APPEAL
2019

MoveAbility
Disability Rehabilitation Inclusion
OUR DONORS

We would like to thank all our donors; without their continuous support we would not be able to achieve our mission and goals to ensure that people with physical disabilities develop their full potential in an inclusive society. Our main donors are listed below, but we would also like to thank all of the individuals and institutions in the field that are not mentioned on this page. Moreover, we would like to thank the ICRC, which provides MoveAbility with administrative, logistical and technical support (in the form of services).

Governments

- Australian Government
- Principauté de Monaco
- Norwegian Ministry of Foreign Affairs
- Swiss Agency for Development and Cooperation SDC

National Societies

- Liechtensteinisches Rotes Kreuz
- Croix-Rouge monégasque
- Røde Kors

Public sources

- Republique et Canton de Genève
- Ville de Genève

Private sources

- medicor foundation Liechtenstein
- Fondation Pro Victimis Genève

Cover picture:
Football player with disability, as part of the Amputee Football Tanzania project in July 2018.
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MoveAbility is appealing for **CHF 6,405,073**
to cover the costs of its operations in 2019

Donors are encouraged to support this Appeal as a whole, without earmarking funds for specific countries. We would also appreciate early contributions, to help us plan effectively. Funds from donors are subject to our standard procedures for reporting, auditing and financial review.
The period 2016-2018 has been marked by the transformation of the former “ICRC Special Fund for the Disabled” into the ICRC MoveAbility Foundation. This has been much more than a change of name and visual identity: our objectives have changed, becoming much more ambitious. Our working processes have changed: articulated around our five General Objectives, our approach is based upon a rigorous, measurable, scalable methodology which can be applied in most low- and middle-income countries settings.

Concretely, and most importantly, in 2016-2018, 142,970 persons with disabilities benefited from our support through our partners. During these 3 years, we have expanded our network of partners, National Societies, Disabled Persons Organizations (DPO’s) and others. Our new name and visual identity have been warmly embraced by our donors and partners and our visibility has increased. The mission and focus of MoveAbility are much better known – and recognized. The national platform - or a national entity in charge of rehabilitation - has been or is being implemented in almost all the countries where we operate. And there is a rising interest in the issue of disability, as it was made clear during the July 2018 London Global Disability Summit.

There is still much to be done, and the demonstrated interest in the theme of disability has yet to be effectively addressed. The announcement of the launching of a global partnership on assistive technology in London (AT Scale and AT 2030) aiming at providing 500 million persons with appropriate assistive technology by 2030 is a positive and encouraging step forward. However, providing assistive products is not enough – a policy on physical rehabilitation as part of the public health system should exist at a national level. Proper training and education of professionals must be ensured. Improved access to quality services must be provided. And the service providers must improve their management capacities. However, there is clear and concrete progress which allows an increasing number of individuals to access quality rehabilitation services in countries such as El Salvador, Ecuador, Togo, Madagascar, and Viet Nam; only a handful of the countries where MoveAbility operates. These efforts must be sustained and accompanied.

It is in this regard that the Global Rehabilitation Alliance was created in 2018. Its aim is to serve as a powerful advocacy platform, uniting civil society and relevant stakeholders under a common vision and towards the implementation of World Health Organization’s (WHO) Rehabilitation 2030: A Call for Action. The Global Rehabilitation Alliance, chaired by MoveAbility’s executive director, is composed of professionals from the physical rehabilitation sector, condition-specific organizations, and field organizations, such as MoveAbility, Humanity and Inclusion and the ICRC.

More specifically, with regard to MoveAbility, we are developing new working tools, together with the WHO and other rehabilitation actors and professionals. Next year we would like to implement – in close cooperation with national authorities – the WHO Rehabilitation support package in different countries. This will allow a more targeted and context-specific systemic approach to be developed. The use of measurement indicators enables to assess both the needs and actions necessary for the implementation of a sustainable physical rehabilitation system. This evaluation will bring more clarity to the entry and exit criteria, and help us to expand our partnerships - in line with the development work.

We are confident that this is the way to increase in a sustainable way the number of beneficiaries and users in a functioning national public health system.

To implement this essential contribution to the Sustainable Development Goals, and in order to cover the costs of our operations in 2019 - we are appealing for CHF 6,405,073. It should be noted that the data and objectives of this report cover the period 2019-2021, except for the budget figures, which only refer to 2019.

Prof. Dr. Jürg Kesselring
Chairman
The ICRC MoveAbility Foundation
## OBJECTIVES AND PRIORITIES

### OBJECTIVE 1: WORK ON NATIONAL PLAN
The existence of a national plan including persons with disabilities is essential for a sustainable health system.

### OBJECTIVE 2: REINFORCE EDUCATION & TRAINING
Education is an essential prerequisite for the transmission of knowledge and skills and for ensuring the quality of products and services in the long term.

### CROSS-CUTTING ISSUE

**REHABILITATION AS THE FIRST STEP TOWARDS SOCIAL INCLUSION**

### KEY PRIORITIES 2019-2021

- Help establish and implement dynamic national platforms for physical rehabilitation in all the countries where we work.
- Assist in the implementation of an action plan and policies for the physical rehabilitation sector.
- Develop and disseminate innovative teaching techniques and up-to-date approaches.
- Ensure that professional schools are accredited by authorities.
- Provide support to the schools to help them develop their capacities to respond to educational needs.

### INDICATORS FOR SUCCESS

<table>
<thead>
<tr>
<th>PHYSICAL REHABILITATION ENTITY</th>
<th>QUALIFIED PROFESSIONALS EMPLOYED BY PARTNERS’ REHABILITATION CENTERS</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Existence of a national plan for physical rehabilitation</td>
<td>• Number of qualified physical rehabilitation specialists employed in the physical rehabilitation centers</td>
</tr>
<tr>
<td>• Percentage of the national health budget allocated to physical rehabilitation</td>
<td></td>
</tr>
<tr>
<td>• Number of full-time employees (FTE) working for the Ministry involved in the implementation of the national plan</td>
<td></td>
</tr>
</tbody>
</table>
OBJECTIVE 3: IMPROVE THE QUALITY OF SERVICES
Services and products meeting minimum quality standards are integral for the cost-effectiveness and sustainability of the measures

> Identify and improve the quality gaps in all the partners’ centers
> Help centers set up and use effective and sustainable assessment tools

OBJECTIVE 4: ENSURE ACCESS TO SERVICES
Vulnerable people with disabilities in low- and middle-income countries are often trapped in the vicious cycle of poverty. Ensuring the access to services for all persons with disabilities is fundamental for their social inclusion

> Increase access to services and devices for economically vulnerable people
> In cooperation with paralympic sports organizations and other groups, support the improvement of access to sports for athletes and people with disabilities

