

KOHULA

The Official Bulletin of The Straight Child Foundation

Vol.4 (No. 1) November 2025



PREVIEW

- Editorial
- Message from the Founder
- TSCF's Impact in Clubfoot and CP Intervention
- Let's Talk Mental Health
- Protecting Every Child with Disability
- Disability and Culture
- Early Detection and Referral for clubfoot
- Testimonials
- Free CP Physiotherapy at TSCF office
-and more



...Towards a life beyond limits

EDITORIAL

OLUYOMI WILSON BANKOLE



In the ever-evolving journey of care, advocacy, and inclusion, KOHULA-our publication at The Straight Child Foundation (TSCF) serves as a symbol of hope, reflection, and renewed dedication to the well-being of children with disabilities. This edition emphasizes TSCF's mission: to restore hope, empower families, and foster systemic change in how society perceives and supports children with clubfoot and cerebral palsy (CP).

At the core of this issue is a collection of inspiring stories, thoughtful reflections, and expert insights drawn from our shared experiences in disability care and advocacy. We begin by highlighting TSCF's transformative impact in "Restoring Hope, One Step at a Time," which recounts how early intervention and ongoing rehabilitation have transformed the lives of many children and their families across Nigeria.

Our exploration deepens with "Let's Talk Mental Health," which encourages a meaningful conversation about the emotional realities of parenting a child with a disability. It reminds us that, beyond medical treatment, mental and emotional well-being

are vital pillars of resilience. Complementing this is "Smart Nutrition," a practical guide highlighting how proper diet and nutrition significantly support the physical and neurological development of children with CP.

Protecting the dignity and safety of every child takes center stage in "Protecting Every Child with Disability", a clarion call for vigilance against abuse, neglect, and exploitation-issues often hidden in silence. Similarly, "Finding Their Voice" highlights the critical roles of speech therapy in helping children gain independence, improve communication, and succeed within their abilities.

The fight against stigma remains an ongoing effort, as discussed in "Tackling Stigma and Discrimination against People Living with Disability". It calls for shared responsibility from families, professionals, and communities to move from pity and prejudice toward acceptance and empowerment. This conversation also delves into "Disability and Culture", where traditional beliefs and misconceptions are examined, challenging us to adopt more informed and compassionate cultural perspectives.

Movement and early intervention are central in "Healing in Motion" and "Early Detection and Referral for Clubfoot," both of which highlight that timely action, whether through structured exercise and prompt referral, can determine whether someone faces lifelong limitations or a future full of promise.

Each article in this edition exemplifies TSCF's core values of compassion, inclusion, and professional excellence. Collectively, they form a unified voice advocating for systems that see beyond disability to ability, potential, and personhood.

As you turn each page, may KOHULA renew your faith in what can be possible when hope is restored, knowledge is shared, and action is inspired. Let this be not just a record of our work, but a movement of hearts and minds toward a society where every child, regardless of ability, stands tall, supported, seen, and celebrated.

EDITORIAL TEAM

Editorial Manager

Dr. Peace Amaraegbulam

Editor

Oluyomi Wilson Bankole

Bankers:

Guaranty Trust Bank

Account Name:

The Straight Child Foundation

Account Number:

Naira Account: 025 957 9198

USD Account: 025 957 9215

Contact us:

Road M, No.47, World Bank
Housing Estate, Umuahia, Abia
State.

Call: 08061790938,
09031449167

Email:

info@thestraightchildfoundation.org

Website:

www.thestraightchildfoundation.org

CO-FOUNDER/CHAIRMAN'S MESSAGE TOWARDS A NEW BEGINNING

DR PEACE AMARAEGBULAM



Looking back over the past eight years since the inception of The Straight Child Foundation, I can only thank God for how far He has taken us.

A simple hospital clinic encounter with a patient stirred up dreams of improvement in care among my people. Our faith has grown steadily as we took the little steps, at first, not knowing exactly where the path led. Our confidence in the future in which the child with a disability will live a life beyond limits has soared by virtue of the encounters we have had. Like Eleazar of the Bible in Genesis 24 v 27, we can say that "...as for me, being on the way, the Lord has

organized seminars and symposia, called parents together in a support group, given out assistive devices and palliatives, hosted children to special children's day events and ran the August boot camps. We stumbled and rose through our mistakes. We learnt from the opportunities that we missed. Through it all, we are emerging better and stronger.

In the coming years, we will build on the experiences to revise the plans that did not work and to scale up those that did. As the clubfoot program grows, we desire that the older ones who require surgery will become beneficiaries. We look forward to scaling the physiotherapy services to

led me." And we are assured that God will continue to lead us to the destination, a world where deformities and disabilities do not stop any child from attaining his/her God-given potentials.

In the past eight years, we have

become a full-blown rehabilitation protocol that will cater, not just to the physical, but to the mental, spiritual, and socio-economic aspects as well. We visualize the actualization of the ABILITY REHABILITATION CENTER that will not only host a physiotherapy gym but will also employ speech and occupational therapists. A center that will encompass a vocational center as well as a prosthetic/orthotic unit. Early detection and intervention services will be ensured for every child and parents will not be left out so as to ensure consistency in the care of the child with special needs.

While we are grateful for the support over the years, we anticipate that our donors and supporters base will enlarge to include those who willingly commit monthly, quarterly and annual donations to the course of the child living with disability. The government will facilitate the progress through the enforcement of enabling laws and policies.

Everyone has a role to play to ensure that the child with special needs is well accommodated. Then and only then will the society be counted to have started the journey towards universal health coverage.

RESTORING HOPE, ONE STEP AT A TIME: THE IMPACT OF TSCF IN CLUBFOOT AND CEREBRAL PALSY INTERVENTION.

BY UCHENNA EGBE-ENI.
TSCF CAST COORDINATOR.



Impact of TSCF Clubfoot Program

The free clubfoot treatment program, executed by TSCF with support from MiracleFeet Inc., has given hope and relief to children born with clubfoot and their parents, especially those from low-income families who could not afford treatment. Many children with clubfoot who received treatment are now happily attending school, able to wear shoes like their peers, play, and run freely. They no longer face stigma or discrimination because of clubfoot. The foundation has also increased awareness and expanded access to treatment across 11 states in Nigeria's South-East, South-South, and North Central regions. Over the past eight years, more than 22 government health facilities have been strengthened through training, equipment, and a consistent supply of treatment resources, ensuring free, comprehensive clubfoot care in these states. This enables children with the deformity to receive treatment without any financial burden on their families.

- (a) Over 3,500 children have enrolled in treatment since 2018.
- \(b) Over 330 healthcare providers

have been trained in the Ponseti Method of clubfoot treatment.

- (c) Over 2,000 healthcare providers have been trained on early detection and referral of clubfoot cases across states implementing the program.

Through this effort, the Foundation remains dedicated, in partnership with various state governments, to ensuring children born with clubfoot have the chance to grow up without disabilities.

Impact of TSCF Cerebral Palsy Program

As part of the Foundations' primary intervention focus, children with Cerebral Palsy (CP) and their parents or guardians are offered access to various support and intervention services. Our impact is evident through the Foundation's free CP intervention activities, which include:

- 1. Distribution of 25+ mobility and assistive devices – wheelchairs, crutches, and CP chairs.
- 2. Distribution of 11+ assistive devices for learning in CP patients.
- 3. Distribution of 8 orthotic shoes for CP patients.
- 4. Supported 8 CP surgeries.
- 5. Sustained financial and material support to over 100 families of children with CP.
- 6. Establishment and operation of the CP Wellness Center, facilitating:-
 - a. One-on-one counseling sessions for parents or guardians of children with CP to enhance their caregiving skills and develop a home management plan.
- b. Free physiotherapy sessions for children living with CP to help improve muscle coordination and function.
- c. Parents Support Group meetings have been held quarterly since March 2019 for parents of children living with CP, creating a community where they can share frustrations, ask questions, and receive answers.
- 7. Host special annual events in March (CP Awareness Month) and October 6th (World CP Day) to share experiences, raise awareness, enhance health workers' capacity through CP seminars, and strengthen the coping skills of parents with children living with CP.
- 8. Host an annual Special Children's Day celebration, an inclusive event for children with Cerebral Palsy and other childhood disabilities, fostering an environment where love and care are shown.
- 9. Host annual August Boot Camps for children with CP, an event focused on providing free multi-disciplinary health support services to children living with Cerebral Palsy in Abia State and nearby areas, along with their parents or guardians.
- 10. Eight years of advocacy efforts directed at the government and private organizations to fully implement the disability acts.
- 11. Eight years of public awareness and education to dispel misinformation and decrease public stigmatization of children with CP.

