



A Systematic Review of the Effectiveness of Alternative Cadres in Community Based Rehabilitation

Hasheem Mannan

(mannanh@tcd.ie)

Senior Research Fellow
Centre for Global Health, Trinity College Dublin

Acknowledgements

Prof Mac MacLachlan, Prof Eilish McAuliffe
and Camille Boostrom

Centre for Global Health, Trinity College
Dublin

&

Chapal Khasnabis & Neeru Gupta

Background

- The Millennium Development Goals (MDGs) aim to improve population health and the quality and dignity of people's lives, but their achievement is constrained by the crisis in human resources for health.
- An important potential contribution towards achieving the MDGs for persons with disabilities will be the newly developed Guidelines for Community Based Rehabilitation (CBR).
- Given the global shortage of highly skilled practitioners, effective implementation of the CBR guidelines will require additional practitioners, with improved distribution and a new skill set, allowing them to work across the health, education, livelihoods, social, and development sectors.

Methods

- We conducted a systematic review to evaluate existing evidence regarding the effectiveness of alternative cadres working in CBR in low and middle income countries.
- We searched the following databases: PUBMED, LILACS, SCIE, ISMEAR, WHOLIS, AFRICAN MED IND.
- We also searched the online archive of the Asia Pacific Disability Rehabilitation Journal (available from 2002 to 2010), which was not covered by any of the other databases.

Results

- The search yielded 235 abstracts, only 6 of which addressed CBR through some type of evaluative component.
- Three of the studies explored the effects of CBR interventions, mainly related to physical disabilities, while three explored issues concerned with the work performance of rehabilitation workers.

Inference

- All six studies related to specific service delivery in local contexts, using outcome measures that were not comparable across studies.
- Due to the dearth of evidence regarding the effectiveness of alternative cadres in CBR, systematic research is needed on the training, performance and impacts of rehabilitation workers, including their capability of working across sectors and engaging with and making use of health systems research.

Community Based Rehabilitation Guidelines

- The Guidelines on Community Based Rehabilitation come after decades of the application of CBR in a myriad of fashions, through varied mechanisms and in hugely differing contexts.
- We have very little idea of what works well, where it works, how or why.
- With the Guidelines already being implemented through quite different interpretations, we urgently need to establish a programme of implementation.

CBR Guidelines

- CBR guidelines will require practitioners to work across disciplines and across health and related sectors (social welfare, employment, education) to address the five major components targeted in the guidelines: health, education, livelihoods, social development, and empowerment.
- This will require practitioners with a new, and broader, skill set than any profession can currently offer. But in low-income countries, where most people with disabilities live, we already have a chronic shortage of human resources.

CBR Guidelines

- However, there is now cumulative and strong evidence for the effectiveness of task shifting to alternative—so-called mid-level or low-level—cadres.
- We call for the development of a new cadre for implementing the new CBR guidelines
- We stress that such a cadre, providing a broad skill mix, must have a stronger professional identity, better developed interconnections with other health workers.
- We call for a more supportive and motivating work environment than has previously been characteristic of new cadres, in CBR and elsewhere, in low-income countries.

Staff skills and not staff types

- The human resources challenge relates not only to the number of CBR workers available but also to the much broader skill set they will need to implement the new guidelines.
- We argue for a much greater skill-mix within the individuals who will be generalists
- Generalists who are required to integrate the lived experiences of a person with disabilities across very different domains, often in isolated resource-poor settings.

