

ROLLING INSPIRATION

ISSUE 3 2019 | R60.00

The thought leadership publication for people with mobility impairments

INNER PEACE

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adaptive yoga

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disabilities of guilt

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ROLLING INSPIRATION

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www.rollinginspiration.co.za

Throughout this issue, these acronyms
are used as follows:

QASA = QuadPara Association of South Africa
SCI = spinal cord injury / spinal cord injured



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Jodie Kroone shares her
experience of adaptive
yoga, which allows her to
reconnect her body and
mind from her wheelchair.
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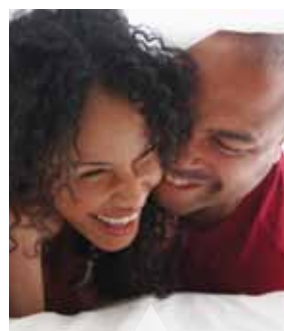
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Athletes with disabilities
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TIME TO WORK TOGETHER

NOW THAT WE HAVE CAST OUR VOTES AT THE POLLS, IT IS TIME FOR SOUTH AFRICANS AND GOVERNMENT
TO WORK TOGETHER TO EFFECT REAL CHANGE



Most of us have enjoyed shorter work weeks lately because of the Easter weekend and public holidays like Workers' Day and election day, which was on May 8. I trust you have gone out in your numbers and made your mark. The canvassing by political parties has stopped. The radio and TV ads as well as some SMS campaigns have come to an end, and the elections are wrapped up.

Now we look forward to the first term of the new government. Our votes were turned into seats, which are now occupied by the members of the new parliament. Our public representatives are there on the benches, some with renewed vigour and motivation for their next term in office.

Hopefully, the cabinet will be trimmed and some ministries collapsed into more streamlined and effective entities. This would be a great cost-cutting measure, or am I just imagining what our country could be like if we manage to change our perspective?

Many of the new members of parliament are older members of newly formed parties or of parties that they have represented before. Now they have to make good on their election promises.

But will the results of their efforts in governing translate into better service delivery? Will we see proper accountability and will some of our depleted municipalities receive the necessary attention they deserve?

This is not asking too much, but where we come from as a nation, there are some that deserve better treatment. We still have communities that struggle without basic services like electricity or water. The costs of these amenities are forever increasing, making it unaffordable for a large majority of the population.

Coupled with the huge backlog in affordable housing, this is the main reason behind many service delivery


protests, which negatively affect the economy as roads are blocked, traffic disrupted and property destroyed during some of the demonstrations.

The vicious cycle places so much pressure on the members of these communities: kids are kept out of school, their parents have no public transport, and resources like the South African Police Service and other emergency services are not available.

It's not favourable, but in the light of the promises and commitment made in the manifestos of political parties, are there not clear plans to remedy the situation? As voters and citizens, we expect action to be taken. We want a government that accepts the way it operated was not the most effective way, a government that realises the difficult decisions that need to be made.

We want to see the perpetrators of crime prosecuted, dishonest politicians to return their ill-gotten gains to the people, and a government that shows true leadership. Twenty-five years of democracy so far has brought many examples of the type of leadership required to guide the country into the future. There have also been examples of the type of leadership we don't want.

We have matured as a nation and can measure our performance in terms of economic and social development against other African countries. We have numerous global challenges too, but also the opportunity to acknowledge our blessings and focus on the positive. Let's not go back to where we were before the elections.

Unemployment and high levels of crime are worrying and South Africans must address these with government. An increase in the economic growth of the country should be achieved through innovation and dedication. We need to garner support from one another and work together, not focus on our indifferences. This, in my opinion, would be a responsible way of building a brighter, sustainable future in our beautiful country. 



Raven Benny is a member of QASA. He has been a C5, 6 and 7 quadriplegic since 2000. He is married and has five children, is mad about wheelchair rugby and represented South Africa in 2003 and 2005. He also plays for Maties. email: rbenny@pgwc.gov.za

QASA WORK READINESS PROGRAMME LAUNCHED

The unemployment rate among South Africans with disabilities, specifically wheelchair users, is extremely high. QASA took the initiative to research the reason for this. It found that prospective employers felt wheelchair users were not work-ready, as they had little or no work experience.

