

Future in Our Hands

Education and Development Fund

Newsletter - Issue 2 – Winter 2017



These are two of the 20 disabled children successfully treated since April 2017

The FIOH Fund helps disabled children in the Cameroon

During the past year the FIOH Fund made grants exceeding £6,000 to its partner Global Rehabilitation Services (GLORES) to treat and rehabilitate severely disabled children in the West Region of Cameroon. These funds enabled the completion of a new treatment centre. Stages of construction can be seen in the inset pictures below.

GLORES moved its operations and equipment from poor rented accommodation in April 2017 and received good local support, in addition to the support provided by the FIOH Fund, to continue its activities in the new centre. Parents also made contributions for treatment according to their means.



Foundations



Making sun-dried clay blocks



Roof construction



Main structure complete



Completed building

The need for a new Treatment and Rehabilitation Centre

Despite the success of GLORES there was a lack of space in the rented building it occupied before April 2017. The building had only four small bedrooms, a small physiotherapy treatment room, an adapted internal kitchen that was being used as the administrative office and an external kitchen which was being used as the orthopaedic workshop. The building was in a poor state of repair and there was a clear need for a new centre.

The new centre

The FIOH Fund became aware of GLORES work in 2008 and in 2014 provided the money to purchase land for the new centre, which was situated on the main road between Bafoussam and Foumban. Construction work started in 2014 and the walls were completed in December 2015 using blocks hand made from clay on the site. The roof was completed in September 2016 and GLORES moved into the new building in April 2017.



FIOH Fund trustee Mike Thomas with some of the children in the old rented building



New centre - Completed structure

How GLORES organises its work

GLORES organises its work in three major sections:

1. Prevention of disabilities through health education and encouragement of parents to vaccinate their children against diseases causing disabilities. Part of the education focuses on prenatal/postnatal care, nutrition, hygiene, genetic information and environmental pollution.
 2. Physical therapy that includes therapeutic exercises, mobility training, functional re-education, occupational therapy and activity training for coping with everyday life.
 3. Vocational training in 3 trades. The disabled person makes the choice of trade and is then able to undergo training in that trade for one year in a sheltered workshop environment. Younger children who cannot work are sent to local schools for their education. While the child is in school parents will take an active part in its education and prepare to take over responsibility for the child's welfare later on. After successful completion of the training disabled persons are settled in their individual group ventures or employment and there will be follow-up by GLORES for a few months after treatment and training has finished.
- Once a disabled person goes through the GLORES project he or she becomes a member of the GLORES family. GLORES monitors all the outcomes of its work in order to evaluate its effectiveness and introduce improvements where necessary.

Records

GLORES records the name, address and family background of each child referred for treatment and a diagnosis of the disability. A plan for treatment and rehabilitation is then devised. A daily treatment record is kept and a weekly assessment is made to check on progress. The treatment can involve a combination of the following – exercises, ambulation training, massage, wound dressing, plastering, splinting, occupational therapy, electrotherapy, surgery, stretching exercise, hydrotherapy, cryotherapy, wedging, pulley therapy and parent counselling. These are recorded.

Temporary water supply

At the start of the project there was an expectation that a connection would be made to the water supply to a new football stadium when the treatment centre was completed. However, the connection was not made until November 2017. A large tank and a pit latrine were installed as temporary measures until the mains water supply was connected. Bottled drinking water was brought in from the town.



Rainwater tank installed on pedestal

Activities in the new centre

Electricity was installed on 15th May 2017. There was little activity before this date.

GLORES has registered 76 children for treatment, 20 of which have been treated successfully. Some of the children who were not treated are in need of surgery for which funds are not available at present. 24 of the children registered have valgus leg deformities, 7 have congenital deformities and 4 have neuromuscular complications - 19 of the children are male and 16 are female. Ages range between 4 and 13).

There are 3 bedrooms which can accommodate 6 children. The average stay has been two weeks.

After this stay the children go home and return for follow-up treatment. Most of the children are able to stay with relatives in town. Most of the parents are farmers and treatment can be disrupted during harvesting.

A kitchen has been constructed at the rear of the building and crops have been grown to save on meal costs.