Staff skills and not skill types

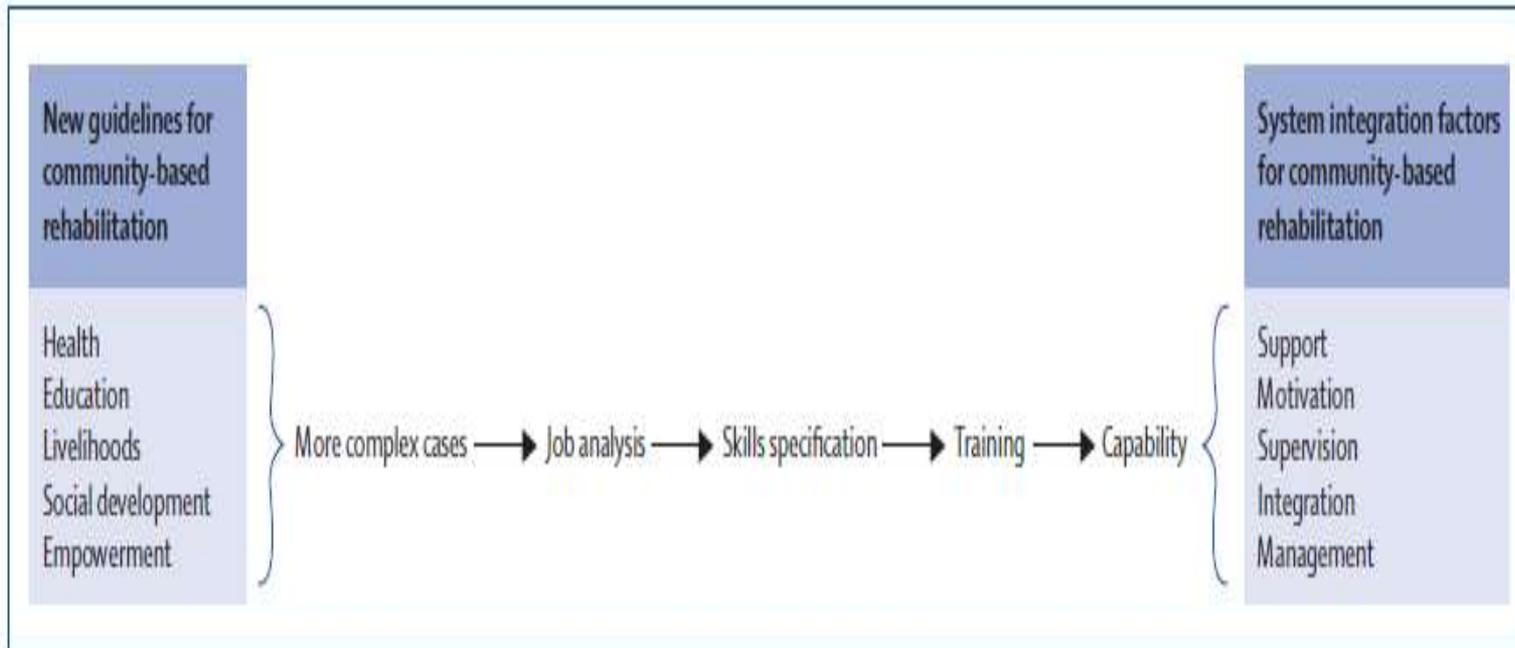


Figure: Integrative staff skill-mix requirements for community-based rehabilitation and important associated factors for system integration

Staff skills and not staff types

- Some rehabilitation and community health workers already do this to some extent.
- A new mid-level cadre of rehabilitation worker should be developed, on the basis of requirements of the new guidelines.
- It will be crucial to think less about staff types and more about staff skills, with a new cadre whose roles are defined through systematic job analyses to identify the core skills necessary to address the work to be done, work that no existing cadre is trained for.

HRH for CBR

- WHO's Maximizing Positive Synergies Collaborative Group noted a global deficit of trained health workers of over 4 million, but failed to acknowledge or address the significant HRH crisis especially in the provision of services for people with disabilities.
- The CBR Guidelines also require a skill mix not available in any existing profession, indicating the need to develop a new alternative cadre that could embrace this skill mix and support existing professions, but through a much shorter and more focused training.

HRH for CBR

- World Report on Disability notes that
 - Developing standards in training for different types and levels of rehabilitation personnel can assist in addressing resource gaps particularly in impoverished countries, where there is a proportionally high number of people with disabilities.
- The establishment of a Global Programme on Human Resources for Disability and Inclusive Development, would be an effective mechanism to achieve this.

HRH For Community Based Rehabilitation

- A program that oversees and allows for organisational, country and contextual differences, but also facilitates comparable data collect, through the establishment of a range of 'common goods' concerned with CBR training, support, monitoring, evaluation and research.
- The establishment of a Global Programme on Disability and Inclusive Development would be an effective mechanism to achieve this.