Arnold was born with deformed legs. Walking is impossible for him. For seven years now the Liliane Foundation has been supporting Arnold through the Cameroon Baptist Convention Health Services. A hand bike has made him more mobile, he goes to school and a decent, accessible toilet has been built next to his house. Information to neighbours, classmates and teachers has made them understand more about Arnold’s disability and treat him better.
The Liliane Foundation

The Liliane Foundation is a Dutch NGO which originated in 1980 from a private initiative. The organization supports programmes for children with disabilities in 30 countries in Africa, Asia and Latin America.

Partnerships
The Liliane Foundation wants to contribute to a world that is open to everyone and where the poorest children and young people with disabilities know their rights and develop their talents. For this, the Liliane Foundation works in each country with a (potential) Strategic Partner Organization (SPO), maintaining a programme on the ground that is appropriate to the context, and ensuring that it is implemented by local partner organizations (POs), who work at grass-root level.

In addition, the Liliane Foundation works in close collaboration with MIVA, a Dutch NGO with related objectives. Together, the two organizations are implementing a joint inclusion programme.

Core strategy
With its local partners, the Liliane Foundation empowers children with disabilities by enabling them to develop and by making their environment more accessible. It does this by improving the functional capabilities of children, including medical and paramedical rehabilitation and education, contributing to a greater resilience. And by removing infrastructural, behavioural and policy barriers that prevent them from participating in society. Through this core strategy, the Liliane Foundation and its partners contribute to a structural improvement in the position of people with disabilities.

Unique characteristic
A particular characteristic of the programmes financed by the Liliane Foundation is that children receive individual tailored support. About 90,000 children and young people are supported each year within the programmes of SPOs.

Lobbying & advocacy
The Liliane Foundation will ensure that the government’s commitment to the UN Convention on the Rights of Persons with Disabilities (CRPD) and the Sustainable Development Goals (SDGs) translates into policy and practice in the Netherlands.

The Cameroon Baptist Convention Health Services

The Cameroon Baptist Convention Health Services (CBCHS) is an NGO based in Bamenda. CBCHS is the Strategic Partner Organization, in Cameroon, of the Dutch based Liliane Foundation.

CBCHS is a non-profit, faith-based health care organization, stationed in 10 regions, and compromising among others 7 hospitals, 30 integrated health centres and 53 primary health centres as well as several programmes for persons with disabilities.

Disability programme
In 2009, CBCHS created a special department for the socio-economic empowerment of persons with disabilities (SEEPD), funded by the Australian Agency for International Development and Christian Blind Mission. Components in this disability programme include the provision of Community-Based Rehabilitation Services (CBR), orthopaedic care, ear-nose-throat-care, physiotherapy, eye care services and an integrated school for the blind. The programme also includes advocacy and research on issues related to disability. CBCHS advocates for child rights and implements programmes that help protect these rights, especially for children and youngsters with disabilities.

Inclusive development
The Empowerment and Disability Inclusive Development (EDID) Programme of CBCHS aims to enable children and youngsters with disabilities to become fully included in society. For this the EDID programme team works in partnership with 25 Partner Organizations (POs) in Cameroon. These PO’s are the direct implementers of activities designed to enable children and youngsters to develop themselves and of activities aiming to make the environment more accessible in all aspects. CBCHS coaches, monitors and evaluates the 25 PO’s and where needed strengthens their capacity. Over the years has thus built a string network of Partner Organizations in Cameroon.

The CBCHS also works in partnership with national and international governmental and non-governmental health care organisations, and funding agencies in Africa and other parts of the world.
Nourou Dine can prepare for his future

As a baby Nourou Dine from Burkina Faso fell seriously ill. As a result he suffered brain damage. Since then moving and walking are very difficult for him. Through its SPO and a PO, the Liliane Foundation supports him with orthopaedic shoes and also finances his schooling. Although it is still difficult for him to feel at home at school, his world has become considerably bigger. He has contacts with peers and he can develop his talents.

