

PEOPLE WITH SPECIAL NEEDS

IN THE COMMUNITY

A CHILD IN NEED

Care of Children in Need

- A child in need is one who has been abandoned, orphaned, or one whose parents are incapable of looking after them properly. Such a child needs the best possible alternative arrangements for their care in the absence of the parents.

NEEDS OF THE CHILDREN

- Nutritional needs. Most of these children are malnourished.
- Parental love.
- Lack of education.
- Lack of access to health care. such as AIDS orphans who are themselves infected.
- Security and protection from harmful practices like female genital mutilation, child labour, forced marriage.
- Stigma and discrimination such as those orphaned by AIDS.
- Social burden such as care for the other children or for a terminally ill parent.
- Poverty due to lack of a source of income to care for themselves and the family.
- Inadequate or lack of shelter.

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What kinds of services are available for children in need in your community?

Children's Homes

These homes are owned and run by individuals with the help of donors and well wishers. They provide the children with their basic needs and education. These homes are supervised by the department of children under the ministry of social services.

- Approved schools, for example Kirigiti in Kiambu, Wamumu in Mwea and many others. These are run by the government.

Remand Homes

These are available in your communities and they are run by social services.

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Hospitals

- Most of the abandoned children are brought to the hospitals. Here they are cared for and then handed over to the children's department for adoption, or are later taken to homes or institutions.

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Integration and Rehabilitation

- When these children grow and attend school or acquire some skills they are able to be independent by getting employment or by becoming self-employed. In this way they become useful members of the community.

REDUCTION OF CHILDREN IN NEED

You can reduce the number of children in need by:

1. Strengthening family relationships in the community, so that such children are taken care of by their immediate family members, especially orphans. This will provide a conducive environment for the child to grow in.
2. Providing family life education to the youth on consequences of pre-marital sex, as many of the abandoned children are as a result of unwanted pregnancies.
3. Implementing safe motherhood initiatives in order to prevent maternal deaths.
4. Providing family planning services, so that families get the number of children they can manage.
5. Providing information to the community members on the services available for adoption. This would help those members in the community who have no children of their own, as well as those with unwanted pregnancies

CARE OF ELDERLY

- The ageing process is often defined in terms of physical changes that negatively affect the body's function and appearance. Old age is associated with poor health, poverty and dependency.
- In the past, our traditional support systems were so effective that they made the problems of the elderly insignificant. However, today these support systems have disintegrated due to socio-economic changes in our society.

In Kenya, the elderly are defined as persons aged 64 years and above, although the retirement age is 55 years of age.

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- The number of elderly citizens in this country has been on the increase. This increase would not be of much concern if you already had support structures in place to take care of them. However, as mentioned earlier, these systems have disintegrated leaving them vulnerable to medical and social problems.

PROBLEMS OF THE ELDERLY

The following are problems of the elderly:

- Poverty
- Loneliness
- Poor nutrition
- Physical handicap
- Dental problem
- Mental problems
- Lack of energy to provide activities of daily living
- Inadequate housing
- Chronic illnesses
- Age related changes such as immobility and presbyopia
- Lack of care in sickness
- These problems are experienced by the elderly throughout the world, although they may vary in some cases, depending on the kind of support available in the community.

AVAILABLE SERVICES FOR THE ELDERLY

At the Family Level

In Kenya most elderly people live with their nucleus and extended family. These are the people who care for them.

- As a community health nurse, it is your responsibility to encourage families to care for their elderly persons. You need to educate them on the needs of the elderly, equip them with the necessary knowledge, skills and attitudes to provide effective care.
- You also need to educate members of the community on the importance of planning for retirement. The aim for this preparation is to help the elderly persons remain independent and comfortable in their own homes as long as possible. There is need to discuss the payment of pensions and allowances early for better planning.

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At the Community Level

- Elderly persons require community health services. It is your responsibility to identify them and make sure they are available and accessible to the elderly persons. Encourage them to join recreation facilities to improve their mobility and to join peer groups to help them psychologically.

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- During home visiting you should be able to provide direct care to the elderly. Churches also provide spiritual support as well as material support to the elderly persons. The women and youth groups offer different types of care. When these groups visit the elderly they alleviate their loneliness and improve their nutrition status by providing them with meals. They also help them with cleaning, repair work and gardening.
- As a health worker, one of your important roles is to become their advocates. You should let their needs be known by the community and motivate them, especially the youth, to have a positive attitude towards care of the elderly, so that you add life into their days.

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INSTITUTIONS FOR THE ELDERLY

In Kenya, there are a number of homes for the elderly and day care centres.