LET'S TALK MENTAL HEALTH:

BREAKING THE SILENCE AND BUILDING RESILIENCE AS A PARENT OF A CHILD LIVING WITH DISABILITY

Joy Egware (Psychologist)



Parenting a child with a disability is a journey that changes how you see life. It includes moments of doubt, courage, love, and personal growth. For many parents, the initial diagnosis can feel like the world has suddenly shifted, filled with questions, fears, and unexpected turns. Still, this experience offers a chance to find strength, purpose, and community. Breaking the silence about disability and actively building resilience helps parents shift from feeling isolated to feeling empowered. It involves recognizing every emotion, fully accepting your child, and finding purpose in the shared journey of growth and acceptance.

Below are key strategies that make this journey more purposeful and fulfilling:

1. Emotional Acceptance and Support

The first step toward resilience is emotional honesty. Many parents go through a range of feelings: shock, sadness, guilt, anger, and even denial after discovering their child has a disability. These emotions are natural and valid. Emotional acceptance does not mean giving up hope; it means allowing yourself to feel, to grieve the unexpected, and then to rise renewed with a sense of purpose.

• Acknowledge and validate your emotions: It is okay to feel overwhelmed. Naming your emotions reduces their power

over you. Accept that your feelings do not define your love for your child — they reflect your humanity.

• Build a support network:

Remember, you are not alone. Connect with other parents who share similar experiences through support groups, faith-based gatherings, or online communities. Talking to someone who truly understands can lift the emotional burden you carry.

• Practice self-care: Taking care of your emotional and physical health is not selfish; it is essential. Even small actions like walking, journaling, praying, or enjoying a hobby can help you recharge and be more present for your child.

Remember, healing starts when you stop pretending to be fine and begin seeking the help you deserve.

2. Fostering Resilience in Your Child

Children develop resilience by observing their parents. When you believe in your child's potential, they start to believe in themselves. Building resilience includes boosting your child's confidence, acknowledging their achievements (no matter how small), and providing them with the skills to face challenges.

Focus on abilities: View your child through the lens of potential. Every child has gifts waiting to be developed. Recognize what your child can do and nurture it.

Encourage independence: Let your child make age-appropriate

decisions, learn new skills, and explore the world safely. Independence helps build confidence and self-esteem.

Teach coping strategies: Help your child understand emotions and how to express them constructively. Use stories, play, and encouragement to teach patience, problem-solving, and positive self-talk.

A resilient child is not someone who never faces struggles, but someone who learns to get back up after every fall.

3. Building Your Own Resilience

As a parent, you are your child's strongest source of support. But to stay strong, you need to recharge your own energy regularly. Building resilience involves developing emotional awareness, asking for help when needed, and practicing gratitude even during tough times.

Develop emotional awareness: Notice your triggers and emotional patterns. Recognizing them enables you to respond intentionally rather than react impulsively.

Seek support: Professional therapy or counseling can provide clarity and coping strategies. Asking for help does not make you weak—it shows courage.

Practice gratitude: Each day, take a moment to reflect on something positive—a smile from your child, a small milestone, or a word of encouragement. Gratitude turns pain into perspective.

4. Psychological Help and Support

Caring for a child with a disability can significantly affect your mental and emotional health. Seeking psychological support helps you process your feelings and gain a better understanding of your child's emotional and behavioral patterns. A psychologist can help you

communicate effectively, manage stress, and support your child's emotional development.

By prioritizing your mental health, you create a calm and balanced environment that benefits both you and your child. Remember, taking care of your mind is just as important as caring for your child's body.

5. Helpful Resources and Networks

No parent should walk this path alone. The correct information, community, and professional guidance can make all the difference.

Parenting Support Groups: Join online or in-person communities

for parents of children with disabilities. Sharing experiences offers comfort and helpful advice.

Therapy and Counseling: Seek professional help for yourself and your child. Therapists provide personalized strategies for coping, behavior management, and maintaining family harmony.

Educational Resources: Learn about your child's condition through reputable books, organizations, and workshops. Knowledge empowers you to advocate confidently for your child's needs.

Conclusion

Breaking the silence about

disability is not just about speaking up — it is about showing up with love, courage, and hope. Each day you choose to nurture your child, you are rewriting a story of strength and resilience. Remember: your journey is not one of sorrow but of transformation — a testament to the limitless power of love.

You are not alone, and neither is your child. Together, you are building resilience that will shine through every challenge and inspire others to follow suit.

SMART NUTRITION: DIET TIPS FOR CHILDREN WITH CEREBRAL PALSY

Dr. Solomon Confidence (HOD, Nutrition and Dietetics, FMC, Umuahia)

Background:

Children with Cerebral Palsy (CP) often face unique nutritional challenges due to movement difficulties, muscle tone issues, swallowing problems, and digestion concerns. Proper nutrition is essential for supporting their growth, bone health, and overall development. This paper explores tailored dietary strategies, key nutrients, and practical feeding tips to enhance nutritional outcomes for children with CP. Emphasis is on understanding their diverse dietary needs, managing feeding challenges, and incorporating medical and therapeutic support to ensure adequate nutrient intake and improve quality of life.

Introduction

Cerebral palsy (CP) is a group of neurological disorders that affect muscle tone, movement, and motor skills, often leading to feeding problems and nutritional

deficiencies in affected children. Proper nutrition is essential for supporting growth, preventing malnutrition, and maintaining healthy bones. However, due to varying muscle tone and limited motor abilities, customized dietary approaches are necessary. Additionally, common issues such as swallowing difficulties (dysphagia), gastroesophageal reflux, and constipation can complicate feeding and digestion, making careful nutritional management a vital part of care.

Definitions of Key Points

Cerebral Palsy (CP): A non-progressive neurological disorder that impacts posture and movement due to abnormal brain development during fetal or early infancy stages. **Muscle Tone:** The level of muscle tension when at rest, influencing energy needs and feeding ability in children with CP.

Dysphagia: Difficulty swallowing,



common in CP, requiring modified food textures or feeding strategies.

Malnutrition: Inadequate/Insufficient nutrient intake or absorption, resulting in poor growth and health problems.

Nutritional Support: Customized dietary plans that include supplements, calorie boosters, or tube feeding to fulfill specific energy and nutrient requirements.

Bone Health Nutrients: Essential minerals and vitamins like calcium, vitamin D, phosphorus, and magnesium are vital for maintaining strong bones.

Nutritional Challenges in Children with Cerebral Palsy

Children with CP often struggle with chewing, swallowing, and digestion, which can prevent them

from eating enough and absorbing nutrients. These issues may lead to malnutrition, slow growth, and fragile bones that are more likely to break. The severity of these problems varies depending on the child's muscle tone and mobility. For example, children with high muscle tone or activity levels might need more calories, while those with low muscle tone or limited movement may need fewer calories but still require nutrient-rich foods.

Essential Nutrients for Children with CP and their sources

- Calcium, Vitamin D, and Phosphorus:** Support bone growth and strength; found in dairy products, fish, fortified juices, and sunlight exposure for vitamin D production.
- Protein:** Essential for muscle repair and growth; obtained from lean meats, fish, eggs, dairy, beans, and lentils.
- Vitamins C, K, magnesium, zinc, and others:** Support bone growth and immune health; found mainly in fruits, vegetables, nuts, and whole grains.

