



March 2006 / Vol 5.3

## CBR and the Role of Disabled People's Organisations

Adult disabled people have a role related to self-care and home-care. In the case of disabled children, it is the family who provides the bulk of home-based rehabilitation. Some disabled persons can teach other disabled adults to read and write or contribute to ability/vocational training. Disabled people and their families can help in awareness building and stimulate animation locally, help mobilise resources and have an active part in the local management committee. Successful disabled adults can play a particularly useful role by meeting young people in the local schools which help in overcoming some negative images developed in the past about the persons with disability. As members of the rehabilitation committee, they can become actively engaged in home visits, in analysing the local situation, as well as in proposing ability training and jobs. They also can play an active role in the management, in planning and evaluation of the local project.



At community level, disabled people's organisations have a crucial role to play when it comes to promoting environmental changes and seeking protection of their human rights. The organisation should draw attention to environmental barriers and request their removal. If these rights are violated, they should approach those in the community responsible for legal protection and request them to take action. The local groups/organisations should take part in both social and political functions. It is a place for getting together with others who have similar problems and needs. This also helps to voice their members' needs to the local leaders and authorities. Where there exists more than one such special interest group, joining together in a local federation or in a union, as a more representative body, would give them more political weight.

Disabled people should not confine themselves to joining their own separate associations. Rather, they should strive to become members of groups of non-disabled people representing political, cultural, religious, social, environmental and other interests. Integrating themselves in this way will serve to sensitise all such groups to the special needs of disabled people.

There is no doubt that in CBR the main goal for all the action proposed is empowerment. It is to provide persons with disabilities services and opportunities that will give the knowledge and skills to mobilise their capacities. With this preparation the DPOs should themselves actively fight for the restoration of all the human, civil, economical, social, development, cultural and political rights of they are now are deprived of.

**AMICI DI RAOUL FOLLEREAU**  
58, 4<sup>th</sup> cross, Kavery Layout, Dharmaram PO, Bangalore-560 029  
Tel: 91-80-2553 1264/ 41106294, Tel-fax: 91-80-2552 0630  
Email: [aifo@aifoindia.org](mailto:aifo@aifoindia.org)/[aifo@airtelbroadband.in](mailto:aifo@airtelbroadband.in)  
Website: [www.aifoindia.org](http://www.aifoindia.org)

## Leprosy Vs Society

**BIDAR:** Blind belief among people is making life difficult for some who have been cured of leprosy in Bidar. Narsing Dhannure, who makes a living driving an auto rickshaw, was completely cured of leprosy a decade ago. However, some of his neighbours in the Labour Colony are forcing his family to shift to the outskirts of the city. "People are alleging that all members of my family are suffering from leprosy and that we can infect others," he told *The Hindu*.

His daughters Anuradha and Jagadevi go to college. They say people are unnecessarily harassing them. "Some people have spread rumours in the college that we are carriers of leprosy. Some girls refuse to sit near us. We know the truth that our father was cured of leprosy long ago and is now leading a normal life. We are tired of facing this mental torture at the colony and the college," said Jagadevi. Added to this is a complaint filed by some members of the Karnataka Tigers Horata Samiti before the City Municipal Council seeking the eviction of the Dhannure family from the colony. Samiti president Shiromani and others said that Mr. Dhannure's face is deformed and children are afraid to look at him. He also comes to the hotel in the colony to drink tea. We are afraid of drinking tea in that hotel. The whole colony will be infected if they are not sent out immediately, said the complaint.

However, the Dalit Sangharsh Samiti has come to the rescue of the family. DSS leaders Rajkumar Moolabharati, Baburao Mithare, Vijaykumar Gaikwad and others have sought the intervention of the Deputy Commissioner. Some vested interests are trying to victimise a poor Dalit family. It should be protected. The KTHS members who have sought action against the Dhannure family should be punished. The law does not provide for such social boycotts. The Government should ensure that such incidents are not repeated, said a letter by DSS members.

District Health Officer S. Adivappa said leprosy is not an infectious disease. "Mr. Dhannure has been totally cured. There are some deformities on his face that cannot be erased. However, there is no chance of him infecting others," he said. "It is blind belief among the people that he will spread the disease around. We will organise an awareness camp in the colony to make people understand the facts related to the disease. District Leprosy Officer G.K. Shivamurthy has visited the colony. He and other doctors will counsel residents to make them accept the family," he said.