They provide the following services:

- Nutrition
- Activities of daily living such as personal hygiene
- Treatment of any sickness
- Recreational activities
- Safety and comfort
- The best care for the elderly is the one provided by the family.

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Hospitals

Geriatric hospitals are well established in developed countries.

- In Kenya the elderly do not have any special health services targeting them. In some communities it is commonly believed that old age is a cause of illness. This leads to delay in seeking health care for the elderly.
- Another reason why the elderly may delay to seek health care, is that they live far from the health services. As a community health nurse, it is your responsibility to sensitise and encourage community members to seek health care for their elderly persons

THE CHRONICALLY ILL

What is chronic illness?

An illness is said to be chronic if it meets one or more of the following criteria:

- Permanent
- Leaves a residual disability
- Caused by non-reversible pathological conditions
- Requires special rehabilitative training of the patient
- Requires long term supervision and care

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Examples of chronic illnesses include:

- Diabetes mellitus
- Arthritis
- Hypertension
- Sickle cell disease
- Renal disease
- Heart disease
- Terminal carcinoma and other debilitating diseases
- AIDS

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Affects Many Parts of Life

Chronic illness affects many parts of life, such as, the ability to work, relationships, emotions, dreams for the future and personal integrity.

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Brings Uncertainty

_Chronic illness brings great uncertainty, both on a day to day basis.

- They may be concerned about their finances, worrying about whether they will be able to support themselves, or whether they can qualify for or keep up with the disability.
- When they think about the future, they may worry about how far down they may slide, and about becoming dependent or financially destitute. They may feel at times that they have lost control over their bodies, and over their ability to plan and predict.

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Varies Greatly in Severity

Just as chronic illness is comprehensive in its effects, so too is it tremendously varied. Some people have relatively mild cases, while others may be bedridden. Most people are somewhere in between.

- There are many different patterns of symptoms. The bottom line is that each person's illness is different.
- Adding to the complexity, an individual's illness may vary over time. Some symptoms may disappear, only to be replaced by new ones. Some people may have a relatively stable course, while others may fluctuate between times of severe symptoms and times of remission.

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Varies Depending on Life Situation

The financial situations of patients vary enormously. Some continue to work, have spouses who work, or receive generous disability payments. They may find their financial situation to be similar to what it was before becoming ill.

- For others, however, financial pressures can be overwhelming. Some patients have little or no income.
- Qualifying for disability can be a long and stressful ordeal. Those with disability may worry about losing it. Others feel forced to work even when their bodies cry out asking for rest.
- The quality of relationships may vary greatly too. Some patients receive good support from family and friends. For others, relationships are a source of great stress. For all, however, chronic illness changes relationships, creating new strains and frustrations.

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Will be Affected by One's Response

Chronic illness calls for a different role for patients and doctors than is typically true for short-term illness.

- The doctor has limited powers, because there are no cures for chronic conditions and medications often have limited effectiveness.
- In chronic illness, much more responsibility falls on the shoulders of patients, the people who manage their illness on a day to day basis.

AVAILABLE SERVICES FOR CHRONICALLY ILL

- A chronic condition does not only affect the patient, but also all the family members who live with the affected person.
- This is because most chronic diseases bring about dependency and an extra financial burden on the family. A number of services are available for the chronically ill at the family, community and institutional levels.

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Family

Often, chronically ill patients are taken care of at home by family members. In order for a family to care properly for a chronically ill patient, they need to be prepared and educated on the requirements.

- It is your responsibility to provide them with the necessary information and to follow up on the patient's progress from time to time. This is important as it helps the family and the patient to feel confident in the care at home.

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Community

Community Health Workers (CHW), as well as Community Owned Resource Persons (CORPS), can assist the family to care for a chronically ill person at home. This can take the form of medical advice, material support and spiritual support.

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Institutions

Institutions that provide services to the chronically ill include hospitals, hospices, and support groups depending on the type of chronic illness.

- Hospitals admit these patients during the acute stage for management. Once this stage is over, they are then discharged and followed up at the consultant clinics, from where they are given medication to take at home.
- Hospices usually take care of terminally ill patients. They teach the patients and their caregivers all issues concerning care, and also make follow up visits at home, where the patients are being cared for.

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Management of Chronically Ill Patients

- The management of chronically ill patients depends on the stage of adaptation to the illness that the patient is in.
- In the first stage, they tend to be in denial and disbelief. During this stage you need to be actively involved in the care of this patient even if they are being cared for at home. Educate the family members to listen to all the expressions of feeling by the patient without criticising them. They should also be empathetic and listen to the arguments without being judgmental.