Dietary Strategies and Tips

- Provide three balanced meals and two nutrient-dense snacks daily, ensuring enough time for eating to prevent rushed meals, which could decrease intake.
- Use calorie and protein boosters, such as adding cheese sauce or butter, to increase caloric intake without raising meal volume.
- Adjust food textures (such as pureed or thickened liquids) under professional supervision to safely manage swallowing issues.
- Include nutrient-rich foods like eggs, fish, avocados, leafy greens, and whole grains, while avoiding processed foods high in empty calories.
- Plan and prepare meals ahead of time to ensure a balanced intake of nutrients and minimize stress during mealtime.

Medical and Therapeutic Support

Nutritional management should involve a multidisciplinary team including doctors, dietitians, speech-language therapists, and occupational therapists. Regular monitoring and adjustment of the

diet are crucial as children grow and their needs change. For children who cannot safely eat enough orally, tube feeding may be recommended to ensure proper nutrition and address gastrointestinal issues such as reflux and constipation.

CONCLUSION

Smart nutrition for children with cerebral palsy requires a personalized, multidisciplinary approach that combines dietary modifications, nutrient supplementation, and therapeutic support. Tackling the unique challenges of feeding and digestion while ensuring a balanced intake of essential nutrients promotes optimal growth, bone health, and overall well-being. Regular assessments and adaptable dietary planning are crucial for meeting the changing nutritional needs of these children, ultimately enhancing their quality of life and developmental progress.

PROTECTING EVERY CHILD WITH DISABILITY:

PREVENTING ABUSE, NEGLECT, AND PROMOTING SAFETY

CHIMEZIE ELEKWACHI

(Clinical Psychologist & Program Manager, African Network for the Prevention and Protection against Child Abuse and Neglect)



Globally, it is estimated that about 1 billion children have experienced violence. Children often fall victim to economic downturns, insecurity, climate change, and other humanitarian crises. Children with disabilities represent a significant

portion of the child population, making them more vulnerable than their peers. In Nigeria, children with disabilities face multiple challenges, including stigma, exclusion from schools and services, poverty, and a higher risk of physical, sexual, and emotional abuse and neglect.

Why are children with disabilities/special needs at a

higher risk in Nigeria?

1. Multiple barriers leading to exclusion:

Many parents of children with disabilities often deny that their children have a special need or disability. This denial frequently delays the essential support these children need to develop effectively.

Parents' denial often serves as a common social reaction to children with special needs. This results in substantial neglect of infrastructure that could assist these children in adapting and overcoming their challenges.

This collective denial by both parents and society often causes many children with disabilities to encounter inaccessible schools and healthcare services, limited access to specialists, and curricula that do not address their needs. These barriers increase isolation and decrease visibility to protective systems.

2. Higher rates of exclusion from education

Children with disabilities are usually not excluded from school in Nigeria. This is because there are no active efforts to enroll them or provide the necessary facilities for their education, such as building inclusive schools to help them adapt, training teachers in inclusive education methods, and actively targeting children with disabilities in enrollment initiatives. This can be linked to society's failure to recognize the importance of supporting children with special needs in education. A key factor that removes them from protective environments and reporting channels—especially when they are being abused.

3. Stigma, poverty, and family stress

Children with disabilities often face many challenges that raise their risk of experiencing abuse and neglect. Social stigma based on myths and shame can cause families to hide their children, preventing access to education, healthcare, and social inclusion.

Poverty increases vulnerability. The high cost of care and limited income can lead families to desperate measures such as child labor, early marriage, or abandonment.

Family stress, driven by financial difficulties and societal judgment, can also reduce caregivers' capacity to offer proper care and emotional support.

4. Legal invisibility in practice

Nigeria has laws such as the Child Rights Act and the Disability Act. These laws establish the legal framework for protecting children and prohibiting discrimination. Despite their enactment, their enforcement remains weak in many states and communities. When it comes to children with disabilities, the gap between law and practice is still large, leaving many children without effective legal protection.

Types of abuse and neglect commonly affecting children with disabilities

- Physical abuse:** These are various forms of aggression directed at a child. This may involve the use of weapons, among other things.
- Corporal punishment:** This is the intentional use of physical pain as a means of discipline. It causes bodily pain or harm and may include spanking, slapping, hitting, the use of belts, sticks, etc.
- Emotional and psychological abuse:** This can involve actions like social exclusion, using derogatory language that causes emotional and mental harm, and forcing isolation, all of which may harm the child's self-esteem.
- Sexual abuse and exploitation:** These involve sexual acts committed against children. Children with disabilities are often targeted because of assumptions that they lack access to reporting channels or won't be believed when they disclose.
- Neglect and deprivation of basic needs:** These are actions or omissions that deprive children of proper care, such as adequate nutrition, medical attention, and access to education, shelter, and clothing.

What can we do to prevent abuse and protect children with disability in Nigeria?

Make schools and services for children truly inclusive

This will require making public facilities such as schools, hospitals, and public spaces accessible to children with disabilities. This includes renovating public areas with ramps, adapted restrooms, seating arrangements, and more. It will also involve enhancing the capacity of teachers and healthcare workers in inclusive pedagogy, classroom accommodations, and inclusive healthcare facilities for children with disabilities.

Awareness creation

Raising awareness is crucial for protecting children with disabilities from abuse and neglect. Many harmful attitudes stem from ignorance, fear, and long-standing myths about disability. Through ongoing education, communities can learn to focus on ability first and recognize that every child deserves love, dignity, and safety.

Awareness campaigns, whether through schools, media, faith groups, or community meetings, should aim to promote inclusion, use positive language, and demonstrate respect for children with disabilities. Parents and caregivers also need accurate information about their rights, available support systems, and safe ways to seek assistance.

As people become more informed and attitudes begin to change, stigma lessens, families feel more supported, and children with disabilities can grow up in safer, more accepting environments.

Strengthen family supports

Parenting programs designed for parents of children with disabilities can be very effective. The curriculum should include human developmental stages and understanding developmental delays. These programs should also teach non-violent caregiving, positive behavior support, and practical skills for daily care of

children with disabilities.

Furthermore, providing cash transfers, livelihood support, or targeted social protection for families caring for children with disabilities is essential to ease economic pressures that could lead to neglect or exploitation.

Enact, implement, and enforce disability-inclusive policies across all sectors.

A strong collaborative effort should be made by Federal and State governments in Nigeria to domesticate the Child's Rights Act and implement the 2018 Disabilities Act. Concrete steps in this regard should include establishing a commission for children with disabilities as an independent entity; they should be given clear budgets, monitoring, and accountability mechanisms, as well as trained professionals. This commission will facilitate a coordinated effort between government and civil society to promote and protect the rights of children with disabilities. It will also monitor progress and take legal action when rights are violated.

Training Law Enforcement and Service Providers

Law enforcement agencies such as

the Nigeria Police, Civil Defense Corps, healthcare workers, and social service providers must be trained to identify and respond properly to cases of abuse involving children with disabilities.

Many incidents go unnoticed or mishandled because of limited awareness and inadequate training on disability issues. Educating these professionals will help them recognize signs of abuse, communicate effectively with affected children, and handle cases with empathy and respect.

Building their capacity ensures that every child with a disability receives protection, justice, and care delivered with understanding and dignity.

Hotlines and Reporting Mechanisms

Effective protection begins with accessible and trusted channels for reporting abuse. Children with disabilities and their caregivers often face barriers when seeking help, such as fear of stigma or lack of awareness about where to report. Establishing dedicated hotlines and reporting mechanisms helps address this gap and ensures a prompt response to cases of abuse or neglect.

These systems should be accessible and easy to use, providing options for voice, text, or visual communication to assist people with various disabilities. Trained responders must handle each report with confidentiality, empathy, and promptness.

Public awareness of these hotlines, along with cooperation among government agencies, civil society, and disability groups, can create a responsive network where every case is recognized and addressed. A robust, inclusive reporting system not only protects children but also enhances public trust and strengthens accountability.

Strengthen data, research, and monitoring.

To effectively coordinate efforts for children with disabilities, it is necessary to collect disaggregated data, including age, sex, disability type, location, type of abuse, and other relevant information. They will conduct regular mapping of the types and prevalence of abuse among children with disabilities, available services, and accessibility. The data will help evaluate which interventions are effective and assess their outcomes.

