

CBR Field Worker Manual: Update Scoping Report for WHO Western Pacific Regional Office

Prepared by Professor Gwynnyth
Llewellyn and Alexandra Lewis-Gargett,
March 2016



World Health Organisation Collaborating Centre in Health
Workforce Development in Rehabilitation and Long Term Care,
Faculty of Health Sciences, University of Sydney

Introduction

The *CBR Field Worker Manual: Scoping Report for WPRO* was submitted to and endorsed by Pauline Kleinitz, Technical Lead, Disability and Rehabilitation WPRO in December 2015. At that time, we noted we would complete an analysis of the most promising CBR Training materials taking into account post release of WHO 2010 publication *Community based rehabilitation CBR guidelines*¹ and utility, feasibility and accessibility in the Pacific context. This *CBR Field Worker Manual: Update Scoping Report for WHO Western Pacific Regional Office, March 2016* presents that work.

First, we summarize the preliminary findings from the December 2015 *Scoping Report*. This is followed by our analysis of two readily accessible manuals which meet the criteria developed for this analysis. Lastly, we present our conclusions in relation to the desirability and feasibility of a CBR Field Worker Manual for the Pacific context.

Preliminary Findings from the Scoping Report

Finding 1

CBR materials vary widely. For the purposes of analysis we categorized the materials located as follows:

CATEGORY 1: ACCORDING TO INTENDED AUDIENCE

- CBR materials on specific topics which aim to assist community level workers in their day-to-day CBR practice.
- Compared with CBR materials designed for trainers and educators, including those offering short courses and CBR certificate or diploma levels courses or aligned community development areas. The most recent of these focus specifically on the content areas articulated in the WHO 2010 publication *Community based rehabilitation CBR guidelines and Matrix*.

CATEGORY 2: ACCORDING TO TIMING – PRE OR POST WHO 2010 COMMUNITY BASED REHABILITATION GUIDELINES

- CBR materials developed prior to the WHO 2010 publication *Community based rehabilitation CBR guidelines*. These CBR materials primarily come from a health, medical and rehabilitation perspective and were developed in line with the initial focus of CBR in the 1970s and 1980s as rehabilitation therapy and special education

¹ WHO (2010). *Community-based rehabilitation: CBR Guidelines*. (<http://www.who.int/disabilities/cbr/guidelines/en/>) Accessed 14th September 2015.

practiced at the community level by community workers or para-professionals. Typically, although not always, this CBR approach developed in the absence of rehabilitation services or special education for children and adults with disabilities and their families and carers.

- Compared with CBR materials developed following the release of the WHO 2010 publication *Community based rehabilitation CBR guidelines*. These materials address the areas of the Matrix to varying levels of depth and breadth. The more recent materials do not always address the Health component, with authors frequently arguing that there are many health related resources already with far fewer for the remaining four components of education, livelihood, social and empowerment.

CATEGORY 3: ACCORDING TO LOCAL CONTEXT OR COUNTRY, REGIONAL OR GLOBAL PERSPECTIVE

- CBR materials that are developed by large international NGOs with intent for application across various contexts and settings. Accordingly, these materials are more likely to be less contextualised, more general, and in some instances at a higher order level of description and presentation.
- Compared with CBR materials developed at a country, regional, or program level to address local needs. Accordingly, these materials are more likely to be contextualised, more specific, and at a detailed level of description and presentation.

CATEGORY 4: EASILY ACCESSIBLE OR HARDER TO LOCATE AND BREADTH OF RESOURCES – TEXT, VIDEO, DVD

- CBR materials which are aimed at community workers and field personnel including managers and trainers are relatively easy to locate. This is because of the excellent e-repository – Ask Source - <http://www.asksource.info/> - which is an ‘international online resource centre on disability’. The repository is organized by topic and by organization so that searching can be done in both these categories. There are also two specific key topic areas on CBR. These are found in the themed lists of key topic areas. These are CBR introductory resources and experiences <http://www.asksource.info/topics/cross-cutting-issues/cbr-introductory-resources-and-experiences> and CBR Training Manuals and Tools <http://www.asksource.info/topics/cross-cutting-issues/cbr-training-manuals-and-tools>
- CBR curriculum materials for community level training and education and for certificate or diploma level education are somewhat harder to locate. This is because the materials are typically embedded within organizational or institutional websites. Depending on the organization (NGO, INGO) or institution (university or college) there is almost no information available about the CBR curriculum or limited information for example only topic or subject of study outlines.

- CBR materials are primarily text based no matter which category. Many are directly instructional – using a follow this instruction approach rather than adult learning principles and practices. More recent materials post-2010 utilize a range of learning methods with text, role play, DVDs, YouTube clips, and other national and international resources which can be located for the training/ teaching sessions.
- An overall impression is that the vast majority of CBR materials of any kind that are easily accessible have been developed in the context of the African continent.

