

## **Treatment for disabled children in Malawi set to improve**

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A new programme to educate care workers and parents in Malawi who are looking after disabled children is to be developed by the University of Liverpool.

Over 13 million <u>children</u> have a moderate or severe disability, with 90% of these living in low and middle income settings. In low income settings such as Malawi, it is clear that at least 8-12% of children are likely to have a disability.



The high numbers in these settings are likely to be caused by poor outcomes of brain infections such as cerebral malaria, encephalitis meningitis, as well as children who have had brain injuries (asphyxia); with many mothers finding it difficult to reach health facilities or trained birth attendants at the time of delivery.

## **Burden of neurodisability**

Despite this high burden of neurodisability, Malawi has only a handful of trained therapists and most professionals are concentrated in urban areas to the exclusion of families in rural parts of the country.

With a new grant from the Sir Halley Stewart Trust, Dr Melissa Gladstone, the University's Institute of Translational Medicine will develop a set of materials and resources for carers and parents that will be used to 'train the trainers' and stretch limited resources further.

Dr Gladstone said: "By training non-specialist health workers who are operating in these rural areas and providing them with resources such as checklists and manuals to give to families, we will be able to improve the level of care which these children receive."

## **Training manuals**

The training manuals will provide advice and support linked to those problems most commonly faced by parents, which may include specific advice such as feeding a child with a disability, posture management and caring for a child with behavioural problems, but will also specifically emphasise disability rights and inclusion and parental mental health.

Most programmes emphasise physiotherapy support and advice but do not provide more generic advice to parents. This tool will be piloted with



community workers and the research will then look at the acceptability and feasibility of the training package.

This part of the programme will continue for two years and the research team will be meeting with disabled groups and healthcare authorities in Malawi to look at ways of extending the programme across a wider part of the country over a longer timescale.

Dr Gladstone said: "This type of programme hasn't been attempted in Africa before, yet the need here is amongst the most acute anywhere in the world.

"It represents a good way for a country without a large health budget or skills base to improve the way in which its <u>disabled children</u> are cared for and rehabilitated."

Provided by University of Liverpool

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