THE POWER OF SPEECH THERAPY IN THE DEVELOPMENT OF CHILDREN WITH DISABILITIES

Sotomi Ebenezer (Speech Therapist)



From the first cry to childhood's playful chatter, communication shapes how we belong, learn, and grow. For children with disabilities, that connection to the world is often fragile or incomplete, and the effects go beyond missed words. When a child cannot be understood or has difficulty understanding others,

their opportunities to learn, make friends, and build confidence are limited. Speech therapy helps strengthen that connection. It transforms struggle into progress and silence into understanding. Children with disabilities, whether due to autism, cerebral palsy, Down syndrome, hearing loss, or other conditions, face a wide range

of communication challenges. Some struggle to produce clear speech sounds; others find language confusing or have difficulty organizing their thoughts into words. Many also require support with social communication skills, such as taking turns in conversation, reading facial expressions, or maintaining eye contact. In some cases, the same muscles used for speech also affect feeding and swallowing, making every day routines difficult or stressful. Each child's profile is unique, and that is exactly why speech therapy must be personalized, practical, and compassionate.

Speech therapy is not a single technique or a quick fix. It is a focused, child-centered process that helps children develop tools to express needs, share ideas, and connect meaningfully with others. Speech and Language Therapists work on more than just speech clarity and language understanding; they also focus on social skills, safe swallowing, and alternative methods of communication. These options might include the **Picture Exchange Communication System (PECS)**, **sign language**, or **speech-generating devices (AAC)**. Therapy uses play, stories, daily routines, and technology so that learning feels natural and engaging rather than clinical or strict.

The benefits of speech therapy are profound and lasting:

I. Enhanced thinking skills: As children learn to ask questions and

follow directions, their attention, memory, and problem-solving skills improve, which boosts their overall learning experience.

II. Social connections:

Communication opens the door to friendships. A child who can join play, share stories, or invite others in is much more likely to belong and less likely to feel isolated.

III. Healthier emotions.

The ability to express needs and feelings reduces frustration and anxiety while building confidence. A child who can say "I need help" or "I am upset" feels more secure and understood.

IV. Growing independence:

Communication is central to daily decisions, from selecting clothes to requesting help. Speech therapy provides children with the tools to live more freely and stand up for themselves.

Despite its clear importance, access to speech therapy remains inconsistent. Many families are unaware of when or how to seek help, services can be expensive, and trained professionals are scarce in many areas. These obstacles often cause children to miss crucial early intervention periods when help is most effective. That gap is not just a health issue; it's a missed chance for learning, inclusion, and long-term independence.

The first and most important step in disability care is early detection and intervention. Small delays in speech or language should never be dismissed as a child "just being

slow to talk." Prompt assessment ensures that challenges are addressed when the brain is most capable of benefiting from therapy, providing children with the strongest possible foundation. Additionally, there must be a deliberate effort to train more qualified therapists, enhance school services, and equip parents with strategies they can use at home to extend therapy beyond the clinic. At the same time, access must be widened through affordable and inclusive services such as **community programs, teletherapy, and subsidized AAC devices**. Awareness and advocacy are also vital. When parents, educators, healthcare providers, and policymakers fully recognize the transformative impact of speech therapy, the argument for increasing funding and improving accessibility becomes clear.

In conclusion, speech therapy is more than just a clinical service; it is an investment in human potential. It yields multiple benefits: enhanced learning, stronger relationships, healthier emotions, greater independence, and a life lived with dignity and confidence. It does more than teach words; it restores possibility. If we want children with disabilities to reach their fullest potential, speech therapy must be made available, visible, and valued. We must support early intervention, ensure adequate resources, and eliminate barriers to access. Every child deserves the right to be heard, understood, and included.

TACKLING STIGMA AND DISCRIMINATION AGAINST PEOPLE LIVING WITH CLUBFOOT AND CEREBRAL PALSY.

Dr Anijunsi Livinus Patrick (*Consultant Orthopedic Surgeon, ESUTH, Enugu*)



Introduction

Clubfoot deformity and cerebral palsy (CP) are among the most common disabilities encountered in medical practice. Unfortunately, individuals affected by these conditions often face stigma and discrimination, especially when they are untreated. These negative attitudes mainly arise from misinformation and harmful cultural beliefs, where disability is sometimes viewed as a curse, punishment, or sign of witchcraft.

Showing compassion, offering social support, and actively raising awareness can significantly reduce stigma and discrimination, fostering a more inclusive and understanding society for people living with clubfoot and cerebral palsy.

Understanding Clubfoot and Cerebral Palsy

Clubfoot is a birth defect where one or both feet are twisted or misshapen. It is a common musculoskeletal condition in children and can be effectively corrected with the Ponseti method, which is the internationally recognized standard treatment. Without

treatment, however, clubfoot can cause lifelong physical problems, social isolation, and discrimination.

Cerebral palsy (CP), on the other hand, is a neuromuscular disorder caused by a non-progressive injury to the developing brain. It affects movement, muscle tone, and posture. Children with CP often face significant stigma due to misconceptions, lack of awareness, and limited community understanding of their condition.

Discrimination against individuals with these disabilities often stems from ignorance about the causes and effects of their conditions, fear of contagion, and deeply ingrained cultural beliefs.

Impact of Stigma and Discrimination

Stigma and discrimination have significant long-term effects on children with disabilities and their families. These effects include:

- Social withdrawal and isolation.
- Difficulty securing employment and financial instability.
- Exposure to physical violence and abuse.
- Marginalization and challenges integrating into society.
- Emotional distress and feelings of hopelessness.
- Development of low self-esteem and poor self-image.
- Struggles in maintaining social relationships.
- Abandonment of treatment or reluctance to seek medical help.
- Exclusion from social and

recreational activities.

- Experiences of bullying and harassment.
- Inadequate or discriminatory health insurance coverage.
- Negative self-perception due to physical limitations.
- Discrimination in accessing housing or employment opportunities.
- Deepened sense of shame and hopelessness, which hinders early diagnosis and treatment.

How to Address or Reduce Stigma and Discrimination Against Clubfoot and Cerebral Palsy

Creating an inclusive environment for children and individuals with disabilities requires intentional efforts to shift attitudes, behaviors, and social norms across families, communities, schools, and service providers. The following strategies are essential:

• Early Identification and Treatment:

Encourage early diagnosis and proper medical care to improve outcomes, increase quality of life, and lessen the visible effects of disability that often contribute to stigma.

• Emotional and Psychosocial Support:

Offer counseling and support groups for children and their families to build confidence, promote independence, and enhance coping skills.

• Community and Social Support Networks:

Encourage families to develop positive social networks by connecting with other parents, caregivers, and medical

professionals for shared experiences, guidance, and support.

- **Education and Awareness Campaigns:**

Organize community awareness and education programs to dispel myths, promote inclusion, and foster understanding of clubfoot and cerebral palsy.

- **Training and Empowerment:**

Equip service providers, teachers, healthcare workers, and communities with skills to support inclusion and provide disability-friendly services.

- **Language Sensitivity:**

Promote the use of respectful and non-derogatory language when referring to people with disabilities, whether in conversation or the media.

- **Accessible Workplaces and Institutions:**

Ensure schools, offices, and public spaces are physically and socially accessible to individuals with disabilities.

- **Policy and Legal Frameworks:**

Enact and implement laws that address stigma and discrimination, backed by adequate funding to enforce inclusion and protection measures.

- **Multi-Level Strategic Interventions:**

Invest in integrated, evidence-based approaches that challenge negative beliefs and increase the availability and inclusivity of services for everyone.

- **Research and Understanding Societal Perceptions:**

Conduct research to understand community beliefs, attitudes, and perceptions of disability to guide effective advocacy and inclusion programs.

Conclusion

Reducing stigma and discrimination against individuals living with clubfoot and cerebral palsy requires a combination of awareness, empathy, policy action, and community involvement. When families, caregivers, and society at large are informed and supportive, children with these conditions can thrive, living with dignity, confidence, and equal opportunity.