Finding 2

- There is an absence of CBR materials of any kind that pertain specifically to the Pacific context. This is both surprising given that CBR has been present in several countries including the Solomon Islands, Fiji, Samoa and Papua New Guinea for several decades. It is also unsurprising given the relative lack of resources: reliable internet access, funding for expanding or developing the CBR programs, relatively few personnel covering large geographic areas, and, often personnel often undertaking multiple roles in government or non-government agencies.
- The lack of Pacific appropriate CBR materials is in direct contrast to recent policy developments at a Pacific regional level – which all attest to “doing CBR the Pacific Way”. At the 2015, 2nd CBR Pacific Forum, Ms Kleinitz, Technical Lead, Disability and Rehabilitation, WPRO commented on progress since the Pacific Community-based Rehabilitation Plan of Action prepared at the 1st CBR Pacific Forum in 2012. The joint approach between Pacific Disability Forum, Pacific Island Forum Secretariat and WHO providing direct support to countries to improve and strengthen existing CBR programs as well as direct support to countries to develop new CBR programs had led in the intervening three years to building regional capacity development and information sharing. Ms Kleinitz went on to summarize the specific **Pacific Flavour** to CBR as follows:
 - Rights based approach – in line with CRPD
 - CBR supports implementation of national disability policies
 - Government ownership of CBR programs
 - For new CBR programs, promotion of lead disability ministries to take ownership of CBR
 - For established CBR programs, encouragement in line with CBR guidelines to broaden the focus of CBR from health to the other components
 - Building on the Pacific Strengths, especially strong communities and families.

Findings from Review of CBR Materials

In this phase, the CBR training manuals that we identified in the *Scoping Review December 2015* were analysed to investigate: the feasibility of a CBR Field Workers Manual; the conceptual framework; the essential and desirable content; and the practical utility of various formats including text, on-line, and DVD. We developed the following criteria to evaluate the three CBR manuals identified in the December 2015 *Scoping Report* as potentially useful for the purpose of a Fieldworker Practical Manual.

Criteria

- Post - 2010 WHO CBR Guidelines with attention to content of CBR Matrix
- Readily accessible via the internet and/ or in text form
- Utilising adult learning principles and practices to facilitate problem solving, strategy development, and application of learning in new as well as familiar contexts
- Resource rich to enable participants to further their learning as desired and in their own time
- Preferably applicable to CBR fieldworkers undergoing training (short course, certificate or diploma level) as well as experienced CBR fieldworkers

After closer inspection of the three alternatives presented in the December 2015 *Scoping Report*, we excluded the second of these: *Empowering Communities through Knowledge Transfer: Training Guide for Community Based Rehabilitation* published by Volunteer Organization for International Cooperation (OVCI) in partnership with the Usratuna Association for Children Disabilities in Sudan. This manual is a good example of a resource developed in a specific context in response to a specific identified need, which was to build local knowledge in communities in Sudan about CBR. This limits its applicability and relevance to other contexts and purposes including the Pacific. The information in this resource is also available in the *WHO CBR Guidelines* which are freely available from the WHO website. We were only able to access the manual through a link in the AskSource repository. It is not certain that this link (the URL) is stable compared with for example CBR materials which are available through stable links at host organisation websites (such as the *CBR Training Manual* from Light for the World).

The remaining two training manuals which met the criteria above were the *CBR Training Manual* (2010) published by Light for the World and *Dream of Inclusion for All* (2011) published by Enablement. Below we summarise the key features of these two training manuals. Table 1 in the Appendix provides a more detailed description of their content and format. Both were published in the first year or two following the release of the 2010 WHO CBR Guidelines. On International Day of People with Disabilities, 3rd December 2015, WHO launched a *Community-based Rehabilitation Indicators Manual*² a welcome addition to the suite of documents on CBR. Information on monitoring and evaluation of CBR as per this

² WHO (2015). *Capturing the difference we make. Community-based rehabilitation indicators manual*. Geneva: WHO. (http://www.who.int/disabilities/cbr/cbr_indicators_manual/en/) Accessed 28th March 2016

manual and other readily available resources on monitoring and evaluation such as *Monitoring Manual and Menu (MM&M) for CBR and other community-based disability inclusive development programs*³ (Centre for Disability Research and Policy, 2014) needs to be taken into account in future manual development or revision of the manuals described here.

The two manuals

CBR Training Manual (2010), Light for the World

<http://www.light-for-the-world.org/resources/>

Purpose

The manual was published after the *2010 WHO CBR Guidelines* release to build on existing resources that already exist for health in CBR by addressing the other elements of the CBR Matrix.

“It is now vital to begin intensive training in the field for CBR practitioners to refresh and develop skills, knowledge and attitudes about the ‘new CBR’”.

Target Audience

CBR practitioners (fieldworkers, supervisors, managers) who do not have prior knowledge or experience with the ‘new’ CBR (CBR as outlined in the *2010 WHO CBR Guidelines*). Each module clearly indicates for whom it is most appropriate.