OBJECTIVE 5: BUILD MANAGEMENT CAPACITIES
The proper delegation of responsibilities in the management of rehabilitation activities requires the strengthening of specialized skills

> Organize training and coaching to improve the management capacities of key staff and stakeholders
> Sponsor participation to international congresses and facilitate exchanges
> Follow up on the implementation of the NGO benchmarking recommendations (SGS)

QUALITY OF SERVICES DELIVERED BY OUR PARTNERS
• Results of the quality assessment of prosthetic & orthotic services carried out using the technical assessment form
• Results of the interviews regarding the impact of satisfaction with services received

BENEFICIARIES’ STATISTICS
• Number and type of training sessions
• Number of people that received physical rehabilitation services and assistive devices
• Breakdown of services
• Breakdown of devices

MANAGEMENT CAPACITIES OF OUR PARTNERS
• Result of the management assessment (EMSAT, SGS, LEAN)
• Number of professionals who have received management training, by gender

1 Essential Management Systems Assessment Tool (EMSAT), Société Générale de Surveillance (SGS).

The core idea of LEAN is to maximize customer value while minimizing waste.
Rehabilitation is an essential part of health care, and **integral to achieving universal health coverage**. The needs are increasing globally, due to the growing prevalence of non-communicable diseases, road accidents and aging populations. National authorities must strengthen the health-care system to provide rehabilitation services so that they are available to everyone, at all levels of the health-care system, whenever needed. The accessibility of quality and affordable products and services is necessary to ensure that persons with disabilities can participate fully in society.

In 2017, the World Health Organization (WHO) issued “Rehabilitation 2030: A Call for Action”, which aims to draw the attention of public health authorities to the magnitude and scope of unmet rehabilitation requirements. The WHO underlines the urgent need for concerted and coordinated global action by all stakeholders. “The need for rehabilitation continues to grow worldwide, especially in low- and middle-income countries. The demand for rehabilitation services already exceeds availability, leaving a large unmet need."\(^1\)

To effectively meet these requirements, countries should conduct a needs assessment and response planning. The WHO has developed the rehabilitation support package in collaboration with different stakeholders, including MoveAbility. This package responds to the challenges faced by countries with practical guidance that seeks to strengthen rehabilitation leadership, planning, and integration across health systems. The support package has been developed according to a four-step process with corresponding tools. The first step is the needs assessment, which is done through the Standard Assessment of the Rehabilitation Sector (STAR) and the second step is the development of a rehabilitation strategic plan, the Guidance for Rehabilitation Strategic Planning (GRASP).

**MOVEABILITY AND THE WHO**

MoveAbility’s contribution to the WHO’s Call for Action is to focus on moving the Rehabilitation 2030 agenda forward, and to address the WHO global disability action plan 2014-2021: better health for all people with disability (resolution WHA 67.7). MoveAbility has supported the development of WHO tools and resources related to rehabilitation over the past three years through technical input, piloting tools, and attending relevant meetings as technical expert. MoveAbility also plays an important role in implementing related projects and providing technical advice.

Through its long-term presence and relationship in a number of low- and middle-income countries, MoveAbility develops its collaborations with government health authorities and works to ensure that the issue of rehabilitation remains high on the national agenda.

**MOVEABILITY, LOCAL GOVERNMENTS AND PARTNERS**

At MoveAbility, we provide tailor-made cooperation and context specific support to ministries of health in relation to the rehabilitation sector. We also seek to develop synergies with other organizations regarding other needs in physical rehabilitation, and potentially other type of services.

In the coming years, we will work to ensure that governments of the countries where MoveAbility is active are convinced of the added value of WHO rehabilitation support package. We will then carry out the STAR and the GRASP in collaboration with the WHO. In 2018, Haiti was the first country where MoveAbility carried out the Support Package in collaboration with Humanity and Inclusion\(^2\). This first assessment will serve as a basis for future projects; we believe that this type of collaboration and partnership is the key to success.

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\(^{1}\) According to the WHO: [http://www.who.int/disabilities/care/NeedToScaleUpRehab.pdf](http://www.who.int/disabilities/care/NeedToScaleUpRehab.pdf)

\(^{2}\) Formerly known as Handicap International
## FINANCIAL NEEDS FOR 2019

### WEST AFRICA 2019
- Benin: 382,546
- Côte D’Ivoire: 260,557
- Togo: 708,217

**Subtotal West Africa**: 1,351,320

### EAST AFRICA 2019
- Madagascar: 526,783
- Rwanda: 365,668
- Somalia: 740,256
- Tanzania: 418,232
- Zambia: 233,883

**Subtotal East Africa**: 2,284,822

### ASIA AND CENTRAL ASIA 2019
- Vietnam: 745,158
- Tajikistan: 393,684

**Subtotal Asia**: 1,138,842

### LATIN AMERICA 2019
- Ecuador: 501,704
- El Salvador: 505,398
- Haiti: 211,820
- Nicaragua: 411,167

**Subtotal Latin America**: 1,630,089

### Core Budget

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Material &amp; financial assistance</td>
<td>2,951,164</td>
</tr>
<tr>
<td>Tuition &amp; staff related costs</td>
<td>2,425,806</td>
</tr>
<tr>
<td>Total premises, equipment, general supplies, audit</td>
<td>415,058</td>
</tr>
<tr>
<td>Total transport of material</td>
<td>1,770</td>
</tr>
<tr>
<td>Total operational program support, financial management &amp; headquarters</td>
<td>611,275</td>
</tr>
</tbody>
</table>

**Total Core Budget**: 6,405,073

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1 The budget is indicative and is subject to income received.
GLOBAL IMPACT IN 2019

SHARING EXPERIENCE TO PROGRESS

Félicienne Houmagon Zanou was interviewed at her home by the Red Cross of Benin about the services and products she had received.

Learn more about the interviews of beneficiaries in the Benin factsheet.

A REHABILITATION CENTER MOVING FORWARD

Sonia Montes is one of those patients who following a tragic accident was treated by ISRI with her daughter Elizabeth.

Read Sonia’s story in El Salvador factsheet.

1 Estimated figures
THE UNSTOPPABLE MAN
There are people, like Marcel Nkurayija, who cannot be stopped. Married and father of two children, he is an active member of the community and a strong advocate for the rights of persons with disabilities.
Find out Marcel’s extraordinary path in the Rwanda factsheet

THE MARKS OF WAR
“I no longer feel excluded because of my disability”, proudly said Sadafmo Rahmatova. After losing her leg on a landmine, she fought to continue to care for her son.
Discover the story of this courageous woman in the Tajikistan factsheet

JUMPING KIDS
Abdul and Musa, two boys from Dar Es Salaam in Tanzania, took part in a pilot prosthetic training program in South Africa called “Jumping Kids”.
Find out what the program is about in the Tanzania factsheet
EL SALVADOR,
STRENGTH COMES FROM UNITY

According to the El Salvador Landmine Monitor Report of 2008, **70,000 individuals were killed** in El Salvador’s twelve-year (1980-1992) armed conflict and another **300,000 persons were left with disabilities**. Post-conflict El Salvador also faced social crises including continued violence and widespread unemployment. Following the civil war, natural disasters deeply affected the country’s recovery: hurricane Mitch (1998) claimed the lives of 2401 persons and was followed by two massive and devastating earthquakes in January and February 2001 that left nearly 2,000 people dead or missing, more than 8,000 injured and 1.5 million homeless.

