program, Empowerment component of CBR are Principles of CBR are highlighted in the paper which are adopted by these NGOs in their working area. The effective works of NGOs are understood through case studies. Recommendations are made on how to effectively utilize CBR for benefits of PWD.

Keywords: Community Based Rehabilitation (CBR), People with Disabilities

Introduction

Community Based Rehabilitation (CBR) is relatively a new concept which includes all measures aimed at reducing the impact of disability for an individual, enabling him or her to achieve independence, social integration, a better quality of life and self – actualization. Rehabilitation can no longer be seen as a product to be dispensed; rather rehabilitation should be offered as a process in which all participants are actively and closely involved. People with disabilities (PWD) include those who have long term physical, mental intellectual or sensory impairment or sensory impairment resulting from any physical or mental health conditions which, in interactions with various barriers may hinder their participation in society on an equal basis with others.

The World Disability Report estimates that there are over one billion people with Disabilities in the world of who between 110 -190 million suffer from very significant disabilities. It is reported that PWD are excluded from education, health, employment and other aspects of society and this situation can accelerate poverty. The life pattern of PWD are dignified in developed countries where in developing countries they are yet to find a proper place for them in the main stream of the society (Agarwal & Sharma, 2002)

CBR is a strategy within general community development for the rehabilitation, equalization of opportunities and social inclusion of all people with disabilities. The primary objective of CBR is the improvement of the quality of life of people with disability / marginalized persons. Key principles relating to CBR are equality, social justice, solidarity, integration and dignity CBR is not an approach that only focuses on the physical or medical needs of a person or delivering care to disabled people as passive recipients. It is not outreach from a centre. Further the CBR involves capacity building of disabled people and their families, in the context of their community and culture. It is a holistic approach encompassing physical, social, employment, educational, economic and other needs. It promotes the social inclusion of disabled people in existing mainstream services. It is a system based in the community, using district and national level services.

Management of CBR

CBR is implemented through the combined efforts of disabled people themselves, their families and communities, and the appropriate health, education, vocational and social services. CBR program has been a flexible one so that its implementation is possible at the local level and within the context of local conditions.

The initiatives for CBR

The NGOs are offering the services of Social counseling, Training in mobility and daily living skills, Providing or facilitating access to loans, Community awareness raising, Providing or facilitating vocational, training/apprenticeships, Facilitating information for local self-help groups, parents groups and Disabled People's Organizations (DPOs) , Facilitating contacts with different authorities , Facilitating school enrolment (school fees and contacts with teachers)

Components of CBR program include

The components that CBR program of NGOs include services such as Prevention of cause of disability, Provision of care facilities, Creating a positive attitude towards people with disabilities, Provision of functional rehabilitation services, Empowerment, provision of education and training opportunities, Creation of micro & macro income generation opportunities for PWD.

Empowerment component

The NGOs are emphasizing the empowerment of PWD. The essence of empowerment is that people with disabilities and their families take responsibility for their development within the context of general community development. The outcome of CBR in NLEP is expected to be a change in their mindset- from passive receiver to active contributor and that each LAP participate in family and community life; in learning, playing, working, and household activities; in politics and cultural activities. Empowerment of community to assume responsibility for ensuring that all its members, including those with disabilities, achieve equal access to all of the

resources that are available to that community, and that they are enabled to participate fully in the social, economic and political life of the community.

Principles of CBR

The NGOs are strictly following the principles of CBR. APD being the nodal agency, it has trained staff of Margadarshi well on the principles of CBR. The three important principles include:

- **Equality:** All human beings are of inherently equal worth, are entitled to equal rights and share the same responsibilities. Human beings are born each a unique individual. Each develops along different lines. Each has different abilities. These differences do not make us unequal in worth.
- **Social justice:** Social justice implies that services and opportunities provided for disabled people should be at the disposal of all and not be reserved for a numerically small group among them. It stands to reason that the ultimate goal is to make individualized care, training, schooling, and access to employment.
- **Dignity:** For a disabled person is possible when it is recognized that all human beings have equal worth and equal rights, he or she is fully participating in the life of the community.

Objectives

1. To study the rehabilitation services offered by

- Margadarshi NGO
2. To understand the impact of services offered by NGOs through case studies
 3. To study the number of PwDs & CwDs for Equipments, Therapy Sessions, Surgeries in the Camps
 4. To study the Workshops & Orientations organized by Margadarshi in the project area.
 5. To Study the medical camps organized and equipments / aids distributed for the PWDs

Methodology

1. Available secondary data will be gathered and perused from MSK, Bangalore, all Concerned DPUs, Federations and Sanghas.
2. Data was collected through structured questionnaire and interview guide
3. Participant Observation method was used
4. Focused Group Discussions (FGD) were held to record the impressions and opinions.
5. Briefing and debriefing sessions were organized to get clarity on the gathered information. It also serves the purpose of cross checking the information.
6. SWOT method was used to record the current situation

Sampling

There are 5918 beneficiaries are identified in Kollegal block of which 10% random sampling was covered under nine categories.