- As reported in *THE HINDU Newspaper*, 16/March/2006  
 Courtesy: Dr. Jayapala, I/C, DTST Coordinator, Karnataka

## SHGs and Education – An Assam report

**SHG** women members have always shown concern and anxiety for good education of their children. What is attempted by Seva Kendra Silchar is to organise coaching, classes for some formal school children in the villages who are poor' and marginalised at suitable timings in coaching centres set up by, the SHGs and *to* train the coaching teachers and thus raise the educational standard to be attained by those poor children in their regular formal school studies.

At present, in all 47 coaching centres with 44 teachers teaching 2184 children (1104 male and 1080 female) assist school children through coaching. The SHGs members pay a part of the remuneration of the coaching teachers while Seva Kendra Silchar subsidizes the balance in barak Valley( 7 centres with 389 children - 160 male and 224 female and 7 teachers) and AIFO in Longai valley ( 40 centres with 1800 children - 980 male and 820 female and 37 teachers)

---



---

*Health is the greatest gift; Contentment the greatest wealth;  
Faithfulness the best relationship  
- Gautama the Buddha -*

---



---

## National Policy for Persons with Disability released on M.S.J.E. website

*The National Policy for Persons with Disability has been released by Ministry for Social Justice and Empowerment (M.S.J.E.) on its website in Hindi and English languages.*

The Policy was approved by the Union Cabinet in December 2005 at a meeting presided over by Prime Minister Dr. Manmohan Singh. The disability sector is now anxious to study the contents of this National Policy that will not only have a direct bearing on the lives of approximately 70 million disabled people but will also fundamentally determine the course of its future interventions.

It needs to be mentioned here that it was only after an intense media campaign and outcry by Disabled Rights Group (D.R.G.) and others in the disability sector on the lack of participation by persons with disabilities and Disabled Peoples' Organisations that M.S.J.E. had held a daylong National Consultation on the Draft National Policy for Persons with Disabilities. At the National Consultation Meeting, D.R.G. had expressed strong objection to the top-down approach taken in formulating the Draft which is a violation of the mandate of Biwako Millennium Framework

*Read National Policy for Persons with Disabilities @ <http://socialjustice.nic.in/disabled/welcome.htm>*

## Action Plan Summary of the CBR and Leprosy – Gudivada Project

Gudivada project is a combined project of Leprosy control programme, community based rehabilitation and children's education. The Leprosy control programme started way back in 1980. Till today more than 6000 patients have been cured of the disease through this programme. The state of Andhra Pradesh where the project is situated is one of the states which have almost achieved elimination. From 2005 onwards leprosy work is integrated with general health care. The project is participating in the leprosy control programme by raising awareness through effective IEC programmes and encouraging voluntary reporting of cases. The other activities regarding leprosy are POID which is being carried out regularly by field visits and follow up activities. The leprosy disabled persons are integrated with the general disabled persons.

The General objective for the year 2007 to 2009 is to bring the PWDs to the mainstream society through the active support of the Caregivers & Community and networking with GO's and NGO's. Through the programme, the project expects that at least 55-60% of the disabled persons would enjoy the benefits of Socio-Cultural integration. With this in view, effective and meaningful IEC programmes are being organised so that there is a lessening of stigma and discrimination meted out by the PWD's.

With these goals in view many activities are being planned by the project team. Monitoring and evaluation of the activities are done half yearly and annually. By analyzing the outcome and output indicators, the successes or failures of the programmes are assessed.

The project's direct beneficiaries are persons with disabilities including leprosy. A total of 900 PWD's are taken up by the project at present. The number is on the increase as more and more cases are being detected. Indirect beneficiaries include the parents, spouses, children and other care givers of the leprosy patients and the PWD's. An Analysis of the felt needs of the PWD's brings out the following facts.

- Among all the stakeholders, the most neglected are those with MR- CP problems. Some special interventions are planned to meet this need. This will include effective IEC programmes targeted to bring awareness to the care givers and the community.
- Provision of aids appliances and subsidies and loans to the Socio- economically handicapped is another felt need. Special camps to provide these are planned. Similarly mobilizing educational loans and subsidies to the PWD's who wants to go for higher education and those who want to undertake group work is also envisaged.
- There is a need to organise and strengthen the SHG's/MSG's and DPO's so that their voices can be heard and their problems represented.

TO,