It is in this difficult context that MoveAbility (at the time the Special Fund for the Disabled) began its activities in El Salvador in 1998. The first collaboration was with the Universidad Don Bosco (UDB), founded in 1984, which is still one of the most prestigious academic institutions in the country today. It is also the only one to offer such a wide range of training in technical fields, including ortho-prosthetics, which is recognized by the International Society for Prosthetics and Orthotics (ISPO). Initially, the collaboration with UDB was done through scholarships granted to Prosthesists and Orthotists students who wanted to study there and through material and technical support. Over time, UDB has become a key partner on the ground and its network of collaboration has expanded to many other Latin American countries.

In 2007, after El Salvador signed the UN Convention on the Rights of Persons with Disabilities (CRPD), MoveAbility’s work expanded and new partnerships with actors in the field were built. From 2010, MoveAbility began working with the rehabilitation center in Santa Ana, the country’s second largest city, to strengthen its technical and managerial skills. In 2014, collaboration began with the Instituto Salvadoreño de Rehabilitación Integral (ISRI), a specialized institution that provides care to persons with disabilities. Important discussions started to take place with the Ministry of Health (MOH) and the Consejo Nacional de Atención Integral a la Persona con Discapacidad around the thematic of rehabilitation policies and how to strengthen the sector.

10 years after the signing of the CRPD, El Salvador has made great progress not only in the field of rights but also in increasing the visibility of persons with disabilities. In April 2017, a first regional forum on the theme of persons with disabilities was held in Quito. Over three days, representatives from Ecuador, Nicaragua and El Salvador met to discuss and exchange on best practices and experiences to promote the rights of persons with disabilities.

The Ecuadorian First Lady, Ms. Rocío González de Moreno, who is deeply committed to the cause, gave the opening speech. She underlined the importance of cooperation mechanisms to implement relevant actions towards persons with disabilities. She also highlighted the great symbolic value of this forum to raise awareness in Latin America.

In December, MoveAbility and the ISRI organized the third edition of the international congress “Perspectiva Integral de la Discapacidad”, which gathered more than 300 people, representing local and international NGOs, and providers of physical rehabilitation services in Ecuador, Guatemala, Peru and Nicaragua; they discussed advances in national policies for persons with disabilities, and other related matters.

In the coming years, we will continue working with El Salvador, particularly by supporting national authorities to implement policies in the field of physical rehabilitation. Collaborations with partners in the field will also be strengthened and extended. It is indeed essential to work with them to best meet the needs of persons with disabilities in El Salvador.
ISRI, A REHABILITATION CENTER MOVING FORWARD

The lack of a specialized institution to care for people with disabilities led a group of citizens to create the Instituto Salvadoreño de Rehabilitación Integral (ISRI) on November 25, 1957. With the mission of providing medical care to people in need of admission to hospitals, in addition to helping people with cerebral palsy who, due to their lack of resources, could not afford to go to hospitals.

Thousands of patients pass through the ISRI every year to receive quality and affordable care. Since 2014, after the signature of a cooperation agreement, it is one of the most important partners of MoveAbility in El Salvador. These four years of collaboration have enabled ISRI to significantly improve the quality of its products and services, but also its management skills.

In April 2018, a new step was taken with the first stone ceremony, in which Thierry Regenass, the executive director of MoveAbility participated, for the future prosthetic/orthotic unit being built in ISRI’s satellite center in Santa Ana. This new unit will be a real improvement for the patients of the city, who will no longer have to travel to the capital to get assistive devices.

Sonia Montes is one of ISRI’s patients. Her tragic accident led her to ISRI, where she was treated with her daughter Elizabeth. One evening, as they were driving home from a family reunion, the vehicle went off the road and rolled over. Sonia and her daughter barely made it out, but they had to undergo amputations. Her daughter lost her left arm and right leg, and she lost her right forearm. “I will never forget that day and the image of my daughter lying on the road,” she remembers with emotion.

“It is when you hear stories like Sonia’s that you remember the importance of having rehabilitation centers like ISRI to care for patients who don’t have enough financial resources,” says the Director of ISRI, Dr. Alex Gonzalez. He is glad about the positive evolution of the center in recent years and the fruitful collaboration with partners such as MoveAbility. “We thank MoveAbility for supporting our projects and I am pretty sure that we will continue to do more and work better for people with disabilities in El Salvador,” said Dr. Gonzalez.

By the end of the reporting period covered by this document, in 2021, we aim to have contributed to the following objectives:

### NATIONAL PLAN
- The national platform – with a validated plan of action – is autonomous and meets regularly; the national platform and the authorities work towards the further development of the rehabilitation sector in Benin, including through the implementation of the WHO Rehabilitation Support Package
- The government has finalized and validated a strategic plan for improving the rehabilitation sector by 2021
- In 2020, the World Confederation for Physical Therapy Africa Congress is successfully held in Cotonou, bringing together a broad audience of international and regional professionals

### EDUCATION AND TRAINING
- People working in the field of physical rehabilitation – such as prosthetists, orthotists, and physiotherapists – continue to undertake further education and training to hone their skills, and the pool of qualified professionals is broadened by the end of the reporting period

### QUALITY OF SERVICES
- The Ecole Supérieure de Kinésithérapie has improved its management, and is able to carry out assessment on the rehabilitation sector
- Both the Centre National Hospitalier Universitaire (CNHU) and the Service de Kinésithérapie et d’Appareillage Orthopédique (SKAO) regularly share data on rehabilitation activities with the Ministry of Health (MOH)
- Stakeholders in the physical rehabilitation sector – especially professional associations of prosthetists/orthotists and physiotherapists and also organizations of disabled persons – develop their capacities to carry out their projects

### ACCESS TO SERVICES
- Economically vulnerable people receiving treatment at Calavi’s supported centers access good quality services for free

### MANAGEMENT CAPACITIES
- At CNHU and SKAO, tools for ensuring the quality of services (e.g. EMSAT, BFTA, PTS) and management tools (e.g. PMS, Stock Management) are implemented
- The MOH is able to effectively monitor its activities and analyzes its data

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1 The budget is indicative and is subject to income received.
OBJECTIVES AND EXPECTED IMPACT FOR 2019-2021

By the end of the reporting period covered by this document, in 2021, we aim to have contributed to the following objectives:

**NATIONAL PLAN**
- The national platform – created by the authorities and with a validated plan of action – is autonomous and meets regularly.
- Following the implementation of the WHO rehabilitation support package the MOH takes appropriate steps to strengthen its efforts and policies in physical rehabilitation.
- The government has finalized and validated a five-year national rehabilitation strategic plan – aligned with the WHO rehabilitation 2030 strategy.