Alignment with CBR Guidelines and Matrix

The resource is framed around the CBR Guidelines and has 13 modules with detailed lesson plans. The modules cover all of the components of the CBR matrix except for health. This is in keeping with the stated purpose of building on the existing resources that cover the health component of the CBR Matrix. It also includes modules that cover knowledge and skills for the community development model that underpins the CBR Guidelines – for example there are modules on the UNCDRP, Awareness Raising, and Culture and CBR.

Strengths and Potential Limitations

- Authors: The manual has been developed with input from people with experience practicing CBR in Africa.

³ Centre for Disability Research and Policy, 2014). *Monitoring Manual and Menu (MM&M) for CBR and other community-based disability inclusive development programs*. (<http://sydney.edu.au/health-sciences/cdrp/projects/cbr-monitoring.shtml>). Accessed 28th March 2016

- **Format:** Prescriptive training sessions mean training can be run with minimal preparation and planning. It uses adult learning strategies: problem solving activities, role plays, group discussion and to a lesser extent, lectures/presentations
- **Availability:** The manual is freely available through the Light for the World website. A hard copy with the accompanying CD can be requested by contacting Light for the World
- **Audience:** Useful for participants who are new to CBR and also as a resource to bring experienced fieldworkers up to date with the 'new' way of thinking. The activities are helpful for thinking in the 'new' way about disability, community development, and social inclusion. For experienced practitioners who come from the pre- *WHO 2010 CBR Guidelines* context, there could be resistance if their existing knowledge and field experience was not acknowledged. This would need to be carefully managed in implementation in contexts where the majority of CBR practitioners have been educated primarily in a health model.

Dream of Inclusion for All (2011), Enablement

http://www.enablement.nl/index.php/80/The_Dream_of_Inclusion_for_All.html

The format for this manual and DVD is 27 real life case studies from across the world. Following each case study there are group discussion points and activities. The design is to provide case studies that highlight issues relevant to the *WHO (2010) CBR Guidelines*.

Purpose

The publication is designed to be used in CBR training programs around the world; "it is aimed at enabling participants to critically review their own practice, learn from others and start thinking more critically" (p19). The authors claim it can be used as a supplement to other CBR training resources although they do not specifically highlight which ones.

Target Audience

Fieldworkers and CBR Managers with field experience.

Alignment with CBR Guidelines and Matrix

The material in the book is intended to align with the *WHO (2010) CBR Guidelines and Matrix*. The component of the CBR Matrix that is covered in each case study is not explicitly stated. A working knowledge of the CBR Guidelines and Matrix is required to identify the components of the Matrix that are covered in each case study.

Strengths and Potential Limitations

- **Authors:** This book has been prepared by Enablement – a Netherlands based organisation well recognized for their expertise in CBR education and CBR evaluation. The contributors are known experts in the field of CBR.
- **Format:** In-depth case studies, and although from different countries, highlighting issues

which are common across CBR programs worldwide. This format is designed to facilitate participants' problem solving and developing strategies for addressing real life challenges in the field. The book does not include foundational knowledge on the CBR components or community development as it is intended for those already experienced in the field. Each chapter includes questions to facilitate group discussion about the case study. Participants are actively encouraged to seek out local and international resources to aid their learning. The questions prompt knowledge and information about the CBR guidelines and community development to be shared and discussed.

- Availability: The book can be downloaded from the website –chapter by chapter. This is particularly useful for slow or unreliable internet connections or those prohibiting large megabyte downloads. It is available from the Enablement website http://www.enablement.nl/index.php/80/The_Dream_of_Inclusion_for_All.html. A hard copy of the book, including DVD, can be ordered from Enablement (order form on website) at a cost of €25 including postage (Europe, North-America, Australia) or €20 (all other countries).
- Audience: The content and discussion points rely on participants drawing on their existing experience in the field. It also assumes as stated above a working knowledge of the *WHO (2010) CBR Guidelines and Matrix*. Depending on the context, it may be more appropriate for people who have been working in the field for at least one year. However, if the CBR field worker participants' initial training included field placements, this manual could be used with CBR workers new to the field.

Conclusions

As we noted in the December 2015 *Scoping Report*, CBR programs operate at the community level and require practical and accessible materials to guide CBR field personnel in their daily work with people with disabilities, their families and carers and the many stakeholders from government and non-government agencies with whom they regularly interact. Our experience in working with personnel in CBR programs, and in reviewing CBR institutional training programs suggests that an additional document – a CBR Field Manual – would be warmly welcomed by CBR field workers. This is because although there are many highly specialized publications supporting the five components in CBR – health, education, livelihood, social and empowerment – these are generally of a technical or scientific nature and require specialist knowledge for translation into everyday practice. This specialist knowledge is not generally available at the community level. There is a need to 'translate' this specialized knowledge into guidance which is useful to CBR field workers at the community level. A CBR Field Worker Manual could also serve as a very useful resource in CBR Training Programs.

