

**Ashraya Project Status Report
Grameena Abyudaya Seva Samsthe
Rehabilitation & Therapy Center for Physically Disabled - 2007**

Programmes supported by Ashraya Foundation



Therapy Unit

Ashraya Foundation supported GASS in setting up physiotherapy unit purchasing materials to continue therapy to persons with severe disabilities. This is ongoing activity and everyday children come to the therapy unit for exercises.

1.Name of the children who benefited from the therapy unit:

Name	Age	Type of disability	Problem	
Chetan. M.A	13	CP with MR	-Upper and lower limbs weakness' - Both TA tightness -Poor trunk control & poor balance -poor hand functional activities	-Stiffness reduced -improved in balance -Hand functional improved
Anand	10	CP with MR	-Both wrist and ankle joint stiffness -Poor trunk control -poor eye and hand co-ordination -difficulty in ADLs - Problem in Communication and understanding -saliva	-saliva stopped - Stiffness reduced -sitting balance improved - eye and hand co-ordination improved - with the support of parents he is learning the ADLS
Shahit Ullakhan	6	Hemeparalysis	-Rt leg T A tightness - Rt leg slight hyper extention - Both leg flat feet - poor Balance - Difficulties in Walk	- Stiffness reduced - Improved balance -
Eshwar	5	CP With MR	-Upper and lower limbs are weakness -Dealy development in mentally -Unable to sit and stand -Poor trunk control and balance	-Improved kneeling halfkneeling balance -Reduced adductor and TA stiffness

			-scissor pattern movement -speech problems -Difficulties in ADLS Skills	-He can walk with splint and walker support
Srinivas	5	CP with MR	-Upper and lower limbs weakness -poor trunk control -Adductor,knee and ankle joint stiffness -unable to walk -speech problems -Difficulties in his adls skills -	-stiffness reduced -hand functional activities is improved - with the support of parents he is learning the ADLS -
Nayan kumar	5	Cerebral palsy	- Upper and lower limbs weekness, both wrist and ankle stiffness, poor balance , Poor eye and hand coordination, poor fine motor and gross motors activities, and speech problem. Difficulty in ADLS.	-Stifness reduced -improved in balance -Hand functional improved
Rehaman	8	Cerebral palsy	-both wrist and ankle stiffness, - poor balance , -Poor eye and hand coordination, -poor fine motor and gross motors activities, -and speech problem - Difficulty in ADLS.	-improved fine motor and gross motors activities, -Stifness reduced
Anusha	3	CP with MR	-Both L/L limbs weakness -Poor Balance and co-ordination -Speech problems -Need medial arch support	-Improved fine and gross motor functions -She can sit with support -
Thejashwini	7	CP Hemi	- Both L/L limbs weakness -Both wrist andTA tightness - speech problem - Difficulty in ADLS. -Hyper activities	-She is speaking one one word -Reduced tightness
Kavyasri	13	CP withMR	-Both elbow,wrist,hip,knee,and ankale joint Tightness -poor trunk control -poor sitting balance -poor hand functional activities - Difficulty in ADLS.	-Improved sitting and standing balance -She can walk with support
Ushamonika	10	Cerebral palsy	-Both U/L and L/L limbs weakness -poor neck and trunk control -Poor sitting and standing balance -poor eye and hand coordination -She can't walk	-Improved sitting and standing balance -She can walk with support
Nagaraj	53	Hemipligia	-Lt wrist and TA tightness Lt leg shortness	-Stiffness reduced
Jagadish	58	Low back pain	-back pain	-Reduced back pain
Bc Prakash	52	Gluteal muscles pain	-He can't sit - sever Gluteal muscles pain	-Reduced back pain -He can sit
Latha	3	Cerebral palsy	- Both L/L limbs weakness -Both knee hyper extention -Poor eye and hand coordination -Both evertion foot -poor grass motor and fine motor functions -Poor balance	-Improved eye and hand coordination -Improved fine and gross motor functions -She can walk with supoort -She is speaking one one word
Naseebha pathima	5	Cerebral palsy	-Both U/L and L/L's Elbow,wrist, hip, knee, and ankal joint tightness	-Reduced stiffness --Improved eye and hand

			-poor hand functional activities -speech problems -Poor eye and hand coordination -saliva	coordination -Improved fine and gross motor functions -She can sit with support
Vanajakshi	14	Cerebral palsy	-Adductor, knee and ankle joint tightness -Flexere pattern movement -She can't walk -poor trunk control	-Reduced stiffness -she can walk with silent and gaiters support
Muttumaimanna	55	Artheraities	-Both knee joint pain and stiffness -He can't walk such a long distance -	-Reduced pain and stiffness
Eshwaraiah	56	OA	-Both knee joint pain and stiffness -He can't walk such a long distance -	-Reduced pain and stiffness
Divaker	18	Lt Hemi	-Lt wrist and ankle joint stiffness -He walks limping -Need AFO splient	-He is using AFO splient - Reduced stiffness
Nithin kumar	3	CP	-Poor sitting and standing balance -poor grass motor and fine motor functions -Speach problems -Difficulties ADLs skills	-Improved fine and gross motor functions -He can sit with support -
Harshith	4	CP with MR	-Both elbow, wrist, hip knee, and ankle joint stiffness -Poor trunk control -Poor eye and hand coordinations -Saliva	-stiffness reduced -With support he can sit -
Bidhu	6	Cerebral palsy	-Poor balance -Poor trunk control -TA slight tightness -Difficulties in ADLs skills	-Impromtent in ADLs skills -With support she walk
Suresh	6	Cerebral palsy	C -Difficulties in ADLs skills --Poor balance -Poor trunk control	-Impromtent in ADLs skills -With support she walk -stiffness reduced
Mahamadh mausur	3	Cerebral palsy	-speech problems -Poor eye and hand coordination -saliva -Adductor, knee and ankle joint tightness -Poor trunk control	-stiffness reduced -With support he can sit
Varadan	5	CP with MR	-Poor neck and trunk control -Both TA slight tightness -Increased musels tone -He had fits -	-With support he walk -stiffness reduced -
Brammesh	7	CP with MR	-Upper and lower limbs weakness -Increased musels tone -Poor neck and trunk control -speech problems -he getting fits	-Dincreased museles tone -With support he walk -stiffness reduced
Kavya	6	CP with MR	-She is always laying position -Poor neck and trunk control -Both wrist knee and ankle joint stiffness -speech problems-	-With support she is sit -improved neck and trunk contro -
Ganesh naik	4	Cerebral palsy	- he is always laying position -Poor neck and trunk control -Both wrist knee and ankle joint stiffness -speech problems-	-With support he is sit -improved neck and trunk contro
Shofia	3	CP withS&HI	-Upper and lower limbs weakness -poor kneeling and half kneeling balance	-Improved kneeling and half kneeling balance

