

### Primary Health Care centre and its influence on the community

The concept of PHC has strong socio-political implications. It explicitly states the need for a comprehensive health strategy that not only provides health services, but also addresses the underlying social, economic, and political causes of poor health. Political commitment to Primary Health Care implies more than formal support from the government and community leaders. For developing countries in particular, it implies the transfer of a greater share of health resources to the under-served majority of the population. At the same time, there is a need to increase the national health budget until the total population has access to essential health care. PHC should also emphasize the close link between health and development of the poorer sector of the community. Since primary health care is the key to attaining an acceptable level of health for all, it will help people to contribute to their own way for the social and economic development. So it has to be seriously considered that the primary health care should be an integral part of the overall development of society.

In order to plan and implement PHC effectively, strong participation of the people affected would be essential. The people have the right and should take the responsibility to participate individually and collectively in the planning and implementation of their health care. Governments have the responsibility for the health of its people which will be fulfilled only by the provision of adequate social and health measures. The main target in the coming decades, for the governments, international health organisations and the world community should be the attainment of all people, a level of health that will permit them to lead a socially and economically productive life. Primary health care will then be the key to attaining this target as part of the development.

The main function of the primary health care is to reflect and evolve from the economic conditions and should be based on the application of relevant social and health services and public health experiences. It should address the main problems in the community providing promotive, preventive, curative and rehabilitative services accordingly.

It can be seen that the proper application of primary health care will have far-reaching effects, not only throughout the health sector but also for other social and economic sectors at the community level. Moreover, it will greatly influence community organization in general.

GOI has already taken up the process of fully integrating leprosy services into general health system though it faced opposition from many corners initially. Now it has started to give rich dividends

AIFO along with other ILEP and NLEP partners and are giving main focus to strengthen the general health system in order to give best services to the leprosy affected persons which is well appreciated.

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# My seven days in Bangladesh – Jayanth Kumar, CBR Co-ordinator

This visit to the PBM Chittagong CBR project was one of the most memorable and thrilling experiences in my life. It was my first exposure to the Buddhist life style, culture and their work in the society. What struck me as unique during my visit to the project was the simplicity of their lifestyle. The Buddhist Monks who run the project are dedicated to their work and their work encompasses lending a helping hand to people of all castes and religion.



Their simple life style, food habits, motivation, service dedication, commitment to the tasks has inspired me a lot.

It was indeed a memorable experience thanks to the precise guidance by Mr. Jose in terms of mobility and description of the place I visited. More so was his help in widening the scope of my thinking towards developmental work.

What did not escape my notice during my visit was that the people in the area live with insecurity day after day. Even during our stay we were under the constant observation of the police and the military. This is partly to the possibility of violence by fundamentalists that may erupt at any given time. However, the major problem is of subjugation, infiltration of majority of the community from the plane land to indigenous belt.

The visit was an eye opener to me in coming to terms with the kind of precarious existence led by people in this area. From all this, I have gained lot of ideas on working with tribal communities particularly in the border areas and, in difficult circumstances. Though the visit was for a very short time, the experience of working in difficult situations has improved my potential and confidence.

Apart from being exposed to the rich tribal culture, I also had a glimpse on the problems they face. More significantly on the issues concerned with refugees or poverty. To me, they are factors that have been enlightening to increase my scope in working for the upliftment of the most marginalized groups in the society.

"Civilization is neither numbers nor strength nor money
It is the love, patient, eager and desire
That there be on earth, to the possible extent,
Less injustice, less pain and less unhappiness"

Raoul Follereau

### SRMAB's: Empowering persons with disability

# Resource/Information centers at sub-district level:

Today the information is one of the essential resources but owing to the slow development in communication, information cannot possibly reach everywhere. In this scenario, the most affected are the people with disability in rural area as they find it extremely difficult to access the required information. Especially if it demands to spend huge time and money.

To address this barrier, Malavalli project, came up with an idea to setup an information and training center for the people with disability at the sub-district level. They successfully negotiated with the local elected community leaders and authorities to get free site allotment in the form of a useful 2000 Sq.ft area from Nagarasabha limit of Ramanagar Taluk near Bangalore. In the similar way, project is putting its effort to mobilize the site of the 1200 Sq.ft to setup community resource center at various sub-districts.

#### Panchayath leader's workshop to sensitize on issues regarding persons with disability:

The main motto of any community based program for the deprived group is to bring them in to mainstream of the society. To achieve this, entire administrative system should have an attitude that will see the deprived community also become a part of the program. For this, local government has to be sensitized regarding disability issues.

Malavalli Project staff conducted a workshop for panchayath leaders in the project area. The object of the workshop was to sensitize the local leaders regarding their roll in the development of people with disabilities. The workshop also emphasised on the legislation and entitlements of people with disabilities. Moreover the workshop was successful in drawing the attention of the Panchayath leaders regarding the reserved allotment under Grama Panchayath program for the development of people with disabilities. The leaders were also oriented about PWD's Act-95 and the Panchayath's role in the development of people with disabilities.

- From Malavalli Project

#### **Event**: Sports competition for the physically challenged

Disability proved no constraint to the physically challenged who participated in a specially organised sports competition held on August 18<sup>th</sup> at Paikpara, Jharkand. Excitement was apparent in the faces of not only the participants but also the onlookers as they gathered to view the first ever such sporting event for the physically challenged in the area. The event included Tricycle race, 100 meter race for boys and girls and biscuit race.

- Simdega Project (Jharkhand)



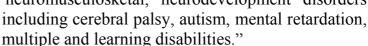
# Hopes for Inclusive Education for children and youth with disabilities in India – News extracts from disability News and Information Service, NCPEDP

The nation is poised at a historic threshold that could, in the coming years, usher in equity and participation for millions of youth and children suffering from a range of disabilities, as their participation in the mainstream education in the past five decades of independence has been near zero, with only two percent of children with disabilities getting any kind of schooling. This hope has been kindled by promising hints in various reports presented at the Central Advisory Board of Education (C.A.B.E.) meeting held in the Capital from 14-15 July 2005.

In a promising development for the disability sector, Minister of Human Resource Development Arjun Singh has announced an outlay of Rs.1000 crore for the Comprehensive Plan of Action for Inclusive Education of Children and Youth with Disabilities. This was stated in a note circulated at the C.A.B.E. meeting.

The note further said: "The thrust of the Government's policy on Inclusive Education is that persons with disabilities need to be admitted into mainstream institutions and not dependent solely on specialist institutions. This will call for changes and enhancements not only in physical infrastructure and the availability of study material but also in mindset and attitudes."

Another important development from the point of view of the disability sector is that the document has defined the term disability in its broader meaning: "The term disability used in this scheme will include visual impairments (blind and low-vision), speech and hearing impairments, locomotor disabilities, neuromusculosketal, neurodevelopment disorders





Mr. Javed Abidi welcomed the broad outlook towards the definition of disability and urged a little more elaboration and categorical mention on the issue of access and barrier-free environment during the mention of universal access. He specifically appreciated the usage of the term "physical and mental disability", as this marks recognition of the fact that the government, at least in concept,

envisages participation of children with mental disabilities at the secondary school level education.

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