

Linking Determinants of the Parents' Perception on the Effectiveness of Community Based Rehabilitation Programmes (CBR). A Case of 4 Selected CBR Services Centre in Seremban

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Abstract

The New Economic Model introduced in 2010 has emphasised the inclusiveness of every society in socio-economic development to become a developed nation in 2020. Among targeted groups emphasised by the government is the person with disability, which contribute to 1.2 % of Malaysia's population. One of the continuous efforts by the government to accelerate this objective is by strengthening the Community Based Rehabilitation Program (CBR), which was implemented in 1984 to assist person with disabilities (PWDs) with basic living skills. This program was pioneered by the World Health Organisation (WHO) following the Declaration of Alma-Ata in 1978 to enhance the quality of life for people with disabilities and their families, meet their basic needs, and ensure their inclusion and participation. Thus, this study aims to examine the level of effectiveness of CBR and to determine the relationship between participation level, module and syllabus, social workers and social support system and the effectiveness of CBR program on 4 selected centres in Seremban, Negeri Sembilan. The sample consists of 121 respondents who are the parents of the trainees. The sampling method used is purposive sampling as the parents would be the suitable ones to deliver the information required for the study. Based on the input obtained from 121 parents, the results found that trainees are indeed showing moderate level of effectiveness of CBR program. The finding reveals a significant correlation of participation level, module and syllabus, social workers and social support system with the level of effectiveness of CBR program. The study found that the participation of trainees had the highest correlation with the level of effectiveness of the CBR in Seremban. Therefore, the trainee's participation level should be the main focus as it is the most essential part in the successful implementation of the program.

Keywords: Community Based Rehabilitation Program, Person with disability, Social welfare, Social protection

INTRODUCTION

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The Persons with Disability Act 2008 (PWDA) came into passage in the Malaysian Parliament in 2008. This act covers numerous aspects to guarantee that disabled

individuals can work and additionally any physically fit individual. Promotion for the benefit of inability associations has saturated its way into the general population of Malaysia, and keeping in mind that there are still some indications of unequal treatment towards disabled persons, this is no chance demonstrative of the nation in general (Suhaida, 2014). The implementation of PWDA was fruitful as the relevant associations and organisations collaborate with each other in carrying out various initiatives for the sake of disabled persons.

Data recorded by the Department of Social Welfare, as indicated in Table 1, shows that there are 497,390 individuals with disabilities in Malaysia in 2018 (Department of Social Welfare, 2018). In any case, as enrolment is intentional, it is not the real numbers of PWD in Malaysia. Hence, family members, particularly their parents, should aware of the importance of registering their disabled family members so that the government can enhance the policies on PWDs. Acknowledging that their rights and privileges should be protected, Malaysia has made a vital by approving the Convention on the Rights of Persons with Disabilities (CRPD) in 2010. Prior to that, the government has likewise enacted the Persons with Disabilities Act 2008, and the government provides social security benefits in several areas, including wellbeing, rehabilitation and training for youngsters with disabilities guided by the National Policy for Persons with Disabilities and the National Plan of Action for Persons with Disabilities.

According to the World Health Organization (2018), it is estimated about 15% or equal to 1 billion of the world's population live with some disabilities. Thus, the Malaysian government's initiatives are in line with this issue and the Sustainable Development Goals (SDG) by the United Nations concerning Goal 4; Ensure inclusive and quality education for all and promote lifelong learning opportunities for all. Among the targets to be achieved by 2030 are: (i) to eliminate gender disparities in education and ensure equal access to all levels of education and vocational training for the vulnerable groups, including persons with disabilities as stated in Goal 4.5, and (ii) to build and upgrade education facilities that are child, disability and gender sensitive and provide safe, nonviolent, inclusive and effective learning environment for all which can be found in Goal 4.a. (Ikmal Hisham and Khairil Azmin, 2018).

