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RESEARCH ARTICLE

"COMMUNITY BASED REHABILITATION: PROVIDE BARRIER FREEENVIRONMENT AND DEVELOPMENTAL OPPORTUNITIES FOR DISABLED PEOPLE"

Dr. Kavita Gautam

Prof. Rajendra Singh (Rajju Bhaiya) University, Prayagraj.

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Abstract

Community-based rehabilitation approach provides rehabilitation; reduce poverty, equal opportunities, and social insertion for differently abled people at community level. Objective of CBR is to meet the needs of people with disabilities with the respect to health, educat ion, employment, social and economic empowerment issues (WHO 2010).

Statement of the problems: I am going to find out the barriers which affect the available facilities for disabled people. Society treats disabled people in a different way as pity, feelings of sympathy, isolated or rejected. People often maintain social distance and consider disabled as outsiders. Many disable people feel discriminated at various levels in the family as well as in the community. Sometimes their families strongly supported them and even sometimes they might be overprotected by the family members. At the same time they might be rejected and left out from normal community life because of society humiliation and discrimination. In that conditions disabled people have very restricted and limited opportunities and choices for their own development.

Objectives: The main focus of the study to find out how community based rehabilitation programme strategies will be effective to remove barriers in all stages and createmultiple opportunities and choices for the betterment of life of disabled people. In this backdrop the paper aims to find out how CBR helpful to provide and strengthentheir mental and physical abilities so they can understand themselves as normal human being in the society.

Methodology: The research paper envisioned to find out the exercise of CBR service facility to PWDs, regulate whether differently abled have access to community based rehabilitation facilities, and recognize the CBR implementation challenges from the opinion of caregivers and parents, service providers. This whole paper is based on theoretical and literary approach. Data is collected from secondary sources such as books, research papers, journals, and reports etc.

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Introduction:-

People with disabilities (PWD) and their families confront various physical and viewpoint and discriminatory barriers to participation in their communities. The social model of disability depicts this exclusion as 'disabling' and

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as caused by the way in which the society is organised, making disabled person more vulnerable to poverty and oppression. "Person with Disability" means a person with long term physical, mental, intellectual or sensory impairment which, in interaction with barriers, hinders his full and effective participation in society equally with others (According Person with Disability Act 2016)

On the occasion of 'International Day for Persons with Disabilities' UN Secretary General confirmed the adherence of the United Nations to work with disabled people to build a sustainable, inclusive and transformative future in which everyone, including women, men, girls and boys with disabilities, can understand their potential. To create inclusive and barrier free society for disabled people is in accord with the motto of the United Nations Sustainable Development Goals, i.e., "No one is left behind". Additional, in 2020, the theme of United Nation for perceiving International Day for Persons with Disability was "Building Back Better: toward a disability-inclusive, accessible and sustainable post COVID-19 World" as Persons with disabilities everyday fighting discrimination and barriers that control them from participating in society.

Community-based rehabilitation approach provides rehabilitation; reduce poverty, equal opportunities, and social insertion for differently abled people at community level. Objectives of CBR are to meet the needs of people with disabilities with the respect to health, education, employment, social and economic empowerment issues (WHO 2010).

Community Based Rehabilitation (CBR) was initially conceived as a low cost method of rehabilitating people with disabilities in rural areas. Since its adoption by the World Health Organization (WHO) in 1978, CBR has grown significantly. It is no longer just about the medical rehabilitation of individuals, but also about improving the general well-being and livelihood of the disabled and the communities in which they live.

CBR involves parents, neighbours, friends, teachers and employers in an effort to drive disability-comprehensive development, regardless of infrastructure. Community-based rehabilitation connects the dots that make a happy society: health services, schools, vocational training, employment, political participation.

What are the Objectives of CBR?

India introduces this approach in National Policy for Person with Disability (2006) as a way to address the needs of people with disabilities. CBR is very effective approach and this approach must be used by those actors who are responsible for service delivery at the local level. The model aims to utilize and generate resources, infrastructure, general services and environmental support systems that already exist in communities. A community-based model of rehabilitation promotes self-help, information and awareness in the indigenous community. Rehabilitation is done through the joint efforts of people with disabilities, their families and communities, and appropriate formal service providers (i.e. health, social, welfare, vocational and education).

CBR works with people with disabilities to

- develop their capacity,
- address their specific needs,
- ensure equal opportunities and rights, and
- facilitate them to become self-advocates.
- reducing poverty
- promoting community involvement and ownership;
- developing and strengthening of multisectoral collaboration;
- involving disabled people's organizations in their programmes, scaling up their programmes;
- promoting evidenced-based practice

CBR is about making the community accommodate individual with different needs and abilities by

- removing barriers that exclude people with disabilities and
- enabling everyone to participate fully and equally in all development areas.

Researchers have referred to community-based model as a framework that seeks to promote individual clients' ability to achieve their goals and to ensure real community membership. These goals are achieved through collaboration between the professional and the client, which put emphasis on client strength, and diminished professional influence.

Therefore, prominence is given to the commitment of the clients and their families rather than to the intervention strategies and the objectives set by worker. The service provided is tailored to the needs and goals of individual clients and addresses those needs comprehensively. Directed by the client or at least with the client's cooperation, the worker develops an appropriate package of community training and education using available community support and resources.