We now present our conclusions from preparing the December 2015 *Scoping Report* and this *Updated Scoping Report, March 2016* together with our knowledge of the Pacific context detailed in three previous reports to WPRO^{4,5,6}. These are:

⁴ *Pacific Health Rehabilitation Workforce, October 2012*

1. There are two existing CBR Training Manuals: *CBR Training Manual (2010) – Light for the World* and *Dream of Inclusion for All (2011) - Enablement* that could be utilized in the Pacific context with some adaptations as per 2 below.
2. Given the commitment made at the two CBR Pacific Disability Forums (2012, 2015) for Pacific nations to undertake CBR with a Pacific Flavour, both CBR Training Manuals could be expanded with case studies from ‘real life’ in Pacific nations. These would build on the strengths of the Pacific context such as strong communities and families and would ideally come from places with established CBR programs as well as from those nations recently implementing CBR.
3. We strongly recommend, given the existence of two institutional accredited CBR courses in the Pacific, at Fiji National University and at Solomon Islands National University, with discussions occurring about a third potentially at Divine Word University in Papua New Guinea, that a combined endeavor is undertaken to bring CBR in the Pacific more into alignment with the *WHO (2010) CBR Guidelines and Matrix*. This is in line with the *WHO Global Disability Action Plan 2014-2020* objectives and implementation which focuses on bringing resources together across sectors for the best possible outcomes for people with disabilities, their families and carers.
4. We suggest that the relevant parties would include the training institutions offering CBR training programs, the Pacific Disability Forum, the Pacific Island Secretariat, Ministerial focal points for disability, DPOs in the Pacific, the new CBR Network Committee (established to implement and monitor the *Pacific Regional Network for Community-based Rehabilitation 2016-2020* and WPRO, to achieve a Pacific CBR resource. This resource should be applicable for initial training of CBR fieldworkers and for ongoing education in workshops and short courses for already trained CBR field workers. This collaborative effort would support the two purposes of bringing CBR in the Pacific into alignment with the *WHO (2010) CBR Guidelines and Matrix* and building capacity in community based inclusive development for key stakeholders in government, DPOs, training institutions, the Pacific Disability Forum and the CBR Network Committee.
5. We further suggest that the key stakeholders could begin this endeavor by becoming familiar with the content and format of the two training manuals identified in this *Updated Scoping Report*. These are excellent resources that operationalize in a practical way for fieldworkers and for managers and trainers, the principles, content, and processes set out in the *WHO (2010) CBR Guidelines and Matrix*.
6. Given our Pacific experience at the WHO Collaborating Centre for Health Workforce Development in Rehabilitation and Long Term Care in CBR, we would welcome further discussions with the Technical Officer, Disability and Rehabilitation on the recommendations and suggestions offered in this concluding section.

⁵ *Analysis of Community Rehabilitation Assistants Program in Fiji, August 2014*

⁶ *Review of Diploma of CCB at Solomon Islands National University, December 2015*

Appendix Table 1 Descriptions of two selected CBR Training Manuals

Title: CBR Training Manual

Publisher: Light for the World

Date: 2010/2011

Available from: <http://www.light-for-the-world.org/resources/>

Module	Learning outcomes – presented in three categories in the manual – knowledge, skills and attitudes			Learning methods
	Knowledge	Skills	Attitudes	
Module 1: ICF	<ul style="list-style-type: none"> • CBR workers have understanding of the ICF. • CBR workers have understanding of commonly used models in disability studies. 	<ul style="list-style-type: none"> • CBR workers can use the ICF to explain to others what elements constitute disability. • CBR workers can relate local attitudes and the different models of disability to the ICF, and explain how they are relevant to their CBR projects. • CBR workers form a plan within their project to strategize how to change negative attitudes in the community towards disability, and how to use positive attitudes of the community towards disability. • CBR workers can develop 	<ul style="list-style-type: none"> • CBR workers can explain both the positive and the negative attitudes of the local community and their own attitudes towards people with disabilities. 	<ul style="list-style-type: none"> • Lecture (ICF) • Problem solving exercises (definitions, terminology, local attitudes and ICF) • Role play (attitudes and disability, models of disability, planning and identifying skills)

Module	Learning outcomes – presented in three categories in the manual – knowledge, skills and attitudes			Learning methods
		<p>awareness raising strategies based on the ICF and other disability models.</p> <ul style="list-style-type: none"> • Skills needed for the implementation of the plan are listed and the skills not available in the CBR project are identified for future training and or support. 		
<p>Module 2 - Networking towards an inclusive society</p>	<ul style="list-style-type: none"> • CBR workers have knowledge of what constitutes an inclusive society. • CBR workers should have knowledge of how they can contribute towards an inclusive community in their region/local area. • CBR workers understand how to use lobbying to work towards an inclusive society. • CBR workers have knowledge of communication skills and how to use them. • CBR workers understand how networking enhances the sustainability of their work 	<ul style="list-style-type: none"> • CBR workers have lobbying and communication skills to allow them to lobby in their region/local area. • CBR workers know how to map their region/local area and connect to relevant stakeholders. • CBR workers can prepare and deliver a message to improve the knowledge and change the attitudes of relevant stakeholders in the community. 	<p>CBR workers believe that their community should be and can be inclusive of persons with disabilities.</p> <ul style="list-style-type: none"> • CBR workers believe that people with disabilities should have equal access to community life. • CBR workers are ready to lobby for an inclusive society and to advocate for the rights of persons with disabilities within the community where they work. • CBR workers are confident in approaching different stakeholders to advocate for an inclusive society 	<ul style="list-style-type: none"> • Lecture (Communication – how people communicate, Lobbying theory) • Problem solving exercises (what constitutes inclusive society, mapping stakeholders, networking) • Role play (inclusive society, preparing message, lobbying skills, preparing lobbying plan)