Naome can learn to walk now

Naome from Rwanda was still a baby when, in an unguarded moment, she was attacked by a pig. Her mother managed to chase the animal away, but Naome’s right lower leg could not be saved. For four years, her mother had to carry her everywhere. Now this is no longer necessary. Naome has a prosthesis and she is learning to walk. The Liliane Foundation paid for Naome’s prosthesis and for the operation that was necessary to adjust her leg to using the prosthesis. Thanks to the support of the Liliane Foundation and its SPO in Rwanda, Naome’s world is no longer limited to the yard at her house. She can explore her environment, play with peers and develop freely. Naome is currently attending the School Group of Gatagara.

Centre in Bujumbura builds bridges between school and work

You can finally go to school. You learn a trade. You are proud of your diploma. And then ... no employer wants you. And if you want to set up your own business, you cannot get credit anywhere. Many young people with disabilities in Burundi have this experience. They face numerous prejudices. In addition, because of their uncertainty, they present themselves poorly. At their training institute they have not been adequately prepared for the labour market. The Union des Personnes Handicapées (UHPB) in Burundi is changing this. In the capital Bujumbura, the UHPB has created a centre that builds bridges between school and work for young people who have finished their education. They receive advice and learn how to apply for a job, how to write a business plan and handle finances. The centre also establishes contacts between unemployed young people, companies and micro-credit institutions. The centre was set up with support from the Liliane Foundation and the Dutch Postcode Lottery.

Call for change from school playgrounds

The action We ring the bell was initiated by the Liliane Foundation at a number of schools in the Netherlands. The action was carried out in a playful way by primary school children - by causing one minute of uproar in the school they draw attention to the more than 20 million peers with disabilities, who are still not able or allowed to go to school. Meanwhile many SPOs, POs and schools in Africa, Asia and Latin America also adopted this action. Of course, adults should answer the call of the children and take action at the level of policy and decision makers. This is happening now. We ring the bell is serving as a wake-up call and pointer to the example of the Liliane Foundation and its SPOs as focal points for inclusive education. This includes the accessibility of schools and, for instance, the provision of adequate sanitation facilities.

Beninese students ‘ring the bell’. A playful action with serious undertones.
This treaty regulates the obligation of states to promote, protect and ensure the rights of people with disabilities.

**The United Nations Sustainable Development Goals (2015-2030)***

Should give priority to the most excluded groups in the coming years.

**The ICF (International Classification of Functioning) of the WHO***

This model shows disability as being the result of the interaction between an individual's condition and factors in the environment.

**The CBR (Community-Based Rehabilitation) approach***

CBR means that the local community is involved in the rehabilitation and inclusion of children (and adults) with disabilities.

**Implementation of core strategy***

Customized support for children and the bottom-up approach are typical of the approach of the Liliane Foundation and its partners.

**Customization***

People close to and in the environment of children in the programme provide individual, broad support, tailored to their needs. This is possible because each Strategic Partner Organization (SPO) cooperates with a network of Partner Organizations (POs) **1**, which extends into the fabric of society. A PO communicates with all local parties that are important for the empowerment of children with disabilities and their inclusion in society **2**. Through use of these contacts, a multidisciplinary team within the PO arranges customized support for children **3**. This is always done in consultation with the parents or caretakers, and of course, with the child, if this is possible. Together, they establish a plan of action. One team member ensures good coordination in the implementation of the plan.

**Strong children, an accessible environment***

The SPO programme, implemented by the POs and supported by the Liliane Foundation, focuses primarily on strengthening the position of children and young people with disabilities, through:

**Enabling children to develop***

The programme concentrates on the life areas that are crucially important for every person according to the WHO CBR matrix: health, education, work and income, a social life and self-determination.

**Making their environment accessible***

The development of children must be accompanied by the dismantling of barriers that prevent them from participating in the community: obstacles in the physical environment, prejudice, stigma, inaccessible information and flawed policies.

Parents have a crucial role in both aspects. They are the preferred partners of the professionals and are therefore given a lot of attention: *Strong parents make strong children.*

**Bottom-up approach***

From their work at grassroots level, the POs, SPOs and Liliane Foundation contribute to changes at the macro level. The POs thus deliver the ‘proof’ which the SPOs at national and regional levels and the Liliane Foundation in the Netherlands can put forward to influence policy.

