



# Early Childhood Development in Malawi

## Cases studies for Zero Project

June 2019



## Story summaries

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### **Theresa, 4 (attends Chimpambana CBCC)**

Disability: stunted growth and chronic ill health due to malnutrition and malaria



Since attending Chimpambana centre for the first time four months ago, the impact on Theresa has been profound. She has learned to walk, can recite the letters of the alphabet and has learned to speak her first two words. Her great-grandmother, Gogo Beatrice, saw that other children with disabilities attended the centre and were well taken care of and this gave her the confidence to enrol Theresa. Every day, the Caregivers use the bicycle provided to the centre by Sightsavers, to pick Theresa up and take her home again.

### **Tapiwa, 6 (attends Chimpambana CBCC)**

Disability: cerebral palsy caused by a malaria attack as a baby



Tapiwa developed cerebral palsy after a bout of malaria as a new born, and was orphaned while still an infant. Her grandmother Christina said it never crossed her mind that Tapiwa could go to school like other children. Though Tapiwa only attends Chimpambana centre two to three days a week, she now gets to do what she most desires – to dance, stand up and sing alongside other children. Thanks to physiotherapy and exercises at home with her devoted granny, as well as Tapiwa's own determined spirit and motivation to learn, Christina

now has great hopes that Tapiwa will learn to walk, and someday transition to Primary school.

### **Hecmond, 6 (attends Mwai CBCC, preparing to transition to primary school)**

Disability: cerebral palsy due to catching yellow fever (carried by mosquitos) as a baby



Before Hecmond began attending Mwai CBCC in 2016, he would lie at home sleeping, unstimulated both physically and intellectually. He was unable to even sit up without a chair that held him in position. Since watching and learning from friends at the pre-school centre, Hecmond can now sit on any chair, or even a mat on the floor, and hold himself unaided. What's more, he's 2<sup>nd</sup> in his class academically, and a recent school readiness' assessment showed he has

the skills needed and will soon make the leap to Primary school.

### **Peter, 8 (attends Nsinga primary school, transitioned from Maluwati CBCC)**

Disability: born with [hydrocephalus](#) (fluid on the brain)



At 8 years old, Peter (pictured on the right, in blue school uniform, with his twin brother Macdonald) has just started Primary School, defying the naysayers in his community who would regularly tell Mele, his mum, 'no, this child will not survive', discouraging her from investing in his future potential. But after receiving the medical treatment he needed, as soon as Peter was able to sit up unaided, Mele began bringing him to Maluwati pre-school centre. Now, Mele reports that local attitudes are changing towards children with

disabilities, when people hear that Peter doing well at school. He's had some challenges to overcome in his transition to Primary school, but his teachers are supportive and say that Peter having friends from Maluwati centre at Primary school with him has helped him a lot.

### **Materson Speak, 45 (local hero)**

Volunteer Caregiver at Chimpambana pre-school centre



Materson's day begins very early, so that he can fetch Theresa, one of the children with a disability that attends his centre, from home using the centre's specially adapted bicycle. For three to four hours, he then devotes himself entirely to the children in his care, entertaining and engaging them in both academic and play activities, before returning home to farm his own fields. Materson explains how the training for caregivers that Sightsavers provides has helped him to include children with disabilities in the centres

activities, as well as having changed his own attitude towards teaching them. It has also increased the confidence of the parents and guardians to leave their disabled children in the centre's care.



## Local hero: Materson's story

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### A typical day for Materson

Materson begins his days very early, arriving to Chimpambana centre early enough to collect Theresa, one of the children with a disability that attends his centre (pictured with him above), from her home using the centre's specially adapted bicycle provided by Sightsavers. He'll bring Theresa to the centre, leaving enough time remaining for one of his fellow caregivers to use the bike to pick up a second child before classes begin at 8am.

Keeping a room full of three to five-year-olds engaged is no mean feat, and Materson devotes an incredible level of energy, attention and commitment throughout the hours until the centre closes and the children return home between 12pm and 1pm. There is still much left to do in Materson's day. He will cycle in the midday heat to bring Theresa safely back home before returning to his own home to tend the fields in his occupation as a farmer.

### Children with a disability at Chimpambana centre

Materson is into his 12<sup>th</sup> year as a volunteer caregiver at Chimpambana community-based childcare centre. The centre has 148 children registered, and of those, 20 are registered as having a disability.