**EDUCATION AND TRAINING**
- Prosthetic and orthotic personnel from Centre de réadaptation physique Vivre Debout (VDE) complete a three-year training course.
- Professional associations of physiotherapists and of prosthetists/orthotists are accredited and financially autonomous; their members have access to opportunities to hone their skills.

**QUALITY OF SERVICES**
- VDE enforces a multidisciplinary approach to providing services and is able to monitor its progress in improving the quality of such services.
- VDE trains people working in the field of physical rehabilitation to provide good-quality services, particularly to vulnerable persons with physical disabilities.

**ACCESS TO SERVICES**
- Vulnerable people with physical disabilities gain or maintain access to treatment and assistive devices at VDE, with help from local stakeholders.

**MANAGEMENT CAPACITIES**
- At VDE, tools for ensuring the quality of services (e.g. EMSAT, BFTA, PTS and PTTA) and effective management (e.g. cost calculation, PMS, stock management) are rolled out by 2019.
- The MOH is involved in the use and analysis of quality and management tools.

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OBJECTIVES AND EXPECTED IMPACT FOR 2019-2021

By the end of the reporting period covered by this document, in 2021, we aim to have contributed to the following objectives:

**NATIONAL PLAN**

> After the completion of the WHO country evaluation support package, the authorities develop and implement the national rehabilitation strategy by the end of 2021
> A national platform for physical rehabilitation, led by the MOH and composed of representatives from different stakeholders in the physical rehabilitation sector, is established and develops a national implementation plan for rehabilitation service provision

**EDUCATION AND TRAINING**

> The prosthetics and orthotics school strengthens its academic and technical education – in line with a plan of action developed with the Institut Supérieur Technologique de Montplaisir (ISTM) – by 2020 and works towards ISPO certification
> The schools’ workshop is renovated and equipped, to provide better training capacities, by 2021

**QUALITY OF SERVICES**

> Rehabilitation professionals at three rehabilitation centers take steps to improve the quality of their services following training – held by the end of 2020 – in the interdisciplinary approach and other specialized skills
> Staff in Centre Hospitalier Universitaire d’Appareillage de Madagascar (CHUAM), Centre de Rééducation Motrice de Madagascar (CRMM) and Service d’Appareillage et Rehabilitation (SAR) Mahajanga are capable to use technical assessment tools; all three centers are able to procure raw materials and components for assistive devices
> The Platform des Fédérations des Associations des Personnes Handicapées de Madagascar implements tools to evaluate user satisfaction and gather feedback

**ACCESS TO SERVICES**

> Disabled Peoples’Organizations increasingly identify and refer persons with disabilities from remote regions to MoveAbility-supported centers
> The MOH, with MoveAbility, develops and puts in place a mechanism to assist financially vulnerable persons with disabilities in accessing services and obtaining assistive devices
> The number of regional teams participating in wheelchair basketball events increases

**MANAGEMENT CAPACITIES**

> The MOH, CHUAM and CRMM have strong management capacities, following collaboration with ICRC Program for Humanitarian Impact Investment (PHII) efficiency improvement project

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OBJECTIVES AND EXPECTED IMPACT FOR 2019-2021

By the end of the reporting period covered by this document, in 2021, we aim to have contributed to the following objectives:

**NATIONAL PLAN**
- The national platform chaired by the MOH and composed of members of the rehabilitation sector, and other pertinent stakeholders promotes and manages the rehabilitation sector and its activities in the country
- The national authorities have adopted a plan of action with appropriate budget and human resources allocated for improving the rehabilitation sector by 2021
- A national database with statistics on rehabilitation services and needs are published and analyzed by the national authorities

**EDUCATION AND TRAINING**
- Physical rehabilitation professionals hone their skills and further their education, and students build on their knowledge of physical rehabilitation services
- Schools for physical rehabilitation use innovative and updated teaching approaches, attract students from overseas and receive accreditation from national authorities and international organizations
- The training facilities of University of Rwanda’s College of Medicine and Health Sciences (UR-CMHS) accommodate prosthetic trainees following the renovation of its campus

**QUALITY OF SERVICES**
- The Centre Hospitalier Universitaire de Kigali (CHUK) provides quality services to persons with disabilities, establishing itself as a model service provider; it is evaluated based on client satisfaction data obtained from interviews and group discussions
- Through quality assessment tools, physical rehabilitation providers are evaluated and key training gaps are identified by 2019. They are able to address these gaps with appropriate technical and clinical support

**ACCESS TO SERVICES**
- Through partnerships with relevant stakeholders, vulnerable persons with disabilities have access to physical rehabilitation services and receive financial support from MoveAbility
- Persons with disabilities are able to participate in sports and recreational activities developed by the National Paralympic Committee, in coordination with MoveAbility

**MANAGEMENT CAPACITIES**
- The CHUK and National Council of Persons with Disabilities (NCPD) staff improve their ability to manage rehabilitation centres through training on the Essential Management Package (EMP)
- Staff from MoveAbility-supported centers and schools are able to attend international conferences

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OBJECTIVES AND EXPECTED IMPACT FOR 2019-2021

By the end of the reporting period covered by this document, in 2021, we aim to have contributed to the following objectives:

**NATIONAL PLAN**
- National authorities analyze and, together with the National Society, publish verified nationwide statistics of rehabilitation services and needs in a centralized database
- An official national registry for health professionals includes the professions of orthotists, prosthetists, physical therapists, occupational therapists and speech therapist

**EDUCATION AND TRAINING**
- People working in the physical rehabilitation sector – such as physiotherapists, orthopedic technicians and other professionals – undertake further education and training to enhance their skills
- Students have access to scholarships that will allow them to build on their knowledge of physical rehabilitation services, enabling them to pursue careers in the field; a sustainable pool of professionals is established

**QUALITY OF SERVICES**
- Staff of Somali Disability Empowerment Network use the Essential Management Systems Assessment Tool (EMSAT) to enable them to provide an assessment of the three Somali Red Crescent Society (SRCS) physical rehabilitation centers
- The three SRCS centers carry out a self-assessment of the quality of their service provision based on client satisfaction data from a third of its service users. By 2020, these centers are implementing an action plan developed through the application of the EMSAT and analysis of low scoring systems.

