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FINAL REPORT

OUR Philosophy on Rehabilitation Services for People with Mental Retardation and our Action Plan

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INTRODUCTION

In our country, Senegal, we note a lack of Rehabilitation services for people with mental Retardation (M.R.). The only service that receives the children with M.R. is the Pedopsychiatry's service of Dakar-FANN University Hospital. This service is not enough equipped for Rehabilitation children with M.R.

The attendance of people with M.R. needs actual Rehabilitation services in our country; ASSEDEME is the Senegalese Association for children's Protection with M.R. This Association has a project to create at Dakar a big Rehabilitation service for children with M.R. Unfortunately, this project is not still executed because the financial means are not found although the grounds exists.

Our philosophy for a good Rehabilitation is to consider the social and cultural realities of People with M.R..

We give here, firstly the bases of our philosophy secondly, we point out the requirements of our philosophy services for People with M.R. and at last we announce our action Plan.

I - Our philosophy on Rehabilitation Services for People with M.R.

A- Our philosophy

When we carry out an intervention, we need to understand the culture demands of the culture in the community where the individual lives and acts every day. Life style and the sense of values that each home and school possess may be said to be a kind of culture.

The daily lives of children and adults with developmental disabilities are, as a matter of course, influenced by their culture. Therefore, before intervening, we need to assess the individual's behavior in the context of culture background, and consider the goals and the method of approach.

Our philosophy is that we have to respect the child's and family's culture.

At last the social environment has a comparatively important role in human development. The social environment refers to all the social interpersonal functions in the actual environments where the individual lives and into which the individual may possibly

go. So we need to assess the behavior of the people that the child will contact in the natural environment.

B- The requirements of Rehabilitation services for people with M.R.

From our point of view, there are many kinds of rehabilitation services:

- 1) counseling or guidance and advice of families who cannot recover from the shock of the birth of a child with M.R. and who cannot have harmonious family relations because of having a child with a disability;
- 2) Enforcement of the proper therapy program after various examinations and developmental evaluations;
- 3) Various types of training, such as physiotherapy, occupational therapy, and speech therapy, necessary for children with sensory disabilities depending on the kind and degree of their disability;
- 4) Referral to special organizations such as parent's meetings, temporary care service organizations, or volunteers, when intensive medical treatment becomes necessary;
- 5) as children develop, shift to ensuring a setting in which the child is integrated with other children without disabilities, such as group daycare agencies or day nursery facilities.

II- ACTION PLAN = "Senegal three years plan"

1- Subject of this plan : The integration of the children with M.R. in the society.

2- Objectives:

- short term objective: To change people's position
- Long term objective: To find a place in all the fields of living for people with M.R.

3) Beneficiaries = children with M.R.

4) Resources =

a - Institutional :

- Ministry of Health and Social Action
- Ministry of National Education
- Ministry of child, Woman and Family

b - Human Resources:

- Doctors : Pedopsychiatrists, Pediatricists, Neurologists.....
- Medical workers
- Psychologists
- Social workers
- Special teachers
- Physical therapists
- Volunteers
- Parents
- Religious people

c - Funding

- Government
- Private sources
- Associations: ASSEDEME, voluntary organization,
- International cooperation: France, Belgium, Japan, etc

5- Training:

We will have an annual course of one hour per week in the national schools and University for 3 years.

6- Official employees.

- We will contact the director of social Action at Ministry of Health and social Action, the director of training at Ministry of National Education and the director of childhood at Ministry of child, Woman and Family.

- We will contact the National Employees for Information and Cooperation.
- We will contact voluntary organizations for the volunteers.

7- Facilities :

- schools
- University
- Hospitals
- Associations

8- Methods:

We will use for this plan

- seminars
- Lectures
- National research / study
- Media: Radio, TV, Newspapers.

9) Difficulties

We expect to meet the following difficulties during the training plan:

- Lack of special schools and special centers for people with M.R.
- Lack of cooperation of national staff
- Lack of parent's cooperation

10) Solutions:

- We must have few meetings with the schools staff, hospitals staff and few public lectures for changing wrong ideas;
- Try to urge the official persons in the country for more intervention with our target;
- We must do broadcasts (radio and television) and write news in the newspapers;
- We must have monthly meeting with all actors' plan for discussing with the difficulties they have and refreshing their information

11) Results:

In the end of the training plan we should have the following results:

- Training course in M.R. in twenty schools and at University
- To integrate the children with M.R. in some ordinary school
- To create special classes and special schools
- To create a special center
- To develop ASSEDEME's Actions
- More acceptance in the family and society.

12) Evaluation

- We must go step by step with training
- An inclusive evaluation must be done every six month to know if there is any deviation of the criteria of the plan and to more appreciate the acquired results.

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