

Inspire2Care a disability prevention and rehabilitation programme

Programme brief 2016



“I had spasms and cerebral palsy. Before community based rehabilitation (CBR), I could hardly talk or walk”. In front of the large group of people present at meeting he continued. “Nobody saw me or knew me. I also didn’t know I had rights. And look at me now, now I am standing in front of you and speaking to you as the chairman of the child club. I am very grateful to the community based rehabilitation worker for his everlasting patience with me in physiotherapy and speech therapy lessons. I am grateful to Karuna because they showed our community the way to become inclusive.”

–Shankar, a 16 year old boy with a disability from a village in Nepal where CBR as part of Inspire2Care is implemented by the community

Context

Around 150 million children under the age of 18 live with disabilities worldwide. They face barriers to their inclusion in society and suffer basic human rights violations. Violence against them occurs almost twice as much as against their peers without disabilities. Ninety percent of children with disabilities in developing countries do not attend schools, and under-five mortality is as high as 80% for children with disabilities in some countries. The UN Convention on the Right of Persons with Disabilities (UN-CRPD), ratified in 162 countries, mandates governments to promote, protect and ensure the full and equal enjoyment of all human rights of persons with disabilities. But implementation is often lacking. Moreover during the last cycle of development goals persons with disabilities were the ones left behind. Now in a pledge to leave no one behind the United Nations Summit has explicitly included persons with disabilities in its key Sustainable Development goals.

Karuna's approach to disability-inclusive development: Inspire2Care

Karuna Foundation seeks to prevent avoidable disabilities and improve the quality of life of children with a disability. Inspire2Care (I2C) was born in this context as a way of creating systematic change for children with disabilities and their families and preventing avoidable disabilities. I2C's unique Community-Based Rehabilitation (CBR) programme for children with a disability is guided by the World Health Organization's CBR guidelines which consist of five key components: health, education, livelihoods, social context and empowerment (see right). The programme includes disability prevention and rehabilitation activities and is customized as per local needs and available resources to address the unique needs of each child and adult with a disability and their families in the villages. Disability prevention activities focus on awareness raising activities and improving maternal and child health.

Local health and disability committees implement the programme for prevention and CBR respectively and are responsible for the supervision and support of the health workers and CBR Facilitator as well as planning and approval of activities and corresponding budget. Where possible, rehabilitation services are provided through networking with existing organizations or programs which the CBR facilitator helps identify and arrange. Staff from Karuna Foundation Nepal provide guidance and technical support where required, especially in the first years.



“Karuna Foundation works as a facilitator in the villages rather than a forefront implementer.”

Impact Assessment Report (2013)

The I2C journey in the community



Readiness assessment of **local health and disability committees** mandated by the Government of Nepal



Agreement and **equal partnership** with community



Mobilize financial resources from government budgets, community people & other local sources



CBR Facilitator selected and paid by local community fund



Strengthen local **network** with existing organizations or programs and services



Provide **leadership & capacity building** of CBR facilitators, health workers and local leaders



Develop **rehabilitation goal & yearly intervention plan** for each child



Identify & assess all children with disability in community



Organize CBR & prevention supportive activities like awareness events & child club



Evaluate yearly and develop renewed annual plans



3 years financial + 2 years technical support from Karuna for **sustainability**



Celebrate becoming **self-sustaining** after five years

Financing

The programme is funded jointly by the community, local government and temporarily by Karuna Foundation, who provides financial support for three years (80% in first year, 50% in second year and 30% in third year) and technical support for two more years. The villages receive funds from government budgets and other local resources including community people to implement the programme; Inspire2Care is entirely funded by local resources after the third year. After the fifth year, the local health and disability committees and the community are able to continue the programme also without external technical support.

Costs per village (on average 6,000 people) are €90,000 in total for 5 years of which €17,500 comes from local resources. After 3 years the average budget in the community is €4,000/year.