**ACCESS TO SERVICES**
- MoveAbility continues working with the SRCS and Norwegian Red Cross (NorCross), and partners with new organizations such as MiracleFeet and Motivation, to broaden the availability of physical rehabilitation services for those in need
- Persons with disabilities are able to participate in sports and recreational activities through the cooperation of the SRCS center in Mogadishu with the Somalian Paralympic Committee

**MANAGEMENT CAPACITIES**
- Staff from the three SRCS centres improve their ability to manage rehabilitation centres through training on the EMSAT. The Somali Disability Empowerment Network (SODEN) develop their capacity to carry out external management evaluations

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1 The budget is indicative and is subject to income received.
OBJECTIVES AND EXPECTED IMPACT FOR 2019-2021

By the end of the reporting period covered by this document, in 2021, we aim to have contributed to the following objectives:

**NATIONAL PLAN**
- By the end of 2019, a plan of action with a framework for monitoring and evaluation is developed by the national platform to implement the rehabilitation strategy adopted in 2018.

**EDUCATION AND TRAINING**
- Professionals working in the rehabilitation sector – prosthetists, orthotists, and physiotherapists – enhance their skills with MoveAbility’s support; students continue their education in physical rehabilitation on MoveAbility scholarships.
- Training Center for Orthopedic Technologists (TATCOT) applies innovative teaching approaches and maintains their accreditation with national authorities and international organizations.

**QUALITY OF SERVICES**
- Physical rehabilitation centers are able to regularly assess the quality of their services, through user group discussions and client satisfaction interviews.
- The user feedback process becomes a practice standard leading to the development of a national guideline for rehabilitation.

**ACCESS TO SERVICES**
- Persons with physical disabilities take part in events held by the Tanzania Paralympic Committee to foster social inclusion through sports.
- Particularly vulnerable persons with physical disabilities have access to financial support.

**MANAGEMENT CAPACITIES**
- Staff from centers supported by MoveAbility improve their management capacities, and their ability to assess their performance, by applying training on the appropriate tools (e.g. Beneficiary Feedback and Technical Assessment, EMP).
- The Comprehensive Community Based Rehabilitation in Tanzania (CCBRT) authorities apply principles of LEAN management to improve their systems.

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1 The budget is indicative and is subject to income received.
OBJECTIVES AND EXPECTED IMPACT FOR 2019-2021

By the end of the reporting period covered by this document, in 2021, we aim to have contributed to the following objectives:

**NATIONAL PLAN**
- The national platform establishes and updates its plans of action and priorities on a yearly basis; these priorities include issues such as the establishment of universal health care and the inclusion of costs of physical rehabilitation services for economically vulnerable people under its coverage.
- A country assessment is carried out with the World Health Organization by 2020. Based on the findings, the Ministry of Health adopts a plan of action aligned with an amended national strategic plan.
- The Ministry of Health coordinates effectively national rehabilitation services.

**EDUCATION AND TRAINING**
- The École Nationale des Auxiliaires Médicaux (ENAM), from 2020 onwards, is able to cover its costs for materials and components and retains its International Society for Prosthetics and Orthotics (ISPO) accreditation. The level of teachers at the institution are upgraded according to the License Master Doctorat (LMD) system.

**QUALITY OF SERVICES**
- The Centre National d’Appareillage Orthopédique (CNAO) and the ENAM have bolstered their capacities to provide technical support and training, respectively. The CNAO is a center of reference for technical expertise within the region, and the ENAM improves its ability to supervise and oversee quality control of rehabilitation services.

**ACCESS TO SERVICES**
- NGOs which aim to broaden the accessibility of rehabilitation services, and foster inclusion for persons with disabilities (e.g. CRAO, Humanity and Inclusion, associations of professionals in the sector) broaden their activities with the help of increased cooperation and/or support from MoveAbility.

**MANAGEMENT CAPACITIES**
- The CNAO, and other centers, have implemented standard management tools for monitoring and ensuring the quality of their services, beginning 2019.
- With MoveAbility’s support, the CNAO completes the implementation of the ICRC Program for Humanitarian Impact Investment (PHII) in 2020.

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1 The budget is indicative and is subject to income received.
OBJECTIVES AND EXPECTED IMPACT FOR 2019-2021

By the end of the reporting period covered by this document, in 2021, we aim to have contributed to the following objectives:

**NATIONAL PLAN**
- A national rehabilitation platform – composed of various local stakeholders – is established and recognized by the authorities, by 2019
- The platform works to further develop the physical rehabilitation sector, through the implementation of WHO Rehabilitation Support package, and develops a strategic plan for rehabilitation by 2020

**EDUCATION AND TRAINING**
- People working in the physical rehabilitation sector such as prosthetists and orthotists develop their capacities to provide good-quality services; those aspiring to work in the sector pursue physical rehabilitation studies

**QUALITY OF SERVICES**
- By 2019, tools for measuring the quality of services, such as beneficiary-feedback sessions, are rolled out in three centers; the University Teaching Hospital (UTH) takes into account the assessments made of its services while planning for its annual activities
- Physical rehabilitation centers deliver good-quality services, and adopt a multidisciplinary approach in the provision of their services

**ACCESS TO SERVICES**
- The Zambia Agency for Persons with Disabilities (ZAPD) and the Zambian Red Cross Society identify and refer persons with disabilities in need of treatment
- The Zambian Paralympic Committee is reactivated and registered with the appropriate sports federations and associations

**MANAGEMENT CAPACITIES**
- Key senior staff at the UTH and other physical rehabilitation centers hone their leadership skills through the Essential Management Package (EMP) training presented by Management Sciences for Health

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1 The budget is indicative and is subject to income received.
OBJECTIVES AND EXPECTED IMPACT FOR 2019-2021

By the end of the reporting period covered by this document, in 2021, we aim to have contributed to the following objectives:

**NATIONAL PLAN**
- The national authorities work towards enacting policies that make assistive devices more available and accessible to people with physical disabilities
- Prosthetists and orthotists are included in the national organization for physical rehabilitation professionals

**EDUCATION AND TRAINING**
- Students on MoveAbility scholarships complete their physical rehabilitation studies by 2020; professionals in the sector – those working in schools or centers – hone their skills further
- Physical rehabilitation schools are accredited by the national authorities and international organizations

**QUALITY OF SERVICES**
- The national authorities adopt quality-control criteria that adhere to international standards
- Local service providers provide good-quality physical rehabilitation services

**ACCESS TO SERVICES**
- Vulnerable people with physical disabilities have their treatment costs covered by state health insurance
- Referral mechanisms with the Vietnamese Red Cross and Disabled People’s Organizations (DPOs) are strengthened – broadening access for people with physical disabilities to the appropriate services
- The national study on the gaps in the supply of mobility devices and on the existing needs of people with physical disabilities and services available to them in Viet Nam is finalized

**MANAGEMENT CAPACITIES**
- Management procedures, organizational structures and functions of physical rehabilitation facilities are regulated by the national authorities for more efficient service-delivery
- Managers and key staff of physical rehabilitation centers benefit from training and organizational support; tools for leadership development (e.g. Essential Management Systems Assessment Tool (EMSAT)) are implemented at training centers or facilities

