

The Role of Care-giver Training In Promoting an Enabling Social Context for Orphans in Johannesburg

Lyndsay Koch

University of the Witwatersrand

Ethics no: M080614



Department of
Occupational Therapy
School of Therapeutic Science | Faculty of Health Science



INTRODUCTION

- Social Context
 - Human interactions within the environment
- Most NB environmental factor in development
 - Ability to modulate brain chemistry and brain development!

INTRODUCTION

- Moore (2002)
 - Quality of relationship with care-givers
 - Responsiveness to child's needs, feelings, interests
 - Protection from harm (real OR perceived)
 - Clear behavioural limits and expectations
 - Consistent
 - Benignly maintained
 - Opportunities and support for learning new skills
 - Opportunities to learn social skills
 - Opportunities and support in learning to resolve conflict
 - Stable, supportive communities



INTRODUCTION

- Thus: responsive care-giving!
- Research in Eastern Europe:
 - Cold, harsh care-giving
 - Dearth of human interactions
 - Spending a lot of time alone!
- Research in South Africa:
 - Physical care NB
 - Cold care-giving
 - Spending a lot of time alone!

PROBLEM DESCRIPTION

- Thusanani Children's Foundation
 - Promote normal development amongst children living in residential care facilities
 - Training programme aimed at care-givers and management
 - Normal development
 - Importance of stimulation and play
 - Incorporating play into daily routines

PROBLEM DESCRIPTION

- Is the situation as bad in SA?
- What are the trends in time-use patterns in SA?
- Is training enough?
- Does increasing knowledge and skills translate into changed behaviour?

OBJECTIVES

- To measure temporal context of infants and toddlers living in residential care facilities in terms of the quantity of time spent in different activities.
- To measure the social context of infants and toddlers living in residential care facilities in terms of the human interactions experienced by these children during the day.
- To compare the temporal and social contexts of two groups of children to determine if caregiver training can be effective.

STUDY DESIGN

- Quantitative
- Descriptive
- Cross sectional
- Group A = received training
compared to
- Group B = not received training
- Further divided into age groups – infants and toddlers

SUBJECTS

- Matched sample of convenience
- 6 residential care facilities in greater Johannesburg area) participated
 - 3 facilities where caregivers had received training
 - 3 facilities where caregivers had not received training matched according to:
 - Size of facility
 - Type of facility
 - Availability of funding
- Exclusion criteria for residential care facilities:
 - Receiving intervention on site from Thusanani but no training at present
 - Specifically designated as a “Special Needs Home”
- 60 infants and toddlers were observed

PROCEDURE

- Spot observations
 - Tirella et al. and Daunhauer et al.
 - Valid and reliable
 - Developed from time diaries, but objective observer
- Observation process
 - 08:00 – 17:00
 - Observation made every 30 minutes
 - 2 – 3 children observed consecutively on 1 day
 - Observations made in whichever area is normally used at that time of day
 - Observations made as unobtrusively as possible – if possible, observer to be positioned outside of room between observations
 - Observers avoid interaction and contact during observations
 - Recorded on data sheet
 - Care-givers
 - Aware of aim of study
 - Not aware of which child is being observed
 - Completely anonymous

TRAINING PROGRAMME

- 6 weeks
 - Once a week
 - 3 hour morning programme
- Teach knowledge and skills
 - Normal development
 - Factors affecting normal development
 - The need for stimulation and play
 - The effects of institutionalization
 - Brief introduction to attachment and bonding
 - Common disability encountered in facilities