Spotlight: I2C in Nepal

In Nepal, one of the poorest countries in the world, 2% of the population lives with disability. Persons with disabilities in Nepal face stigma and discrimination informed by religious and cultural beliefs and have very limited opportunities for improving their lives. Their rights, access to services and inclusion in society are largely ignored. The causes of disability in childhood vary from congenital birth defects, to diseases, malnutrition, injuries, accidents and trauma. Birth-related disabilities are the result of poor maternal and child health care: there are 46 infant deaths per 1,000 live births, 40% of children are chronically malnourished and only one-third of the women deliver with assistance. The health system does not provide impairment-specific health care services, and many persons with disabilities are without assistive devices. A significant proportion of children with disabilities among school aged children remain out of school in Nepal, and persons with disabilities are neither integrated in skills training nor in employment development programs.

Results

I2C's pilot programme was jointly developed and implemented by Karuna Netherlands and Karuna Nepal in 7 villages in Sunsari and Rasuwa district over the period 2011-2014.

"Distinctively different approach... the strength of the programme lies in its integral approach which focusses also in influencing context of each child which creates barrier for children with disability to live a life to their full potential"

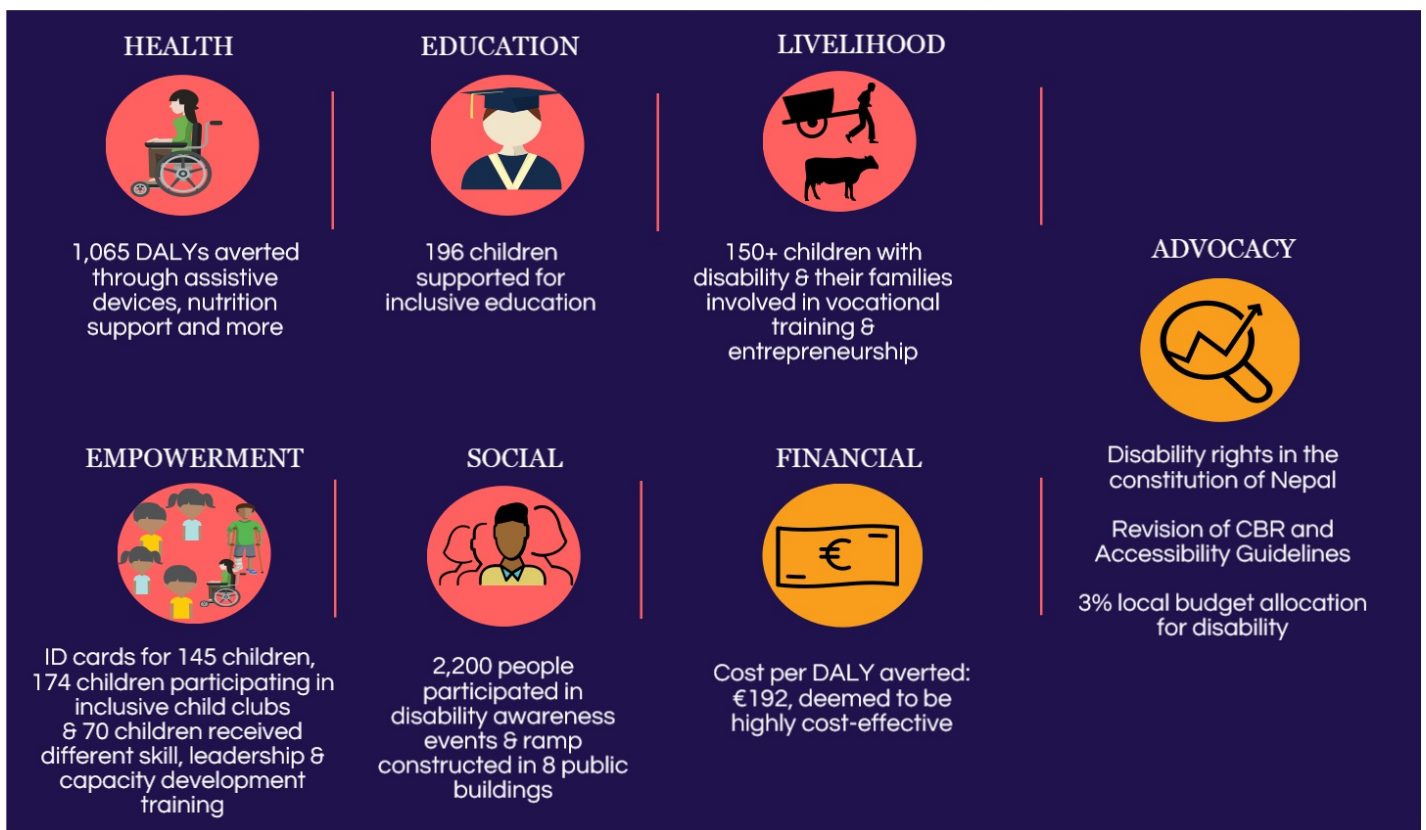
Evaluation of I2C in Nepal (2012)