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1 The budget is indicative and is subject to income received.
TAJIKISTAN

BUDGET 2019
CHF 393,684

OBJECTIVES AND EXPECTED IMPACT FOR 2019-2021
By the end of the reporting period covered by this document, in 2021, we aim to have contributed to the following objectives:

NATIONAL PLAN
> A national platform for rehabilitation, comprising representatives from different stakeholders, is established; an entity within the relevant ministry acts as a point person for the sector at national level
> The authorities, in dialogue with other concerned parties and with support from MoveAbility, take steps to establish a national salary scale which includes professionals in the physical rehabilitation sector, and to gather, publish and analyze data on the sector

EDUCATION AND TRAINING
> Professionals working in the rehabilitation sector – prosthetists, orthotists, and physiotherapists – bolster their skills with MoveAbility’s support

QUALITY OF SERVICES
> MoveAbility’s partners in Tajikistan, particularly the State Enterprise Orthopedic Plants (SEOP), are able to regularly assess the quality of their services
> Physical rehabilitation services, particularly those provided through SEOP, are coordinated by the Ministry of Health and Social Protection of the Population (MOHSP) and monitored with the support from service user representative and enhanced through the application of new initiatives (e.g. telemedicine)

ACCESS TO SERVICES
> The SEOP procures all raw materials it needs in the provision of physical rehabilitation services, with MoveAbility’s support
> Organizations working in the physical rehabilitation sector in Tajikistan, such as the Red Crescent Society of Tajikistan, take steps to improve access to services and raise awareness of the issues facing persons with physical disabilities
> Persons with physical disabilities participate in sport events held by disabled people organizations aimed at fostering inclusion through sports

MANAGEMENT CAPACITIES
> The MOHSP is able to routinely monitor its activities, using the Essential Management Service Assessment tool (EMSAT)
> Staff from MoveAbility-supported centers improve their management capacities, and their ability to measure their performance, by applying training on the appropriate tools (e.g. EMP, EMSAT)

1 The budget is indicative and is subject to income received.
OBJECTIVES AND EXPECTED IMPACT FOR 2019-2021

By the end of the reporting period covered by this document, in 2021, we aim to have contributed to the following objectives:

**NATIONAL PLAN**
- The national physical rehabilitation platform — led by the Ministry of Public Health (MOPH) and composed of different professionals — is active and meets regularly; a national plan on the rehabilitation sector is created
- Through the efforts of Consejo Nacional de Discapacidades (CONADIS), national authorities of Ecuador and other countries in the region learn from each other’s insights and experiences in creating and implementing national disability policies

**EDUCATION AND TRAINING**
- People working in the physical rehabilitation sector — doctors, prosthetists, orthotists, administrative staff and other professionals — further develop their capacities to provide good-quality services
- The Hermano Miguel Foundation (FMH) is able provide opportunities for physical rehabilitation professionals to hone their skills

**QUALITY OF SERVICES**
- The FHM and physical rehabilitation centers run by the MOPH incorporate a multidisciplinary approach to physical rehabilitation and implement our recommendations to improve their services
- The centers run by the MOPH assess and address gaps in their service-delivery with quality-control tools. By 2020, with the Ecuadorian Red Cross Society and other entities, we begin to work towards conducting patient-satisfaction surveys at facilities

**ACCESS TO SERVICES**
- Persons with disabilities — particularly those who can’t afford to pay for services — are able to access free, good-quality services at the FHM
- Physical rehabilitation centers under the MOPH improve their services and production capacities with donations of raw materials

**MANAGEMENT CAPACITIES**
- Administrative and management tools are developed and standardized for physical rehabilitation centers under the MOPH; management staff have improved capacities
- MoveAbility’s partner organizations in the region are able to develop their organizational capacities, guided by best practices of the FHM

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1 The budget is indicative and is subject to income received.
OBJECTIVES AND EXPECTED IMPACT FOR 2019-2021

By the end of the reporting period covered by this document, in 2021, we aim to have contributed to the following objectives:

**NATIONAL PLAN**
> The physical rehabilitation entity meets regularly and coordinates physical rehabilitation activities including training, and quality of access to services
> The Consejo Nacional de Atención Integral a la Persona con Discapacidad (CONAIPD) regularly participates in exchanges of information with the authorities of other countries in the region, particularly on national policies concerning physical rehabilitation and the International Classification of Functioning, Disability and Health (ICF) of the WHO.

**EDUCATION AND TRAINING**
> The Universidad de El Salvador (UES) and the University Don Bosco Prosthetics and Orthotics School (UDB), and the Instituto Politécnico de la Salud “Luis Felipe Moncada” of the National Autonomous University of Nicaragua (UNAN-POLISAL), collaborate closely (e.g. exchange best practices, implement short courses for exchange of knowledge)
> The Instituto Salvadoreño de Rehabilitación Integral (ISRI) improves its facilities for clinical placements, enhancing the learning environment of its students, and diversifies its locations for students’ placements to include opportunities outside El Salvador

**QUALITY OF SERVICES**
> Centers take steps to improve their services
> In collaboration with the UDB and the Salvadorean Red Cross Society, the satisfaction of patients and the quality of services at ISRI are assessed (e.g. through beneficiary interviews, technical assessments)
> A database for the physical rehabilitation centers’ records is deployed for all service providers in El Salvador

**ACCESS TO SERVICES**
> Service providers under the authority of the MOPH are able to meet their needs for raw materials and components, and issues of public funding for their activities are discussed by the national physical rehabilitation entity
> The prosthetics and orthotics unit of Centro para la Rehabilitación Integral del Occidente (CRIÖ) San Miguel is rebuilt, enabling them to improve the quality of their work
> Cerebral palsy patients who are part of Los Angelitos – a Disabled Peoples’ Organization – obtain physical rehabilitation services and prosthetic/orthotic devices at the UDB
> Athletes with disabilities receive specialized prosthetics/orthotics from UDB, allowing them to participate in competitions and other activities which foster the inclusion of persons with disabilities through sports

**MANAGEMENT CAPACITIES**
> MoveAbility’s partners in El Salvador, particularly managers and key senior staff, reinforce their capacities
> The UDB benefits from an assessment to improve its management of its facilities

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OBJECTIVES AND EXPECTED IMPACT FOR 2019-2021

By the end of the reporting period covered by this document, in 2021, we aim to have contributed to the following objectives:

**NATIONAL PLAN**
- A national platform is created under the authority of the MOH; it works towards developing the physical rehabilitation sector, including the implementation of the WHO Rehabilitation Support Package
- The government has adopted a strategic plan, with appropriate budget and human resources, improving the rehabilitation sector
- The physical rehabilitation sector in the country is strengthened through MoveAbility’s collaboration with other actors, such as Humanity and Inclusion (HI)

