The Continuum: From Immobility to Mobility to Empowerment

David Holdridge
VVAF

Jo Nagels
VVAF

Caitlin Wyndham
VVAF

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The Continuum: From Immobility to Mobility to Empowerment

Victim assistance goes far beyond the physical; there is also a need to rehabilitate victims psychologically and give them the confidence and support they need to re-enter society as productive members of the community. This is not an overnight process, and the author describes the series of events that need to take place in order to make this difficult transition.

by David Holdridge, Country Manager, The Mobility Project

The Mobility Project is a non-profit organization that collects and restores used wheelchairs and other medical equipment for persons with disabilities that cannot afford this much-needed equipment. Additionally, in a few of their countries of operation, they have trained disabled civilians to restore wheelchairs and other objects themselves, and they have established the facilities for them to conduct this work. The Mobility Project has made three deliveries to Afghanistan and Pakistan, assisting hundreds of landmine victims and other disabled individuals. In addition to delivering the material, their volunteers adjust each mobility device to fit the needs of each particular patient.

Another aspect of the Mobility Project is to enhance further rehabilitation by providing a sports program in the area. The volunteers feel that playing sports is a way to not only rebuild the individual's physical and emotional strength but also to show them exactly how much mobility their new wheelchair brings them. Although this past year's events have halted their project in Afghanistan, they hope to resume operations as soon as possible.

Conclusion

Those organizations are only a few of the ones making a significant effort to rehabilitate and reintegrate landmine/UXO victims in Afghanistan. By addressing the needs of the entire individual rather than just treating the wound, they are making a huge difference in the lives of people who otherwise would have no chance of surviving in the world. These groups are not only taking steps to rehabilitate the individual but also to rehabilitate the nation by providing job opportunities to encourage a desperately struggling economy. Although the landmine problem in Afghanistan is one of the most severe and will continue to hinder the country's growth for years to come, these programs provide some much-needed hope for the entire nation.

References

1. UN Portfolio on the Comprehensive Disabled Programs: http://www.association.org/ countries/projects/afghanistan/index.html
2. The Mobility Project: http://www.mobilityproject.org/pakistan.htm

Contact Information

Susanna Sprinkel
Mine Action Information Center
Tel: (540) 568-2810
E-mail: sprinkel@jmu.edu

Vietnam Veterans of America Foundation

Tragedy can yield hope, and the Vietnamese people have learned just that. In the wake of decades of war and trauma, there is a growing understanding of the importance of rehabilitation and reintegration. The Vietnamese government has made significant strides in providing care for those affected by landmines and other injuries. The Trauma Care Foundation was founded in 1989 and has since provided care to thousands of survivors. The Mobility Project has provided wheelchairs and other equipment to hundreds of survivors, allowing them to live more independently. The Center for International Rehabilitation has worked to train disabled civilians to care for themselves and others.

Although progress has been made, there is still much work to be done. The challenges of rehabilitation in a war-torn country are immense, but the Vietnamese people have shown resilience and determination. The Continuum of care, from immobility to mobility to empowerment, is a process that requires ongoing support and resources. As the world looks to Vietnam for lessons on how to transition from conflict to peace, there is hope for recovery and prosperity.
Phuoc Pho to look closely at the vexing question of appropriate prosthetic tech- 

tology for the developing world. This discussion has raged for several years, with various agencies adopting wildly differing views on just how we could deal with the huge numbers of limbless people in the world.

Although nowadays most care sensitive are committed rather nicely, locally 
designed and manufactured modular prosthetic systems and custom orthotic 

designs and fittings, Vietnam still struggles with the acceptance of the use of 

polypropylene in most of their workshops. The system works well in many countries and is relatively easy to use. It was designed and built by a team of prosthetists and engineers working together. Polypropylene material displays properties that are unique when compared to other materials and has contributed greatly to the quality of our everyday service. Polypropylene, properly applied, will perform functions at a cost that other materials cannot match.

VVAF's rehabilitation programs in Vietnam are supported by the Leg for 

Vietnamese Victims Fund and implemented in partnership with the rehabilitation departments of two of the leading hospitals in the country under the wings of the Ministry of Health. The NIP and Bach Mai University Hospital, both located in Hanoi. Since 1994, VVAF-NIP has produced and distributed more than 60,000 quality thermoplastic braces, helping 4,000 kids to achieve a better future and quality of life. Today, the Institute also provides much-needed medical and rehabilitative services to children suffering from cerebral palsy, clubfoot, and other ailments requiring braces and physical therapy.