Training Programme

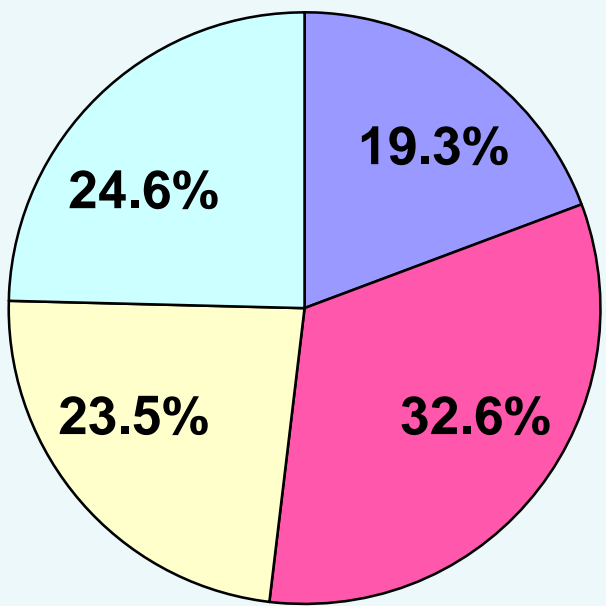
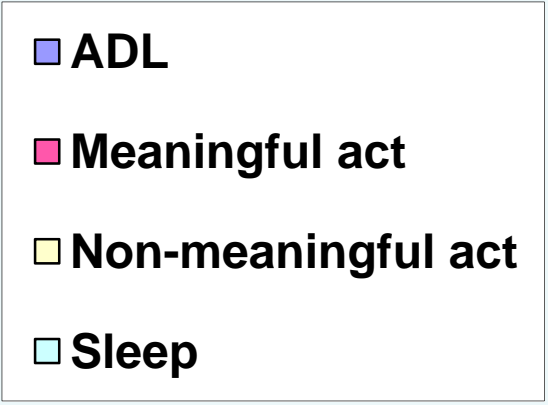
- Emphasis on skills
 - Done at residential care facility
 - Opportunities for practice of activities with therapist facilitator
 - Tailored to specific children in facility
- Emphasis on time already spent with children
- Problem solving session with management

DISCUSSION OF RESULTS

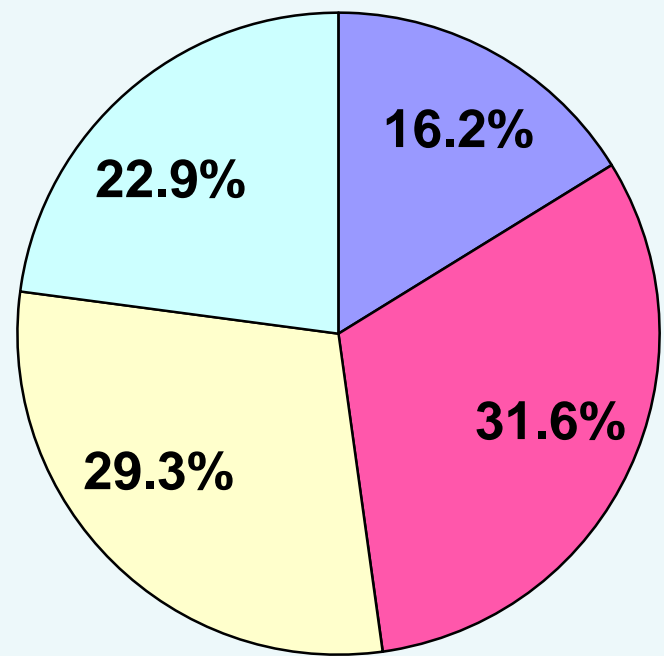
DEFINITION OF TERMS

- Alone
 - Not engaged in any interactions with either caregiver or other children
- Meaningful activity
 - Developmentally appropriate tasks or learning-based tasks (includes play)
- Non-meaningful activity
 - Developmentally inappropriate activities (e.g. repetitive mvts)
- Personal Management (PM)
 - Sometimes called ADL
 - Consists of physical care of child (feeding, bathing, dressing, etc)

ACTIVITY PROFILE OF INFANTS



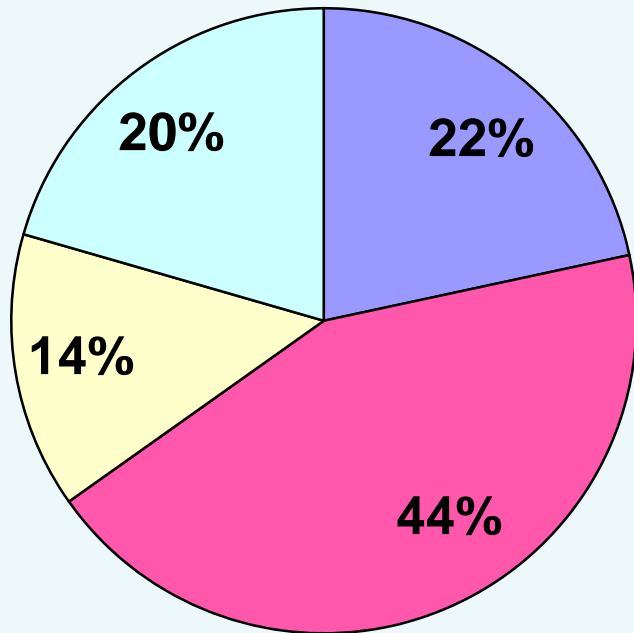
Facilities With Caregiver Training
(n = 15)



