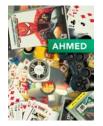
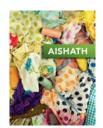


## Books in this series......



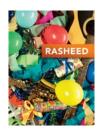




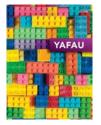














Written by Ifham Niyaz for Handicap International Concept, Design, Photography & Layout by mooinc. [www.mooinc.com]

### Introduction

Welcome to this series of inspiring stories of Maldivian children and adults. With each story you can see part of a new world, and meet a person with a different experience of life. Through the stories you are privileged to gain an insight into what each person values, and what they aspire to. You will realise that each character has another aspect to his or her life as well - either a hearing, visual, intellectual, mental or physical impairment. But as you read, you will understand that all people, whether with or without an impairment, have skills, talents and dreams, as well as challenges in life.

These are true stories, using real names, and were written during 2008 / 2009. Each person is trying to help you understand more about his or her life, so that you can realise that we are all equal, and deserve equality. Through your understanding you can help to make a more welcoming environment for all on your island.

Handicap International would like to say a big 'Thank you' to the stars of the stories, for taking the time to share them with us.

Every day Gasim wakes up at 4.30, in time for the early morning prayers. His working day starts with a shower and prayers every day. Then its time to do his cleaning in the kitchen, do the laundry, and prepare the morning tea for the people who live in his ward. Gasim works as an attendant and lives in the Home for People with Special Needs in Guraidhoo, Kaafu Atoll. Every day at he takes care of the people he is assigned to look after, gives them food, prepares their drinks, which sometimes needs extra care, says Gasim, because he has to remember to use the special sugar for patients with high sugar levels. He makes their beds, he makes sure they are kept clean, he takes them for walks in the garden, he talks to them and plays football with them in the afternoons.

Gasim became an attendant in April 2007. Before that he also had been a patient at the home, coming in first in 1992. Since he was first admitted, he has been a familiar customer of the home, coming and going, sometimes with a couple of months to one year before he is readmitted. He says he cannot handle the pressures when he is outside, when he is in Male' or when he is in his island home Kinbidhoo. He says people know he gets angry very easily. When people make fun of him, he cannot control his temper. He cannot understand his limits. And most of the time he ends up hurting himself.

Though Gasim is now staff at the home, he still needs to take his

medication regularly. "I need to pray five times a day to feel calm. If I cannot do my prayers on time, I cannot control myself. The medication helps me feel calm and in control. This way I can do all my chores well. I have a need to complete any task that I have started. It helps me sleep well after a good day's work. I feel happy knowing that I can do my work well. I think it will be good for others too if they can do some kind of work. It is important to start a habit of working."

While Gasim carries on with his daily routines at the home in Guraidhoo, he keeps looking forward to visit his relatives in Male' and in Kinbidhoo. He is anticipating a holiday soon so that he can see his sister get married and maybe meet friends in Male' after a long time. Though he is excited, he cannot help but feel agitated about the outcome of his trip to Male'. He says the streets of Male' make him distressed, much different from the flowered gardens of his home in Guraidhoo. He does not want to stay there long, as he does not want to end up in the troubled ways he used to end up whenever he got out. He hopes his medication will help him this time.

While Gasim gets ready to take that step outside the walls of his home, he is content with the man he has become now. Neatly dressed in freshly pressed shirts and trousers, sitting on the joali in the home garden, he wonders how others will see him now. Wonders if others accept him as one of them; as a hardworking, able man who is in control of his life. This acceptance means a lot for him at this time in his life.



## Glossary of terms used in this series;

Brain Injury – this could be due to a mechanical or infectious cause, and could result in one or more of the following; Attention impairment, cognition (understanding) impairment, language impairment, memory impairment, conduct disorder (different behaviour), motor (physical movement) disorder, any other neurological dysfunction.

Cerebral Palsy (CP) – Caused in the womb or at birth by lack of oxygen, meningitis encephalitis, German measles (rubella) or other unknown causes. The child's muscles may be weak, with tremors and uncoordinated speech, hearing and sight. The child's body may not grow the same as other children. Some children with CP have an intellectual impairment, while others may be extremely intelligent. Spasms may cause particular problems, and speech and facial expression are often affected.

Early intervention – applies to children of school age or younger who are discovered to have or be at risk of developing a disabling condition or other special need that may affect their development. Early intervention consists of the provision of services such children and their families need, for the purpose of lessening the effects of the condition.

Impairments – all the impairments defined can range from mild to severe;

Hearing impairment - Four categories are generally used to

describe hearing loss: mild, moderate, severe and profound. Some people with a significant loss, communicate through sign instead of, or as well as, speech. People with a hearing impairment may require hearing aids, adaptations to their environment and/or particular strategies in order to access concepts and language. Hearing loss may be because of conductive or sensori-neural problems and can be measured on a decibel scale.

Visual impairment – this refers to a range of difficulties from partial sight through to blindness. People with a visual impairment may be able to use spectacles or low vision aids (such as magnifiers) as well as training in mobility skills to be able to move independently. Adaptations to the environment may be necessary depending on the individual. Some people who cannot see to read large print may learn Braille, a tactile language read with the fingers.

Intellectual impairment – this means an impartment in paying attention, in thinking, understanding, or in memory. People may require support, both for their learning needs and also for personal care. They could need tasks broken down into very small steps. Some people with an intellectual impairment which makes speech difficult may communicate by gesture, eye pointing or symbols.

Mental impairment – this can include people with depression, schizophrenia, paranoia and can result in behavioural, emotional or social difficulties, from mild to severe. A person may be withdrawn or isolated, disruptive and disturbing, hyperactive and lack concentration, lack social skills or present challenging behaviours.

*Physical impairment* – This could mean a different shaped arm or leg, hand or foot. It could impact on mobility. Or, people with a

physical impairment may be mobile but may have significant fine motor difficulties, like holding a pen and writing, which require support.

**People with a disability** – includes those who have long-term impairments as described, and who experience discrimination or barriers in society, such as steps, language and laws, which prevent people with disabilities from being included equally.

**Polio** (poliomyelitis) – causes muscle paralysis. The virus may affect the nerves governing the muscles in the limbs and the muscles necessary for breathing, causing respiratory difficulty and paralysis of the arms and legs.

Sign Language – a language of communication through hand and arm movements and facial expressions which is completely visual. Sign languages commonly develop in deaf communities, which can include interpreters and friends and families of deaf people as well as people who are deaf or hard of hearing themselves.

Special classes – classes in schools for children with needs which are not met in the mainstream classes.

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