This approach allows individuals to achieve their own goals and develop a sense of community we feeling. It is clear that the driving forces behind the community-based model are empowerment and community integration. Consequently, it is essential to understand these structures are correctly understood, incorporated and implemented in the terms of service and their limitations are fully identified. Without this understanding, the model could be reduced to nothing more than oratory and could belose its empowerment values. Empowerment is used to describe the process by which individuals critically understand their lives and their environment. Similarly, empowerment is the ability to make decisions and control one's life, leading to respect and motivation to participate. Although empowerment is likened to psychological concepts such as self-efficacy, self-esteem, and space of control, it emphasizes actual ability and participation in decisions that affect one's existence or self-determination. Although individual empowerment is at the core of the community-based model, it encourages the viewing of disability as a socio-political construct. Consequently, empowerment should be promoted at broader community level through civil rights and development of community integration.

Barriers for Disabled Persons

1. Environmental barriers

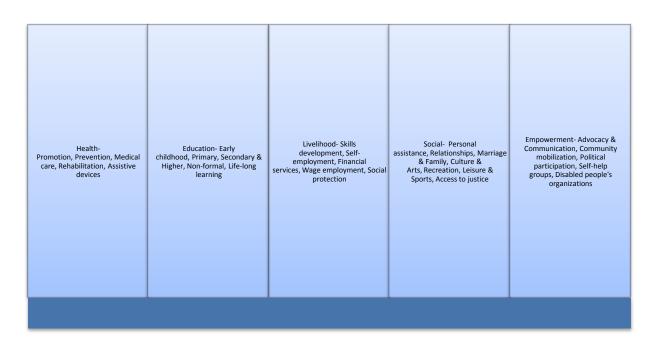
- 2. Attitudinal barriers
- 3. Technological barriers
- 4. Economic barriers
- 5. Communication barriers
- 6. Policy barriers
- 7. Social barriers
- 8. Transportation barriers

Developmental Incentives of CBR

Development programs are often initiated by policy makers in places that are top-down, far from the community level, and designed without community involvement. One of the most important aspects of development has been identified as participation in society as individuals, groups or organizations or through representation at all stages of the development process, including planning, implementation and monitoring. The community-based approach helps to ensure that development reaches the poor and downtrodden and facilitates more comprehensive, realistic and sustainable programs.

A conceptual framework for CBR has developed by WHO called the CBR Matrix. It reflects a comprehensive multisector approach to CBR. The CBR model consists of five components: health, education, livelihood, empowerment, and social. The WHO has developed the Community-Based Rehabilitation Indicator Manual to measure the impact of a program on society in achieving outcome indicators. However, the index manual does not measure the qualitative impact of the CBR program on the lives of people with disabilities, the local community, and the quality of service or program management.

CBR Matrix



Service Delivery System for Community-Based Rehabilitation

This will require coordinated efforts by the ministries, local, district and regional authorities and NGOs in the various sectors involved in the rehabilitation. For most people with disabilities (70%), local supervisors / school teachers can intervene at the community level. A recent study in the mentally handicapped adolescent found that psychosocial intervention increased quality of life and reduced the severity of disability. Additional services should be provided in response to community needs. At the district or regional level, approximately 20% are required to be

disabled, general practitioners, intermediate level supervisors, orthopedic technicians, resource teachers, and vocational trainers. In addition to providing complex rehabilitation services, national level professionals are involved in training and supervising district, regional and national level personnel.

People with disabilities face many social problems in society. Improving the living standards of people with different classes of disabilities is a very difficult and challenging task. People with disabilities are neglected in society due to lack of services and health services, schools, vocational programs and jobs. In addition, social isolation of people with disabilities is common in society. This is due to deep fears and beliefs that come from cultural and religious factors. Overall, this is actually a social problem, where disabilities become a responsibility to society. Research is supported on improving the living standards of people with disabilities, their socio-economic and cultural context, the cause of disability, childhood education, consumer-friendly aids and tool development, and all aspects of disability. Significantly alters their quality of life and the ability of civil society to respond to their perceived needs.

Conclusion and Suggestions:-

We need to advocate for mainstream systems and services. It requires commitment in all areas and is built into new and existing laws, standards, policies, strategies and plans. Invest in specific programs and services for the disabled. In addition to mainstream services, some people with disabilities need specific intervention, support services or training. In this process, the involvement of people with disabilities is important because they provide information about their problems and suggest possible solutions. It is needed to provide capacity building trainings of health care providers and program administrators. Human resource efficiency can be improved through effective education, training and recruitment. A review of the knowledge and competencies of employees in relevant fields provides a starting point for developing appropriate measures to improve them. Manpower creation solves the problem of manpower shortage in the long run by promoting new courses and introducing degree and diploma courses such as physical therapy and rehabilitation. Focus on educating children with disabilities as close to the mainstream as possible.

Raising awareness among the people and raising awareness on disability. Governments, NGOs and professional associations should consider implementing social marketing campaigns that change perspectives on issues such as mental illness and leprosy. Involvement in the media is essential for the success of these campaigns and the spread of positive stories about people with disabilities and their families. Creating representative community-based data can help plan and implement appropriate actions to address disability issues.

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