Polypropylene at "Appropriate"

There are some innovative new prostheses for amputees and orthotic devices and technologies being adapted to meet the need for prosthetic care in deprived countries. High-tech devices turn out to be inappropriate in the light of local repair, resistance to harsh circumstances, durability and expense. What is appropriate?

In 1995, the International Society of Prosthetics and Orthotics, with USAID funding, held a conference in Phnom Penh to look closely at the vexing question of appropriate prosthetic tech- 


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In Institution Building

In both Bach Mai and the NIP, VVAF focuses on training existing staff to improve the quality of service at each hospital. A key goal has been to provide educational opportunities for mid-level program staff. VVAF sponsored several doctoral level training opportunities for mid-level trainees at the International Society of Prosthetics & Orthotics (ISPO)-recognized Vicer School. The conclusion of both courses, trained staff will be proficient in the fabrication and correct biomechanical manufacturing of polypropylene orthotic and prosthetic devices. VVAF's rehabilitation program at Bach Mai is growing and has been strengthened with the inclusion of four ISPO CAT II recognized graduates from the Vicer School. To meet the needs of 

A burgeoning disabled population that cannot make its way to the NIP or Bach Mai, VVAF's Mobile Outreach Program has continued to bring basic rehabilitative services directly to the community to assist physically challenged children.

Recognizing the critical importance of post-category II training, VVAF programs will enhance education and training to promote the institutional will and capacity of the NIP and Bach Mai to achieve excellent high-tech rehabilitation and extend these services to the selected provinces. This instruction program will not only cover the clinicians but allied health staff as well. The training will cover all essential technical components as well as provide key doctrine, critical technical skills and a "train-the-trainer" program. This aims to ensure the sustainability of training and professional development at the two key hospital workshops and in provincial facilities. When the epartments depart, these local Management of Health staff can continue the training effort.

Stepping Out into the World

During the past two decades, there has been an increasing recognition that the disabling effects of disease, accidental injury and congenital defect constitute one of the greatest responsibilities not only of medicine but also of society itself. Rehabilitation workshops should provide the best service possible to anyone requiring custom orthoptic devices.

But how should one deal with the loss of self-worth in an individual who has lost not only his earning power but his ability to take care of himself? How can one measure the burden of frustration, anxiety, dependency and physical distress that is the daily lot of so many disabled persons? How can we gauge the real effect of the social rejection and job discrimination that are still so prevalent? The fact that many are able to bear these burdens with dignity does not alleviate the problem of disability. That can be done only through an enlightened social policy that ensures these people a life of dignity and self-respect and an ever-expanding rehabilitation program.

VVAF believes the answer to that lies with the disabled people themselves.

This is where the significance of user groups is paramount. Broadly defined, this is a peer group of persons with similar challenges. Most experts would agree that these groups are the key to the continuity of the rehabilitation process as well as providing support and encouragement for the PWs to become the best he or she can. As concerns the "continuation," very few people in developing countries who have benefited from prosthetics can make the device more useful and attractive to the PWD, it will not be discovered. With time, the device will be discarded. The hope that devices can be made, carried, homemade physio courses can be applied, and encouragement can be given.

Equally important, the "users" of assistive devices can gather with their peers, trade stories and share information about opportunities. At a recent meeting of a new self-help group consisting of patients of Bach Mai University hospital in Hanoi, a woman was examined by an expert clinical supervisor. "When was your prosthetic device fitted?" he asked. "In 1984," she replied. Which explained why it was such a bad fit and why she required crude repairs to even "do the job." "Why have you not returned for a new one?" "Nobody ever told me I could!" This woman had spent several years at home with little
social interaction, simply because getting out of the house was so difficult. She recently thanked VVAF for supporting the establishment of a self-help group as it has made her life worth living again. She says she looks forward to the weekly meetings and has regained some joy in living.

From User Groups to Self-Help Groups

This is the beginning of a potentially wonderful transformation. This is where a group that was begun for rehabilitation and its attendant benefits is now transformed into a group for empowerment. With little facilitation, leaders emerge from within the group. They are authentic because they are also PWDS. They speak from the same place.

Attendance and participation are encouraged through peer pressure and perceived value, rather than on the basis of obligation to authority. Again, with only modest facilitation from outside, the group naturally evolves from rehabilitation to mutual support to discussions on empowerment and "good use." Talks become increasingly centered on how to use their mobility toward becoming productive and self-reliant citizens.

The group gains access to employment, access to public policies (schools, hospitals, trains, buses, etc.), access to higher education and then, finally, access to the public policy debate.