Disability & Culture: *Exploring Traditional Beliefs and Misconceptions*

Bright Amadi



In medical terms, disability is considered a health condition that affects the body structure or function, leading to difficulty performing activities typical for humans. It can result from illnesses, injuries, or congenital

conditions present at birth. Therefore, it is viewed as a condition that may require treatment or rehabilitation to improve quality of life.

However, in the cultural landscape, disabilities, especially when they are congenital, are viewed very differently because of traditional spiritual beliefs. These beliefs are often false or outdated superstitions rooted in limited understanding. Their impact on disabled individuals and their families is significant, as they can greatly hinder access to available medical treatments and rehabilitation.

Traditional Perceptions of Disability

Some of these common traditional views on disabilities are as follows:

- **Disability as a Curse or Punishment:** In many African traditions, disabilities are believed to result from a curse, sin, or ancestral punishment, inflicted either directly by the gods or indirectly on the parents for some conscious or unconscious wrongdoings against the land, individuals, or ancestor lines. Sometimes, this condition is viewed as a transgenerational affliction that can only be addressed through specific ritual cleansing processes.
- **Disability Linked to Witchcraft**

or Evil Spirits: In many cultures, women are advised to be very cautious about whom they meet, where they go, which traditional festivals they attend, and even whom they tell about their pregnancy (or stage of pregnancy), as they could expose their unborn children to witchcraft attacks. It is generally believed that the physical condition of an unborn child can be influenced through witchcraft as a way of targeting the family. In some cases, pregnant women make sure to clip "safety pins" or other special ornaments and accessories to their clothing for the protection of their unborn child. It is also common in some communities for people born with disabilities to be labeled as "ogbanje," which implies they are associated with certain traditional spiritual sects.

• **Disability as Contagious:** Despite medical evidence showing that disabilities are not contagious, many traditional beliefs still see them as conditions that can be "caught" through close contact. In some communities, people fear that associating with individuals who have disabilities, especially children, might bring misfortune or cause others to develop similar conditions. This misconception leads to avoidance, social exclusion, and discrimination against persons with disabilities, further deepening their isolation and reinforcing harmful stereotypes within society.

• **Blaming the Mother or Family:** Some cultures hold the woman responsible for her child's congenital disability. In some cases, women are accused of adultery, while some families are blame for their insistence on marrying from specific lineages that they are barred from marrying into traditionally.

• **Viewing Disabled Persons as Incapable or Useless:** It is well known that in many traditions, disabled persons are viewed as individuals who are born

incomplete and, as a result, are not included among genuine family members. They are perceived as a source of diminishing the family's or lineage's honor.

• **Hiding Disabled Family Members:** Generally, in the cultural context, disabled persons, especially children, are often hidden from the public eye. They are seen as objects of shame and ridicule for the family. Therefore, they are locked in rooms or quickly taken away when visitors arrive.

Effects of Disability Misconceptions:

At The Straight Child Foundation, we are aware of these cultural misconceptions. Therefore, we are committed to advocacy, especially working with traditional leaders and other community gatekeepers, as well as implementing public education programs aimed at health workers and households. These efforts aim to address some of the harmful effects of these misconceptions through fact-based health education. Some of the dangerous effects of these misconceptions include:

• **Social Exclusion/Isolation:** People with disabilities, especially children, are often kept away from schools, work, playing with peers, and social gatherings. This results in near-complete denial of participation in community life. In some cases, this can be as severe as confining affected individuals to a separate room with minimal care.

• **Stigma and Discrimination:** Because disabled persons are labeled as cursed or bewitched, people fear and mock them. This situation can lead to bullying, rejection, or abuse of the affected individual.

• **Low Self Esteem or Emotional Distress:** This stems from constant negative treatment, which causes the individual to develop feelings of shame and eventually, worthlessness. This mostly leads to anxiety, loss of

confidence, and depression. In extreme cases, it can lead to suicidal thoughts.

• **Lack of Education and exclusion from Social activities:** In some cases, families of disabled persons, given the type of disability, conclude that education for such persons is "useless." Hence, they are denied the opportunity. This limits their ability to learn skills or become independent. Marital opportunity is also a major aspect of social life that persons with disabilities are often denied due to their physical conditions.

• **Unemployment and Poverty:** Given the denial of opportunities to acquire education, including the learning of vocational skills, a lot of disabled people are tagged unemployable, hence denying them the opportunity for self-dependence and sustenance. This worsens their situation, especially in adulthood, due to financial and economic dependence.

• **Family Stress and Shame:** Due to the associated labeling of disabled persons as cursed, bewitched, and the burdens linked to their ownership and daily care, some families of disabled individuals find themselves feeling stressed (both emotionally and financially), embarrassed by their physical appearance, as well as facing social judgment. This, in some cases, results in the neglect and abandonment of disabled persons due to social pressures.

• **Violation of Human Rights:** One of the most serious consequences of cultural misconceptions about disability is the widespread violation of human rights. People with disabilities are often excluded from full participation in society and denied fundamental rights such as access to education, employment, healthcare, marriage, and political engagement. These forms of discrimination perpetuate inequality and social injustice, reinforcing the marginalization of persons with disabilities and undermining their dignity and

freedom as equal members of society.

At The Straight Child Foundation (TSCF), we believe in the total inclusion of all persons across every sphere of life, regardless of their inherent challenges. This conviction drives our continuous advocacy and engagement with all

stakeholders to embrace our vision of “**a world where deformities, disabilities, and challenges do not limit any child from attaining their God-given potential.**”



HEALING IN MOTION: HOME EXERCISES FOR CLUBFOOT AND CEREBRAL PALSY MANAGEMENT

Excellence Effiong & Praise Analaba
(Physiotherapists)



Let us be honest: when people hear the word “**exercise**,” many instantly think of sweat, gym memberships, or, at the very least, a stubborn child who would prefer watching cartoons. But when a child has clubfoot or cerebral palsy (CP), exercise takes on a much different and more crucial meaning.

In this case, it is not about lifting weights or training for a marathon. It is about helping a child move better, feel better, and live better. Here is the good news: a lot of patient progress can begin right at home, with nothing more than your hands, your heart, and a few minutes a day.

Whether a child has clubfoot or cerebral palsy, professional care always plays a vital role. Pediatric physiotherapists, orthopedic surgeons, and other rehabilitation specialists all provide crucial expertise. Additionally, between clinic visits, another aspect matters just as much: **the home program**. These are simple, parent-led exercises done daily (or almost daily) to reinforce what is being

done in clinical therapy. Think of them as the “**maintenance team**” working behind the scenes, keeping joints flexible, muscles active, and progress on track.

You do not need to be a health professional to help your child move forward; just a few straightforward instructions, a soft space to work in, and the willingness to turn 15-30 minutes into a lifelong impact.

Clubfoot:

Clubfoot is a condition where a baby is born with one or both feet turned inward and downward. It is often corrected early with the Ponseti method; a brilliant, gentle approach involving casting and bracing. But even after correction, the job is not quite done. Without daily stretching and strengthening, the foot can stiffen again or even relapse. That is where home exercises come in.

Here are practical exercises parents can do at home:

Foot Stretching (Passive Range of Motion)

What to do: Hold your child's heel with one hand and gently push the front of the foot upward and outward with the other. Hold for 10–15 seconds.

Why: It helps to maintain flexibility and supports correct alignment.



Ankle Circles

What to do: Gently rotate your child's foot in slow circles, 5 times each direction, or tell them to rotate it actively if they can participate.

Why: It helps to keep ankle joints loose and mobile.



Towel Pulls (For Older Kids)

- What to do:** Have your child sit with legs stretched out. Use a towel or stretchy band around the foot and gently pull the toes toward the body.
- Why:** It helps to stretch tight calf and foot muscles.



Ball Rolling with the Sole

- What to do:** Roll a small ball (like a tennis ball) under the child's foot while seated. Roll forward, backward, and in circles.
- Why:** It helps to encourages arch development and foot mobility.