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- Patients in the second stage of adaptation to their illness commonly manifest with anger. During this stage the patient develops an awareness of the chronic illness. You should educate the caregivers to exercise restraint and self control.

In the third stage the patient undergoes reorganisation and is nourished by the concept of hope. You should therefore give hope generously within acceptable limits. You should also provide the patient and family with suitable and practical coping methods, and encourage the use of self-help devices if necessary.

- Knowing the patient's values, religion and beliefs will go along way in assisting you help the patient.

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Primary Prevention

These include:

- Provision of good prenatal, intrapartum and delivery care.
- Genetic counselling is done in cases where there is a genetic risk, for example, in diabetes mellitus and sickle cell disease.
- Discouraging risky habits, such as smoking and over consumption of alcohol, in order to reduce chances of lung conditions, liver cirrhosis and mental disorders.
- Early diagnosis and treatment of these conditions.
- Regular exercises.
- A healthy diet low in calories and animal fat, to prevent obesity, heart and blood vessel diseases.

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Secondary Prevention

- Regular medical checkups.
- Screening measures, such as, pap smear, self breast examination. Screening should take place at home, school and community levels

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Tertiary Prevention

Tertiary prevention includes, first aid, treatment and rehabilitation of diseases. It aims at preventing complications and disability.

DISPLACED PERSONS

- These are people who have been displaced from their communities or even countries.
- The displacement of people can be caused by a number of factors, the most common being armed conflict. Natural disasters, famine, political reasons and economic changes are some of the others.

They can be divided into two categories:

- Internally displaced persons
- Externally displaced persons

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Internally Displaced Persons

- These are people who have been displaced within their country, following ethnic clashes or disasters such as floods and earthquakes.

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- **Externally Displaced Persons**

These are people who have run away from their country as a result of civil war or political persecution.

- They are also known as refugees. For example in Kenya there are many refugees from neighbouring countries such as Sudan and Somalia.

The government works closely with the United Nations High Commission for Refugees (UNHCR) to settle all externally displaced persons.

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The problems experienced by displaced persons include:

- Housing
- Sanitation
- Water supply
- Lack of inadequate nutrition which may result in malnutrition
- Security risk and human rights violation
- Overcrowding which may cause rapid spread of diseases
- Lack of education opportunities
- Lack of health services
- Emotional needs
- Poverty

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- Displaced persons tend to develop health problems due to poor living conditions, as well as psychological and physical trauma caused by displacement.
- Some displaced persons are separated from their families and relatives and have lost homes, jobs and schools for their children. They need material as well as psychological care. Some may develop antisocial behaviour as a defence mechanism, as they are unhappy with the displacement.

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- It is important that some measures be taken to help them.

Apart from the above problems, people who have been displaced may bring new diseases, such as diarrhoeal diseases, typhoid, measles, meningitis, sexually transmitted diseases, and HIV/AIDS.

- Even their animals can bring in diseases such as rabies, anthrax, foot and mouth and brucellosis. So as you can see, they can also pose as a health risk to the community where they settle

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Effects of Displacement of People

- Displacement often leads to dramatic changes in the family structure and gender roles, relations and identities.
- In conflict situations, many women are suddenly thrust into the role of head of the household because the men are recruited to combat, they stay behind to maintain land, or migrate in search of work.
- There is also:
 - Escalation in the level of poverty
 - Reduction in the level of foreign aid
 - Demographic consequences
 - Religious effect
 - Conflicts between the host community and the displaced group
 - Political effect

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Services Available

The services available for displaced persons tend to be those provided by relief agencies, NGOs, the government through the county government, the church, and institutions such as UNCHR which take care of external refugees.

- They provide them with shelter, medical care, food and clothing, and sometimes rehabilitation in the form of teaching them new skills.

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- Refugees have some sort of international protection. Their needs are catered for by UNHCR and their rights are also protected.
- Internally displaced people are still citizens of their country, and are not afforded protection.
- The International Committee of the Red Cross (ICRC) protects the rights of internally displaced people. It conducts protection and assistance programmes for these victims.

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Management of Displaced Persons

- Your role as a community health nurse, will be to work with other health workers as a team, in order to deal with the various problems of displaced people.