Table 1: *The Statistics of Registered Person with Disabilities in Malaysia*

State	Year 2014	Year 2015	Year 2016	Year 2017	Year 2018
Johor	69,824	45,953	50,312	54,310	58,803
Kedah	41,262	32,983	36,435	40,057	43,270
Kelantan	44,169	25,947	29,264	32,403	35,953
Melaka	24,547	18,391	20,059	21,882	23,143
Negeri Sembilan	28,035	17,273	19,171	20,979	22,964
Pahang	33,317	21,946	24,350	26,823	29,179
Perak	49,537	33,020	36,099	39,415	43,534
Perlis	7,719	4,404	5,002	5,673	6,233
Pulau Pinang	33,619	22,094	24,775	27,306	29,443
Sabah	33,494	22,806	25,593	28,683	32,233
Sarawak	25,202	25,037	28,159	31,002	33,397
Selangor	77,051	55,594	63,514	71,399	79,292
Terengganu	30,411	18,281	20,467	22,633	24,720
W.P. Kuala Lumpur	32,654	20,911	24,913	29,372	33,777
W.P. Labuan	1,121	1,037	1,156	1,321	1,449
Total	531,962	365,677	409,269	453,258	497,390

*Sources from JKM Statistic Report = various years

The Malaysian Disability Act 2008 defined a person with disabilities as a person who incapacitated physically, intellectually, and senses for a long term, but for some cases, it is permanent. This group of special people are usually faced with challenges of inability to fully involve in the community effectively and sometimes isolating themselves (Suhaida, 2014). Although the CBR program was in place since 1984, there is a lack of studies conducted to explore the effectiveness from the perspectives of their family members, particularly their parents. Therefore, the aims of this study are (1) to examine the level of effectiveness of the CBR program and (2) to examine the relationships between participation level, module & syllabus, social workers and social support system with the level of effectiveness of CBR program at the selected centres in Seremban, Negeri Sembilan from the perspective of the parents.

LITERATURE REVIEW

Community-Based Rehabilitation in Malaysia

The CBR Program in Malaysia was initiated back then in 1984. It is the same program initiated by WHO back in 1978. In Malaysia, the pioneer centre was at Mukim

Batu Rakit Kuala Terengganu, involving 55 trainees. The Social Welfare Department developed the module and manual and started to involve directly in implementing CBR. This program received great feedback from the community from time to time. It is an initiative taken by the government to help the PWDs with a strong integrated effort from family and community.

Department of Social Welfare (1984) formulated the program's objectives which include to encourage self-awareness, self-reliance and a sense of responsibility of local communities in the rehabilitation of the disabled, bring together local resources for rehabilitation of the disabled, encourage the use of simple and acceptable, cheap and effective techniques under local conditions, optimising the infrastructure of existing local organisations to provide services, consider the country's economic resources and enable it to extend comprehensive services according to the needs of the disabled.

The services provided by CBR includes rehabilitation for health like physiotherapy, vocational training, education such as therapy, writing, reading, counting and drawing as well as encouraging them to participate in social activities like recreation, creativity and games (DSW, 2011). As part of the public assistance program, the trainees do not need to pay for the services, and they were even given allowances of RM150 per month, which can be used for travelling cost to the centre to encourage them in participating in this program.

According to Suriatini (2004), Ashikin (2009), Suhaila (2003) and Suhaiza (2013), the CBR Program in Malaysia is based on three models, which are home-based, centre-based and centre-home-based. The home-based model is for trainees with the critical disabled condition. The model is for the unfit trainees who are unable to commute to the centre and attend the training. The centre-based is clearly the primary model and the focus of this study. The centre-based is the main approach of the CBR Program implementation. This approach allows the Social Workers to pay greater attention and focus on the trainees because the training can be centralised at the centres in every state with sufficient numbers of staff and equipment for their teaching and learning activities, as tabulated in Table 2.

Department of Social Welfare (2021) and Wahida (2016) stated that there are a few common activities at the CBR Centres, which are the gross motor skills, social development, language development, self-management, pre-writing, reading,

calculating and drawing, other creative activity, recreational and others. There is also vocational training, musical therapy session for the trainees. The purpose of these activities is to develop or boost the trainees' abilities and provide them with meaningful skills to be independent adults. The training provided is meant to ensure the accessibility of social sustainable for person with disability, so that they will not feel segregated from the community (Halmi, Haryati, Siti Rashidah and Ainaa, 2019).