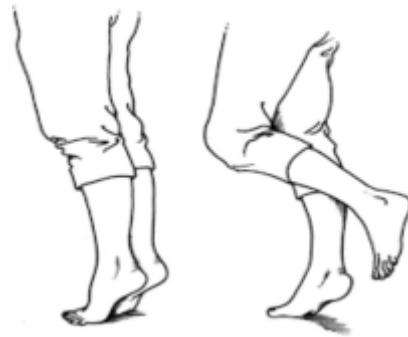


Supported Squatting (If Child Can Stand)

- What to do:** Hold your child's hands and gently

guide them into a squat position, then help them stand back up.

Why: It helps to build leg and ankle strength and encourages proper alignment.



Toe Grabbing/Towel Scrunch

What to do: Place a towel on the floor and ask your child to grab/scrunch it toward them using their toes. You can also use marbles or beads for toe-grabbing.

Why: It helps to build small foot muscle strength and improves coordination

Marble Pick Up with Feet



Heel Raises (If Child Can Stand)

What to do: Ask your child to stand and slowly rise onto their toes, then lower down. Hold onto something for balance.

Why: It helps to strengthen calf muscles and improve balance for walking.

Frequency: Daily is best, but even a few times a week, consistently done, can make a huge difference. You do not need to overdo it. **Think quality over quantity.**

Cerebral Palsy

Cerebral palsy (CP) is a condition caused by early brain injury or abnormal brain development that affects movement, posture, and muscle control. Some kids have tight muscles, others have low muscle tone, and many face challenges with coordination or balance. While professional intervention is crucial, parents play an important role in supporting movement skills at home by helping their child stretch, strengthen, and practice in a comfortable and familiar environment.

Here are simple but effective home exercises for children with CP:

♀ Stretching for Flexibility

What to do: Gently stretch legs, hips, and arms. Focus on hamstrings, calves, and hip flexors. Hold each stretch 20–30 seconds.

Why: It helps to prevent stiffness and reduce the risk of contractures.

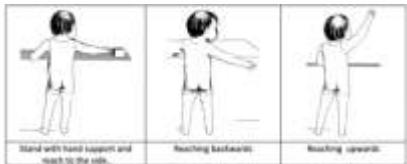


Supported Standing and Reaching

What to do: With a standing frame, furniture,

or your help, have your child stand upright for 1–5 minutes.

Why: It aids in boosting bone strength, improving posture, and enhancing leg stability.



Rolling and Reaching

What to do: Place toys just out of reach to encourage rolling or reaching while lying down or sitting.

Why: It helps to develop motor control and body awareness.



Seated Balance

What to do: Sit your child on a firm surface and gently shift their weight side to side (with support).

Why: It helps to build core strength and balance.



Assisted Walking

What to do: Hold your child's hands or use a walking aid for short walks around the home.

Why: It helps to reinforce coordination and weight shifting.



Note Importantly:

Never force a movement. If your child is in pain or resisting strongly, stop and consult your therapist. Every child progresses at their own pace. Not every day will be smooth. Sometimes your child might resist, feel tired, or not want to participate, and that is okay. Home exercises are not about perfection; they are about routine, patience, and

celebrating small wins.

If your child manages a longer stretch today than yesterday, that is a win.

What if they try balancing for 3 seconds instead of 2? That is huge progress.

If you both laugh halfway through because someone made a funny noise during a stretch, that is a memory plus a relaxed muscle.

In Summary, Home Is a Healing Ground

Yes, children still need their clinic visits, therapy sessions, and sometimes even surgeries. But what happens at home fills the gaps and keeps the momentum going. Think of these exercises as brushing the muscles and bones, small daily habits that prevent bigger issues down the road. You do not need to be an expert to help. You just need to show up, gently guide, and believe in your child's ability to grow stronger with every move. Because healing is not only found in hospitals; it is also found in living rooms, on mats, beside toy boxes, and in the caring hands of a parent who says: "We have got this. Let us move forward together."

EARLY DETECTION AND REFERRAL FOR CLUBFOOT: GIVING EVERY CHILD WITH CLUBFOOT A CHANCE TO WALK FREE.

CHIDIEBERE ASIMOBI (TSCF, Program Manager)

Clubfoot is a congenital condition where one or both feet twist inward and downward, making it one of the most common musculoskeletal birth defects worldwide. Fortunately, it is highly treatable when caught early. The Straight Child Foundation (TSCF), working with various states, prioritizes early detection and referral to ensure that

children born with clubfoot receive timely, life-changing treatment in the right setting.

Why Early Detection and Referral Matter

Early detection of clubfoot, ideally at birth or within the first few weeks, allows for full correction through the Ponseti method, a non-



surgical approach involving gentle manipulation, casting, and bracing. Unfortunately, in many regions, a lack of awareness and delayed referrals frequently lead to preventable disabilities, stigma, and social exclusion.

This is why The Straight Child Foundation has improved its Early Detection and Referral (EDR) strategy. This community-led program trains frontline health workers and local influencers to recognize clubfoot signs early and connect affected children with nearby treatment clinics. Early detection prevents disability and helps children regain dignity, confidence, and hope for the future.

“Each One, Reach One” — Expanding Reach Across 11 States

To accelerate enrollment and treatment, TSCF launched the **“Each One, Reach One”** campaign, an active enrollment strategy focused on community collaboration and peer engagement. The core idea is simple: **every trained stakeholder identifies and directs at least one child with clubfoot to the nearest free treatment center.**

This ripple effect encourages natural awareness growth and boosts referrals, gradually increasing the number of children receiving treatment. The campaign now covers 11 states where TSCF supports clubfoot clinics — including Abia, Akwa Ibom,

Anambra, Cross River, Imo, Enugu, Ebonyi, Kogi, Delta, Bayelsa, and Edo. This wide reach ensures that all regions are part of the effort to eliminate untreated clubfoot in Nigeria.

The Backbone: Early Detection and Referral (EDR) Training

This campaign focuses on EDR training, a practical program designed to improve the skills of key community gatekeepers. Participants include Officers-in-Charge of Primary Health Centers, Disease Surveillance and Notification Officers, Traditional Birth Attendants, Immunization and RMNCH officers, traditional rulers, religious leaders, and early childhood school owners.

These individuals are strategically positioned within communities and often have the initial contact with newborns and families. By training them to recognize early signs of clubfoot and refer promptly, TSCF is creating a strong, sustainable referral network that connects homes to hospitals and communities to care.

This approach expects a 40–50% increase in new enrollments at supported clinics. More

importantly, it promotes collaboration among communities, state health agencies, and partner hospitals, fostering a more united and effective effort against childhood disabilities, such as clubfoot.

Transforming Lives, One Child at a Time

The message of Early Detection and Referral is clear: every child deserves the opportunity to walk, play, and dream without limits. By increasing community awareness and enhancing response efforts in 11 states, TSCF is changing the narrative of clubfoot — transforming what was once viewed as a lifelong condition into a story of hope and renewal.

Following the “Each One, Reach One” mantra, one person can make a difference in a child’s life, and together, we can influence them all.

You can also be that one person. When you see a child with clubfoot, please refer them to us, where they can access free treatment.

