



**International Conference:
Evidence in Global Disability and Health**

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ABSTRACT

Title: The development, pilot, evidence and scaling up of the Inspire2Care model

Abstract text (limited to 300 words, should include background, methods, results and conclusions):

Background: To create a systematic change for children with disabilities in Nepal Karuna Foundation, a small Dutch entrepreneurial organisation developed and piloted a disability prevention and rehabilitation model, Inspire2Care (I2C). This model builds around local structures, local resources and local leadership with the aim to sustainably embed prevention and Community Based Rehabilitation (CBR) activities in the communities.

Methods: From 2011 till 2014 Karuna piloted a new model, Inspire2Care in seven villages in two districts in Nepal. The model built on the experiences of Karuna's previous successful community health insurance program. Inspire2Care has five components: Prevention, CBR, secondary and tertiary care for disability, local leadership development, lobby & advocacy along with follows three guiding principles: local responsibility and ownership at community level, cost sharing for financial sustainability in three years and partnership with local government.

Results: In the pilot phase the program has reached over 400 children with disabilities, improved maternal and child health, created a more inclusive community and ensured 3% budget allocation from local government. The year 2014 was the year of acknowledgement, evidence and scaling up. The Asian Pacific Centre for Development and Disability researched best practices in CBR in 37 Asian countries and concluded that Inspire2Care was among the top five of best practices. Independent research from the Royal Tropical Institute in the Netherlands concluded that this programme was highly cost-effective using WHO benchmarks. The cost per DALY averted is 192.34 euros. From 2015-2020 in a joint venture with Liliane Foundation and Netherlands Leprosy Relief the model will be scaled up to 55 villages covering at least one whole district.

Conclusions: The cost effective Inspire2Care model has shown to be CBR in the purest sense: in the community, by the community, for the community, for the children. It is ready to be piloted in other countries in partnership with others creating long lasting changes.

Deadline for abstract submission: November 30, 2015

Please submit your abstract to: disabilitycentre@lshtm.ac.uk

Restricted to one first author abstract per participant.

If you have any questions, please write to: disabilitycentre@lshtm.ac.uk