Module	Learning outcomes – presented in three categories in the manual – knowledge, skills and attitudes			Learning methods
Module 3 – Social Inclusion	<ul style="list-style-type: none"> • CBR workers understand of the concept of social inclusion. • CBR workers understand how social inclusion helps in working with disadvantaged groups. • CBR workers understand why certain groups of persons with disabilities are more vulnerable than others. 	<ul style="list-style-type: none"> • CBR partners can promote social inclusion in their daily work. 	<ul style="list-style-type: none"> • CBR workers feel that social inclusion work by the project and other stakeholders helps to mainstream disability (see Module 5: Sustainability of CBR Programmes). 	<ul style="list-style-type: none"> • Lecture (social domain of CBR) • Group discussion/reflection (defining social inclusion) • Problem solving (defining social inclusion, identifying social inclusion issues, methods for promoting social inclusion, explaining vulnerability) • Role play (social exclusion of women with disabilities, promoting social inclusion)
Module 4 – Culture and CBR	<ul style="list-style-type: none"> • CBR workers are aware of and can express their local culture and its influence on persons with disabilities in their communities. 	<ul style="list-style-type: none"> • CBR workers are able to use their local culture to positively influence their local communities to include persons with disabilities. • CBR projects can form a plan on relating their project development to the local culture and its development. • Skills needed for the implementation of the plan are listed and skills unavailable within the CBR project are noted for future training and/or support. 	<ul style="list-style-type: none"> • CBR workers are aware of their own attitudes towards their local culture and how that makes them relate to persons with disabilities. 	<ul style="list-style-type: none"> • Lecture (culture) • Group discussion/reflection (understanding local culture , own attitudes) • Problem solving activity (local culture influence on disability, mapping indigenous knowledge/collaborating with indigenous healers, gender and local culture) • Role play (Develop plan around local culture,

Module	Learning outcomes – presented in three categories in the manual – knowledge, skills and attitudes			Learning methods
Module 5 – CBR Programme Sustainability	<ul style="list-style-type: none"> • CBR workers understand what makes their CBR programme more or less sustainable. • CBR workers understand what an inclusive society means and how they can play a role in reaching an inclusive society in their CBR project area. (See Module 2: Networking Towards an Inclusive Society). • CBR workers know the relevant partners to work with in order to make their work sustainable. (See Module 2: Networking Towards an Inclusive Society.) • CBR workers know how to prepare training of and awareness raising sessions for CBR partners. (See Module 7: Awareness Raising.) 	<ul style="list-style-type: none"> • CBR workers have the skills to deliver training and awareness raising sessions for relevant CBR partners. (See Module 7: Training on awareness raising.) • CBR workers have the skills to select and approach relevant partners. (See Module 2: Networking Towards an Inclusive Society.) • CBR workers have different tools that they can use to ‘build an inclusive society’. (See Module 2: Networking Towards an Inclusive Society.) 	<p>CBR workers are committed to working towards inclusion, rather than only towards the continued existence of their organisation.</p> <ul style="list-style-type: none"> • CBR workers are committed to working with other organisations in order to reach an inclusive society. • CBR workers are committed to phase out of areas where the community, DPOs, the families of persons with disabilities or the government are ready to take over their work. • CBR workers believe that their community should be and can be inclusive of persons with disabilities. (See Module 2: Networking Towards an Inclusive Society.) • CBR workers believe that people with disabilities should have equal access to community life. (See Module 2: Networking Towards an Inclusive Society.) • CBR workers are ready to lobby for an inclusive society and to advocate for the rights of persons with disabilities within the community where they work. (See Module 2: Networking Towards an Inclusive Society.) • CBR workers are confident to 	<ul style="list-style-type: none"> • Lecture (sustainability in CBR) • Problem solving activity (elements of sustainable program) • Role play (sustainable CBR with families, design sustainable CBR program)