The QASA Work Readiness Programme was established at the QASA office, with a simulated working environment serving as the “bridge” to becoming integrated members in mainstream employment. After months of hard work by the offices of QASA and those of regional associations, the Work Readiness Programme officially launched on April 1, 2019!

It is a two-month soft-skills programme that will introduce candidates to the career world and take them on a journey to work readiness. Twelve candidates – six in the Western Cape and six in Gauteng – have officially begun this journey already.



NEW WHEELCHAIR FOR QASA MEMBER

QASA recently hosted a Victor Daitz Capacity Building event attended by a group of dynamic and motivated individuals. The QASA CEO noticed that one of the candidates was not seated properly and knew that QASA would have to assist. The CEO immediately did some research and issued the candidate with a chair that would be suitable for his needs.

The candidate, Fana Zuma, was very excited about receiving his new wheelchair and mentioned how much easier it would be to get around. Zuma is now able to travel on rough terrain and manoeuvre his chair easily around his community.



Ari Seirlis is the CEO of the QuadPara Association of South Africa (QASA) and managing editor of ROLLING INSPIRATION. email: ceo@qasa.co.za

EMPOWERED AFTER PASSING DRIVER'S TEST

Rowan Martell was involved in a freak accident in 2015. While he was standing at a robot waiting to cross the road, a glass frame fell from the 22nd storey of a building nearby and landed between his shoulder blades, severing his spinal cord. He was rushed to hospital, where doctors soon gave him the news that he had sustained a T4 spinal cord injury.

Martell did not let this get him down and immediately launched himself into rehabilitation. He was integrated back into mainstream employment and soon realised that his mobility was restricted without personal transport. He made a decision to join the innovative QASA Driving Ambitions programme to regain his independence.

Martell already had his licence, so he only had to be reassessed to drive an adapted vehicle. He passed his reassessment on the first attempt and was extremely excited about this achievement. QASA caught up with Martell, who says he's feeling empowered after obtaining his adapted driver's licence.

"I would like to thank QASA for allowing me the use of the car to prepare for and do my test. And thank you to Shaun Kanayee for his guidance on the lessons, his tips and tricks," Martell says. "With his methods, you won't forget the training."

QASA is very proud of Martell for achieving his goals and wishes him well on all his ventures. Happy motoring, and remember to Buckle Up!



ABOVE: Lowri Williams, from the QuadPara Association of the Western Cape, and Jodie Kroone, member of QASA, participated in the Wings for Life World Run on Sunday, May 5. Williams ran 8,95 km, while Kroone made it to 19 km. Well done and thank you for supporting an event that aims to cure SCIs.



FINDING INNER PEACE WITH THE WARRIOR POSE

AFTER HER INJURY, JODIE KROONE WAS SURE THAT SHE WOULD NEVER PRACTISE YOGA AGAIN, BUT THROUGH ADAPTIVE YOGA AND INSTRUCTORS WHO UNDERSTOOD HER BODY'S LIMITATIONS SHE WAS ABLE TO RETURN TO A FORMER LOVE. SHE SHARES HER EXPERIENCE



When I think about my disability, caused by a spinal cord injury, I tend to split my body in two: the working and not-working. There was so much I thought I couldn't do because of the physical limitations of being in a wheelchair.

While volunteering at the QASA offices in Gillitts, KwaZulu-Natal, I had the opportunity to meet Dale Guthrie. She is an occupational therapist with a masters degree in neuroscience, a certified yoga and adaptive yoga instructor and the founder of Holism Health. She explained her aim of providing adaptive yoga with a focus on inclusivity so that anyone using a wheelchair, crutch or walker could feel welcome.

Guthrie developed a teacher training course that runs over ten weeks and I was honoured to be invited as her

assistant during the seventh week, when she was covering adaptive yoga. When I arrived at the studio in Randburg, Johannesburg, I initially thought I was only assisting in teaching future yoga instructors how to approach a person with a disability. Little did I know how beneficial this would be to my own recovery.