**EDUCATION AND TRAINING**
- Physical rehabilitation professionals, including Healing Hands for Haiti Foundation (HHH) staff, further hone their knowledge and skills through training sessions organized by MoveAbility and the University Don Bosco Prosthetics and Orthotics School (UDB)

**QUALITY OF SERVICES**
- HHH is able to adapt the cost of its services in order to be affordable for people with low income; it has developed its network and obtained additional financial backing
- Providers of physical rehabilitation services regularly share data with MoveAbility, enabling the monitoring of the quality of their services
- The assessment of physical rehabilitation providers is carried out by the UDB in 2019; subsequent assessments are implemented with the cooperation of local organizations in Haiti
- The HHH implements the recommendations of Société Générale de Surveillance (SGS), based on its 2017 benchmarking audit, with financial support from MoveAbility and implementation is likewise assessed by SGS in before the end of 2021

**ACCESS TO SERVICES**
- Vulnerable people receiving treatment at HHH, especially those who lack financial means, are able to obtain good-quality services

**MANAGEMENT CAPACITIES**
- A patient management system developed by MoveAbility and Fundación Hermano Miguel (FHM) is implemented, strengthening the internal processes and management of HHH. HHH staff follow training about this patient management system through courses delivered by FHM in 2019. Some representatives of the Bon Repos Rehabilitation Center are also invited to participate

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1 The budget is indicative and is subject to income received.
OBJECTIVES AND EXPECTED IMPACT FOR 2019-2021

By the end of the reporting period covered by this document, in 2021, we aim to have contributed to the following objectives:

**NATIONAL PLAN**
> The MOH, including the physical rehabilitation entity under its authority and its program Todos con Voz, continue their work with some support from MoveAbility; they participate in exchanges or forums with practitioners in other Latin American countries
> New procedures and/or tools related to the registration and certification of persons with disabilities are ready for implementation by the MOH

**EDUCATION AND TRAINING**
> Service providers in the physical rehabilitation sector in Nicaragua – including technicians working to obtain diplomas recognized by the International Society for Prosthetics and Orthotics (ISPO), and professionals working under the MOH – bolster their capacities
> The National Autonomous University of Nicaragua (UNAN) improves its capacities to manage physiotherapy training, and revises its curriculum

**QUALITY OF SERVICES**
> Centers supported by MoveAbility are able to offer improved services, following field visits (e.g. of MoveAbility’s physiotherapy adviser, prosthetics/orthotics teachers from the University Don Bosco Prosthetics and Orthotics School (UDB), Centro Nacional de Producción de Ayudas Técnicas y Elementos Ortoprotésicos (CENAPRORTO)) and hands-on professional practice
> During 2019, MoveAbility, with the Nicaraguan Red Cross (NRC) and Instituto Politécnico de la Salud “Luis Felipe Moncada” (UNAN-POLISAL), assesses beneficiaries’ satisfaction and rehabilitation center’s service quality

**ACCESS TO SERVICES**
> Centers run by the MOH (e.g. rehabilitation centers, CENAPRORTO and its satellite centers) are able to purchase raw materials and components needed to provide good-quality services
> In 2019, economically vulnerable persons with disabilities, including children are able to receive services from Fundación para la Rehabilitacion Walking Unidos (FURWUS) subsidized by MoveAbility

**MANAGEMENT CAPACITIES**
> MoveAbility partner organizations improve their capacities, thanks to a program implemented by Moveability in collaboration with the Hermano Miguel Foundation (FMH), in 2019
> The authorities use a national database (for statistics on physical rehabilitation service patients, and implement this database in all their centers)

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1 The budget is indicative and is subject to income received.
FIELD PARTNERS

AFRICA

BENIN
- Association Beninoise des Kinesitherapeutes (ABEKIR)
- Orthoprothésistes et Professionnels de l’Appareillage Orthopédique du Bénin (AOPB)
- Centre d’Appareillage Orthopédique (CAO) du Centre National Hospitalier Universitaire (CNHU), Cotonou
- Centre Médico-Social Sainte Elisabeth de la Trinité (referred to as Calavi)
- École Supérieure de Kinésithérapie (ESK)
- Ministry of Health (MOH)
- Service de Kinésithérapie et d’Appareillage Orthopédique (SKAO), Parakou

CÔTE D’IVOIRE
- Confédération des Organisations des Personnes Handicapées de la Côte d’Ivoire (COPHCI)
- Ministry of Health (MOH) & Ministry of Social Welfare and Development (MOSW)
- Prosthetist & Orthotist and physiotherapist Associations
- Centre de réadaptation physique Vivre Debout (VDE), Abidjan

MADAGASCAR
- Centre Hospitalier Universitaire d’Appareillage de Madagascar (CHUAM)
- Centre de Rééducation Motrice de Madagascar (CRMM)
- Ministry of Public Health, Madagascar
- Ministry of Population, Social Protection and Women’s Promotion
- Service d’Appareillage et Rehabilitation (SAR) Mahajanga

RWANDA
- Centre Hospitalier Universitaire de Kigali (CHUK), Kigali
- Ministry of Education
- Ministry of Health
- National Paralympic Committee (NPC)
- University of Rwanda’s College of Medicine and Health Sciences (UR-CMHS), Kigali

SOMALIA
- Norwegian Red Cross (NorCross)
- Somali Red Crescent Society (SRCS)
- SRCS Rehabilitation and Orthopedic Center, Hargeisa
- SRCS Rehabilitation and Orthopedic Center, Galkayo
- SRCS Rehabilitation and Orthopedic Center, Mogadishu

TANZANIA
- Comprehensive Community Based Rehabilitation in Tanzania (CCBRT), Dar es Salaam
- Ministry of Health, Community Development, Gender, Elderly and Children (MOHCDGEC)
- Tanzania Paralympic Committee (TPC)
- Training Center for Orthopedic Technologists (TATCOT), Moshi
- Tanzania Federation of Disabled People’s Organisations (SHIVYAWATA)
- Tanzania Red Cross National Society

TOGO
- Centre National d’Appareillage Orthopédique (CNAO)
- Centre Régional d’Appareillage Orthopédique de Kara (CRAO-Kara)
- École Nationale des Auxiliaires Médicaux, Lomé (ENAM)
- Fédération Africaine des Techniciens Orthoprothésistes (FATO)
- Fédération Togolaise des Associations de Personnes Handicapées (FETAPH)
- Fédération Togolaise de Sports Paralympiques (FETOSPA)
- Ministry of Health
- Organisation Africaine pour le Développement des Centres pour Personnes Handicapées (OADCPH)
- The Togolese Associations of Physiotherapists (AKITO) and Prosthetist & Orthotists (ASTOP)
- The Togolese Red Cross