Table 2: *The Number of CBR by State, Workers and Trainees*

State	Total CBR Centre	Supervisor	Officers	Trainees
Johor	73	73	367	2,508
Kedah	42	42	239	1,681
Kelantan	45	45	162	1,363
Melaka	18	18	90	451
Negeri Sembilan	44	44	187	1,176
Pahang	51	51	222	1,345
Perak	41	41	123	1,066
Perlis	8	8	55	426
Pulau Pinang	24	24	194	970
Sabah	37	37	193	2,214
Sarawak	54	54	328	2,779
Selangor	55	55	283	2,415
Terengganu	47	47	198	1,526
W.P Kuala Lumpur	13	13	76	579
W.P. Labuan	2	2	12	74
Total	554	554	2,729	20573

*Source: Department of Social Welfare Annual Report (2018)

The Effectiveness of CBR Program

The number of CBR in Malaysia is increasing. It is believed that the effective implementation of the program has led to its growth (Nurul Anisah, Nor Azlin and Syed, 2021). Various factors have led to the effectiveness of CBR programs, including the participation level, module and syllabus, social workers and social support system. The measurement of the effectiveness of the CBR Program means evaluating the program from the parent's perspective. The effectiveness can be evaluated based on various indicators, including positive changes in participants behaviour; abilities to learn new skills; be independent; communicate in a better way; mingle with the community; managing basic needs; delivering thoughts and be a better person. Thus, the indicators for the effectiveness were derived/influenced by/from several factors such participation level, module and syllabus in CBR, the quality of social workers and

social support system. All of these elements are taken into this study based on the researches by Suhaida (2014), Suhaiza (2013), Ashikin (2009), and Suhaila (2003).

i. Participation level

The conceptual definition of participation level is referring to the participation level of the community towards the CBR Program that the government has introduced (Ashikin, 2009; Suhaiza, 2013). Community participation is the most essential in the implementation of the program. The participation level is measured by the willingness of the community to assist the PWD to join the program. It is reflected through their intention to help them register, attend, and be involved in the CBR program's rehabilitation activities. In Selangor, it was reported that the family prefer to send them to private CBR due to more sophisticated facilities (UNICEF Malaysia, 2017). However, the families in remote areas claimed that they faced difficulty accessing the CBR in rural areas due to transportation costs they have to bear. Though the trainees receive a monthly allowance, yet no supportive assistance provided (UNICEF Malaysia, 2017).

ii. Module and Syllabus

This variable refers to the module and syllabus used by the rehabilitation management, a diagram and outline of subjects shrouded in instruction or instructional class. It is illustrative, dissimilar to the prescriptive or educational modules. A syllabus might be set out by an exam board or arranged by the teacher who administers or controls course quality. It might be given in a document or on the web. For the CBR, the modules were developed by the Department of Social Welfare. There is a standardisation of modules and syllabus applied by the trainers at all centres. The modules and facilities will determine the activities conducted for the trainees.

iii. Social Workers

Social workers are the trainers at the centres who are voluntarily involved in the program to train the trainees. They possessed unique skills in handling the PWD at the centres and expected to focus on education services guided by professionals. The social workers in this study also analyse how they deal with the trainees from the parents' view. The social workers also use their own delivery and teaching skills to make the

module and syllabus easier to understand. However, there are concerns about social workers' qualifications in community-based rehabilitation (CBR) centres. It is worrying to note that most of them had only secondary school education with no professional specialisation in social work. Though they had undergone educational training provided by the Department of Social Welfare, their skills are questionable and might affect the CBR effectiveness (Shazlin Umar, Azriani, Aziah, Azizah, Normastura, Azizah, Rostenberghe; 2015).

