BARAMASIA REHABILITATION TRAINING CENTRE

REHABILITATION

HELPING OTHERS
TO STAND ON THEIR OWN

DAMIEN SOCIAL WELFARE CENTRE
P.O. BOX NO. 17
DHANBAD, BIHAR, INDIA 826001

BARAMASIA REHABILITATION TRAINING CENTRE (BRTC)

THE SETTING

BRTC JHARIA ANNEX

INTRODUCTION

The primary reason for undertaking rehabilitation work is to maximize an individual's potential for standing on his/her own ; concentrating on strengths rather than limitations so that remunerative work can be found. Self-care, as opposed to welfare, is an alternative only accessible to the skilled. For those individuals who have been reduced to begging for a livelihood because of disability-associated discrimination, vocational training—the acquisition of a skill-can become a means to a remunerative end : work.

Ideally one would prefer seeing beneficiaries of skill training programs re-entering the mainstream of society's work force. It is hardly surprising that in a country of high unemployment among the able-bodied, the disabled should find difficulty in finding work, regardless their respective skills. For these individuals, sheltered employment has become a necessity.

HISTORY

Through funding provided by the German Leprosy Relief Association and the Indo-German Social Service Society, the Baramasia Rehabilitation Training Centre was built in 1974, for the purpose of rehabilitating disabled leprosy patients. With a grant from Cebemo of the Netherlands, a cane industry was begun in 1975. The industry met with relative success until 1979, when the unavailability of cane forced closure. With bad news came good in the form of a grant that same year from the J. Homer Butler Foundation of New York, which financed the Centre's much needed renovation and expansion.

In 1979, Rev. L.J. Hunt, S J., Director of the Damien Social Welfare Centre (DSWC)[1] since 1970, requested and received assistance from the German Leprosy Relief Association in the form of financing for a new rehabilitation department. Previously, all rehabilitation work had been coordinated by DSWC's welfare department. The organization of the new department began in 1980 under the direction of Mr. Frank O. Klein II.

The rehabilitation department soon began studying what rehabilitation work had been initiated in Dhanbad District prior

to 1980. In order to determine the kinds of further intervention still required by leprosy patients in the district, studies and surveys ensued. Most important of these studies was the Skills Assessment Survey, which provided insight into the interests, skills, and needs of the 611 family units resident in Dhanbad District's 18 "leprosy colonies"[2].

Once the rehabilitation department had assessed its population, it began grouping individuals interviewed whose skills and interests matched. An identification of disabled persons with weaving skills and/or interests culminated in the development of a sheltered weaving unit in the Baramasia Rehabilitation Training Centre (BRTC). By the end of 1980, the weaving unit was producing bandage, gauze, and bedsheets for the hospitals, clinics, and children's hostels of DSWC.

In 1981, plans to reorganize BRTC were put into motion, with a new emphasis on :

1. organizing small industries and co-operatives

2. teaching of production skills related to local raw materials

3. "half-way" assistance for young entrepreneurs, who are :

a. without tools to practice their trades

b. after vocational training unable to practice their respective trades in the open market due to medical conditions, and/or

c. lacking in confidence and assertiveness skills.

Skill groupings further identified individuals with skills and/or interests in agriculture, maintenance, jute handicrafts, embroidery, security guard work, cycle repair, and cooking. Once these skill groupings were formed, they were directed to BRTC, where they were able to demonstrate their skills unimpeded by the stigma surrounding their disabilities. In addition to the weaving unit, a jute handicrafts unit, cushion unit, macrame unit and cycle repair unit were organised. Counselling became an integral aspect of entrepreneur development, work adjustment, and work activity programs.

Significantly, administrative changes took form in the appointment of administrative assistants to co-ordinate personnel, production, scheduling and finances. An advisory council, made up of BRTC residents, was appointed to give guidance on policy

decisions. A marketing officer was appointed to develop a market for all BRTC products.

By late 1981 BRTC began encouraging those workers who could commute to and from the Centre to do so. Incentives such as cycle loan/grant schemes, housing and food allowances, and non-residential privileges were implemented. Disabled persons with non-leprosy associated disabilities were welcomed into BRTC for the first time. Persons having histories of mental illness, cerebral palsy, alcoholism, epilepsy, chronic anthritis, deafness, and blindness were now working alongside those having histories of leprosy (Hansen's Disease). All had individual problems, yet all were united in their general need for employment.