In addition to results on CBR (see below), I2C has achieved:

- Reaching 270 children with disabilities with CBR and over 2,500 (pregnant) women with safe pregnancy and safe delivery interventions
- Creating a more inclusive community and ensuring 3% budget allocation from the local government for disability
- Initiating and supporting an annual Career Expo for persons with disabilities to stimulate access to employment
- providing a practical tool for local implementation of the UN-CRPD

The entrepreneurial approach that makes I2C different

1. Strong focus on the 'exit strategy' right from the beginning
2. Thinking 'out of the box' during each step of the process
3. Mobilization of local resources before the start of the project to guarantee ownership and sustainability
4. Willingness to accept risks regarding the social investment and stop when ownership is not taken up by the target group



Recognition



Named one of the five "best practices" among 37 Asian countries in area of inclusive development by Asian Pacific Centre for Development and Disability (2015)

Recipient of the Dutch Jobena award for the best approach in self-development (2012)

Deemed a "highly cost-effective" programme (2014)

Karuna Foundation selected as one of the Top 10 most transparent and effective organisations by the Erasmus Centre for Strategic Philanthropy (2012)

Highlights



Children from Sachetana child club were able to stop a child marriage and motivate their parents to re-enroll their children in school. They also organized a street drama to aware people about negative impact of child marriage and importance of education.

- February 2015, Ramche village, Rasuwa, Nepal -

"The children mentioned that they had more friends, experienced less stigma, could go to school and were more hopeful about the future."

- Children with Disability in Nepal: New Hope Through CBR? Disability, CBR & Inclusive Development Journal (2012) -



"I am a trained tailor and have a shop in my village. I also send my products to the capital city and earn additional income. On 25th April 2015, earthquake destructed my home; I can help my family build it again."

- Jamuna Waiba, age 19 -

She received training from 'District Cottage and Small Industries' and 'CTEVT', lobbied and facilitated by the local VDRC. The community further supported her to buy a new sewing machine after the earthquake. Laharepauwa village, Rasuwa

Moving Forward

A 2014 evaluation suggested a high potential for replicability of I2C in Nepal and in other countries. The scaling up of I2C to 56 villages in Nepal started in 2015 and will be done in three batches. Batch 1 is in partnership with Liliane Foundation and Netherlands Leprosy Relief and batch 2 with UBS Optimus. Batch 3 will start in January 2017 after funding is covered. This scaling up effort is focused on providing evidence to the government of Nepal for nationwide scale up. It is also ready to be piloted in other countries in partnership with others, creating long lasting changes for children with disabilities and their families.

If you are interested in joining the Nepal scale up or piloting I2C in another country, please approach Betteke de Gaay Fortman (bdgf@karunafoundation.nl) or Deepak Raj Sapkota (deesapkota@karunafoundation.com) or visit www.karunafoundation.com.

Karuna foundation

Saving children from disability, one by one

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