At this point, a core of enthusiastic PWDS has moved from rehabilitation to advocacy about "rights," the precursor to the promotion and promulgation of the basic tenets of Vietnamese socialism.

From Self-Help to Empowerment

Parallel to these developments at the community level, there should be a commensurate national and international linking. Support, encouragement and empowerment of PWDS should not be limited to borders. Again, for modest investments, the PWD user/self-help groups should now be linked both physically and electronically with other existing and emerging groups throughout Vietnam.

In the beginning, like most movement, this will indeed be driven by educated PWDS, mostly those from urban areas who have been fortunate enough to benefit from a university education. They are the ones who will take leadership positions with communities and then become part of national coalitions of such emerging leaders nationwide. The low costs and increasing ease of access to electronic communications will keep this "sharing" constant and productive. Best practices and lessons learned can be communicated quickly and effectively across PWD groups throughout the country. In Vietnam, this has started through the Disability Forum of the Vietnam Union of Friendship Organizations' nongovernmental organization (NGO) Resource Centre. Across the country, PWDS and gives benefits this forum their own and communicate regularly through the website and an electronic newsletter (see http://forum.vso.vn/).

Just one step removed, but based on the same principles, both community and national groups can, at low cost, now communicate with their peers all over the world. They can connect, with only small subsidies, to the international PWD movement for support, encouragement and empowerment. The new technologies can do wonders for breaking down the isolation many PWDS feel. Being comfortable with these new technologies also represents part of the skills acquisition process that will brighten employment opportunities in countries such as Vietnam.

As one distinguished PWD said recently, "the day when PWDS can take their rightful place in society and make a contribution to society cannot arrive until the PWDS themselves are at the heart of the process."

In sum, the sought-after destiny for PWDS is a process. As concerns the mobility impaired, it is a process that begins with the transition from pain to withdrawal to re-engagement, first through the expert help of doctors, orthotists, prosthesis providers, and then from the light touch of outside "organization" facilitators, and then finally "of and by" themselves. The lessons learned here are clear. The physical treatments of the mobility impaired cannot be done out of the context of another low-cost process whereby the benefits of mobility are married to reintegration and rights. To provide the wherewithal for mobility without addressing the other needs of the PWD is wasteful.

At the end of the day, the PWD movement is no more or less than a justice issue, justified as "right relations." A world where all persons are mutually dependent and respectful. To be part of the PWD movement in Vietnam is to participate in moving the world closer to justice.

"All photos courtesy of VFAW"

Contact Information

Vietnam Veterans of America Foundation
15 Dong Dung St.
Ba Dinh District, Hanoi Vietnam
Tel: 84 4 733 9444
Fax: 84 4 733 9445
E-mail: holdridge@fpr.vn
Website: http://www.vvaf.org

Lending a Helping Hand: Victim Assistance Programs in Africa

Many landmine victims face adverse situations when returning to their communities and trying to live as productive members of society. A number of programs in Africa for landmine victims and the disabled help people not only "get back on their feet," but also "get back in the saddle" and gain the courage and knowledge to live among their peers with confidence.

by Nicole Kreger and Sarah B. Taylor, MAIC

Introduction

In an overwhelming number of countries, people are falling victim to the landmines and UXO left behind after various wars and internal conflicts. Medical assistance and rehabilitation are often hard to come by in such countries where they exist, they usually costly. Africa has a particularly notable disability crisis. It is believed that over 10 percent of Africa's population is mobility impaired. In fact, to call attention to the continent's problem, the Organization of African Unity Heads of State has declared the current decade (2000-2009) the "Africa Decade of Disabled People." War, poverty, disease, hunger and poor environmental conditions all exacerbate the problems of the disabled, as do discrimination and ignorance about disabilities.

In a time when those most need help often do not have access to it, a number of organizations are working to bring relief and support to them.

In recent years, programs have expanded in response to the growing demand for more comprehensive rehabilitative devices and services, and they have developed new and innovative approaches to covering the gamut of needs for persons with disabilities. This article profiles the programs of five organizations doing victim assistance work in Africa.

The Handicap International (HI) is working with the Ministry of Health in this program that aims to "build a sustainable network of competence and facilities that will enhance the reintegration, general well-being and promotion of the rights of the physically disabled and psychologically suffering population." The program focuses on orthopedic services, psychological support and reintegration (both social and economic) of people with disabilities into society. This initiative, which is funded by One Love Sierra Leone—the British charity formed in 1999 in response to