A Romanian orphan reaches out for the affection of his American visitors. This "failure to thrive" child, his legs tightly swaddled in cloths, is stunted by the lack of proper nutrition, nurturing and exercise. Although he has the physical development of a two-year-old, he is actually four.

Nurture the Little Children

It's not often that an ordinary bucket of water can become the conduit of magic.

That is exactly what happened, however, when college sophomore Paul Jennings watched a three-year-old Romanian orphan play outside for the first time, waving tiny hands through a pail of water and laughing at the drops. Although physically underdeveloped and not yet able to walk without help, the child still demonstrated all the natural curiosity of the typical toddler.

Part of a three-week visit to Romania, the experience was an eye-opener for Jennings, of Choctaw, who plans to attend medical school at the University of Oklahoma Health Sciences Center. Equally intense was the impact on the other 14 members of a very special team that traveled to the East European country in June with the specific goal of improving the lives of Romanian orphans. The team—and its ongoing effort—is spearheaded by Wanda Draper, internationally known child development expert and OUHSC professor of psychiatry.

Two years ago, before the Bosnian conflict usurped international headlines, nightly newscasts were filled with heart-wrenching pictures of turbulent streets and overflowing orphanages in the wake of Romania's violent transition from a communist government. Viewers worldwide were subjected to visions that seemed straight out of another century—dirty, broken-down buildings, few caregivers, no hot water, little food, no medical equipment, and in the midst of it all, large numbers of malnourished children confined to small metal cribs with a minimum of human contact.

The plight of these children is not easily resolved in a country still in transition and short on funds. The source of the problem is clear however: during his regime, former dictator Nicolai Ceaucescu denied the Romanian people access to birth control, declaring that children were needed as workers for the state. When birth rates increased accordingly, Romanian parents were unable to feed their children, resulting in thousands being left—willingly or unwillingly—in state-run "laegens" (literally "cradles").

Upon the collapse of the communist system, these children remained wards of the state, confined in the appalling conditions that generated international attention. In an effort to solve the seemingly insurmountable problem, Bucharest physician Violeta Suceava undertook an extensive tour of the United States a year ago in an attempt to find a child-care program that could...
"We have a 50-year communistic heritage, and because of that, we are 50 years behind the United States in solving our problems."

be implemented in her native country.

She found her answer in Draper, who is founder of the University-affiliated Early Childhood Development Center and a highly sought-after author and lecturer on child development. During the past 12 years, Draper has evolved a unique philosophy of child rearing and child care designed to address the development of the child as a whole—taking into account the child's view and the integration of thoughts, feelings and actions.

Originally planned as a one-time-only visit, the Romanian effort has become "a thing that is bigger than all of us," Draper says, noting the creation of a foundation to support the effort, her follow-up visit in September and another trip planned next spring.

After Suceava's initial invitation last year, a team of volunteers rapidly began to grow. In addition to Draper and Jennings, the team included OU professor of science education Ed Marek; physicians Ron Marek and Hampton Anderson III; OU medical students Jason Sigmon, John Voth, Kellie Jones and William Caire; physical therapists Lu Ann Meyer and Maxine Gunter; psychologist Donna Sleeper; teacher Margaret Wagner; and foundation administrator Catherine Colbert.

They were joined later by Oklahoma City pharmacist Kenneth Henderson, who brought with him a large amount of medications and medical equipment. All volunteered their time, financed their own trips and actively helped raise money and donations of food, medical supplies, medications, toys and equipment for the three-week endeavor.

Also assisting in planning and carrying out the effort were Larry Acton of Volunteers In Mission, the Oklahoma City-based international Feed the Children Program, nursing student Polly Kennon and nurse Barbara Harper, the mother of an adopted Romanian child. Once in Romania, the team was aided further by Suceava, her husband, Andre, and Imanuel Papagiorge, director of Feed the Children in Romania.

"We have a 50-year communistic heritage, and because of that, we are 50 years behind the United States in solving our problems," Papagiorge explains. "This team was badly needed. We have received lots of business cards and promises, and a lot of nations have come with their flags, but these promises were usually empty. When you talk about things that are tangible, this team is the first one to get results."

Romania has a strong history and a great deal of national pride that has been seriously eroded by the communistic regime, Papagiorge adds. "This group is the first to come in and work with us, not try to impose their own system on us. Dr. Draper and her group are perfect for what we need."

The majority of the Romanian orphans fall into a category that the Americans term "failure to thrive," used to describe an otherwise healthy child whose development is delayed due to malnutrition and/or the absence of human contact. A significant percentage of the children also has other problems, such as autism, cerebral palsy and related disorders.