LIST OF SUPPORTED CLUBFOOT CLINICS

S/N	CLINICS	DAYS OF CLINICS	VENUE FOR TREATMENT
1	Federal Medical Centre, Umuahia Abia State	Every Thursday	Orthopaedic clinic @ Consulting Complex Building. Phone: 08167037052
2	University of Uyo Teaching Hospital, Uyo Akwa Ibom State	Every Tuesday	Plaster room, Accident and Emergency complex Phone:08081355851
3	Nnamdi Azikiwe University Teaching Hospital Nnewi, Anambra State	Every Tuesday	Orthopaedic clinic @ Oba Trauma Centre. Phone:09027425708
4	Irrua Specialist Teaching Hospital Irrua, Edo State.	Every Tuesday	Orthopaedic clinic @ Outpatient Unit. Phone:08159146117
5	Alex Ekwueme Federal University Teaching Hospital, Abakaliki . Ebony State	Every Thursday	Surgical outpatient clinic (SOPC) AEFUTHA. Phone:09139956583
6	Federal Teaching Hospital, Lokoja , Kogi State	Every Thursday	Plaster room, Accident and Emergency complex Phone:08084926685
7	Enugu State University Teaching Hospital, Parklane. Enugu state	Every Wednesday	Surgical outpatient clinic (SOPC) ESUTH Parklane Phone:08084230291
8	Federal Teaching Hospital , Owerri, Imo State	Every Friday	Clubfoot Clinic: Room 10 Surgical Out Patient Department. Phone:09162341274
9	University of Benin Teaching Hospital, Edo State	Every Wednesday	Plaster room, Accident and Emergency complex Phone:08100435245
10	Rhema University Teaching Hospital, Aba	Every Friday	Antenatal Unit Phone:08063864401
11	University of Nigeria, Nsukka Medical Centre. Nsukka, Enugu State	Every Wednesday	Accident and Emergency complex Phone:08137947750
12	University of Calabar Teaching Hospital, Cross River State	Every Wednesday	Plaster room, Orthopaedic Department Phone:07035320224
13	Delta State University Teaching Hospital, Oghara	Every Monday	Plaster room, Orthopaedic Department Phone:09057196775
14	Prince Abukakar Audu University Teaching Hospital, Anyigba	Every Thursday	Surgical out-patient clinic Phone:08065107548
15	Zonal Hospital Okene	Every Wednesday	Pediatric Ward Phone:08166642975
16	Edo State University Teaching Hospital, Auchi	Every Thursday	Outpatient Unit Phone:07031252822
17	Immanuel General Hospital, Eket	Every Tuesday	Orthopaedic Outpatient Unit Phone:09063166726
18	Comprehensive General Hospital Ikom, Cross River State	Every Thursday	Out patients unit Phone:08081418202
19	Niger Delta University Teaching Hospital, Amasomma	Every Monday	Orthopaedic unit Phone:08164330170
20	Federal Medical Centre, Asaba	Every Tuesday	Clubfoot Clinic, Outpatient Unit Phone:07087190420
21.	Amudo Integrated Community Mental Health Foundation, Itumbuzor	Every Wednesday	Phone:09124943976
22.	Immaculate Heart Hospital and Maternity, Umenze	Every Friday	Phone:07060619535

OUR CLUBFOOT JOURNEY: MY CHAIRMAN AND HIS DESIGNER SHOES

Dr. Kelechi Faith Roberts

My baby, my love, my brave soldier — Emy nwam! Honestly, I am just grateful that we caught his clubfoot early enough. How would I have explained to him later that I did not notice it sooner and got him the necessary treatment, and now he would have a Rohii leg with that adorable face? God forbid! Luckily, it was only on one leg (unilateral clubfoot), and it was not even very noticeable at first. But still, that discovery changed everything for us.

We started our treatment at Rhema University Teaching Hospital in Aba, and from the very first day, I knew this journey would test me and help me grow. When he got his first cast, I looked at my little man and whispered, **“We have got this.”** He took it like a champ, even though I knew deep down he did not like that white leg wrap one bit.

He had three casts in total before we went for the tenotomy, that little procedure to loosen the tight tendon. Ah! On the day of the tenotomy, my tough man failed me. My baby, who usually acted like a soldier, suddenly became soft. He cried, I cried, and the nurses probably thought we were auditioning for a movie but God was faithful, and we ended up smiling.

After that came what I now fondly call **“the designer shoes”** — **the braces.** Emy had to wear



them for 23 hours every day. Can you imagine? At first, he did not find it funny at all. He cried a lot because he did not understand why his legs had to be cuffed like that. But now? This oga climbs things around the house unaided. You would not even know what he has been through.

To be honest, the whole experience initially took a toll on my psyche. I did not see it coming at all but as time went on, I realized that this journey was shaping not just him, but me too. Each passing day, I saw strength,

patience, and joy that I never knew I had.

If there is one thing I have learned, it is that early detection is everything. Please, if you notice anything unusual about your baby's foot or feet, if they tilt or curve in any strange way, do not wait or assume it will correct itself. Take that child to the hospital immediately. The earlier you started treatment, the easier it is to treat, and the better the outcome.

Now, my boy has finished his casting phase, survived the tenotomy, wears his designer shoes only when he sleeps at night and struts around like a chairman with his straight, strong leg all day. Watching him run, climb, and play fills my heart with so much joy and pride.

Our journey has not been easy, but it has been worth every single step. My baby is stronger, happier, and walking fine — still rocking his designer shoes at night like a model!

“MY CHILD WALKED PERFECTLY: OUR CLUBFOOT JOURNEY”

By: Precious Edoje



One of the things I looked forward to most as a mother was seeing my child walk. I knew he would eventually walk, but I wasn't sure if he would walk well. When he finally took his first steps and walked perfectly like every other child, my heart overflowed with joy. He could run, play, and do everything just like any other kid.

My name is Precious Edoje. I am from Edo State, but I married into Delta, and I currently work in Umuahia. I spent most of my education and part of my working life in Port Harcourt. When I gave birth to my child, I noticed that he had clubfoot on one of his feet. It was devastating because I had waited so long to have this child and seeing that deformity broke my heart.

As luck would have it, I was introduced to an orthopedic specialist by the gynecologist who delivered my baby. We

began treatment with what orthopedic doctor. Each casting session cost forty thousand naira (₦40,000), and my child had a total of six casts. I spent about 240,000 naira before I eventually had to return to Umuahia to resume work.

The process was very inconvenient. Sometimes I would travel all the way from Umuahia to Port Harcourt for casting, only to find out that the orthopaedic doctor was not available. My child would have to carry the same cast for one or two extra weeks, sometimes even up to

three weeks. It was emotionally and physically draining. Dressing him was difficult because one leg was always bulkier than the other.

Then one day, while browsing the internet, I saw what looked like an advertisement about clubfoot treatment, something related to The Straight Child Foundation (TSCF). I immediately sent a direct message and received a response almost instantly. They asked for my location and referred me to Federal Medical Centre (FMC) in Umuahia, providing me with a contact person to call.

When I arrived at FMC Umuahia, it felt like a miracle. I contacted the number I was given, and within days, I was asked to bring my child for assessment. That was

the start of my relief. The Straight Child Foundation became my answered prayer after the answered prayer of having my baby.

At FMC, I noticed that my child's two feet were not aligned, with one being longer than the other. I was scared, but the consultant was kind and patient.



She explained what was happening and told me that the difference could be fixed. She introduced the term **tenotomy** and explained that it was a simple procedure that would help straighten the foot.

We began treatment immediately. When I was told to come back after just one week to have the cast removed, I was surprised because I was used to waiting two or three weeks before. However, they explained that this was the proper, standard procedure. Everything was done carefully, and to my greatest surprise, everything was completely free of charge.

I could not believe it. I had spent around ₦240,000 before, and now I was receiving top-quality care for free. Even the braces, which I had paid ₦32,000 for elsewhere, were provided at no cost.

When it was time for the tenotomy, I stayed calm because the doctor had already explained it to me. I watched the procedure happen; it was quick, simple, and almost hard to believe. I remember laughing through tears because it felt like all my prayers for my child's foot were finally coming true right in front of me.

After the tenotomy, my child's leg was cast again. When the cast was finally removed, we started using braces, also free of charge. The team stayed in touch, calling and sending reminders about appointments and follow-ups. They checked on us regularly through phone calls, SMS, and



WhatsApp messages. That level of care was more than I had experienced anywhere else. It felt like being part of a real support community.

Through this journey, I became an advocate for clubfoot awareness. Many people still do not know that clubfoot can be corrected. Sadly, I have seen children as old as five, six, or even eight years still walking abnormally, not because their condition cannot be treated, but because their parents do not have the right information.

Please, if you ever come across a child whose feet appear twisted or turned inwards, do not ignore it. Do not try to diagnose it yourself. Simply refer that child to any **The Straight Child Foundation-supported Clubfoot Clinic** near you.

I am based in Umuahia, and my

child received treatment at FMC Umuahia, but there are such clinics in other hospitals in different states. The treatment is free, accessible, and open to everyone, regardless of background or income level. No child should have to grow up with clubfoot when correction is possible.

