



News

from the

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Word from the President

Happy Nauryz to all of you in Kazakhstan! Wishing you for this New Year: goodness, health, happiness and great friendships with those around you! May dreams come true, and health be restored.

Like all of us, we look back on a challenging year, facing the direct and indirect impact of Covid-19. One of the core principles within KEA is that we advocate for accessible, acceptable, and available health (services) for all, which also includes primary health care for those suffering Covid-19, and the rehabilitation which is needed to fully recover. This is in line with the Universal Declaration of Human Rights (UDHR), which states in article 25 that 'Everyone has the right to a standard of living adequate for the health and well-being of himself and of his family, including food, clothing, housing and medical care and necessary social services, and the right to security in the event of unemployment, sickness, disability, widowhood, old age or other lack of livelihood in circumstances beyond his control'.

According to the World Health Organization (WHO), the focus for the 21st century should be on rehabilitation as a priority health strategy. Aging populations, and an increase in the number of people living with non-communicable diseases like cancer, cardiovascular diseases, diabetes and chronic respiratory diseases and their risk factors, are an increasing public health and development challenge in Kazakhstan. Occupational Therapists are trained and skilled in observing, planning, treating, and evaluating this process of rehabilitation, whether it is children with special needs, (elderly) people suffering from cardiovascular diseases or dementia, people with mental health issues or those recovering from Covid-19.

Join us by connecting with us – whether you are working in a healthcare setting, facing challenges at home because of health issues, teaching or studying at a (medical) college or university or connected to government entities where decisions are being made we love and need to work together to reach the goal of health for everyone.

Looking forward to hearing from you,

Gerdine (B.G.) Lok – B.Health Occupational Therapy
President of KEA



REHABILITATION
— 2030 —
a call for action

Assessment of a child's development

Bouwine van Eeden Petersman – Occupational Therapist in Almaty

Recently an Occupational Therapy (OT) colleague and I met Dina* and her son David*. After a difficult birth, Dina was told that her new born baby had Cerebral Palsy (CP). Through one of her friends she had heard about OT and she asked for help for her son.

There was not a lot information about David's diagnosis and medical history available, so when we met the family for the first time we planned to see David regularly to do developmental assessments. In this way we could intervene as soon as there were signs of developmental delay or other health problems that could affect David's quality of life. At the ages of 6 weeks, 3 months and 6 months we evaluated David's physical, mental and social development by using the record sheet from David Werner's book 'Disabled Village Children'.

At his 6-month assessment David showed some developmental delays, like poor head control and asymmetrical use of his arms. The assessment helped us to explain to the parents the areas in which David was developing normally and where he showed delay, and we set goals for the coming months.

Through this early intervention we hope to stimulate David as much as possible so that he will be able to reach his full potential!

*Names are changed

Name: _____

Birth date: _____

Date: _____

EVALUATION OF A CHILD'S LEVEL OF PHYSICAL DEVELOPMENT

Note: Although on these guides physical and mental skills are separated, the two are often closely interrelated. These charts show roughly the average age that a normal child develops different skills. But there is great variation within what is normal.

RECORD SHEET
6
(page 1)

| PHYSICAL DEVELOPMENT | Average age skills begin | 3 months | 6 months | 9 months | 1 year | 2 years | 3 years | 5 years | What to do if a child is behind | | |
|------------------------|--------------------------------|---------------------------------|------------------------------------|--------------------------------------|----------------------------------|--|---|---------------------------------|--|--|---|
| Head and trunk control | lifts head part way up | holds head up briefly | holds head up high and well | holds up head and shoulders | turns head and shifts weight | holds head up well when lifted | moves and holds head easily in all directions | | Activities to improve head and trunk control (see p. 302). | | |
| Rolling | | rolls belly to back | rolls back to belly | rolls over and over easily in play | | | | | Activities to develop rolling and twisting (see p. 304). | | |
| Sitting | | sits only with full support | sits with some support | sits with hand support | begins to sit without support | sits well without support | twists and moves easily while sitting | | Work on sitting. Special seating if needed (p. 308). | | |
| Crawling and walking | | begins to creep | scoots or crawls | pulls to standing | takes steps | walks | runs | can walk on tiptoe and on heels | walks easily backward | hops on one foot | Activities to improve balance (see p. 306). |
| Arm and hand control | grips finger put into hand | begins to reach towards objects | reaches and grasps with whole hand | passes object from one hand to other | grasps with thumb and forefinger | easily moves fingers back and forth from nose to moving object | | | throws and catches ball | Eye-hand activities. Use toys and games to develop hand and finger control (see p. 305). | |
| Seeing | follows close object with eyes | enjoys bright colors/shapes | recognizes different faces | eyes focus on far object | looks at small things/pictures | Sees small shapes clearly at 6 meters (see p. 453 for test). | | | | Have eyes checked (see p. 452). If poor, see Chapter 30. | |
| Hearing | moves or cries at a loud noise | turns head to sounds | responds to mother's voice | enjoys rhythmic music | understands simple words | hears clearly and understands most simple language | | | | Have hearing checked. If poor, see Chapter 31. | |

First page of the child development assessment from 'Disabled Village Children' by David Werner

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