



JAMAICA

A CASE STUDY

REHAB CASE STUDY

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Claude is a 42-year-old Jamaican gentleman with a diagnosis of cerebral palsy. He is a resident of an apostolate¹ called Jerusalem, in the city of Spanish Town. The location is west of Kingston, the capitol of Jamaica.

Claude is a resident in the Mustard Seed Communities (MSC). MSC began in 1978 in an impoverished community on the outskirts of Kingston, Jamaica, as a home for a handful of abandoned and disabled children. Today MSC serves more than 500 children, young adults and families who belong to the most vulnerable groups in Jamaican society. The population of their homes includes children and young adults with disabilities, children affected by HIV/AIDs and teen mothers along with their babies.

How Claude came to live at MSC is a very similar story to many residents brought there. Born to a single mother with minimal finances and no financial support from the biological father, Claude was a special needs child that presented a greater challenge for his mother. In Jamaica, many special needs children are either abandoned or given to another family member.

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His maternal grandmother raised Claude, and he stayed with her until the age of 15 years when she was no longer able to care for him. He was brought to MSC where he lived in a dorm in the children's home with a variety of young residents with mental and physical disabilities. Claude had no formal education,

but he is cognitively age appropriate. Physically, however, he is severely developmentally delayed and unable to achieve the basic skills of sitting, creeping or weight bearing for transfers.

Claude has a diagnosis of cerebral palsy quadriplegia with moderate to severe spasticity, and left untreated over his 42 years, he developed many joint contractures. Specifically, he developed a pelvic obliquity that led to scoliosis along with fixed hip and knee flexion contractures that prevent him from sitting independently.

Claude has minimal use of his right hand, but was placed in a fully reclined position where he lacked the strength to move his shoulders against gravity to use his upper extremities functionally. He was not able to use his hands

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for self-help skills such as grooming or feeding. He can, however, get his hand to his mouth for eating finger foods.

Due to his lack of trunk support and poor sitting skills he had been placed in a reclined position for most of his life. This limited his visual field as well as increased risk for aspiration. His shallow breathing in this reclined position affected his vocalizations and over the years his voice became even softer. Claude is a very patient man, but he became more frustrated as others had difficulty understanding him despite his good expressive language.

Claude lived in the youth dorms for more than 20 years and is now older than most of the residents. We were told that other dorm residents who were mobile took his items until he was given a special locker to keep his personal items safe. He is aware of his environment, but his physical disabilities made it difficult for him to defend himself and eventually he

CLAUDE'S GENTLE SPIRIT AND STRONG FAITH EARNED HIM RESPECT FROM BOTH RESIDENTS AS WELL AS STAFF. HE WAS GIVEN THE NICKNAME "MAYOR."

was moved to the young adult dormitory. Claude's gentle spirit and strong faith earned him respect from both residents as well as staff. He was given the nickname "Mayor." He became an advocate for other residents and formed good relationships with staff. He's also taken a role as a spiritual counselor for residents and staff.

Liz Merrick, a volunteer and team leader for 13 years from Atlanta, Georgia, was able to arrange a day trip to the beach for Claude. The island of Jamaica has some of the most beautiful beaches in the world, but Claude had never experienced this. Merrick took him through the sand and into the water. The buoyancy of the water and the sensation of sand under his feet brought him joy and excitement, and he told Merrick he was thrilled to feel like he was walking.

SEATING

Claude's first seating support system was a lawn chair. The webbing accommodated some of his deformities, kept him contained and was low to the ground for safety. However, due to the lack of any padding on the lawn chair, Claude developed pressure ulcers on his support surfaces including on his feet. Towels were added to provide support, but his contractures in both flexion and trunk rotation made it difficult to position him well. The towels and other supports either migrated or ended up in other residents' wheelchairs.

In 2013, Claude received his first custom manual wheelchair with a seating system from Wheels for Humanity. This wheelchair allowed Claude to sit up for the first time, but he did not have adequate hip flexion to sit at a 90-degree seat-to-back angle. He slid forward and a seat extension was added to give him a platform to support his feet (see Picture 1).

A part time occupational therapist joined the MSC staff for a year. She suggested a reclining wheelchair with elevating leg rests. She discovered Claude liked to paint and began to provide him painting opportunities. However, the reclined position was still not functional and made it difficult to position him near a table.

In 2014, I met Claude for the first time in his reclined custom manual wheelchair. It was quite evident that his sliding was due to the lack of pelvic support and the elevating leg rests were in an upright position to keep him from sliding further off the wheelchair seat. Prior to this trip a shipment of custom wheelchairs had arrived, including tilt in space manual wheelchairs with seating systems.

My first step was to evaluate and determine how much hip flexion Claude had in order to sit in a more upright position, rather than assume he needed to be reclined. Lying in supine, he presented with limited hip range of motion,

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Liz and Claude in his first wheelchair



Claude in a manual reclining wheelchair



PICTURE 3

Liz and Claude in his final wheelchair



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windswept legs, and a pelvic obliquity. Although hip flexion was limited, this would enable Claude to be more upright than the fully reclined position of his present wheelchair (see Picture 2).

Next, I recommended and was able to locate a tilt in space frame. We opened the seat to back angle to accommodate his limited hip flexion, which provided him a better upright sitting position. Finally, we were able to find the right tilt angle to give him the best position, keeping him upright, as well as offering a change of position throughout the day. To position him securely in the adapted contour seating system, we mounted a pelvic positioning belt positioned on his lap as well as a contoured back with lateral supports and an anterior trunk strap to keep his trunk upright and in midline. Due to severe distortions of his feet, I created a “foot hammock” made of fabric tied to the frame (see Picture 3).

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This upright position provided Claude a better visual field for better eye contact, enabling him to be more social with peers and staff. The biggest difference we noticed immediately was his greatly improved speech. His lung capacity improved his respiration to produce more speech volume. Claude is now able to pull up to a sink for grooming with assistance, as well as a table for self-feeding and to pursue his love for painting.

I returned to Jamaica in 2015 to see Claude and how he continues to use

I RETURNED TO JAMAICA IN 2015 TO SEE CLAUDE AND HOW HE CONTINUES TO USE HIS WHEELCHAIR SUCCESSFULLY. HE EXPLAINED THE NEW WAYS AND PLACES HE USES HIS CHAIR, ESPECIALLY IN CHURCH.

his wheelchair successfully. He explained the new ways and places he uses his chair, especially in church. He presented with confidence and appreciation, requesting only a few adjustments to his seating and maintenance to his frame. The staff was instructed and trained on correct positioning, especially when first putting him in his wheelchair in the morning.

A two-minute “Safe Seating Training Video” was made on this last trip, which was distributed to the administration to use for staff and new employees to all the MSC.

CONTACT THE AUTHOR

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REFERENCES:

1. APOSTOLATES ARE RESIDENTIAL COTTAGES ON MUSTARD SEED COMMUNITIES PROPERTIES AROUND JAMAICA.

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