1982 began with the formation of an adult education scheme for all workers interested in learning to read and write. A pilot rehabilitation project has begun for the inpatients of DSWC's hospital. A BRTC annex in a town called Jharia is being developed, in which the work force will consist of commuters only.

Today BRTC represents a giant step forward in rehabilitation work in Bihar, by bringing together people having different disabilities and systematically introducing, or reintroducing them to the

world of work. Counselling, behaviour modification, and staff dedication are all intrinsic components of a program dedicated to "helping others to stand on their own"—a phrase which has become BRTC's reason for being.

Frank O. Klein II
BRTC Director
March 1982

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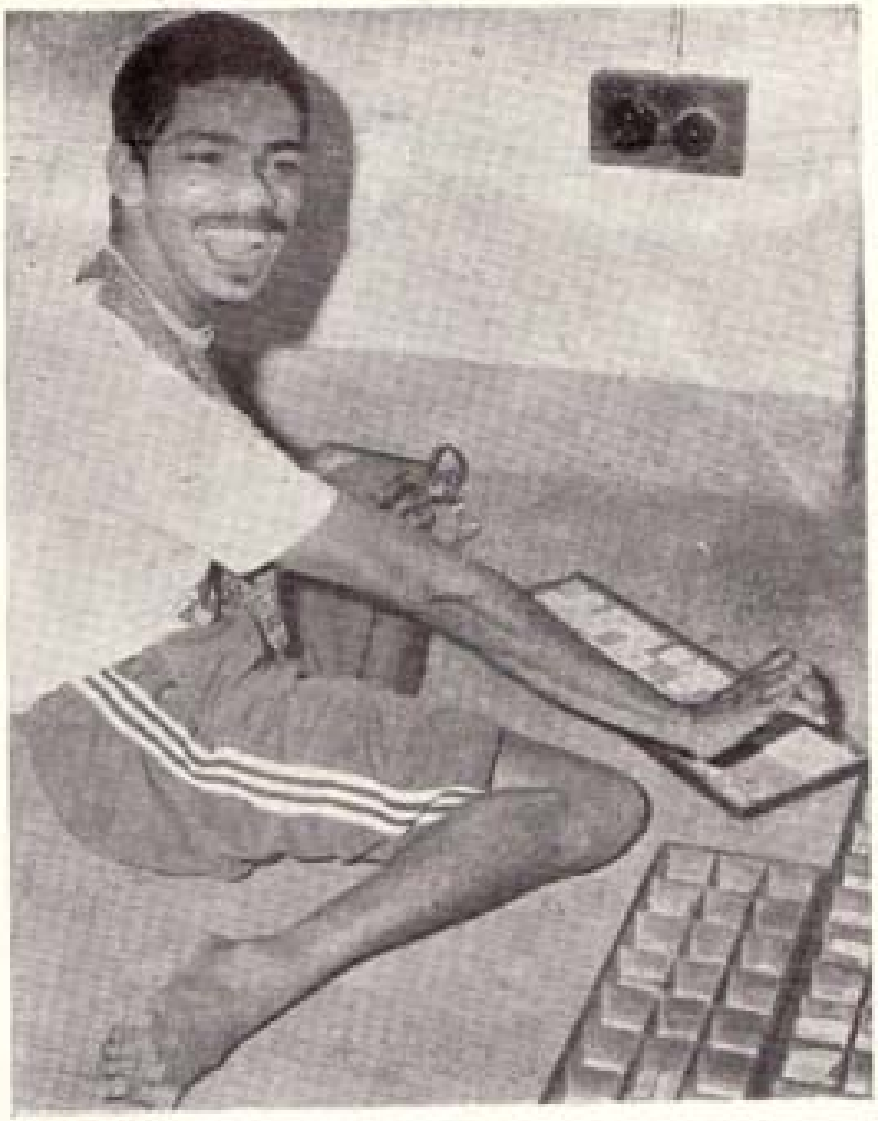
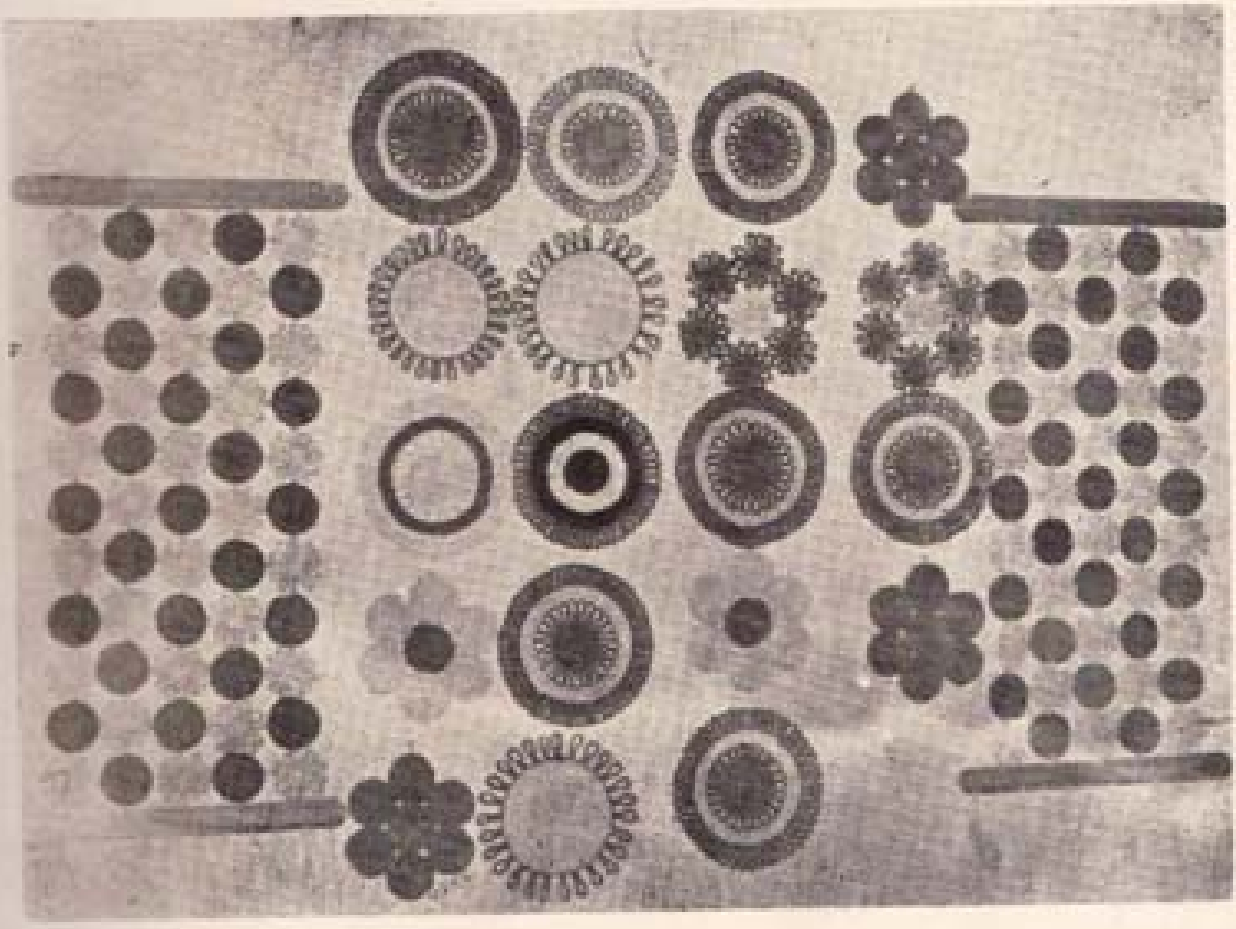
1. The Damien Social Welfare Centre, a Registered Charitable Society, dedicates itself to the many needs of leprosy patients in Dhanbad District, Bihar, India, and provides services free of cost irrespective of caste or creed.

2. A "leprosy colony" is defined as a self-settled community of leprosy affected persons.

THE WORKERS





THE PRODUCTS

AND THE PEOPLE WHO MADE
IT ALL POSSIBLE