

## **Report for Global Giving, May 2016 – Feeding Assessments**

Kyanninga Child Development Centre continues to offer physiotherapy, occupational and speech therapy to children with disabilities in their clinic and through community outreach activities to rural villages in Western Uganda. KCDC staff average visits to 30 children per week through their community outreach activities, where therapy assessment and treatment is conducted in private homes, local health centres, churches and schools. They are also averaging 10 new clients a month through these activities.

KCDC has had the benefit of a volunteer British speech therapist, Jo, for the past 4 months, who has been training all our staff in speech and language assessment and treatment, and has provided comprehensive speech, language and feeding assessments to over 50 children. Many of these children are unable to speak and have been unable to communicate with their families and so have been excluded from community and social activities and attending school because of this lack of communication. By introducing a variety of simple alternative communication methods, including sign language and picture communication, families and communities are now more inclusive.

In addition to this Jo was also able to attend a two day training workshop with specialist feeding therapists in Kampala. They were visiting from the UK, teaching basic feeding techniques to mothers in a cerebral palsy education group. Through the training they were teaching the mothers how to correctly position their child, use utensils (different spoons/cups), and prepare food at different textures and basic nutritional advice.

After completing this workshop Jo returned to KCDC and along with KCDC's senior Occupational Therapist, Rachel, they set about assessing and advising parents that were identified to have children with feeding difficulties and malnutrition.

They devised a simple assessment questionnaire and gathered some example cups and spoons. They have only been assessing children in the past few weeks but have already seen and followed up over 15 children and more are booked in for assessments in future outreach programmes. It's exciting to see immediate changes being made in the way a mum/carer is feeding their child, which is having a direct impact on the safety of their feeding and in the success of moving a child on to the next stage of feeding development e.g. moving onto solid food, chewing or biting skills which previously were not there.

Many of our children with feeding and swallowing difficulties are also severely malnourished so we also provide basic nutritional advice around what foods are good for building strength and weight as well as providing alternative ways to introduce liquids safely using locally sourced items such as avocado, porridge, mashed papaya and banana.

Both Jo and Rachel are excited about and have enjoyed developing this additional element to the services provided by KCDC and have been really encouraged to see dramatic changes in such a short amount of time. This also shows that a little bit of training can go a long way in improving a child's ability to develop essential skills to improve their daily living.

A short testimonial from one of these mothers explains how a little change can go such a long way:

Daniel is two years old and lives with his grandmother as his mother abandoned him when he was 6 months old. He has severe cerebral palsy and is unable to sit without support. He has been attending KCDC for over 6 months for physiotherapy to improve his head control, trunk strength and hand function, but his grandmother has always complained about how he chokes on his food when she tries to give him anything solid, and he survives on a diet of milk and porridge. This has made him extremely malnourished.

Daniel was seen by Rachel and Jo, under a tree during one of the regular community outreach programmes, where they assessed their feeding technique. They found that his positioning was poor, tilted too far back, she was rushing to put the next mouthful in before checking he had managed to swallow and clear the food, and each mouthful was too big for him to manage.

By changing him into a more upright supported position, using a small spoon to control quantity, and checking his mouth before adding more food, she realized that he can take mashed solid foods without coughing, and that the total time to feed him was reduced. When reviewed 2 weeks later, Daniel's grandmother reported that he had more interest in food, was coughing much less at every meal and she is already able to increase the range of foods she can give him. She was amazed that he was able to eat such a variety is now hopeful he can put on weight and be more successful with his physiotherapy progress.