

## BOOKS AND REVIEWS

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**Starting from Scratch**, by *Gunawan Nugroho*, *World Health, Geneva, April 1975*.

A community health programme in Indonesia which stresses health, not disease, and focuses less on the individual than on the community as a whole . . . . Thus a community health programme which may initially require considerable input will in the long run become an increasingly less expensive activity which can ultimately be borne by the community itself.

Health care provided through hospitals, health centres and outpatient clinics is the practice of medicine as applied to individuals. It emphasizes the control of disease, which from the doctor's viewpoint is the appropriate application of his medical knowledge.

A community health programme, on the other hand, directs its attention to health rather than to disease and focuses not only on the individual but rather on the community as a whole. It is concerned with the total community in its total environment. The well-being of the community can be more quickly attained if all its members unite their efforts so as to create conditions whereby the community can progress towards greater welfare.

If such a programme is to be closely adapted to the situation and conditions of the local area, it should be flexible and developed from below with guidance from above. Development from below means involving the community from the very start in the planning and programming. Providing guidance means helping to develop the community members' will and competence to manage their own affairs and, where necessary, to assist with the technical implementation.

The next step is to determine how to allow for the great variety of aspirations and desires of the community—which at times may be completely irrelevant to their real needs—so that all parties concerned will be satisfied.

Community participation involves a cooperative effort to create conditions which will enable the community to live a healthy life, and not merely to free themselves from disease or the threat of disease. This does not negate the need for individual medical care; on the contrary, this care should be an inseparable part of more extensive activities, not standing alone but integrated into the overall programme. With this form of health care, the doctors and auxiliary personnel should not play a dominating role but rather one of guiding the community. They should stimulate the community actively to promote and raise its own health standards so that it does not have to depend continuously on outside assistance but relies primarily on its own efforts to solve its health problems.

In essence, the success or otherwise of a community programme in raising people from the depths of poverty and suffering does not depend on outside activities but rather from within, from the people and their desire to awaken and struggle out of the depths themselves.