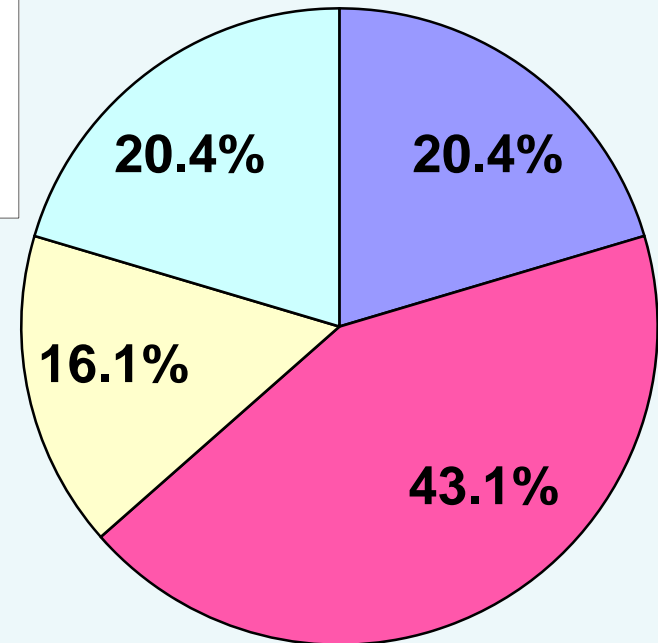
Facilities With No Caregiver Training
(n = 14)

