

Stimulating Development of Young Children with Disabilities at Anganwadi and at Home: A Practical Guide

Guidebook-3



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2. A child whose lower limbs are involved, reaching classroom could be a problem. Make the areas accessible by making ramps, widening the doors of classrooms etc.

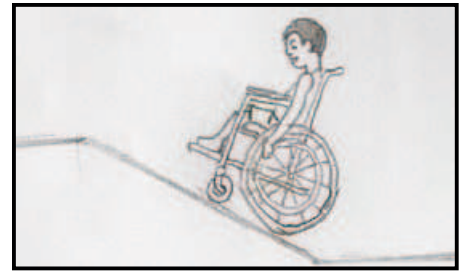


Fig 3.3

3. Make the child sit in class in such a position that he remains involved in classroom activities. It could happen that when the activity involves lot of movement, this child feels left out. Think of ways of involving him.



Fig 3.4*

4. The child would require regular exercises to use all the muscles. Due to paralysis etc, some muscles could develop contractures. Help the family know the exercises so that the muscles are used.
5. Some children could need artificial limbs.
6. Some children might need as escort to reach school. Try to identify local women/adolescent girls who can take the responsibility of escorting the child.
7. The child would need help to go to toilet.
8. Child may not be able to participate fully in outdoor activities. Try to involve the child, even if partially.



Fig 3.5

** Source - NIMH, New Delhi*

What are the Activities of Daily Living ?

These include all those activities which we need to perform daily to keep our body healthy, clean and functional. These are eating, drinking, bathing, washing hands, toileting, dressing and brushing.

General principles for teaching all daily living activities to children with disability

- ⌘ Teach the activity at the time that it is done i.e. brushing at the time that the child brushes teeth, washing hands before/after eating or after using the toilet, etc..
- ⌘ Help the child physically/verbally if needed.
- ⌘ If the activity is very difficult for the child, break it down into smaller units. Also, if the child cannot do one step, that doesn't mean that the child cannot do the next step. E.g child may not be able to walk up to the cupboard to take clothes from it, but may be able to choose which ones she wants to wear. She may be able to remove clothes, but have difficulty in putting them on. Help wherever needed.
- ⌘ Encourage and praise for whatever accomplished. Keep talking to the child and keep supplying the necessary information.
- ⌘ Keep giving choices. E.g. what to eat? Wear? Hair clip? Socks? Build up decision making. Evoke interest in self care.



Fig 3.34

AIDS AND EQUIPMENT FOR FEEDING AND DRINKING

Some children do not develop feeding skills easily or naturally. This may be because of particular physical difficulty (such as cleft palate or cerebral palsy) or it could be due to slow overall development.

Children with cerebral palsy often have feeding difficulties which could be severe. Difficulty in sucking is the first sign of cerebral palsy in a child. The child could have difficulty in swallowing and easily choke. Uncontrolled movements of the body, pushing out the tongue or floppy inactive lips are all components of cerebral palsy.

**FOR THE FURTHER INFORMATION PLEASE
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