Current topic

Prevention of mental handicap and developmental disabilities in South East Asia

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The National Population and Family Development Board, Malaysia, in association with Malaysian Paediatric Association and Commonwealth Association for Mental Handicap and Developmental Disabilities (CAMHADD) held a workshop in Kuala Lumpur in September 1986 on prevention, early detection, and intervention of childhood handicap. The main objective was to identify those problems for which practical programmes of implementations, with special reference to Malaysia and other South East Asian countries, could be initiated. The workshop was attended by 30 invited experts on mental retardation from South East Asia and other Commonwealth countries. During the two days various aspects of mental retardation were discussed and the following recommendations were made.

1. Prevalence and early identification of developmental disabilities and mental handicap

Developmental disabilities and mental handicap present a problem that must be recognised in all parts of the world. In order to plan services for those affected it is essential that well designed data collection systems should be used to determine the prevalence and causes. A general screening test for developmental delay will detect most disabilities but it may miss some impairments such as functionally important hearing loss or squint. There is, therefore, a need to develop simple tests, appropriate for each community, for those specific impairments for which treatment is available. The tests would require careful evaluation before using them with general screening.

2. Health education and professional training

A greater public awareness of child health and development is needed. All available news media should be used to give practical information about normal development and warning signs particularly

to parents, children at school, community workers, and teachers. Health professionals need special training in child development and the identification and management of disabilities. Special workshops should be set up for those who will be responsible for training.

3. Jaundice of the newborn

Bilirubin encephalopathy is a preventable cause of mental handicap and is a particular problem in South East Asia because of a high incidence of an inherited disorder, glucose-6-phosphate dehydrogenase deficiency. Cord blood screening by enzyme test should be performed on *all* infants at birth and the results reported promptly. It would then be possible to eliminate brain damage in this condition using light treatment and health education to avoid exposure to toxic substances such as mothballs and herbal medicines. Parents and health workers should be made aware of the serious consequences of neonatal jaundice.

4. Implementation

Because of the well developed child health services in Malaysia it is proposed that study groups should be set up in that country to implement these recommendations. CAMHADD could then use the Malaysian experience for extending similar programmes in other developing countries.

5. Prevention of mental handicap

Increasing attention needs to be given to antenatal care, particularly to the identification of high risk pregnancies and the selection of women for home delivery. Immunisation against a number of infectious diseases—for example, tuberculosis, rubella, measles, and polio—will reduce brain damage or major disabilities. Therefore every effort should be

made to ensure that children have the benefit of these immunisations. Accidents are an increasing cause of brain damage in childhood; major efforts need to be made to reduce their frequency and the death and disabilities which result from them. The recommendation on genetic counselling made at the Bombay workshop¹ that genetic services, appropriate for each country, should be available in the developing countries, was re-emphasised.

6. Early intervention and education

It is the right of *all* handicapped children to be given appropriate education so that they achieve their maximum potential. Parents should be encouraged to involve themselves in the education of their children. In addition self help groups have an important part to play. It is preferable to initiate intervention programmes early in the child's life in order to reduce subsequent handicap.

The Workshop felt that because the child health services in Malaysia were well developed, it should be possible to implement most of the recommendations in Malaysia and to extend the experience so obtained to the neighbouring and other developing Commonwealth countries.

This workshop would not have taken place without the generous grant from the Commonwealth Foundation and the British Council. The local organisation was under the directorship of Dr Ali Halim.

Reference

- ¹ Sardharwalla IB, Lingam S, Harvey DR. Prevention of mental handicap in developing countries. *Arch Dis Child* 1986;**61**: 411-2.

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