ZAMBIA
- Ministry of Health (MOH)
- The University Teaching Hospital (UTH)
- Zambia Federation of Disability Organizations (ZAFOD)
- Zambia Agency for Persons with Disabilities (ZAPD)

1 The partners listed above are those with whom we have a Memorandum of Understanding or another formal agreement.
ASIA

VIET NAM
- Action to the Community Development Center (ACDC)
- Can Tho Orthopaedic & Rehabilitation Center
- Can Tho Association of People with Disabilities (CAPD)
- Danang Orthopaedic & Rehabilitation Hospital
- Danang Disabled People Organisation (Danang DPO)
- Disability Research & Capacity Development (DRD), Ho Chi Minh
- Ho Chi Minh Rehabilitation Center, Ho Chi Minh City
- Ministry of Health (MOH)
- Ministry of Labour, Invalids, and Social Affairs (MOLISA)
- Quy Nhơn Orthopaedic & Rehabilitation Center
- Vietnamese Training Center for Orthopedic Technology (VIETCOT), Hanoi

CENTRAL ASIA

TAJIKISTAN
- Ministry of Health and Social Protection of the Population (MOHSPP)
- IMKONIYAT, Dushanbe
- State Enterprise Orthopedic Plants (SEOP), Dushanbe
- State Enterprise Orthopedic Plants (SEOP), Khujand
- Red Crescent Society of Tajikistan

LATIN AMERICA

ECUADOR
- Consejo Nacional de Discapacidades (CONADIS)
- Hermano Miguel Foundation (FMH), Quito

EL SALVADOR
- Centro para la Rehabilitación Integral del Occidente (CRIIO)
- Consejo Nacional de Atención Integral a la Persona con Discapacidad (CONAIIPD)
- Instituto Salvadoreño de Rehabilitación Integral (ISRI), San Salvador
- Ministry of Public Health (MOPH)
- Universidad de El Salvador (UES)
- University Don Bosco Prosthetics and Orthotics School (UDB), San Salvador

HAITI
- Healing Hands for Haiti Foundation (HHH), Port au Prince

NICARAGUA
- Centro de Capacidades Differentes (CAPADIFE), Managua
- Centro Nacional de Producción de Ayudas Técnicas y Elementos Ortoprotésicos (CENAPRORTO), Managua
- Cruz Roja Nicaragüense (CRN)
- Fundación para la Rehabilitacion Walking Unidos (FURWUS), Leon
- Laboratorio de Protesis y Ortesis, Puerto Cabezas Hospital, Bilwi
- Los Pipitos, Managua
- La Trinidad Hospital Workshop, La Trinidad
- Instituto Politécnico de la Salud “Luis Felipe Moncada” (UNAN-POLISAL)
- Walking Unidos (WU), Leon
# Abbreviations and Acronyms

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Description</th>
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</thead>
<tbody>
<tr>
<td>AFO</td>
<td>Ankle-Foot Orthosis</td>
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<tr>
<td>BFTA</td>
<td>Beneficiary Feedback and Technical Assessment</td>
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<tr>
<td>BSEIPH</td>
<td>Bureau du Secrétaire d’Etat à l’intégration des Personnes Handicapées, Haïti</td>
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<tr>
<td>CBM</td>
<td>Christian Blind Mission</td>
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<td>CBR</td>
<td>Community-based rehabilitation</td>
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<tr>
<td>CRE</td>
<td>CR Equipements, Switzerland</td>
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<tr>
<td>DPOs</td>
<td>Disabled People’s Organizations</td>
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<td>EMSAT</td>
<td>Essential Management Systems Assessment Tool</td>
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<td>EMP</td>
<td>Essential Management Package</td>
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<td>FTE</td>
<td>Full-Time Employees</td>
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<td>GHI</td>
<td>Global Health Initiative</td>
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<td>HI</td>
<td>Handicap International/Humanity &amp; Inclusion</td>
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<td>ICRC</td>
<td>International Committee of the Red Cross</td>
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<td>ISPO</td>
<td>International Society for Prosthetics and Orthotics</td>
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<td>KAFO</td>
<td>Knee-Ankle-Foot Orthosis</td>
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<tr>
<td>LMG</td>
<td>Leadership, Management and Governance</td>
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<td>LMICs</td>
<td>Low- and middle- income countries</td>
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<tr>
<td>MOH</td>
<td>Ministry of Health</td>
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<tr>
<td>MOU</td>
<td>Memorandum of Understanding</td>
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<tr>
<td>MoveAbility</td>
<td>The ICRC MoveAbility Foundation</td>
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<td>MSH</td>
<td>Management Science for Health</td>
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<td>NCPD</td>
<td>National Council of Persons with Disabilities</td>
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<td>NGO</td>
<td>Non-governmental organization</td>
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<tr>
<td>NorCross</td>
<td>Norwegian Red Cross</td>
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<tr>
<td>NRCS</td>
<td>Nicaraguan Red Cross Society</td>
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<tr>
<td>NS</td>
<td>National Society of the Red Cross/Red Crescent</td>
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<td>PCT</td>
<td>Parents and Caregivers training</td>
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<tr>
<td>P&amp;O</td>
<td>Prosthetist &amp; Orthotists/Prosthetic &amp; Orthotic</td>
</tr>
<tr>
<td>PHII</td>
<td>ICRC Program for Humanitarian Impact Investment</td>
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<tr>
<td>PMS</td>
<td>Patient Management System</td>
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<tr>
<td>PT</td>
<td>Physiotherapist /Physiotherapy</td>
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<tr>
<td>PwD</td>
<td>Persons With Disabilities</td>
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<tr>
<td>SFD</td>
<td>The ICRC Special fund for the Disabled</td>
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<td>SGS</td>
<td>Société Générale de Surveillance</td>
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<tr>
<td>SRCS</td>
<td>Somali Red Crescent Society</td>
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<tr>
<td>ToT</td>
<td>Training of Trainers</td>
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<tr>
<td>UNCRPD</td>
<td>United Nations’ Convention on the Rights of Persons with Disabilities</td>
</tr>
<tr>
<td>VNRC</td>
<td>Vietnamese Red Cross Society</td>
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<tr>
<td>WCPT</td>
<td>World Confederation for Physical Therapy</td>
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<tr>
<td>WHO</td>
<td>World Health Organisation</td>
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</tbody>
</table>
OUR VISION

Persons with physical disabilities develop their full potential in an inclusive society.

OUR MISSION

The ICRC MoveAbility Foundation strengthens national capacity in less-resourced countries to remove barriers faced by persons with physical disabilities, by fostering sustainable, accessible and quality physical rehabilitation services and promoting inclusion.
Donations can be transferred to MoveAbility’s account:
Post Finance SA
Bern - Switzerland
Fonds spécial du CICR
BIC: POFICHBEXXX
IBAN CH15 0900 0000 6049 3552 6