ACTIVITY PROFILE OF TODDLERS

- ADL
- Meaningful act
- Non-meaning act
- Sleep

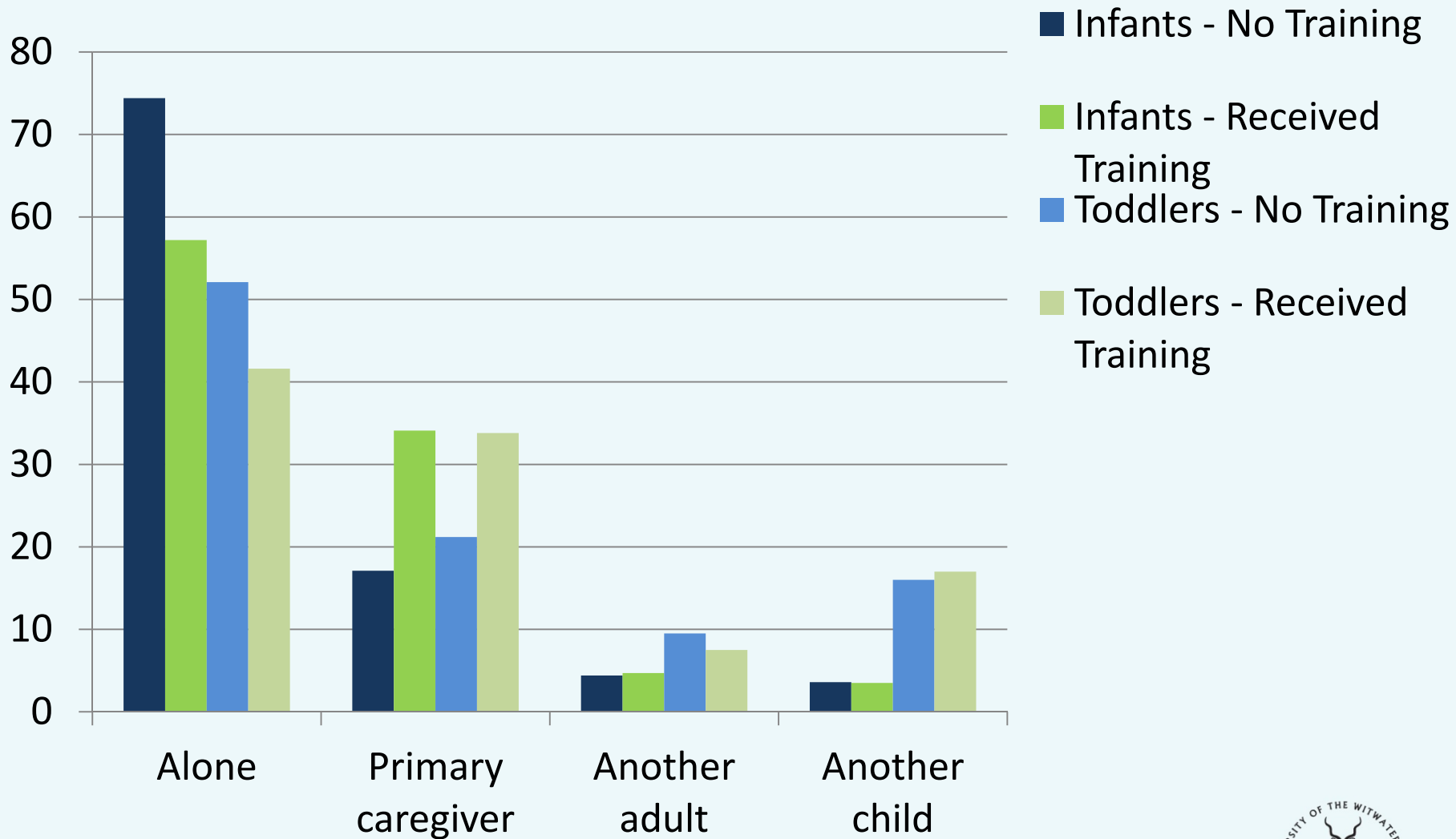


Facilities With Caregiver Training
(n = 15)

