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Toolkit: Working with Special Needs Children at Lalla Amina Orphanage



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Introduction

As we all know, as soon as a child enters into the world, they come with an abundance of needs – the need to be loved and nurtured, to be fed and clothed, the need to be educated and equipped with essential life skills...the list goes on. A child with special needs, however, is a child who, as a result of distinctive medical or developmental difficulties, has other needs in addition to the ones listed above.

The dictionary defines special needs as: *the individual requirements of a person with a disadvantaged background or a mental, emotional, or physical disability or a high risk of developing one.*

The last phrase is particularly striking and emphasises the importance of early intervention in reducing the negative future impact of a disability.

The aim of this toolkit is to offer a starting point for potential volunteers who would be interested in working closely with the children and young adults in the disabled unit at Lalla Amina Orphanage. It is a toolkit that, in time, can hopefully be expanded to include more useful tips and ideas. Aside from providing a short profile on each of the children currently at the centre, this toolkit will also provide practical examples and techniques that can be incorporated into the specifically tailored programs that the volunteer might wish to develop during their time at Lalla Amina.

Profiles

Below, in alphabetical order, are short, observational profiles on each of the children/young adults who are currently in the disabled unit.

- ❖ **Aziz** (Male, age 22): is the oldest in the group and suffers from Autism. He easily approaches and takes a keen interest in new guests, before withdrawing. He eats independently and has a sense of responsibility towards the younger ones. For example, he is able to lift Fadwa (who is unable to walk) and carry her short distances between rooms when asked. He does not have speech but he enjoys listening to music.
- ❖ **Bushra** (Female, age 18): is relatively active and moves around independently. She holds very good eye contact and responds well to instructions; smiles easily. She has the most difficulty with eating neatly, though she feeds herself independently. Because of the problems associated with chewing, she has to have a napkin around her neck to protect her clothes and can only have soft food. Her mouth muscles are quite weak, which causes excessive drooling. She also sways back and forth sometimes. She reacts well to handshakes and is a very friendly girl who is very skilled with building blocks and Lego.
- ❖ **Fadwa** (Female, age 20): is physically disabled, unable to walk, sit up on her own or feed herself. Comfort is the key point here – making sure she has what she needs to feel at ease is important. She would benefit from regular muscle massages. *Idea for a future useful donation to the unit could be a wheelchair for Fadwa so that she can move easily between rooms and be taken out more regularly for fresh air.
- ❖ **Hissam** (Male, age 15): suffers from Autism. He sways backwards and forwards the most consistently yet he is the most skilled at eating on his own - no mess, holds the utensils properly. He is also the only one who speaks a little bit and is able to articulate some food items like bread and water (in French and Arabic). There is lots of room for improvement in this area and he shows great potential for picking up a few more words and phrases. He finds it difficult to hold consistent eye contact and although he may not make an attempt to approach you, he will respond very well to a greeting and a handshake. He is able to pick up on concepts quickly, including puzzles, which he will happily engage with in small doses.
- ❖ **Khalid** (Male, age 15): He drools quite consistently and has done so since he was very little. He is also able to eat his food alone, relatively neatly, but there's room for improvement. He responds to instructions quickly, showing a clear understanding of what is being said to him even though he does not have speech. He also does the swaying movement regularly. He keeps very good eye contact and absolutely loves to go out for walks.

Speech and Language Development

Several factors can contribute to speech and language difficulties including, but not limited to: physical disability, language delay, language deprivation, specific difficulties in producing sounds, hearing impairment, autism/social interaction difficulties, and dyslexia.