Table 1: Category of Disability in Kollegal Block

Category of Disability	Male	%	Female	%	Total	%
Loco Motor	1938	64	1071	36	3009	31
Speech And Hearing	532	56	425	44	957	16
Vision Impairment	479	61	301	39	780	13
Mental Challenge	316	56	247	44	563	9.5
Cerebral Palsy	80	60	53	40	133	2.2
Mental Illness	85	57	64	43	149	2.5
Spinal Card Injury	32	68	15	32	47	0.8
Multiple Disable	132	61	83	39	215	3.6
Leprosy	42	65	23	35	65	3.4
Total	3635	61	2282	39	5918	100%

Table 2: Identified PwDs & CwDs for Equipments, Therapy Sessions, and Surgeries in the Camps

No. of PwDs & CwDs attended medical camp	160
No of PwDs identified for wheel chairs	35
No of PwDs identified for Try cycles	20
No of PwDs identified for creches	11
No of PwDs identified for surgeries	07
No of PwDs identified for caliper, limbs, crutches	36
No of PwDs identified for Physio therapy	25
No of PwDs identified for General problems	26

Correctional Surgeries

Seven beneficiaries have been identified for correctional surgeries during the camps. DDWO has insisted to conduct the surgery in Mysuru itself instead of Bangalore. Out of seven, 3 beneficiaries application have been accepted by DDWO, amounting to Rs.1, 65,000/- to do it in Mysuru. Margadarshi has to work on this to find out good doctors in Mysuru. Another 4 applicants are taken care by DDWO

Medical Insurance Scheme of National Trust

Margadarshi is working to mobilize health insurance scheme for it beneficiaries. A Health Insurance Scheme for the welfare of Persons with Autism, Cerebral Palsy, Mental Retardation and Multiple Disabilities. Accordingly BPL beneficiaries will have an annual premium of Rs.350/- and for APL families it is Rs.500/- Margadarshi has identified 85 beneficiaries and one day workshop has been organized to create awareness on the scheme. The scheme will come into force from January 2016, for this the organization is completing its documentation works, planning to collecting premiums and then follow up service mechanisms etc. Margadarshi has to strengthen its services with the stakeholders. Because usually insurance in schemes, premiums are collected, but when the point of service comes, the beneficiaries do lack quality services from the service providers. Margadarshi has to play greater role in overcoming this lacunae.

Table 3: Workshops & Orientations organized by Margadarshi in the project area

Program	No. of Participants	Venue
Workshops for VRWs & MRWs One Day Workshop	83	Taluk Panchayath & Rotary Bhavan Hall at Kollegala
Workshop for ASHA workers & Anganavadi Teachers	88	CDS Bhavana, Kollegala
Workshop for Parents & Care Givers	50	Govt. Girls hostel, Hanur
	88	Kamma Samudaya Bhavan, Hanur
	46	PU girls hostel Hanur
Residential Camp for CwDs	73	Govt Girls Hostel, Hanur
Book & Study Material Distribution Program	110	Organized by Sammilana charitable trust & Margadarshi
Workshop for teachers	-	Gurubhavan Kollegal, BRC centre Hanur
Programme for Spinal Card Injury Persons	13	Field based program
Mr palswamy & team APD Awareness about Sanitation	Five street plays & around 400 people gathered	CALIDO Trust & Margadarshi team at Hanur sector.
Celebration of World Mental Health Day	50	Kollegal
Workshop for GP presidents & Vice presidents Workshops for PDOs & secretaries of GPs	60	Taluk Panchayath, Kollegal
Formation of SHAG	5 groups, 80 PwDs	Bandalli, Manuganahalli, Shagya, Rampura, Martalli GPs.
Career Guidance & Bridge Course	128	Guru Bhavan, Kollegal, RPs from Piradi - APD Belgaum, DREAM Association, Bangalore.