I had said goodbye to yoga because I couldn't imagine arriving at a yoga class in my wheelchair and expecting the instructor to understand my limits. I feel there's so much concentration on what you've lost post injury, and negative emotions towards your now-different body. But yoga, unlike my other therapies, focuses on the whole being, connecting the mind to the rest of the body to create physical and mental awareness.

Guthrie demonstrated basic adapted poses that could be done while sitting in a wheelchair or on the floor. For



JOURNEY OF HOLISM HEALTH

Holism Health was founded by Dale Guthrie in 2018 after she trained with Matthew Sanford, founder of nonprofit Mind Body Solutions, in Minnesota in the United States in 2017. She brought his adaptive yoga techniques to South Africa and founded a studio in Blairgowrie, Randburg.

Guthrie became interested in adaptive yoga while travelling through India to gain a deeper understanding of the yoga philosophy. Upon her return, she knew that her medical background gave her an advantage. She realised she could develop yoga into something to enhance the lives of individuals with neurological injuries.

Today her classes are accessible to people recovering from an injury, people with an SCI, stroke, brain damage, cerebral palsy, Down syndrome, Parkinson's disease and multiple sclerosis. She offers private yoga sessions and can introduce small groups to reduce costs and offer the service to a greater number of people.

Yoga has many practical benefits, including increased strength, flexibility and balance, better posture, a decrease in pain, increased self-confidence, a stronger mind-body connection, better stress management, improved mood and a deepened sense of connection with others.

If you are interested in learning more about Holism Health or would like to try adaptive yoga, contact Guthrie directly at info@holism.health or 084 222 1192.


example, the warrior pose was introduced and modified to suit my ability as I sat in my chair and stretched my arms out to the sides. I had to focus on my balance or lack thereof, and bring attention to my breathing and posture.

The meaning of yoga is the union of mind and body. The practice of yoga is to connect, join and balance the body. It's not only focused on the poses, which is what I thought and feared I couldn't do. I learnt the essence of yoga lies within gaining mastery of your thoughts and bringing attention to your inner body.



This is an advantage for those who feel they are no longer connected to their bodies. It's a way of unravelling issues and acknowledging difficulties. Gaining control over emotions and working through trauma is important for moving forward, and is often neglected because there's so much emphasis on the physical.

I didn't realise how much this yoga experience was going to help me. I had underestimated yoga and its value for a person with a mobility impairment like myself. The opportunity allowed me to feel liberated.

The assumptions I had about yoga were holding me back from realising that I am not defined by my disabilities. Rather, the power lies in trying. It's wonderful to know that there are people like Guthrie who make it their life's mission to help those who face physical disabilities. 

Photos by Angela Bax



INTEGRATION STARTS WITH ME

RATHER THAN FIGHTING FOR GOVERNMENT, POLICIES OR SOCIETY TO FAST-TRACK INTEGRATION, PEOPLE WITH DISABILITIES SHOULD WORK TOWARDS INTEGRATION THEMSELVES

We live in a country where government tries to correct the wrongs and inequities of society through legislation, while people with disabilities protest their exclusion by advocating for better accessibility and a greater understanding of their needs. However, there are three things that cannot be enforced by legislation, rules or advocacy: love, grace and empathy.

These are a state of mind that, if present, negate the need for policies and the like. Yet, the reality of life is that love, grace and empathy thrive on reciprocity. It is sustained only when it is nurtured from both sides. That is why the motto on the ROLLING INSPIRATION T-shirts reads, "The only disability is a bad attitude."

Some of us have a sense of entitlement; we feel that society owes us and we must demand our rights, but this is baseless and arrogant. Society owes us nothing. Society at large cannot be held accountable for my disability. Whether an injury or an affliction, it is mine to deal with.

Society can help and support. We can advocate and legislate accessibility into buildings and transport and into the hospitality industry. But integration into society? No, that is up to me, you and every person with a disability. We are the architects and the builders of our own integration into society.