**Capacity development***

The POs, as the local organizations implementing the programme on behalf of an SPO, must be sufficiently knowledgeable and equipped. The SPO therefore works with the support of the Liliane Foundation to strengthen these organizations and make them more professional. Capacity building is therefore a supporting strategy that contributes to the smooth implementation of the core strategy: to strengthen children with disabilities and make their environment more accessible.

**Advocacy***

For POs and SPOs, advocacy contributes to increasing the accessibility of the environment for children with disabilities. A PO and an SPO operate at different levels for this. For the Liliane Foundation, advocacy is a strategy for supporting policy: the organization works with the Dutch government and internationally, to claim the rights of children and young people living in extreme poverty.

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**Urgency**

An estimated 35 - 40 million children with disabilities live in the poorest regions of Africa, Asia and Latin America. Many of these children exist outside their communities; they are excluded, have no future prospects, and are much more likely than others to be victims of neglect, abuse and violence.

**Poverty and disability**

According to the World Bank, one in five of the poorest people is someone with a disability. Of all children with disabilities that seriously hampers their functioning, 85 percent live in low and low-to-middle income countries. These skewed distributions are not a matter of chance. Poverty is the biggest cause of disability, and poor children are especially vulnerable to disability, due to malnutrition, lack of clean drinking water and proper toilets, an unsafe environment, lack of medical care, and ignorance of what is healthy and what is not. At the same time, disability leads to even greater poverty, often for the whole family, because of higher costs, loss of income, loss of social contacts and exclusion by the community.

**Starting points**

The Liliane Foundation and its Strategic Partner Organizations are strongly committed to working for the ‘inclusion’ of children and young people with disabilities: societies have to be coordinated and organized to facilitate their participation. The principles of the approach are:

**The UN Convention on the Rights of the Child (1989)**

This also includes special rights for children with disabilities.

**The UN Convention on the Rights of Persons with Disabilities (2006)**

This treaty regulates the obligation of states to...
Glory Agho, born Tsangue, is the National Coordinator of the Empowerment and Disability Inclusive Development (EDID) programme of the Cameroon Baptist Convention Health Services (CBCHS). When asked what her organization sees as the core of its commitment to children and youngsters with disabilities, she answers: “To empower them through facilitating access to health care, education and social opportunities so that they can participate as equals of other children in their families, their communities and the society at large.”

An inclusive society
“With its work the CBCHS wants to contribute to the creation in Cameroon of a society where children with disabilities grow up having the same opportunities as their peers without disabilities, a society free from barriers that limit the integration of children and youngsters with disabilities.” Glory Agho continues: “It is our vision to see a society that is inclusive, a society where all development stakeholders are familiar with, embrace and practice disability- friendly development approaches.”

Obstacles
Glory is aware that there is still a lot of work to be done and she lists the obstacles that children with disabilities and the CBCHS are facing: “Negative attitudes, policy barriers, communication and environmental barriers that limit effective participation of children with disabilities. Limited skills in the management of the medical needs of different disabilities are another obstacle.”

Success stories
Yet, the CBCHS programme, supported by the Liliane Foundation, has recorded many success stories: “From improved functionality of children with disabilities to increased social participation, increased stakeholder collaboration, more commitment among parents and a better access to income opportunities for youngsters with disabilities. An example of a success story is Magrace, a 15-year old girl, born with Cerebral Palsy. “At 7, she could not walk, talk, eat or do anything by herself. Her mother thought all hope was lost for Magrace until the day the girl started participating in our programme and was enrolled in a special school. Now Magrace’s life has changed completely. She goes to school on her own, walks and even assists her mother daily in the kitchen. Magrace, a very playful girl, is accepted fully in the community and by the family. Her mother is the president of the parent support group. She uses her experience to encourage other parents having children with disabilities.”

Partnership
The CBCHS is the Liliane Foundation’s Strategic Partner Organization (SPO) in Cameroon. Glory says: “The partnership with the Liliane Foundation has enabled the CBCHS to be more visible as far as her disability services are concerned. We have been able to create new relationships with partners in Cameroon. The partnership has also enabled us to strengthen our capacities in various domains that are important for an SPO, for example supporting our Partner Organizations (POs) and strengthening their capacities, lobby and advocacy and resource mobilization.”

Glory Agho: “We strive for empowerment of children and youngsters with disabilities through facilitating their access to health care, education and social opportunities.”