MAINSTREAMING CHILDREN WITH DISABILITIES IN NUTRITIONAL PROGRAMMES

MESSAGE Improving the Nutritional status of Children with disabilities in Uganda

Executive Summary

To help improve the health of children with disabilities in Uganda it is important to mainstream their needs as part of nutritional programmes. This article suggests ways of mainstreaming CWDs in nutrition programmes. It recommends to stakeholders the importance of considering CWDs in health and nutritional programmes right from planning, implementation to evaluation. Government is consequently called upon to review the already drawn plans and programmes in order to fit in the nutritional needs of CWDs.

The second part of the article lays emphasis on carrying out research. Research will establish evident information on the causes of malnutrition among CWDs, and numbers that are malnourished. After that information is collected, it should also be analyzed as part of health information system that are essential for planning and management processes.

The last part of the article calls for a collaborative approach from stakeholders such as the NGOs. This should be through training Community Base Rehabilitation (CBR) workers parents and caretakers of children with disabilities in nutritional needs of CWDs. This can enable the parents to improve their knowledge on feeding practices for the children.

Introduction

The World Health Organisation (WHO) and United Nations Children's Fund (UNICEF) are facilitating a number of programmes that provide for the right to health for every child. For example, the WHO (2003) Global Strategy for Infant and Young Child Feeding. Government of Uganda also has dedicated efforts towards improving health and nutrition of Children as evidenced by the Ministry of Health (2004) National Policy on Nutrition. However, these attempts have not closely addressed the nutritional needs of children with disabilities. Disabled children are known to be at a high risk of developing malnutrition as reported by the Department of Human Nutrition (2004) South African National Health Knowledge Network. This article suggests measures for mainstreaming CWDs in nutrition programmes.

In view of the above situation, the Government and other stakeholders should consider reviewing the health and nutrition policies, including the planning, implementing and evaluating of health programmes for CWDs.

Enhancing the review of the already existing policies and plans for management should be backed by evidence from research on the relationship between nutrition and disability. Researching on the relationship between nutrition and disability will form a basis for planning and implementation as it has been done for "normal" children. The established findings will facilitate, working towards reduced mortality rates for "all" children when the CWDs are given special consideration.

In the same way, research will establish a number of ideas. These may include factors contributing to malnutrition among Children with disabilities, (Marais et-al 2000) and the numbers of CWDs who are malnourished. Once the above information is identified, it should be analyzed. This will make the need for interventions towards mainstreaming CWDs in nutritional programmes evident.

In research, stakeholders such as the Non-governmental organizations (NGOs) should adopt a collaborative approach to nutrition programmes. This can be through involving implementers at the grassroots level such as Community Based Rehabilitation (CBR) workers, parents and caretakers of CWDs and community leaders.

Involvement should be in form of training CBR workers in nutritional needs of CWDs. When they acquire the knowledge, implementation of nutrition programmes together with other programmes will become evident. There will be improved information dissemination on nutrition to parents of CWDs and the community at large, thus reduced malnutrition among the children.

Furthermore, training of parents and caretakers of CWDs on nutrition can increase their knowledge. On many occasions, they are ignorant on appropriate feeding skills for their children. A personal experience with a mother of a child with cerebral palsy confirmed this when I asked her how she fed her child and replied:

"I find problems when feeding my child. She chocks so many times when I feed her on the food we eat. I only feed her on liquid foods such as water and milk because I fear she might chock to death".

The question is how can rural mothers and caretakers of CWDs learn how and what to feed their children when they are not skilled enough?

Still under training, there is a lot on sharing experiences. Through discussions with parents on their understanding of nutrition and feeding practices for their children, a number of issues can be highlighted.

For example, Catherine has a malnourished 4 months baby girl with cleft lip. The baby cannot breast feed and Catherine has no idea on expressing breast milk. She instead feeds her on dairy milk.

Through discussions, Catherine can be taught how to express breast milk and feed her child. This can improve nutritional status of her child with disability and also share with other mothers in the same experience.

Extending of nutritional programmes to the rural areas, especially where majority of PWDs live is important, (United Nations 2004, Chronic Poverty Research Centre 2005). This will increase on knowledge about nutrition at the lower levels of community. Stakeholders and parents of CWDs will also be able to work with other parents through parent support groups and share their experiences from their own communities.

Chances are that some of us have already started, while others have not. We are invited to share from our experiences and take a closer look at suggestions in this article to mainstream nutritional needs of CWDS in our activities and plans. Once we attend to their needs, efforts towards health for all children will be realized.