



Learning document

Good practice in Community Based Inclusive Development

WHAT OUR EVALUATIONS ARE HIGHLIGHTING

CBM Australia recently looked back at all the evaluations we have done of our international programs over the last four years. These are some of the common learnings around good practice when working with people with disabilities in community based inclusive development (CBID) programs.

Stigma reduction must go hand-in-hand with improving access to healthcare, rehabilitation and devices

There can be no substantial change for people with disabilities without access to health and rehabilitation support, alongside awareness raising around disability rights and stigma reduction. Helping people to access devices – wheelchairs, walkers, white canes, hearing aids, and toilet supports also improved their ability to be active and engaged in the community and advocate for their rights.

This was one of the key learnings from our work in South Sudan where our team worked hard to break down attitudes and fears about people with disabilities and were successful in raising awareness about preventing disability. Many children that our project team worked with lived with a disability because of poor health care or a lack of timely medical intervention for accidents like burns, snake bites, traffic accidents, or childhood illness that could have been prevented through vaccination.

Helping people access existing schemes and pensions can be life changing

Our work had a huge impact in helping people with disabilities get access to existing government schemes. These benefits will outlast the time that we work in a community.

Front: OPD member involved in our CBID project in Cameroon.

In one of our projects in India, we assisted people with disabilities to access government support by helping families navigate application processes and get pensions and subsidies they otherwise would have missed out on. This support totalled AUD\$22 million!

Programs were most effective when they retained and supported good community organisers

Well-trained local community organisers played a key role in project success. Organisers that were trained in aspects of disability rights and prevention, and paid fairly were most effective. Having trusted people engaging long term and walking alongside people with disabilities in village communities had a strong ripple effect in building up local self-help groups and Organisations of People with Disability (OPD).

Clear expectations of what we expect of government

Successful CBID projects had a strong influence on local government policy and practice, and were clear on what they wanted governments to do. They did not set up parallel systems, but instead supported local government to better respond and budget for the needs of people with disabilities, for example, in disaster preparedness or in inclusive education.

Our work in the [Philippines](#), [Cameroon](#) and [Bangladesh](#) are standout examples of project teams working well with governments. Our project teams were often effective in connecting different government bodies and getting them to work together. This could be connecting different mayors, or education officials from different localities.

Creating a spirit of competition or one-upmanship of who is doing the best job in disability inclusion was also a common approach to getting good buy-in from local government.



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