Module	Learning outcomes – presented in three categories in the manual – knowledge, skills and attitudes			Learning methods
			<p>approach different stakeholders to advocate for an inclusive society. (See Module 2: Networking Towards an Inclusive Society.)</p>	
<p>Module 7 Awareness Raising</p>	<ul style="list-style-type: none"> • Participants understand awareness raising. • Participants know about different awareness raising methods. • Participants know of the issues about which awareness needs to be raised. • Participants understand how to apply the knowledge gained on awareness raising. • Participants know about possibilities to collaborate with others in awareness raising (supervisors and managers). • Participants know about monitoring tools for awareness raising exercises (managers). • Participants know how to train people in awareness raising (CBR networks/committees). 	<ul style="list-style-type: none"> • Participants can raise awareness using different methods. • Participants can identify important topics for awareness raising. • Participants have communication and presentation skills (Module 2: Networking Towards an Inclusive Society). • Participants can support and supervise CBR workers in how to carry out awareness raising exercises in the community. (supervisors and managers). • Participants can monitor awareness raising exercises in different communities (managers) 	<ul style="list-style-type: none"> • Participants have explored their own attitudes towards persons with disabilities and inclusion. • Participants understand how to react to problems in their community that prevent inclusion. • Participants feel that awareness raising is an important tool in reaching an inclusive society. • Participants can select important topics for awareness raising. 	<ul style="list-style-type: none"> • Lecture (awareness raising and how used in CBR) • Group discussion/reflection (methods of awareness raising) • Problem solving activity (identifying awareness raising issues, • Role play (awareness raising method, own attitudes, collaborative awareness raising,

Module	Learning outcomes – presented in three categories in the manual – knowledge, skills and attitudes			Learning methods
Module 8 – UNCRPD	<ul style="list-style-type: none"> • CBR workers know of the UNCRPD and understand its content. • CBR workers know how the UNCRPD relates to other UN conventions and how it can be transformed into national law. • CBR workers have an understanding of what the UNCRPD means in practical terms for persons with disabilities in the communities where they work. 	<ul style="list-style-type: none"> • CBR workers can explain to others the UNCRPD, its main principles and its meaning in day-to-day life of persons with disabilities. • CBR workers can design activities that create understanding of the UNCRPD in the community. • CBR workers can design activities at a community level that support the implementation of the UNCRPD. 	<ul style="list-style-type: none"> • CBR workers share the concept ‘that persons with disabilities have full and equal enjoyment of all human rights and fundamental freedoms, and promote respect for their inherent dignity.’ (UNCRPD) • CBR workers understand the need for a UNCRPD and its ratification in their respective countries. • CBR workers promote the implementation of the UNCRPD at their own community level. • CBR workers see CBR as a tool to implement the UNCRPD. 	<ul style="list-style-type: none"> • Lecture (UNCRPD overview– history and reason for separate treaty; equality and non-discrimination; right to accessibility; right to political participation; right to freedom of expression; right to life; right to freedom from torture and violence; right to privacy, integrity, home and family; right to health; right to work; living independently with dignity; access to justice; right to education) • Group discussion/reflection (applying rights to everyday lives of persons with disabilities) • Problem solving activity (applying the rights to persons with disabilities; identify barriers; monitoring for UNCRPD) • Role play (applying rights to persons with disabilities day to day lives; disability inclusive disaster risk reduction)

Module	Learning outcomes – presented in three categories in the manual – knowledge, skills and attitudes			Learning methods
Module 10 – Child protection for children with disabilities	<ul style="list-style-type: none"> • CBR workers understand the UN Convention on the Right of the Child (UNCRC). • CBR workers understand the need for child protection policies in CBR. • CBR workers understand why children with disabilities are vulnerable to maltreatment. • CBR workers understand how a programme can develop structures on child protection. • CBR workers understand the different services that could help a child that has faced maltreatment in its life. 	<ul style="list-style-type: none"> • CBR workers know how to help a traumatised child to live with its trauma. • CBR workers develop networking skills so that children in danger of, or who have faced maltreatment, can receive the services that they need. • CBR workers develop skills and learn methods to raise awareness on protecting children with disabilities from maltreatment. 	<ul style="list-style-type: none"> • CBR workers develop awareness of their own values and attitudes towards child maltreatment. • CBR workers become sensitive to the need to protect children with disabilities from maltreatment. 	<ul style="list-style-type: none"> • Lecture (vulnerability of children with disabilities; traumatised children) • Group discussion/reflection (own attitudes of child maltreatment; child violence in CBR) • Problem solving activity (UNCRC, UNCRPD, Report on violence against children; child protection policies; working with a traumatised child; mapping community resources; awareness raising for child protection; developing child protection strategy) • Role play (awareness raising for child protection; CBR and child protection; responding to maltreatment of child;