A study conducted by UNICEF Malaysia (2017) uncovered that training opportunities were limited, and the social workers were not given attention in professional development. The quality of social workers was not only poor because of limited training, but it could also be due to the voluntary nature of the work, which has led to a high turnover rate. They were not only demotivated by the lack of incentives provided, but they also felt the government was not acknowledging their services.

iv. Social Support System

Social support is the recognition and the fact that one is administered to, has help accessible from other individuals, and that one is a piece of a steady informal community. These vital assets can be substantial (e.g., money related help), educational (e.g., guidance), or fellowship (e.g., feeling of having a place) and palpable (e.g., individual counsel). Social support can be measured as the observation that one has help accessible, the genuine got help, or how much a man is coordinated in an informal community. Government social support is frequently alluded to as an open guide available for all citizens, especially the PWDs (Nurul Anisah et al., 2021).

METHODOLOGY

This study adopts a quantitative approach and involves 121 parents or guardians of the trainees as respondents selected through purposive sampling. The data were collected through a self-administered questionnaire assisted by the chairman of the CBRs. This study, however, only covers 4 selected CBR members in Negeri Sembilan, as listed in Table 3. In terms of data analysis, descriptive analysis was carried out by looking at the mean score and standard deviation to identify the CBR program's level of effectiveness and then, followed by inferential statistics to investigate the association

between the four factors with their level of effectiveness of CBR program. The data were analysed using Statistical Package for Social Sciences (SPSS) version 20.

Table 3: *The summary of the CBR members on selected CBR Centres in Seremban, Negeri Sembilan*

CBR Centre	Patron	Supervisor	Social Workers	Trainees	Committee members
CBR Bandar Seremban	1	1	5	31	13
CBR Intervensi Awal	1	1	6	30	12
CBR Nilai	Nil	1	5	34	13
CBR Senawang	1	1	7	42	14
Total	3	4	23	137	52

*Source: According to the data provided by the officer in charge in Seremban

FINDINGS

Respondents' Background

Table 4 shows the respondents' profile in terms of their marital status and ethnicity. As for the marital status of the respondent, the married respondents were 103 with 85.1 per cent, the divorced with seven respondents equal to 5.8 per cent, followed by the widowed of 6 respondents equal to 5 per cent. It is worth mentioning that five respondents decided they would rather not say, and it equal to 4.1 per cent.

For the respondents' ethnicity, it was found that Malay respondents were the highest in number with 103 respondents. It is equal to 85.1 per cent of the total sample. The Indian was the second highest with eight respondents equal to 6.6 per cent followed by Chinese as the third highest with seven respondents equal to 5.8 per cent. Lastly, the other ethnicities were the least with a frequency of 3, which equals 2.5 per cent.

Table 4: *Profile of the Respondents*

Variable	Description	Frequency	Percentage (%)
Marital Status	Married	103	85.1
	Divorced	7	5.8
	Widowed	6	5.0
	Would not rather say	5	4.1
Ethnicity	Malays	103	85.1
	Chinese	7	5.8
	Indian	8	6.6

	Others	3	2.5
Level of Education Received	Primary School	14	11.8
	Secondary School	70	58.8
	Certificate or equivalent	14	11.8
	Higher education	21	17.6
Number of handicap child participates in CBR	A Child	115	96.6
	2 Children	2	1.7
	3 Children	0	0
	4 Children and more	2	1.7

Level of Effectiveness of Community Based Rehabilitation (CBR) Program

In this study, descriptive analysis was carried out by looking at the mean score to identify the level of effectiveness of CBR based on parent perspectives at 4 Selected CRB in Seremban, Negeri Sembilan. Mean scores and standard deviation were used to determine the level of CBR programmes. The values were interpreted based on the range of the mean scores. Table 5 indicates the range of mean score was determined by segregating the mean range of 1 to 5 into three levels, i.e. low, medium and high, as adopted from Kosnin and Lee (2008).

