



HEALTH

Social Integration of the Differently-Abled

Face disabilities of young people to alleviate poverty in the rural areas of Northern Vietnam.



COUNTRY
Vietnam



BENEFICIARIES
10.000



METHOD
Awareness /
Information

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|------------------------|---|
| LOCAL PARTNERS | Department of Labor, Disability, and Social Affairs (DoLISA) in the Bac Giang Province Hanoi Rehabilitation Center: Save the Children with Disabilities - Hope Centre (Vietnam) |
| INTERNATIONAL PARTNERS | GTV (Trento) Hungarian Baptist Aid (Hungary) |
| FUNDING AGENCIES | European Union Autonomous Province of Bolzano |
| STARTING DATE | April 2008 |
| IMPLEMENTATION PERIOD | 24 months |
| DESCRIPTION | The project involved differently-abled children and members of their families in Basic Community Rehabilitation programs, along with social and health-care workers participating in training activities, citizens have also been involved in awareness campaigns. |
| OBJECTIVES | This project contributed to the social integration of people with mental disabilities and thus alleviated the poverty of families with differently-abled members . Specifically, the project constructed centers for disabled children and rehabilitation on a community basis for families with disabled children in the Bac Giang Province, as a way to improve their living conditions through the use of highly effective therapy methods. The project also involved parents in income generating activities, significantly improving the economic situation of the entire family, and at better preparing local health workers while improving public and local government opinion about the social inclusion of disabled children. |
| ACTIVITIES | <ul style="list-style-type: none"> • Creation of 7 Rehabilitation Centers which will use Flame methodology within 7 hospitals in the Bac Giang City area; • Organization of training courses for the staff of the Centers; • Improvement of the physical abilities of differently-abled youth, providing the main FLAME center in the city of Bac Giang with a variety of rehabilitation and orthopedic equipment; • Training/Refresher courses for personnel in government rehabilitation services and illustration of therapies which can be carried out at home; • Organization of informational and awareness campaigns about the rights of minors, and of disabled youth in particular; • Explanation and diffusion of the activities described above on the national and international level. |



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