Perhaps most appalling, infants often still are subject to a custom known as "bundling," in which their lower limbs are tightly swaddled in cloth for the first two or three years of life, leaving them unable to move. The
A traditional practice in Romania is “bundling,” tightly wrapping an infant in cloths until age two or three in the belief that the practice ensures that the legs will grow straight. In actuality, abdominal and leg muscles fail to develop.

The custom began out of folklore that bundling ensured a baby’s legs would grow straight. In reality, the practice prevents the infants’ abdominal and leg muscles from developing.

“You didn’t see any children there who could walk before 2 1/2 years,” Jennings recalls.

One of Draper’s first actions—and one of the most personally satisfying—was to get the children out of their cribs and onto the floor where they could sit, crawl, play and interact with the team and with other children. Team members also worked with the Romanian child care workers, or “infermeres,” to establish some routines and procedures, such as set times to allow the children out of their cribs and devising charts to monitor and document the care of the children.

“We tried to set up environments that encourage normal development for these children within the limitations of their setting,” Draper explains.

With assistance from Feed the Children, the team took enough nutritional supplements to feed 200 children for three months. Toys, medical supplies and equipment left by the team also helped to improve conditions in the laegens.

“None of the children had ever had balls to play with before,” Ron Marek notes. “It was a real eye-opener. And it wasn’t just the lack of toys. We ended up leaving three of our own personal medical diagnostic kits—the kind we use for such basics as eye and ear exams—over there. The physicians in Romania had never seen or been taught to use what to us is routine equipment.”

The team also introduced some modern ideas—such as the fact that not all medication must be injected. Virtually all medications in the laegens are injected using non-disposable hypodermic needles, which often become dull with use. Many of the children were scarred, and some had permanent muscle damage from repeated injections.

“The Romanians were reluctant to believe that antibiotics and other drugs taken by mouth could be as effective as those given by injection. We convinced them that they were,” Draper says. The physicians and medical students in the group gave every child in the Bucharest hospital an examination, even performing a few minor surgeries. They taught their skills to the Romanian physicians as well, while the physical therapists instructed the caregivers in ways to help the children sit and crawl.

The team also trained the infermeres to perform quick techniques to benefit the children, such as brief massages to stimulate muscle development that could be administered in the few minutes required to change a diaper.

Along with equipment, new methods and supplies, Draper also passed along her child care philosophy focusing on the well being of the whole child including the physical, social, emotional and intellectual elements. Goals for the children include a more normal development of language and communication, cognitive and daily living skills; motor development; creativity; and self expression.

In addition, children who have disabilities, as do many of the Romanian orphans, now will be “mainstreamed” with those who are not disabled. Draper recalls that one of her tasks was to educate the Romanians to view disabled and disfigured children as otherwise normal human beings.

“My feeling is that disabled and non-disabled children do better if they are not segregated,” she says. “They should not be pushed to accept each other; we simply establish a model for them, give them encouragement and provide opportunities to interact. I have found that this works in all areas—all the students improve in social skills and in intellectual achievements.”

Another vital element is that these Romanian children be allowed to interact and bond with each other. “Since there are too many children for the infermeres to become emotionally attached to each one, and since no one else is available to fill the gap, these children need to be allowed to bond with each other and become each other’s support system,” Draper emphasizes.

At the same time, team members found that the international perception that the Romanian infermeres were indifferent to the conditions of the children in their care was completely false. As some laegens had a ratio of only one caregiver to 30 children, and another had only one to 12, the infermeres were physically unable to provide more than the most basic care. Their inability to do a better job, however, did not mean they did not feel for the infants in their care.

“Before we actually got to Romania, I kept thinking, ‘How can these people let this happen? There must be something wrong for them to not care about
OU's Wanda Draper pauses beside an empty crib, whose recent occupant has just escaped its confines into the fresh air to play with members of the Oklahoma team—just like normal children elsewhere in the world.

"In every conversation, I learned something; I almost felt like a father to those children because they needed someone so badly."

Before Draper and her team visited the orphanages in Romania last June, children like these seldom left their small metal cribs, which were packed tightly into a room with little space for caregivers to walk between them.

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The team members describe their journey to Romania as emotionally overwhelming and uplifting—several categorizing it as "a religious experience, to say the least."

"In every conversation, I learned something; I almost felt like a father to those children because they needed someone so badly," Jennings says. "I honestly don't know how to put in words what it was like to work with them."

Sometimes words are not adequate—or even necessary. For Draper's group, the memory of a small child laughing and splashing in a pail of water is enough.