We are so fixated on the nature of our own disabilities that we create associations in support of our own disabilities. We ring-fence membership and management of our associations to include only those that share our specific disability. So we end up with a multitude of condition-specific nonprofit organisations that compete with one another. There is even inter-regional competition within individual associations.

If the disabled community cannot integrate itself internally, how can we integrate with society at large?

Now that the situation has been sketched, what is the way forward? As a point of departure, we must understand that unity is not the same as uniformity. A unity of purpose is not limited to uniformity of disability. We need to unite around areas of communality, but retain the freedom to manage our own individual circumstances according to our identified needs.

So, rather than a multitude of "unions" governed by fixed constitutions and support policies, I propose a "federal" system where shared needs are managed centrally and where unique needs are supported centrally with love, grace and empathy, but managed within individual nonprofit bodies as seen fit by that organisation.

This goes as much for regions within associations as it does for inter-association relations. Enforced paternalism is as doomed to fail as enforced dictatorship. As for integrating with society at large, our integration can't be demanded. It must be earned. Firstly, by who we are, our attitudes, love, grace and empathy. And only then, by what we're able to contribute.

For those who complain that their disability is so extensive they can't do anything for themselves, doing is not only physical. All doing starts in the mind. Decide what needs to happen and organise someone to assist if you can't do it yourself. As people with paralysis, our bodies may be compromised but our minds, passions and emotions generally remain intact and need to be channelled and developed.

Now for the myth of independence. I know of two "independent" individuals who lead miserable lives in a care centre for people with disabilities. The one was born with cerebral palsy, but later in life also became quadriplegic following a car accident. His mind is sharp and he is highly intelligent, but his body is broken and his speech is severely impaired.

The other was a bright young man who suffered brain damage after a car accident that reduced his intellectual abilities. His body is fine but his mind was set back to that of a child. Both were independently miserable until they got to know one another and learnt to communicate. Now they complement each other's inabilities and have become a team. They have learned the value of interdependence.

As we walk (roll) this path that we call life and it starts knocking us about, we all come to realise that we are interdependent on one another. This is the way we make our own roads – we roll it out by rolling along.

Interdependence starts with our loved ones and our caregivers; it flows to all the people with whom we come into contact. The way we present ourselves will determine how these contacts grow and flourish – in numbers and quality. If you cannot physically open a door for another but they open it for you, show grace, say thank you and, if the situation allows, introduce yourself and strike up a conversation.

Show the other person that your brain cells and your emotional intelligence are still intact. Then you will be

noticed as a person. If you have the knowledge or contacts to help a person in need and do so, you will be appreciated. If you do something extraordinary and achieve the unexpected despite what others believe you to be capable of, you become inspirational.

This is how we integrate ourselves into communities, socially and in the workplace. We don't wait for others to integrate us, we don't demand to be integrated, we just do it. Ourselves. Let's step up, shift our own minds toward integration, recognise that we do not all have to be the same in order to have a unity of purpose – and then let's cross bridges by making ourselves available to fill the gaps in the lives of others where we have the ability to do so.

In return, let's allow others to fill in our own gaps. Let's put our pride in our pockets and open ourselves to the love, grace and empathy of those who want to give it to us. This is what integration is about and it starts with me and with you – together.

I wrote this article to invite debate. If you feel I missed the mark or am speaking out of context, I challenge you to prove me wrong! [R](#)



Ida's Corner is a regular column by George Louw, who qualified as a medical doctor, but, due to a progressing spastic paralysis, chose a career in health administration. The column is named after Ida Hlongwa, who worked as caregiver for Ari Seirlis for 20 years. Her charm, smile, commitment, quality care and sacrifice set the bar incredibly high for the caregiving fraternity. email: georgelou@medscheme.co.za

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EXPLORING CAPE TOWN

FROM ACCESSIBLE TRANSPORT IN AND AROUND CAPE TOWN
TO THE BEAUTIFUL VIEW FROM THE ACCESSIBLE ROOM IN THE
AHA QUAYSIDE HOTEL IN SIMON'S TOWN, HERE ARE SOME
TIPS FOR EXPLORING THE MOTHER CITY



While on my many travels for work and pleasure, I visited Cape Town and needed to arrange transport to and from various venues, including the airport. I decided to look into the options that are currently available and their costs.