Module	Learning outcomes – presented in three categories in the manual – knowledge, skills and attitudes			Learning methods
Module 11 – Working with DPOs.	<ul style="list-style-type: none"> • CBR workers have knowledge of the DPO movement and the key players involved. • CBR workers understand that their project is strengthened when local DPOs become stronger and more involved in their work. • CBR workers have knowledge of the UNCRPD (covered in Module 8: UNCRPD). • CBR workers can implement a comprehensive approach to CBR and persons with disabilities which includes collaborating with various players in the field. 	<ul style="list-style-type: none"> • CBR workers can organise meetings with DPOs (in training Module 2: Training in Networking towards an inclusive society). • CBR workers can help DPOs to organise themselves as independent organisations. • CBR workers can assess the empowerment of a disabled persons’ movement (see Module 6: Monitoring and evaluation). 	<ul style="list-style-type: none"> • CBR workers understand that CBR can only be the ‘implementation of the UNCRPD’ when the projects collaborate with, and strengthen, DPOs. • CBR workers understand that through DPOs they can ensure better participation of their target group in the project and, with that, a higher ownership of the project. • CBR workers understand (and have the skills to pass on the message) that through CBR projects DPOs can reach a poorer, younger and more gender-balanced target group than they can through their active membership. • CBR workers develop an inclusive view of the development and implementation of a CBR project 	<ul style="list-style-type: none"> • Lecture (from DPO representative about DPO work in local context; from CBR project about work with DPOs; CBR, DPOs and UNCRPD) • Group discussion/reflection (own ideas of DPO involvement in CBR) • Problem solving activity (building DPO capacity ; collaborating with DPOs) • Role play (DPO involvement in CBR; understanding empowerment;

Modules not aimed at fieldworkers (supervisors and managers only):

- Introductory module – How to use CBR Guidelines
- Module 6 – Monitoring and Evaluation in CBR
- Module 9 – The political participation of people with disabilities
- Module 12 – Livelihoods for persons with disabilities
- Module 13 – Inclusive Education and CBR

Title: Dream of Inclusion for All

Publisher: Enablement

Date: 2011

Available from: http://www.enablement.nl/index.php/80/The_Dream_of_Inclusion_for_All.html

All units with a country in brackets are framed around a real life case study example.

Chapter	Participant competencies	Learning method
1 – Expectations around the roles of fieldworkers (Indonesia)	<ul style="list-style-type: none">- learns where to find information about disease and diagnosis- critically analyzes medical as well as social situations- reflects on roles and responsibilities of target groups- reflects on sensitive cultural issues and ways to bring these into the public	Problem solving activity Role Play
2 – Decentralizing disability programs (Vietnam) (CBR managers)	<ul style="list-style-type: none">-gains an appreciation of specific and mainstream disability programmes- gains an appreciation of centralized services with outreach programmes and decentralized services	Role play
3) Assessment of service quality (Vietnam) (CBR managers)	<ul style="list-style-type: none">- enhances skills to design a survey for his own situation- gains knowledge on different survey methods- enhances skills to use survey methodologies such as open or closed interviews- enhances skills to design questionnaires	Problem solving activity

Chapter	Participant competencies	Learning method
4.) HIV/AIDS and disability (South Africa)	<ul style="list-style-type: none"> - gains an appreciation of the double burden of HIV/AIDS and disability - gains an understanding of how HIV/AIDS relates to disability - enhances skills to formulate achievement indicators in programmes for HIV/AIDS and disability 	Problem solving activity
5) Inclusive Education (El Salvador)	<p>The participant:</p> <ul style="list-style-type: none"> - gains understanding of the domain Education of the CBR-matrix - forms a motivated opinion about inclusive education - enhances skills to analyze situations from different viewpoints - enhances skills to plan and prioritize activities towards a particular objective 	Problem solving activity Role play
6)Ambition (Ethiopia)	<p>The participant:</p> <ul style="list-style-type: none"> - gains an appreciation of possible barriers and facilitators in personal development of persons with disabilities - gains an insight into the importance of sign language education at community level 	Group discussion/reflection
7.) School for deaf (Tanzania)	<p>The participant:</p> <ul style="list-style-type: none"> - gets an appreciation of different forms of special education as presented in the CBR Guidelines - recognizes various forms of education for children with hearing impairments and gets insight into the strengths and weaknesses of each - realizes that the local context is of influence to the kind of education offered 	Group discussion/reflection Problem solving activity

Chapter	Participant competencies	Learning method
8) A role model (Philippines)	<ul style="list-style-type: none"> - The participant reflects on the importance of having role-models in society and in CBR-programmes - The participant enhances interview and communication skills - The participant improves writing skills 	<p>Group discussion/reflection Problem solving activity/essay</p>
9) Small handicrafts (Pakistan)	<ul style="list-style-type: none"> - The participant develops skills to formulate criteria for starting vocational activities - The participant gets an appreciation of vocational activities that can be carried out in their local context 	<p>Group discussion Problem solving activity</p>
10) Income generating activities (Turkey)	<ul style="list-style-type: none"> -gains an understanding of the value of income generating activities as a means to development --- enhances skills to assess and budget livelihood activities --- translates principles of livelihood into practical measures 	<p>Problem solving activity Group discussion/reflection</p>
11) Unexpected developments (East Timor)	<p>The participant:</p> <ul style="list-style-type: none"> - reflects on stories out of the field of CBR - develops a vision on the priorities of CBR interventions 	<p>Group discussion/reflection</p>
12) Using the ICF (India)	<p>The participant:</p> <ul style="list-style-type: none"> - has an appreciation of the International Classification of Functioning, Disability and Health - has gained skills in using the ICF - has become sensitive towards the stigmatization that is associated with leprosy 	<p>Problem solving activity Group discussion/reflection</p>