*'In the beginning we had just a few,' explains Materson, 'but the numbers have gone up to 20 due to some sensitisation meetings that have taken place within the village. This is the work of the committee that works at the centre. It goes around, sensitises people, and help people realise the importance of sending their children to this place' he explains.*

Materson reports that, to the best of his knowledge, every child in Chimpambana living with a disability is now attending the centre, though that certainly wasn't the case in the past.

*'At first, parents used to keep these kids in their homes. Sometimes they would just lock them up whenever they were busy. To us, we felt strongly that these kids should attend this centre.'*

*'[The parents] thought that if they brought a kid with disability here, they could be laughed at but also that we could not attend to them just as we did with those kids who had no disability.'*

### **The importance of training for caregivers**

Materson and some of his fellow caregivers were trained by Sightsavers on how to manage their classrooms and run classes, which included how to consider children with disabilities in both academic and play activities.

*'Before I did training, I used to concentrate my teaching on kids without disabilities, and would neglect those with disabilities as I felt it was a waste of my time' Materson admits.*

*'But when Sightsavers sent me for training, I was taught that in all class activities, even the kids with disabilities must be involved and take part. And because we were instructed on how kids with disabilities can be taught, when we came back, we could mix and teach all the kids irrespective of disabilities; we teach them together.'*

Materson has been involved with the center since it was first established, and is a great believer in the importance of early childhood development.

*'I was concerned that a lot of children in the village were not going to school. By the time they started attending primary school, there was a lack of foundation. So I wanted to give them that foundation so that when they go to primary school they will perform better.'*

He takes great pride in hearing reports from primary school teachers on how well the children from his centre have transitioned into primary school. He is now as passionate an advocate for the children with disabilities that attend his centre.

### **On Theresa's exemplary progress**

Four-year-old Theresa has only been attending the centre for two terms, and at first could not walk. She has just learned to walk in the last month, after joining the centre and receiving physiotherapy at Beit CURE hospital for her arms and legs. The project has been supporting the family's visits to the hospital.

Materson recalls: *'One time I went to visit her at home and I discovered that she was being carried on the back. So I had to advise the parents to say 'no, leave her, so that she will move around on her own. Maybe putting her on the back all the time makes her feel that she cannot walk, and should be carried by other people.' So that helped her get used to walking on her own.'*

The doctors at Beit CURE explained that children with disabilities being carried on their mother's backs often greatly delays their physical development to serious levels.

He adds: *'I feel good when I see Theresa moving around because I know I had a stake in making that happen.'*

Materson is proud of the impact the centre has had on the lives of children with disabilities in his community.

No child with a disability has yet transitioned to Primary school from his centre, but he's hopeful that soon a couple will be ready.

Materson holds up Theresa's progress in particular as exemplary.

*'We have seen a remarkable improvement with Theresa. She couldn't do anything at first, but at this point you'll find her raising up her hand to attend an answer to a question that has been put forward. To us, that's really good and we feel encouraged. We feel she'll be improving more and more until we find that she'll be fit for primary school.'*

### **On hopes for the future**

In conclusion, Materson reflects:

*'This Centre has changed things here in a way that, before its establishment, the kids could begin primary school without a solid and good education foundation, and their performance there was mostly not good at all.'*

*'But with the establishment of the Centre, there is provision good early childhood education foundation, and by the time these kids reach primary school, they have a good foundation that assists them to easily adapt to primary level education; and the disabled kids can now mix with physically able kids and do activities together.'*

*'My hope, and what I expect is that the centre will grow. Maybe to have at least three blocks, so that we can segregate the students by age. As for me, it's a passion that I have, that I will keep on teaching – whether the government comes here [to pay us] or not.'*

*'We see a future with the children with disabilities, because of the foundation they are getting here. They are getting fully incorporated into the community, because they are mixing with the other kids, they are interacting and the life skills we are imparting to other children are being imparted to them. So we can see a brighter future for these disabled children.'*



## Tapiwa's story

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**Disability:** Cerebral Palsy, developed as a baby as a result of malaria

### Tapiwa's story

Approaching her seventh birthday, Tapiwa's short life has been beset by hardship. Born healthy, she developed cerebral palsy after she suffered a bout of malaria as a new born. While she was still an infant, her mother passed away from an illness her grandmother cannot name. Tapiwa's grandmother, Christina Juga, feared how she would be able to provide and care for Tapiwa.