			-Speech and hearing Problems -Both flat feet -	--Improved Speech
Baby	4month	CTEV	-Bai lateral club foot -Both insertion foot -need to applied POP	-Correction foot
Juber pasha	4	CP	-Upper and lower limbs weakness -poor kneeling and half kneeling balance -Speech and hearing Problems -Poor hand functional activities -Lt leg ½” Short	-improved hand functional activities - Improved kneeling and half kneeling balance --Improved Speech
Pratibha	12	Spina befida	-Lower limbs loss of senseation -Loss of bowel and blader management -Both flat and evertion foot -	-Improved bowel and blader management -
Karthik	3	CP	-Poor neck and trunk control -Both wrist knee and ankle joint stiffness -speech problems-	-improved neck and trunk contro --Improved Speech
Prasadh	26	Hemi	- wrist and ankle joint stiffness -He walks limping -Need AFO splient	-He is using AFO splient - Reduced stiffness
Sarojamma	13	CP with MR	-Difficulties ADLs Skills -Poor in social skills -Both limbs weakness -	-Ilmprovece in her ADLs
Vishveshwaraiiah	28	Fracture	-Rt wrist sever pain and stiffness	-Reduced pain and stiffness
Raghu	8	CP with MR	-Speech problems -Poor eye and hand coordination -Saliva -Adductor and knee joint stiffness -Difficulties in ADLs -Behavior problems	-Controlled behavior problems - Reduced stiffnes
Jaffer	10	Cerebral palsy	-Upper and lower limbs weakness -poor kneeling and half kneeling balance -Speech and hearing Problems -Poor hand functional activities -Difficulties in ADLs	-improved hand functional activities - Improved kneeling and half kneeling balance --Improved Speech
Vinutha	8	Cerebral palsy	She is always laying position -Poor neck and trunk control -Both wrist knee and ankle joint stiffness -speech problems-	-With support She is sit -improved neck and trunk control



Case study of Nayan Kumar

Background of the client: Nayan Kumar is 7 years old from Kamaganahalli born with cerebral palsy with quadriplegia. This child was referred to NIMHANS from 2 years back. Parents were not satisfied with the therapy referred by the doctors, believing that some how or the other the child will become normal. They discontinued doctor's advice and stopped doing basic therapy exercise. Field staff identified this child in CBR Programme and referred to the physiotherapist in June 2007.

Family status: The family has four members including parents. Mother is taking care of the child. Father goes for daily wages coolie work. So the economical condition needs both parent to work, yet the mother can not go for work because of the child. Parents find very difficult to manage the child because the stiffness increased. Parents left the child as it is and contuning to take care of him.

Problems of the child: Upper and lower limbs weekness, both wrist and ankle stiffness, poor balance. Poor eye and hand co-ordination, poor fine motor and gross motors activities, and speech problem. Difficulty in ADLS.

Interventions made: NRO therapy up to the six steps. Belvic control exercise, Balancing exercise, hand functional activities, oil massage.

Development of the child: Muscle tone decreased. Stiffness reduced. Holding things in the hand. Eye concentration to identify colours and to identify people is increased. Sitting with the support. Parents are getting the positive attitude and gained confidence

Case study of Eshwar

Background of the client: Eshwar is 6 years boy from Chikkapete, Doddaballapur born with cerebral palsy. This child was referred to M.S. Ramaiah Hospital from 3 years back. Parents were not satisfied with the therapy referred by the doctors, believing that some how or the other the child will become normal. They discontinued doctor's advice and stopped doing basic therapy exercise. GASS Volunteers identified this child. Then referred to the physiotherapist in August, 2007.

Family status: Eswar was left to his grandmother's house by his mother, because due to his for going disability his mother's mother-in-law are not desired to live together with them. Finally, Eswsar is now, living with his grandmother & grandfather. Hence, three members are their in this family.

Problems of the child: Upper and lower limbs weakness, both ankle joint stiffness, poor balance , scissor pattern movement, Poor eye and hand co-ordination, poor fine motor and gross motors activities, Unable to walk , and speech problem. Difficulty in ADLS.

Interventions made: (NRO) Neuro reorganizational therapy upto the six steps. pelvic control exercise, Balancing exercise, hand functional activities, oil massage.

Development of the child: Muscle tone decreased. Stiffness reduced. Holding things in the hand. Eye concentration to identify colours and people increased. Sitting with the support and walking with splint and using walker. Parents are getting the positive attitude and gained confidence



List of materials Made with the support of Ashraya Foundation:

After purchasing physio materials and ortho repair kit , we had some balance amount left. We made these below items with the support of local carpenter.

- Treatment table
- Balancing boards
- Different shape peg boards
- Special chair and sitting chair