Chapter	Participant competencies	Learning method
13) Different ethical viewpoints (Nepal)	<p>becomes more aware of own norms and values as well as possible prejudices and discriminatory ideas about disability</p> <ul style="list-style-type: none"> - enhances skills to reflect on his or her own behaviour from the viewpoint of ethics 	Group discussion/reflection
14) Fire from heaven – folk story (Tanzania)	<p>The participant:</p> <ul style="list-style-type: none"> - becomes aware of the wealth of gender- and disability-related information that exist in folk stories, myths and proverbs and is able to absorb and relate the information to his/her professional work - improves his or her knowledge on how cultural heritage can play a role in understanding social responses to disability and people with disabilities - reflects on religious and cultural values in relation to professional functioning - increases his or her appreciation of the possible value of some parts of the cultural heritage in explaining social responses to disability 	Group discussion/reflection
15) A housing project (Vietnam)	<p>The participant:</p> <ul style="list-style-type: none"> - gains an understanding of physical and emotional disabling conditions - enhances skills to design a project plan on a housing project - gains an understanding of the logical framework 	Problem solving activity

Chapter	Participant competencies	Learning method
16) Breaking barriers through sports (South Africa)	The participant: <ul style="list-style-type: none"> - enhances skills to identify barriers in educational systems and to find solutions to overcome them - gains an appreciation for role models - gets an understanding of the complexity of multiple disabilities, like paraplegia and dyslexia - enhances debating skills in the World Café teaching method 	Problem solving activity Group discussion/reflection
17) Mental health (Nepal)	The participant: <ul style="list-style-type: none"> - gains an understanding of the magnitude of mental health problems in developing countries - enhances debating skills - gains an understanding of responsibilities of CBR-programmes towards persons with mental health problems - gains an understanding of the difference between advocacy and aid 	Role play Group discussion/reflection
18) Protection of children with disabilities (Ethiopia)	The participant: <ul style="list-style-type: none"> - gains an understanding of the magnitude of violence towards children with disabilities - gains knowledge on rights of children with disabilities - enhances skills to plan activities to protect children with disabilities - becomes creative in designing and presenting strategies 	Problem solving activity Role play

Chapter	Participant competencies	Learning method
19.) Advocacy (El Salvador) (most appropriate for managers of CBR projects)	The participant: <ul style="list-style-type: none"> - enhances analytical skills - practices debating skills - enhances skills to develop criteria and indicators to measure and evaluate projects - gets an understanding of roles and interests of stakeholders - enhances skills to cooperate and lobby with other stakeholders 	Role play Problem solving activity
20) Lobby and advocacy (South Africa)	The participant: <ul style="list-style-type: none"> - gains an understanding of advocacy - enhances debating skills - enhances analytical skills - enhances skills to develop an action plan 	Group discussion/reflection Problem solving activity
21) Programme assessment (Nepal) (CBR managers)	The participant: <ul style="list-style-type: none"> - gains knowledge on various PRA-tools - enhances analytical and problem solving skills - enhances skills to carry out a SWOT-analysis (see Figure 1) - enhances skills to design a plan of action as a result of a SWOT-analysis 	Problem solving activity Group discussion/reflection
22) CBR post disaster (Indonesia) (most suitable for experienced CBR managers)	The participant: <ul style="list-style-type: none"> - gains an appreciation of CBR in post-emergency situations - gains insight into problems persons with disabilities face during and after disasters - enhances skills to design a plan of action for persons with disabilities in emergency and post-emergency situations - forms a vision on disability-focused and comprehensive approaches 	Problem solving activity Group discussion

Chapter	Participant competencies	Learning method
23) Needs analysis in tribal community (India)	The participant: <ul style="list-style-type: none"> - enhances skills to carry out a needs assessment - enhances skills to set priorities on basis of valid arguments - enhances analytical and problem solving skills - enhances debating skills 	Group discussion/reflection
24) Management and leadership (South Africa) (CBR managers)	No competencies listed	Group discussion/reflection Role play
25) Using information for planning (CBR managers)	The participant: <ul style="list-style-type: none"> --- enhances skills to use management information systems --- gets an appreciation of professional literature and data sources --- enhances skills to analyze quantitative data for policy- and planning-purposes 	Problem solving activity Group discussion/reflection
26) CBR Matrix	The participant: <ul style="list-style-type: none"> • gains knowledge and understanding about the CBR Matrix • develops an understanding about the position and opportunities for cooperation and collaboration of his/her own organization or project • enhances skills to assess his/her own organization or project 	Problem solving activity Reflection
27) Project design (Nigeria) (CBR Managers)	The participant: <ul style="list-style-type: none"> --- gains knowledge to draw conclusions from available data on a specific country --- enhances skills to design a project proposal --- enhances skills to fill in a Logical Framework 	Problem solving activity

END OF REPORT

BLANK PAGE