Table 5: Mean Score Range Interpretation

Mean Score	Level of Effectiveness
1.00 – 2.33	Low
2.34 – 3.67	Moderate
3.69 – 5.00	High

Source: Adapted from Kosnin and Lee (2008)

Overall, Table 6 presents the level of effectiveness of the CBR Program as perceived by parents of the trainees. According to Field (2011), means represent a summary of the data, and standard deviations show how well the means represent the data. Based on the result, the mean and standard deviation values (3.64, .69) of parent responses were moderate in a scale of 5. It is implied that the level of effectiveness perceived by the parents were at a moderate level, as presented in Table 6.

Table 6: Level of CBR Program Effectiveness

Variable	Min	Max	Mean	SD	Level
Effectiveness of CBR Program	1.5	5	3.64	.69	Moderately High

Correlations between Participation Level, Module & Syllabus, Social Workers and Social Support System with the level of Effectiveness of CBR from the Parent's Perspective

Pearson's correlation analysis was used to test the correlation between the effectiveness of the CBR programme with participation, module, social workers and social support system. In this study, the strength of the correlations was interpreted based on the guideline suggested by Cohen (1988). Based on the reported results in Table 7, the findings revealed that there was a strong correlation between participation level and the effectiveness of CBR program on selected centres in Seremban, Negeri Sembilan, $R=.581$, $p < .05$. It is understood that as the trainees' participation level increases, the effectiveness of the CBR program also increases. Secondly, there was a strong correlation between module & syllabus and the effectiveness of CBR program, $r\text{-value} = .564$, $p < .05$. It showed a strong positive correlation between these variables, indicating that better module & syllabus were associated with a more effective CBR program.

Next, the r -value for the Social Workers and the Effectiveness of the CBR program is .431, with a significant value of .001. It constitutes that it is statistically significant. There was a moderate positive correlation between these variables. It specified that the more skilful the social workers are, the higher the effectiveness level of the CBR program is. Lastly, the findings also showed a positive, moderate correlation between the social support system with the effectiveness of CBR program on selected centres in Seremban, Negeri Sembilan, $r=.454$, $p < .05$. It is implied that as the social support system of the program increases, the effectiveness of the CBR program would also increase.

Table 7: Summary of Correlational Analysis Results

Variables	R-value	P-value	Decision
Correlation between Participation Level and The Effectiveness of CBR Program	.581	$p=.001$ thus $p < .05$	Significant
Correlation between Module & Syllabus and the Effectiveness of CBR Program	.564	$p=.001$ thus $p < .05$	Significant
Correlation between Social Workers and the Effectiveness of CBR Program on Selected Centre in Seremban, Negeri Sembilan	.431	$p=.001$ thus $p < .05$	Significant
Correlation between Social Support System and the Effectiveness of CBR Program on Selected Centre in Seremban, Negeri Sembilan	.454	$p=.001$ thus $p < .05$	Significant

DISCUSSION

The government is continuously putting efforts into improving CBR programs so that the PWDs and their family could enjoy meaningful impacts from the program. Such a rehabilitation program is needed to assist the PWDs' mental and social development. Parents' expectation and perception of rehabilitation centre must be taken into account to improve the programme's effectiveness. From the parent's perspective, this study confirms that the CBR programme has been moderately effective in its implementation. Since it has been implemented for more than 30 years, it was no doubt that the programme is beneficial to PWDs and the parents. Similar to the findings by Suhaila (2003), the parents were satisfied that their children have had a positive behavioural change and enhance their survival skills. Even though the effectiveness level as perceived by parents is not high, at least it contributes to the trainees' attitude and skill development.