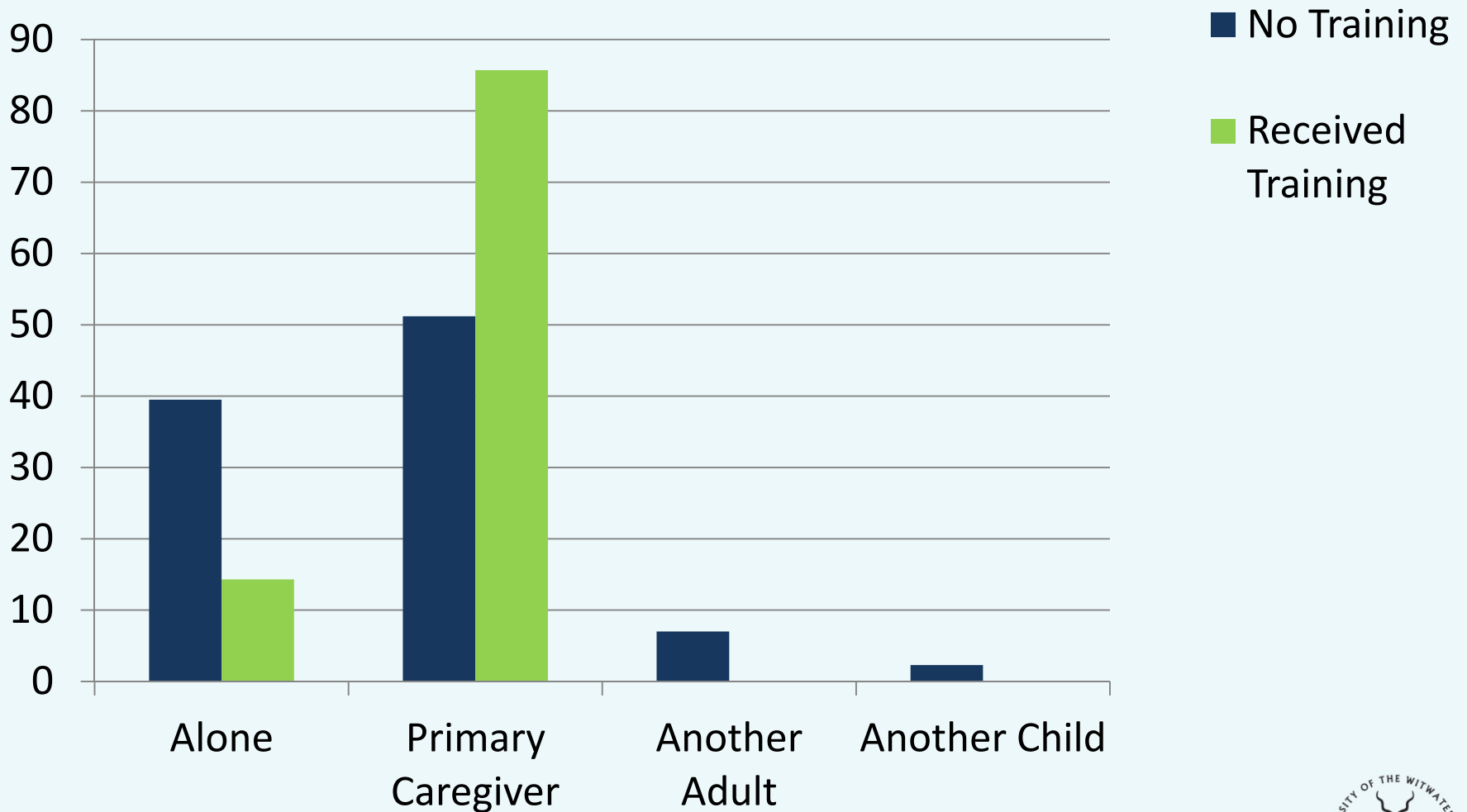


Facilities with No Caregiver Training
(n = 16)