Christina tells how she would carry Tapiwa on her back, seeking food and other means of support from small business owners and other well-wishers in the village.

A devoted and loving grandmother, Christina struggled to know what was best for the development of her granddaughter. Tapiwa wasn't able to sit up, and so would spend the days lying on a mat at home, watched over by a member of the extended family, when Christina wasn't able to carry her with her while she did her daily tasks. She realised Tapiwa was a bright child when she would recount everything that had happened at home in her absence, but says it never crossed her mind that Tapiwa could go to school, like other children.

*'In fact, it's only when we met one of the men that runs the centre, that's when we learnt more about how important it was to send the child to that centre', says Christina.*

Tapiwa was enrolled at Chimpambana centre in September 2017, and has been joining classes for two terms now.

### **Every day she reminds me... ‘you should take me to school!’**

Most weeks, Christina only manages to bring Tapiwa two or three days a week. Tapiwa is not yet in a position to sit on the centre’s bicycle, so her grandmother must walk for an hour with Tapiwa strapped onto her back, which she does gladly but not without physical discomfort. But she now understands the value of Tapiwa attending the centre; witnessing progress in her physical, intellectual and spiritual development, and how much she delights in being at the school.

*‘Every day she reminds me in the morning that ‘you should take me to school!’ says Cristina. ‘She likes being there, she enjoys being there.’*

Christina is grateful that Tapiwa is able to share in the morning porridge when it is available at the centre, with food scarce at home, and can interact with other children and makes friends.

*‘She desires to walk and dance’ says Cristina. ‘When we try to hold her up, she can dance. So she participates in everything that’s taking place in class.’*

Christina always stays with Tapiwa throughout her days at the centre, and carries her home again at the end of the day. At home, she practices physiotherapy exercises with Tapiwa, following advice she is given during physiotherapy sessions at the hospital in Blantyre. As a result, Tapiwa has just learned to sit up by herself, and though it’s still a struggle, when she manages it, the sense of achievement and delight on her face is clear.

### **Christina’s hopes for Tapiwa’s future**

*‘I’m very hopeful that Tapiwa will one day walk, because we have started going to the hospital and we are trying to get some advice on how we can assist her to start walking. So we are very hopeful that one day Tapiwa will walk to school. When that time comes, I’ll be very relieved’.*

Christina says that the caregivers continue to encourage her to bring Tapiwa to the centre, telling her that they see the potential in her, and that she has a motivation to learn.

*‘Because of that motivation, they are very hopeful and they see Tapiwa proceeding to primary school very soon’ says Christina.*

Christina is now able to imagine a very different future for her granddaughter.

*‘I have seen people who have disabilities who are in high offices because they went to school. So for me, the only hope is that Tapiwa should go to school, get an education. And if it all goes well, when I’m dead and gone, Tapiwa can support herself. That’s all I’m looking forward to.’*



## Theresa's story

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**Disability:** stunted growth caused by malnutrition, and associated physical challenges and ill health (exacerbated by a severe malaria attack when she was a baby)

### Theresa's story

Theresa is a silent child and very small for her age: at four, she stands the height of a toddler, and her four-year-old neighbour towers over her by comparison. Theresa coughs incessantly. She is taken care of by her great-grandmother, 'Gogo' (meaning granny) Beatrice Rafael, and her mother Lucia, a single mother who barely speaks herself and has an undiagnosed intellectual impairment.

*'Theresa does not speak, per se' explains Gogo Beatrice. "Dad" and "mum" are the only words she can utter from her mouth.'*

Theresa's own father is not in the picture. *'She just says dad because she hears the other children her age saying the word "dad", so even though she doesn't have a dad around, she copies them',* says Beatrice.

Gogo Beatrice recalls Theresa being of a normal weight when she was born, and says that a nasty malaria attack when she was still a baby was the beginning of her constant ailments. However, the family's neighbour and good friend, who accompanies them to health appointments, suggests that

malnutrition is the underlying cause of Theresa being so small and weak, recalling that the doctors advised that improving her diet was the solution to her ill health. It is likely a combination of the two.

### **Astonishing developments**

Theresa started attending Chimpambana childcare centre four months ago. Every morning, Materson or another of the centre's caregivers picks Theresa up from her home and takes her to the centre on the back of a bike adapted to carry small children securely. When the centre closes at noon, Theresa is then returned home.