The study reveals that the CBR programme's effectiveness is associated with the trainees' participation, the modules developed for the teaching and learning process, the skills possessed by the social workers, and the social support system available to the trainees. Specifically, the study found that the most correlated factor to the CBR Programme's effectiveness is the participation of the trainees in the programmes and activities scheduled by the rehabilitation centre. Participation reflects their involvement in rehabilitation activities has been found strongly related to the effectiveness. In a similar vein, Nurul Anisah et al. (2021) and Wahida (2016) revealed that it is crucial for the trainees to actively participate in the program, leading to the effectiveness of the CBR program itself. Suhaida (2014) also stated that there is a significant relationship between Participation Level and Effectiveness of CBR Program in Johor and Kelantan regarding the basic self-management aspects. Since the participation of trainees depending on their willingness to attend the program, it is important to note that the family members, especially parents to ensure that they will attend the classes consistently. Parents' involvement in persuading the children to go to the training is vital since they are the close ones to them (Ashikin, 2009). Although trainee' participation may influence the programme's effectiveness, the parent's presence at the programme was also important, as indicated by Suhaiza (2013). This is supported by research from Nurul Anisah et al. (2021) and Aizan Sofea, Jamiah and Noremy (2016)

which have proven the role of parents or guardian support to the effectiveness of PDK programmes.

Module and syllabus designed by the experts and instructors also significantly lead to the effectiveness of the program. The finding of the study is concurrent with previous studies, such as Nurul Anisah et al. (2021), Wahida (2016) and Suhaiza (2013). In the case of CBR Permata Hati, the Module and Syllabus for the trainees, such as motor skills, reading, visualisation, social skills, has contributed to the effectiveness of the CBR Program (Wahida, 2016), and it becomes the fundamental element in delivering the information and conducting the class with proper guidance (Suhaiza, 2013) as well as the attendance to the rehabilitation session at the CBR (Nurul Anisah et al., 2021). In the study conducted by Ee (2016), it was found that the PWDs demanded the technique and skills abilities or training for vocational, protected workshop and living skills. These three elements are already included in the Module and Syllabus, proving the association of Module & Syllabus with the effectiveness of the CBR Program.

Although social workers and social support systems are moderately related to the CBR programme's effectiveness, the government should not disregard these elements in enhancing the program. The social workers are the caregiver or the handlers of the trainees at the rehabilitation centre. Skilful social workers who have empathy towards the trainees will make them feel comfortable during the training. Previous research such as Nurul Anisah et al. (2021), Mijnaerends, Pham, Swans, Brakel and Wright (2011) emphasized on human resource readiness from the social workers in facilitating the CBR programmes. Ashikin (2009), Suhaila (2003) and Suriatini (2004) also stated that the Social Workers passionately trained and taught the children with patience. The traits and skills of the Social Workers to handle the children deserve some credit and recognition as with their passion in training the children, they are able to be better person.

The Social Support System highlighted in this study refers to social support, which can be found in forms of financial and non-financial assistance provided by the government institution such as the Department of Social Welfare and the local council. The Department of Social Welfare (DSW) is the institution responsible for providing such diligent support and adequate assistance to the development and empowerment of the CBR Program. Previously, Nurul Anisah et.al (2021) and Ee (2016) stated that the

ability of PWDs to be employed and developed themselves as a better person are due to the assistance and protection system provided by the government. Early intervention programs also helped them survive and live like healthy person (Ee, 2016). However, a study conducted by Suhaida (2016) found that the trainees have less ability to perform the job properly. However, there are some positive changes in the condition of the trainees after they have undergone training. The social interaction level of trainees has improved with the belief that the government's support with various programs, activities, incentives, and assistance has promoted their confidence and not isolating them. More importantly, there are also positive changes in the PWDs personalities.

CONCLUSION

The level of CBR programme effectiveness and the factors associated with its effectiveness were examined in this study. The effectiveness is moderate and associated with the trainee's participation, the training module & syllabus, the social workers, and the support system. The findings can assist the relevant government agencies in framing the strategies or approaches in implementing the programmes for greater effectiveness that will benefit the PWDs, parents, guardian, and society at large. It is recommended that focus be given on the aspect of trainee's participation as it is the most essential in the implementation of the program. The module and syllabus components should be reviewed and revised with current demands and needs, so it will not be regarded as archaic and outdated as per the requirements of the industry.

For future research, research on a longitudinal basis should be carried out so that the progress of the effectiveness could be observed better since the observation made before, during and after the execution of the program. The future researcher could also explore new variables that could lead the study to prove the effectiveness of the CBR program.

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