Table 3: Medical Camps

Program/camp	No. of Beneficiaries	Facilitation team
Assessment & Measurement camp of Calipers & Limbs	53	Mobility India
Assesment camp of customized wheel chair – Phase I	30	APD, Bangalore
Fitmant Training camp of Calipers & Limbs- Phase II	40	Mobility India
Workshop on Distribution of Calipers & Limbs	40	Margadarshi & Mobility India

Table 4: Mobility equipment's/aids distributed during the year 2015

Mobility Equipment's/aids	Total No.	Men	Women	Children
Wheel chairs	36	08	08	20
Try cycles	19	15	04	---
Elbow crutchers	10	08	02	----
Walkers	07	05	02	---
Auxillary crutchers	10	08	02	----
Calipers	19	15	02	02
Artificial limbs	20	18	01	01
Hand splints	01	01	-	-
Total	119	75	21	23

It is found that the total 119 PWD have been provided with Mobility equipments/aids distributed during the year 2015, Parents, caregivers and beneficiaries are happy and have expressed their satisfaction on the services provided. In fact they have gratitude feeling towards the organization. Margadarshi has a very good philanthropy network to support its program in this regard. The organization is proud of itself on its service activities. It has maintained quality standards in its philanthropic activities. Around 8 lakhs they have raised towards margin money and equipments. From Gram Panchayaths Rs.17, 200/- has been mobilized under 3% grant provision of GP. They are trying to involve more the participation of GP in the coming years.

Education Rehabilitation to CwDs & PwDs of Hanur & Kollegal Taluk

Block Resource Person (BRP) opined that there are no IERTs instead outsourced resource persons services are hired. 16

children are provided with Home Based Education Services. A camp has been conducted in which 212 children have been screened of which 41 children were recommended with aids ALIMCO Bengaluru. These children are studying in schools. For all CWDs scholarship facility provided. The Education Department is willing to work with Margadarshi in future days, he is very happy about the works of Margadarshi. Margadarshi has not yet stepped into the Identification, need assessment of PWDs who are in higher education like colleges and technical education. However there is a need to cater services to this target group also. In the coming days the organization has to draw a road map for the same.

Blocks	Pre primary			Primary		
	Boys	Girls	Total	Boys	Girls	Total
Kollegala 0-6	176	113	289	255	187	442
Hanur	108	61	169	385	246	631

Note: Secondary Source: Department of Education

Equip PHC, CHC and district hospital to provide rehabilitation services for all kind of CwDs & PwD's with regard to Mental illness and spinal cord injury people

The evaluation team met Dr Ramesh, Taluk Health Medical Officer of Kollegal and Hanur. He said that Taluka hospital and PHCs have involved with Margadarshi to provide services to PwDs & CwDs in their respective areas. So far they have organized three such camps have been organized. For screening and validation were done. As per Margadarshi survey 1962 people are still left out from getting identity cards. It has been decide that phase wise camps will be organized to provide the same. A team of doctors are ready to come and assess at the earliest in different camps in phased manner. Later MRW can get certification from District Surgeon. It has been decided to have a camp in place there are more left out beneficiaries.

Dr Ramesh said it is very important to do revalidation of PwDs, for which the district hospital is ready to extend its help. Under RSBY, no PwDs & CwDs are covered in the block and hence special care has to be taken in this regard. He said labour department has to coordinate with hospital, & Margadarshi. Dr. Ramesh opined that DDWO (District Disable Welfare Officer)

Has to take active part in these programs

Margadarshi has very recently started its work in five panchayaths in Hanur sector, where in Margadarshi has initiated formation of SHAG (Self Help Advocacy Group) to mobilize PwDs to give their group an organisation structure. However, nurturing, stabilizing the groups have to be taken care in future especially maintenance of books of accounts and records etc. So were five such groups have been organized, it needs further guidance. This formation of SHAG has to be formed at GP level and block level. Till GP level, the groups have to work as advocacy/right based groups at block level the groups have to work as consultative bodies.

Margadarshi has to initiate works in this direction in the later stage. It has to create an environment so that the banks and financial institutions will come forward to provide financial assistance.

i) Case study No 1

Prashanth, 7th standard, town school, HPS, Kollegala , Age About 12 years

This boy is a Home Based Education student. After the training at home, he has been directly enrolled for fifth standard in the school. The boy has been provided with customized tricycle, which helps to reach school and classroom as well as use it as desk in the classroom. The class teachers are very happy about this arrangement, the boy is also very happy with this arrangement, his mobility and comfortable feeling that he has got to sit in the classroom. He is very good at his studies. Mr Balakrishnegowda, teacher has taken personal interest to build confidence in him on a continuous basis. Ms.Bhagyamma, a trained teacher by the Department and Margadarshi is also giving attention to the boy. SPARSHA a guide book to teachers of DSERT has been followed to extend support to such children. She has expressed her happiness on the training provided by Margadarshi. The boy also does well Origami, project works, He is availing scholarship from social welfare department. On account of World Disability Day celebration, sports have been organized in Kollegala. It is a taluka level event for which he is taking part in carem competition and drawing competition events. Already he has won district level prize. He has become a very proud student in the school. All teachers are very helpful to him.