I want to express my heartfelt gratitude to **The Straight Child Foundation (TSCF)**, MiracleFeet, and the entire Clubfoot Team at FMC Umuahia. You have transformed our lives. My child now walks, runs, and plays just like any other child, and I am eternally thankful.

Thank you for giving my child the gift of walking normal.

FREE CEREBRAL PALSY PHYSIOTHERAPY

At The Straight Child Foundation (TSCF), we are passionately committed to transforming the lives of children with disabilities through not just advocacy but through direct, hands-on care that resonates deeply with families. A cornerstone of this mission is our Free Cerebral Palsy (CP) Physiotherapy Program,

fully operational at our welcoming Physiotherapy Gym, nestled within the bustling TSCF Head Office at the World Bank Housing Estate in Umuahia.

Every Tuesday and Wednesday, the gym transforms into an environment brimming

with enthusiasm and determination, the air filled with the sounds of gentle stretches, guided exercises, joyful laughter, and most importantly, the sound of hope. Families travel from near and far, placing their trust in the compassionate, professional, and evidence-based care delivered by our in-house physiotherapist, a dedicated expert fiercely committed to helping each child reach their full potential.

The therapy sessions are thoughtfully designed to encompass key components of holistic rehabilitation, ensuring

each child receives tailored support that respects their individuality:

Manual Therapy: Utilizing expert hands-on techniques, we work to alleviate muscle tightness, enhance flexibility, and promote improved joint movement, fostering a sense of ease and well-being.

Home Care Plan: Recognizing the importance of continuity in care, we equip parents and caregivers with practical strategies and tools, enabling them to carry the therapy forward in the familiar setting of home and ensuring sustained progress in a nurturing environment.



Exercise Therapy: Through carefully structured routines, we build strength, balance, coordination, and endurance, each activity uniquely tailored to align with the child's specific needs and capabilities, empowering them to reach new milestones.

Posture Correction: With specialized guidance and positioning exercises, we assist children in developing better postural control—an essential foundation for daily activities, comfort, and overall development.

This program is entirely free of charge, a testament to TSCF's unwavering belief that quality healthcare should always be accessible, unencumbered by financial obstacles. It caters to children with cerebral palsy aged, warmly inviting parents and caregivers to embark on this transformative journey alongside us.

By offering ongoing physiotherapy support at no cost, TSCF aims not just to enhance motor skills but to elevate confidence, independence, and overall quality of life for children living with cerebral palsy. Every therapy session represents a significant stride toward inclusion, a moment of triumph, and a powerful reaffirmation of TSCF's vision, "Towards a Life Beyond Limits."

PARTNERS AND VOLUNTEER HIGHLIGHTS

The Straight Child Foundation (TSCF) is deeply committed to supporting children born with cerebral palsy and clubfoot. Our mission is made possible through the generous contributions from donor organizations and philanthropic individuals, who share our vision of a world where every child, regardless of their condition, can live a healthy, fulfilling life. Over the years, TSCF has relied on these kind-hearted philanthropists to provide essential services to children living with cerebral palsy. Additionally, since August 2018, MiracleFeet Inc., a USA-based Non-Governmental Organization, has been a vital partner in funding TSCF's collaborations with various hospitals across Nigeria. Through this partnership, we have been able to offer free, comprehensive clubfoot treatment to children aged 0-5 years in the South-East, South-South, and North-Central regions of the country.

In addition to the MiracleFeet support, TSCF has been fortunate to receive contributions from

private individuals who have embraced our cause with compassion and generosity. These donors, many of whom have personally connected with the stories of children in need, have played a crucial role in sustaining our efforts. Their donations, whether large or small, have directly impacted the lives of the children we serve, providing them with the care and treatment they need to thrive. The commitment of these private donors exemplifies the power of collective goodwill and the difference that a caring community can make.

TSCF has also drawn strength from a dedicated network of healthcare providers in the partnering hospitals. These volunteers have played an indispensable role in ensuring that quality services are consistently delivered at all service points. Their passion and commitment have been instrumental in transforming the



miraclefeet

lives of countless children and their families.

We would like to take this moment to express our heartfelt gratitude to all our donors, both organizational and individual, as well as the volunteers who offer their expertise and time. To all the donors, your selfless contributions have provided hope and healing for so many children. Your generosity reminds us that it only takes one person to make a lasting impact. Your support has allowed us to broaden the scope of our work and reach even more communities. And to our volunteers, your time, skill, and dedication have touched countless lives. Together, we have accomplished so much, and with your continued support, we are confident that we will achieve even greater milestones in the years to come.

HOW TO GET INVOLVED

As a Nonprofit organization, we do not receive any subventions from the government or any political associations. We only depend on voluntary contributions and pledges from well-meaning individuals, philanthropists, businesses, and you. You are welcome to sponsor any of our activities or contribute to the care of a child with clubfoot.

You can also donate materials and equipment for adaptive sports, physical therapy, or even walking aids/orthoses for the children.

Financial support can be sent to the following accounts:

a) Guaranty Trust Bank

Account Name: The Straight Child Foundation Naira
Account: 025 957 9198
USD Account: 025 957 9215

b) Polaris Bank

Account Name: The Straight Child Foundation
Account Number: 177 182 0201 (Current).

CONTACT US

Office Address – No. 47, Road M, World Bank Housing Estate, Umuahia, Abia State.

Website www.thestraightchildfoundation.org
Email - info@thestraightchildfoundation.org
thestraightchild@gmail.com

MEET THE TEAM



Dr Peace Amaraegbulam
Chief Executive Officer



Dr Uchenna Oluwatosin
Team Lead



Chidiebere Asimobi
Program Manager



Uchenna Egbe-Eni
Cast Coordinator



Oluyomi Wilson Bankole
Communications and Advocacy Officer



Nathan Ahunanya
Accountant



Praise Analaba
Physiotherapist



Barnabas Victor
Accounting Assistant



Felix Abusoluwa Akande
Office Assistant

PHOTO GALLERY



Annual Thanksgiving Service, PCN, Living Spring Parish, Ehimiri



Xmas Outreach to School of the Blind



Xmas Outreach to St Vincente De Paul School of the Physically and Mentally Challenged.



.Xmas outreach to school of special needs



Meeting with the Federal Ministry of Health, Lagos



NOA AGM Pre-conference Workshop, Enugu



MiraceFeet Network Most prolific Trainer – Mr Clet Aniyem



Clubfoot Champion – Chinyere Peter



Visit to the Akwa-Ibom State Commissioner for Health

PHOTO GALLERY



March 2025 CP Awareness Seminar



Visit to the Abia State Commissioner for Poverty Alleviation and Social Protection



Kogi State Team



Abia State Team



CP parents support group meeting



Bayelsa State Team



TSCF 2025 Annual Review Meeting, Uyo



Edo State Team



Ebonyi State Team

PHOTO GALLERY



Meeting with Kogi State Commissioner for Health and SWAp Coordinator



OIC's Early Detection and Referral (EDR) Training



Akwa-Ibom Team



2025 Special Children's Day Celebration



2025 CP BootCamp Awareness walk



2025 CP BootCamp Seminar

PHOTO GALLERY



World CP Day Celebration



Anambra State Team



Delta State Team



Physiotherapy Clinic



Occupational Therapy Clinic



Speech Therapy Clinic

MENTAL HEALTH CLINIC



Prosthetics and Orthotics Clinic



Psychologists Clinic



Enugu State Team



Recipient of a Learning Tablet



Recipient of CP Chair



Recipient of Wheel chair

PHOTO GALLERY



Visit to the Chairman of Abia State Disability Commission



Crossriver State Team



Imo State Team



Quality Performance Award

PROPOSED ABILITY REHABILITATION CENTRE



You can get help for clubfoot



COME AND VISIT US AT:



Meet Vanell

My daughter Vanell was born with clubfoot. At first I felt hopeless, but then I learned clubfoot can be treated in Nigeria

After meeting the people who could help me, I took Vanell to the clinic to start treatment. One unexpected visit changed my life!

"One unexpected visit changed my life."