Here are some activities you can incorporate into a simple speech and language program:

- Initiating a simple greeting and handshake routine when you see them
- Talking with the children regularly in a clear and precise manner
- Teaching them sounds and getting them to repeat it back
- Encouraging them to blow bubbles in order to strengthen surrounding mouth muscles
- Playing relevant educational audio books or TV shows
- Picture flashcards and naming household items



Cognitive Skills Development

Some of the key cognitive skills include:

- Attention skills: the ability to attend to incoming information in a sustained manner; the ability to remain focused on a task
- Memory: the ability to store and recall information, both long-term and short-term
- Auditory: the ability to process and analyse sounds
- Visual: the ability to perceive, analyse and think in visual images

Difficulties in one or more of these areas are common amongst most special needs children. Here are some tips on how to help them build skills in this area:

- Sustained activities: try to engage the children in one sustained activity at any given time. It might also be worth introducing new games/puzzles/activities only after they have gotten used to one. It wouldn't be ideal to bombard them with too much information at once!
- Mental stimulation through music, interactive toys, bright colours and puzzles are useful.
- Introducing them to new sounds (musical instruments etc) and smells (food items, scented oils, etc)
- Tactile stimulation can include activities such as allowing them to feel smooth, rough, soft, solid, fluffy surfaces or fabrics.
- Picture flashcards can be a fun way of getting them interested in new items as well as items that can be found around the house.
- Passing or throwing soft sports balls or small bean bags can help improve co-ordination skills

Physical Disabilities

Physical impairment refers to a broad range of disabilities which include orthopedic, neuromuscular, cardiovascular and pulmonary disorders. The physical disability may either be congenital or a result of injury, muscular dystrophy, multiple sclerosis, cerebral palsy, amputation, heart disease, pulmonary disease or more.

As mentioned briefly under 'Profiles', Fadwa is unable to walk or support her own weight. As a result, it is important to make comfort a priority for her. This can include making sure she has enough cushions/pillows for support when she is either sitting or lying down. It can also include simple but regular massage of her limbs and joints to prevent stiffness or cramps.

For the other children, regular physical activity such as going for a quick stroll could also help prevent any muscular/joint problems associated with inactivity.

Life Skills

This is definitely something that can easily be taken for granted. On a daily basis, we go about independently carrying out the tasks essential to our well-being and productivity. Teaching or helping the children improve upon some of these simple life skills will no doubt be empowering for them and can help them build independence and confidence in assuming a sense of responsibility. Here are a few key areas that could be addressed:

- Mealtimes: setting the table together, eating neatly, clearing up and putting things away safely
- Dressing: helping them pick out their own clothes for the day, learning to do up buttons or zips independently
- Hygiene: learning to wash hands properly before meals, after meals and after using the toilet
- Organisation: putting toys or games away after using them, learning to straighten the bed.



Putting a Program Together



So, you have a few general ideas of what each child/young adult needs. Here are a few things to consider when putting together an individual program:

- ❖ Questions to ask: what are the top priorities that need to be addressed first? What skill(s) can I build upon that the child/young adult already possesses or shows an interest in? How much time can I dedicate to each child? What resources do I have available and what do I need to get a hold of?
- ❖ Resources: you might want to think about taking some materials along with you, such as puzzles, games, toys, colouring books and crayons, flashcards, soft sporting items etc
- ❖ Keep it simple: be realistic about how many activities you can carry out with each child/young adult.
- ❖ Collaborate: if you need any extra help or support, the director at Lalla Amina and the nurses who look after the children are friendly and approachable.
- ❖ Plan ahead: decide ahead of time what you want to do each week/session so that you can use your time wisely.
- ❖ Record progress: keeping a diary of the activities carried out, any progress made (no matter how little it might seem) and any general observations is a good way to continually reassess your individual programs and make improvements where necessary.
- ❖ Be consistent: it takes time and there will be challenging days, but the benefits the children/young adults will gain from the time you spend with them will make it all worth it. Not only will they be receiving care and attention, but they will also hopefully be gaining new skills.

A Word on Early Intervention

Lalla Amina also has a baby unit where you will find some babies demonstrating early signs of a disability. Spending time with them and engaging them in stimulating games and activities will also be very important in meeting their added needs.

Useful Links

Here are a few websites that might interest you or provide you with more ideas:

www.specialchildren.about.com

www.planotes.org/documents/plan_04512.pdf

www.clementinacenter.com

www.bibic.org.uk