Volunteers have helped with gardening activities.



Beans planted at the rear of the building. The timber kitchen can be seen in the background



Temporary kitchen

The following pictures show some of the children and treatment activities.



Child with corrective plastering for knee contracture



Corrective plastering



Child learning to walk with splints



Mother happily showing her child's corrected legs



Happy father with child treated for leg deformation



Before and after treatment

Splints used for the correction of some deformities or as ambulation aids for children with permanent paralysis of limbs, are made in the orthopaedic workshop.

Orthopaedic workshop

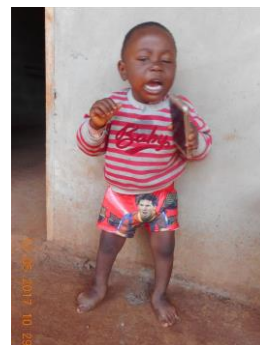
GLORES has a range of equipment and materials for wound dressing, plastering, splinting, occupational therapy, electrotherapy, stretching exercises, hydrotherapy, cryotherapy, wedging and pulley therapy.



Applying corrective plastering

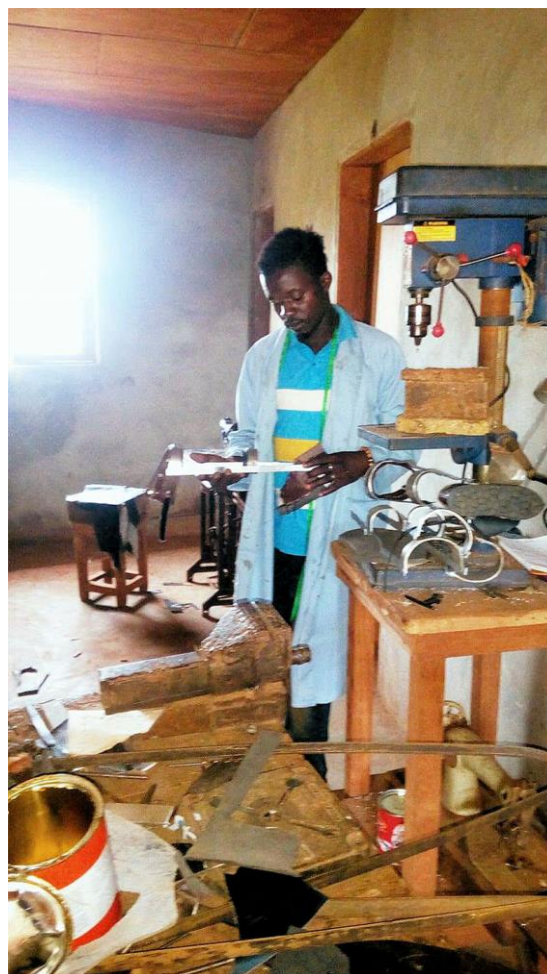


Children before (on the left and after (on the right) treatment



Making splints

Splints made:
55 lower limb splints and 5 calipers
5 hand wrist splints for contractures and paralysis



Orthopaedic workshop

Ticden

Ticden, a two month old girl with congenital deformities of both lower limbs, was referred to GLORES by a doctor in June 2017. She had external rotation of the hip joints since birth. Her father is a farmer aged 50 and the mother is a housewife aged 40 years. They have 3 other children who all go to school.



Hip massage was applied to soften the tendons and splints used to bring the legs and feet to the normal position. Positive progress has been made with the practical cooperation of the parents over a period of 5 months



Application of splints



Ticden after treatment and with the founder and director of GLORES, Alfred Wingo



GLORES Association members

Please help to expand the work of GLORES and transform the lives of disabled children. There are several ways to donate:

1. Via the web site
<http://www.fiohnetwork.org>
2. Directly into the Future in Our Hands E&D Fund bank account
IBAN: GB07CPBK08929965050707
BIC: CPBKGB22
3. UK donations by cheque to the address below made payable to *Future in Our Hands E&D Fund*
4. UK donations using the *donation form* enables bankers order payments and gift aid donations from UK taxpayers. Gift aid enables the charity to claim 25% of the donation from the Inland Revenue to add to the donation.

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