ii) Case Study No.2

Kavitha D/o R Krishna, Mudigunda village, aged about 28 years: She has been provided with a wheel chair by Margadarshi. Her's is Locomoto case. She has studied upto II PUC. She is a member of PMSRY Sangha and doing weekly savings also. She is self-employed women. She has to pack eatables (botis – a kind of snacks in the village) given by a agency. For this work she is getting Rs.70/- per day. She goes around the village whenever she wants. She has given an application to the department now to get her motorcycle, so that she want to go to Kollegala and come back to her village, thus extending her mobility from village to town.

iii) Case Study No 3

Pavan, aged about 14 years: Pavan is studying in 8th std, JSS High school, Mudugunda, he is receiving scholarship. His left hand is not full grown. His concentration ability on the studies is less. He is shy natured boy. He needs sustained mentoring and counseling. The evaluation team interviewed his mother

Gowamma who expressed her happiness on the services that she is getting from Margadarshi organisation and she is ready to take him to the physiotherapy.

iv) Case study No 4

Usha M P w/o Sundar is a ASHA worker: Usha has identified 12 PwDs. Mullur is a very big village which has six ASHA workers. This village alone has 103 PwDs. ASHA workers expressed their satisfaction over the training provided to them on PwD by Margadarshi. Mr Sundar is a PwD, is a working as VCTC counselor in Kuder PHC.

v) Case Study No.5:

Shobha, a anganwadi worker, Indira Gandhi colony, Kollegal (Anganwadi centte dice no.29/578030710): This anganawadi working in Kollegal ULB. She has attended training organized by Margadarshi on Preventive care and early detection which was organized in Gurubhavan, Kollegal. She said she has tried to adopt all the suggestions given in the training and she has shared the training contents in the mothers meeting. There are 4 PwD in her work area, they are getting pension.

vi) Case Study No 6

Krian Babu, S/o C.Shivaram, Chistian Stret, New IB Road Age About 43 years: He has studied PUC & ITI in Fashion designing. He has been provided with artificial limb. The problem he faced was Spinabipfeada, which destroys any part of the body and he said that he lost his leg. Margadarshi has provided with him a two stretchers and limb through Mobility India. Mr Kiran babu want to start a cyber café from NHFD. He is trying to mobilize 3.10 lakh as loan support to start self-employment. He need loan facilitation, EDP training and PMGSY facilitation.

vii) Case Study No 7

Deepika D/o Putaswamy, Age about 15 years: Dipika's case is of Artho and MR She gets fits. She was provided with wheel chair by Margadarshi and getting her pension, Home based education tutors are helping her with education. She is suffering from cerebral palsy. During evaluation team visit, her cycle was punctured. Her mother has to be educated to repair the tricycle immediately in order to help the child. The parents of this child is in need of counseling. The physiotherapy is required for the child.

viii) Case Study No 8

Puttananjamma D/o ChikkaSiddaiah, aged about 30 years: She had fever which caused disability. Her's case of loco moto. Margadarshi has provided try cycle, caliper and, Elbow. She is getting pension, presently she is getting Rs.500/- per month pension. It needs to be ratified and get her Rs.12, 00/- because her disability is more than 75%. She has Adahar card, BPL card.

ix) Case Study No.9

Diwakar S/o Jairaj, aged about 5 years: The boy got the fever after which he is suffering from CP & MR. Parents have tried to provide medical help in JSS hospital in Mysuru. This child has been provided with CP chair by Margadarshi. The parents have to be trained with techniques of teaching. There is no application given for pension for the child by the parents.

The parents need lot of counseling.

x) Case Study No.10

Varsha D/o Suresh aged about 12 years: Her's is a case of CP. Home based education child. The tutors are teaching her at home. The child is provided with chair, which has helped her to sit with stability. She is getting a pension. Her brother is Vishal aged about 7 years is also a CP. Thus this home has two children with CP

Conclusion

Margaradshi has undoubtedly made a significant move in working with PwD and CwD of Kollegal and CH Nagar. Due to their diversified activities, their works have been recognized by the community, department people, philanthropists, and people representatives. The survey that they have done has to be designed properly in a phased manner, time bound manner. Margaradshi has to work as facilitator and Resource Centre for PWD and CWD Management of Margaradshi has expressed its desire to upscale the activities in this region and also to start therapy centre both in Kollegal and Hanur towns. They are intended to work in a more region specific, client specific manner. They have further expressed their willingness to take expert opinions, suggestion in the best interest of the target group. Margaradshi has expressed its gratitude for APD for its sustained institutional support, which has made this Samanvitha – a district level initiative through right based approach, a successful step.

This is a best model which has involved ICDS, Department of Education, Department of Health & Gram Panchayaths to provide services under one umbrella. A momentum has generated in the block to provide service on priority to the beneficiaries among the PRIs as well the people representatives.

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