Though Gogo Beatrice has never visited the centre herself, as she is very elderly and infirm, and the centre is some distance away from her home, she acknowledges the incredible changes she's witnessed in Theresa, in the short time her little great-grandchild has been attending.

When Theresa began attending the centre, she could not walk. Now, just one month ago (in February 2018), she began to walk for the first time.

*'We believe it is the beginning of Theresa attending the centre that has assisted Theresa to start walking, because Theresa has been going to hospital ever since she was young, but she was not able to walk'* says Gogo Beatrice.

Gogo Beatrice also delights in Theresa, who has only recently spoken her first two words, reciting the letters of the alphabet, as she has learned to do at the centre, which Beatrice says gives the family greater hope for her future.

### **Changing attitudes**

Gogo Beatrice told us: *'There is a tendency for people when talking to have a negative attitude towards people with a disability. But for us, we are used to it, and treat it with positivity.'*

She acknowledges the impact the centre and the efforts of its management committee is having on the community's attitudes:

*'They [the committee] are doing a good job; they have managed to sensitise the people in the village about how good it is to have those kids in school. So the attitude of the community has changed a bit – they're now looking at disability as something they can live with, and that people with a disability can also go to school.'*

### **Health and future happiness**

Though Theresa's condition requires a lot of medical attention, the family has always struggled to ensure she gets to the specialist care she needs due to the cost of transport, especially to make the three to four hour journey to Blantyre, which involves three modes of transport for the family.

Through its Early Childhood Development project, Sightsavers is now covering all the costs of transport to reach Queen Elizabeth hospital in Blantyre for physiotherapy, and is also supporting the family to secure speech therapy sessions at Illovo Nchalo Clinic for Theresa to help advance her speech.



## Hecmond's story

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**Disability:** cerebral palsy due to catching yellow fever (carried by mosquitos) as a baby

### Hecmond's story

Hecmond caught yellow fever when he was just a few months old and was taken to Queens Hospital in Blantyre. There, the doctors told his mum, Martha, that Hecmond may never walk. But regardless, it was important that she intensify his physical exercises, and bring him to the hospital regularly.

But being at home all day, physically and intellectually unstimulated, Hecmond would just lie around and sleep, and wasn't even able to sit up without a special chair designed to hold him.

### Physical and intellectual advancements

Martha began bringing Hecmond to his nearest pre-school centre, Mwai CBCC, in 2016. *'After he interacted with friends at the centre, we noted the changes in him, and we really appreciate that' explains Martha. 'After interacting at school, Hecmond can now sit up.'*

It isn't only physical advancements that Hecmond has made since starting at the Centre two years ago, and being among his fellow pre-schoolers. *'Now Hecmond can now count from one to ten,*

*and he also say the letters of the alphabet from A to Z. For us that is an improvement, and we feel he is developing intellectually.'*

## **Preparing for Primary school**

In fact, everyone comments that Hecmond is clearly a very bright boy, as Martha is proud that he's been graded as second position in his class academically. A recent 'school readiness' assessment, carried out by Centre for Children's Affairs (CCA) Malawi, a Sightsavers' partner organisation working in the area, found that Hecmond had the skills needed and could soon transition from pre-school to Primary school.

However, though Hecmond proved intellectually ready, the decision was taken to wait one more year, to give Hecmond time to advance the physical skills that will make the transition easier for him.

*'At the moment, Hecmond can at least scribble something, but we wanted to give him more of a chance to lay a better foundation for himself so that when he goes to Primary School his performance will be good'* explains his mum, Martha. Holding his hands steady and writing legibly is a challenge for Hecmond.

*'We don't want to give him a tough time at Primary School'* she continues. *'We want to give him a better foundation so that he won't struggle too much.'*

Martha is an attentive mother and is ambitious on behalf of her son, whose sparky character comes across when he orders his siblings to bring him his wheelchair (recently donated by another organisation working in the area), making them chuckle before dutifully running off to fetch his chair. Hecmond is the third of four children in the family, and clearly very popular with his siblings.