There will be a need to set up relief centres which provide the following services:

- Screening and first aid to all new arrivals.
- Food assistance, especially to infants and children, as food is a basic need. The adults also need food for survival.
- Temporary shelter so that individuals can sleep and rest.
- Reproductive health services; antenatal, labour, delivery and post natal, family planning services are also provided

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- Medical care services, where curative care for common diseases and injuries will be provided.
- Immunisation programmes for children and pregnant mothers.
- Health education and community mobilisation.
- Identification and the use of the community health workers in the area is necessary.
- As these emergency services are given, the families should be encouraged to settle down, especially if the situation requires them to stay there for a long period. They should be encouraged to start growing their own food and rearing their own animals.

Widows/widowers

- **Widows/Widowers**

The death of a spouse makes one to become a widow or widower and you have many of them in your community. Some of the leading causes of death today in Kenya include diseases and road traffic accidents.

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The following diseases are a major cause of morbidity and mortality in Kenya:

- HIV/AIDS.
- Malaria.
- Hypertension.
- Typhoid.
- Diabetes mellitus.
- Heart diseases.
- Diarrhoeal diseases.
- Obstetric complications, such as pregnancy induced hypertension, ante partum haemorrhage and postpartum haemorrhage

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- As mentioned earlier, apart from disease, the second most common cause of death in Kenya is road traffic accidents.

The factors that contribute to road traffic accidents include:

- Unroadworthy vehicles.
- Careless driving, usually under the influence of substance abuse.
- Poor enforcement of traffic regulations by the concerned authorities.
- Unskilled drivers.
- Poor roads.

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- When a spouse dies the effect of the loss affects the entire family. They not only lose the love and care from that parent or spouse, but sometimes also the financial support. Therefore widows/widowers require a lot of support, empathy, understanding, love and care. They need to surround themselves with people who they can trust and rely on.
- This tends to be people who have been close, understanding and supportive to the family. They are people whom the family has shared important aspects of their life with, and are referred to as significant others. They include members of the extended family, friends, colleagues, church members, and so on. They help the family to cope with feelings of loss.

As a community health nurse, your role is mainly to counsel the widow or widower, and to support them as they go through the grieving process.

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Needs of Widows

- Psychological effects following the death of the husband, such as loneliness, and cultural practices not allowing the widow to re-marry.
- Poverty, due to not having the right to inherit property or have their right enforced, being evicted from their property, no support from family or relatives.
- Basic needs such as food and shelter can not be met due to poverty, resulting from unemployment and illiteracy.
- Support to care for the left children. Children especially girls are in an extremely vulnerable position, due to early marriage and child labour.
- Vulnerable to violence, sexual abuse and rape.

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- Exploitation at work place due to homelessness, illiteracy and poverty.
- Love and belonging. Some may be rejected by the family.
- Health needs for the whole family or the left spouse. This is especially so if she was sick, as in the case of AIDS or if both were involved in an accident, which killed one and left the other injured.
- Marriage, especially where men are culturally supposed to marry when their spouses die.
- Intense loneliness due to lack of previously established relationship. This may result in hurried replacement of the wife.
- Severely affected health and well-being because widowers are not able to care for themselves since most of the care was provided by the wife.
- Immense feelings which may result in physical and psychological symptoms such as sexual fear due to loss of a loved one, social isolation.

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Services Available for Widows and Widowers

In developed countries there are well established systems in place for helping widows or widowers.

However in Kenya there are no formal systems, although within many communities there are various support systems which can be mobilised to assist a widow or widower.

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The Extended Family Members

- In many communities, the traditional support system for a widow or widower is the extended family. They support the widow during the grieving period and sometimes take the responsibility of caring for the family. They also identify ways of assisting the widow or widower and in many cases conduct fund raisings or 'harambees' to help them meet expenses such as hospital bills or school fees for the children. This is a spirit which you need to cherish

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Clan

In certain communities, clans play a very big role in the care of a widow. The clan takes the responsibilities of the children's education, and may even assign individual members of the family, the responsibility over the children, in order to ensure that the burden is well shared out.

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Support Groups

Support groups for widows and widowers are common and exist in most of our communities. They come together to share their problems and help each other in solving them. They also contribute money, and sometimes look for donors to help them establish income-generating activities. A good example is the group known as Widows and Orphans of AIDS Kenya (WOFAK).

- As a community health nurse you should find out about these groups, so that you can advice and encourage widows and widowers to join them for support.

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Institutions

As mentioned earlier, in Kenya there are no established institutions designed to take care of widow and widowers. However, the government has established a system known as the widow and widowers pension scheme.

- This scheme pays a pension to the widow or widower as well as allowances for the children. It is important to remember that the widow and widower pension scheme only covers those who are employed by the government. For the unemployed the family and community takes the responsibility.

