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In the wake of calamity: Let no child be left behind

SAPA-SLCP

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EXPLORATION OF CHALLENGES AND STRATEGIES FOR IMPROVING ACCESS TO REHABILITATION SERVICES FOR PAEDIATRIC PATIENTS WITH CEREBRAL PALSY: INSIGHTS FROM A TERTIARY CARE SETTING IN SRI LANKA

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INTRODUCTION

Cerebral palsy (CP) causes significant impairment affecting multiple domains and rehabilitation improves the outcome. Regular use of rehabilitation services is hindered by many factors, affecting optimum development outcomes.

OBJECTIVES

To identify factors affecting utilization of rehabilitation services and solutions for adhering to regular use of rehabilitation services.

METHOD

A descriptive cross-sectional study was conducted among 236 patients attending the paediatric neuro-disability unit of Teaching Hospital Kurunegala using an interviewer-administered questionnaire. Sri Lanka College of Paediatricians granted ethical approval.

RESULTS

The mean and median age of the participants were 7.05 and 6 years; majority (59%) were males; 45.9% were quadriplegic, 24.9% diplegic and 22.3% were hemiplegic; 94.4% of parents were married and 78.1% of families had another child. The monthly income of 78.5% of families was below Rs:50,000/=; 75.1% of the participants accessed rehabilitation services during allocated dates. However, 23.2% defaulted against medical advice. Most children had defaulted in physiotherapy and occupational therapy; 54.1% sought Ayurveda treatment, out of which 70.7% were families who had defaulted. Families who had other children, children with high GMFCS scores, and child refusal were more likely to stop rehabilitation. Although many parents faced financial issues (93.6%), transport difficulties (88%), and lack of physical assistance (84.1%), it did not affect the utilization of services significantly. Point biserial analysis showed a significant likelihood of parents of younger children not defaulting, believing in seeing an improvement compared to older children. Closer clinics (77.7%), provision of transport (90.1%), allocating one day for all rehabilitation activities (95.3%), provision of medicine and special devices (79.8%), and self-employment opportunities (66.5%) were seen as viable solutions.

CONCLUSIONS

Having other children, the severity of CP and child refusal were the main obstacles that hindered the access to rehabilitation. Closer availability of easily accessible rehabilitation centres, provision of transport, and allocating a single day for all rehabilitation activities were seen as viable solutions.