Every day at home, Martha and her son follow a routine of homework, focussed on his writing and reading skills, combined with physical exercises following the advice given at the hospital. Looking towards the future, Martha says *'I expect Hecmond to go to school, to do well in school and assist me.'*

*'I feel taking him to school is one of the things I'll continue doing, to the best of my ability, to ensure that Hecmond has a future. At first, we used to carry Hecmond on the back to school, but nowadays the centre has a bike which they use to carry him to school.'*

Speaking of the volunteer Caregivers at Mwai CBCC, Martha comments: 'they do assist Hecmond to write and to count, just as they do with the other kids. So I find them to be very helpful and kind.' She adds: *'Nowadays they take Hecmond to school – he is being assisted, and without those people, I don't think life would be as it is today.'*

Martha is hopeful that this year, Hecmond will be ready to start at his local Primary School, which has teachers specialised in special needs education.

Through its Early Childhood Development project, Sightsavers is planning to orientate Primary School teachers more widely in how to include children of varying disabilities in their classes, as more and more children with disabilities attend the CBCCs and become ready to make the transition.



## Peter's story

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Disability: born with [hydrocephalus](#) (fluid on the brain)

### Peter's story

Peter and his brother Macdonald are as close as you'd expect twin brothers to be, though perhaps they have been brought closer by the fact that Macdonald is very protective of his brother, and stands up for him when he's bullied for looking physically different from the other children.

Peter was born with hydrocephalus, which is a condition where there is a build-up of fluid on the brain. It can be fatal if left untreated, and can also lead to mental impairment. However with treatment, many people with the condition lead normal lives.

Unable to walk or sit up due to imbalances caused by the fluid, Peter's mum Mele would carry him with her wherever she went. Naysayers in the community would tell her 'ah, no, this child will not survive', and would discourage her from believing or investing in his future potential. *'But me, I accepted that this was my kind and I had to take care of him' Mele says.*

### Medical intervention

Thankfully, Mele took Peter for medical attention when he was six years old, which is when Peter's condition was officially diagnosed at Queens Hospital in Blantyre. Peter began receiving the surgical intervention and ongoing treatment he needed, that drains fluid away from the brain,

reducing the swelling in his head and improving his balance. He has also been receiving support from a physiotherapist. Until he was six, Peter could not sit up on his own, let alone walk. After his surgery, Peter's condition steadily improved. As soon as he could sit upright, his mum made the decision to begin taking him to his nearest pre-school centre: Mulawati.

The centre hadn't yet received one of the special adapted bicycles used by the centres to transport children with disabilities to and from home, so Mele would carry her seven-year-old son to the Centre and back each day.

It wasn't long before Peter was walking.

*'I believe it was the interaction that Peter had with some kids at the centre, because he was kind of imitating what the other children were doing, and in the process he started walking' recalls Mele.*

The volunteer pre-school teachers at Maluwati centre regularly encouraged Mele on Peter's progress and potential, telling her 'amongst all the kids, he is the best, and we hope we might very soon send him to Primary school.'

This gave Mele great hope that one day soon, against all expectations, Peter would walk and would transition to school.

### **From pre-school to Primary school**

Three months ago, two years later than his age mates, Peter enrolled at Nsinga Primary school, and now Mele's dreams have been realised.

Peter's class teacher, Emma Magaso, is very supportive of Peter, and the school makes adjustments learning and physical activities wherever they can. But Emma admits that without formal training, considering the needs of children with disabilities in her classes can be challenging.

When Peter first joined the school three months ago, he suffered some bullying from the older children, who would pick on his physical differences. But his teachers say that the friends Peter made in Maluwati pre-school centre, that also attend Nsinga primary school, have been a great support and important to Peter's self-confidence when settling in.

Peter's twin brother Macdonald also attends the school, and sticks up for Peter whenever anyone make's fun of him.

When Emma brings the children out to the playground to run races, Peter is delighted to be included in the line-up. He runs with all his strength, coming across the line significantly slower than his classmates, but showing no sign of shyness or embarrassment. Peter has only recently learned how to run, and is clearly delighted and proud to be able to do so, at whatever speed.

Now Mele encourages other parents of children with disabilities to do the same for their children. Mele says she tells them: *'it is better that you take these children to the centre, because these kids are the future of the society and when we take them to that school we may change some things about their future.'*

Mele feels that Peter's progress is changing attitudes towards children with disabilities in her community, and the stigma attached to having a child with a disability.



*'I no longer experience that kind of stigma because people themselves see Peter going to school and coming back, and they hear from their kids that Peter is doing fine at school. So there is not that kind of negative attitude towards Peter anymore.'*