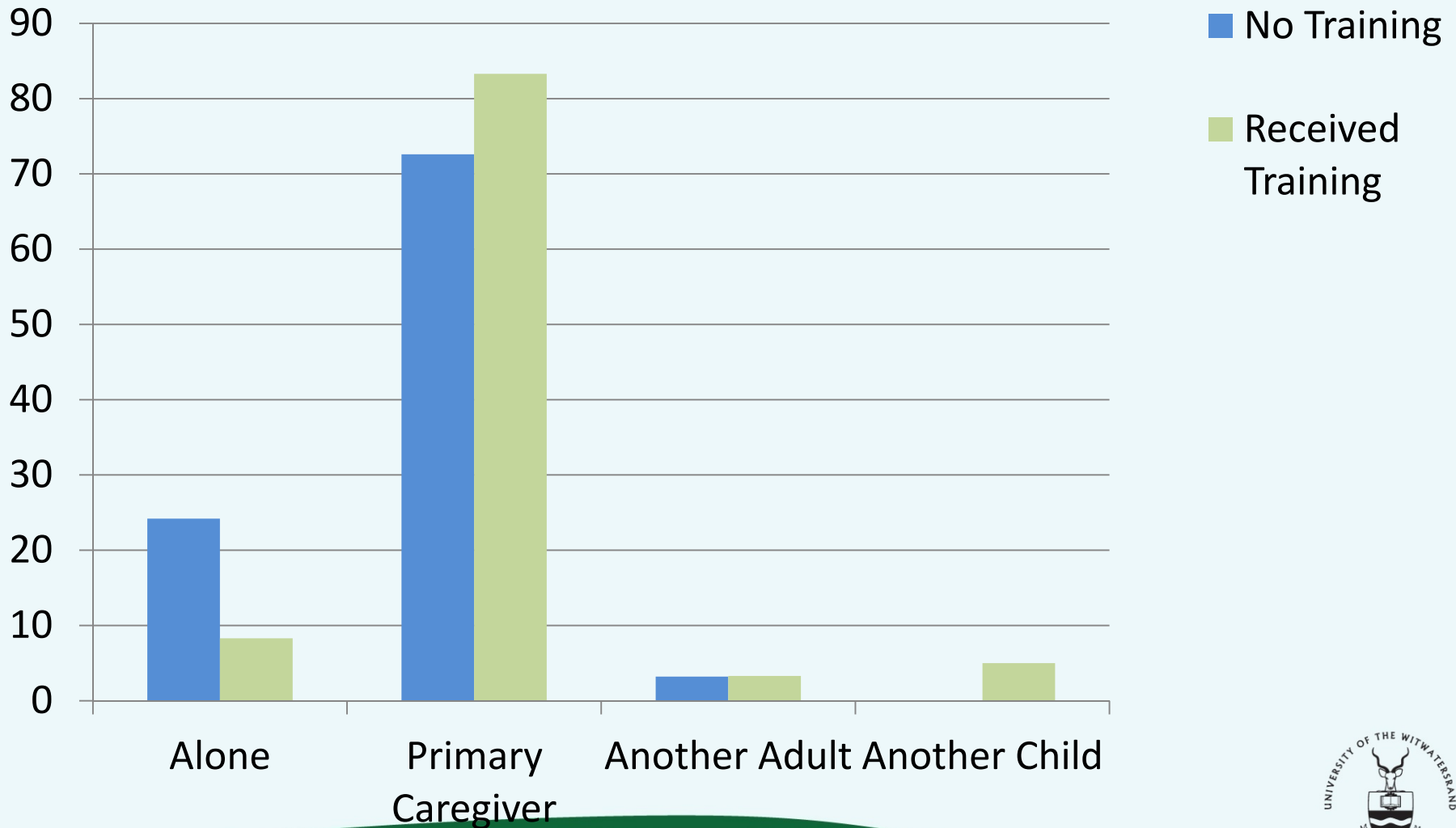
TIME SPENT WITH OTHERS



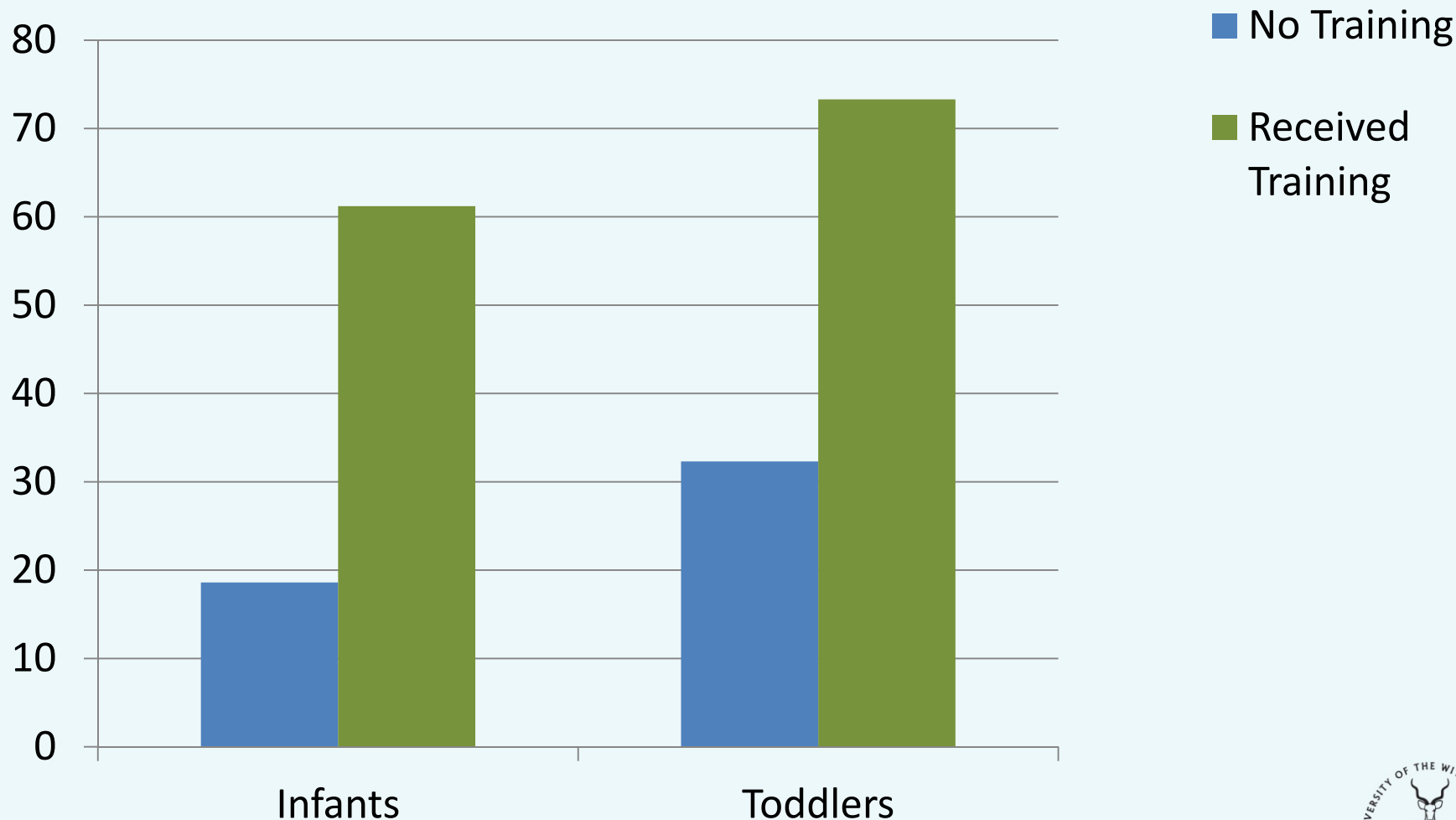
INFANTS - PM TIME COMPARISON



TODDLERS – PM TIME COMPARISON



CAREGIVER LANGUAGE USE DURING ADL TIME



CONCLUSION

- Activity Profiles – factors other than training play a role
- Training effective – social context
 - Particularly PM time
 - Particularly in caregiver language use

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