For airport to city transfers, the cheapest is the MyCiTi bus rapid transit service, which offers a route from the Cape Town International airport to the Civic Centre in the centre of Cape Town. The MyCiTi station is at the main terminal of the airport with level access to the arrivals hall. Buses depart from the airport every 30 minutes on the hour and half-hour from 05h30 to 21h30 on weekdays and from 06h30 to 21h00 on weekends. They depart from the Civic Centre to the airport from 05h00 to 21h00 weekdays and 06h00 to 21h00 on weekends.

Should you wish to transfer from the airport straight to the V&A Waterfront MyCiTi bus station, you stay on the bus at the Civic Centre. The cost for this trip is R100.80. Of course, once you are at the bus stop, you will need to then take an Uber or other taxi to your hotel. If you need to use the bus service to any of the other MyCiTi stations, you will have to change buses at the Civic Centre.

Staff are reasonably helpful, but if you are travelling alone you need to be able to move yourself and your luggage by yourself. Also be aware that, in order to use the MyCiTi bus service, you're required to purchase a card for R35 and then load enough credit for your fares. There are various discounts available for tourist attractions if you have a MyCiTi card. For more information visit the website at www.mycity.org.za.

If you can't be bothered with changing vehicles, the best option is to take some form of paid service directly to your venue. Uber is cheaper than other transfer companies and taxis that charge you to get from their starting point to the

airport. To use Uber, you will need to download the app and create an account that is linked to your credit card. Uber drivers can also be paid in cash, but this is very risky in my opinion.

For transfers in and around Cape Town consider companies with accessible vehicles. Here are a few options:

CARE TRANSPORT AND TOURS

Founder Susan Fowkes has a Mercedes V230 wheelchair-accessible vehicle with a lift that can take up to three passengers and one wheelchair. Based in Faerie Knowe, Care Transport and Tours offers airport transfers, shuttles to local venues and a shopping service. Other vehicles are available to accommodate groups and full-day tours to the West Coast, Stellenbosch and Franschhoek.

Website: www.caretransport.co.za

Telephone: 021 785 5859

Cellphone: 082 869 4224

FLAMINGO TOURS

Although Pam and Jeff Taylor offer airport transfers and shuttle services to restaurants, their main focus is specialist tours for people with disabilities, including sightseeing in and around Cape Town and various other options around South Africa.

Website: www.flamingotours.co.za

Telephone: 021 557 4496

Cellphone: 082 450 2031

TRAVEL WITH RENÉ

René Moses, a quadriplegic herself, offers a comprehensive service that includes airport transfers, customised tours, and vehicle hire for self-drive.

Website: www.travelwithrene.co.za

Cellphone: 082 770 9430



As I needed to be in Simon's Town for work, I booked into the Aha Quayside Hotel. The four-star hotel is situated on the water's edge overlooking Simon's Town yacht basin. Access to the hotel from the parking lot is via a paved ramp that is too steep to take on alone. The reception staff are extremely helpful and friendly.

One of the 29 rooms is an accessible room: Room 101 is located on the corner of the hotel with a balcony that offers exceptional views. There are twin beds that can be pushed together to form a double bed, and the room is spacious with a desk and seating area. However, the hanging rail in the cupboard is impractically high.


The safe and tea station is situated at an acceptable level, but the extra glasses and ice bucket are on shelves that are too high to reach. The mirrors are all situated too high for a wheelchair user, except the full-length one in the passage to the bedroom.

The wet room has a step-free shower with a fold-down seat. The shower head is on an adjustable connection, but the rail starts at 1,45m from the floor – a bit high. Again, the mirror above the basin is too high for a wheelchair user. The towel rails and shower caddy are accessible.



ABOVE: The accessible room at Aha Quayside Hotel comes with twin beds that can be pushed together and a bathroom fitted with grabrails.

The property offers one restaurant, which is situated on the level of the quay and is only accessed via the outside. There is a set of general steps on the one side of the hotel and wheelchair access is via the general pavement along the road going to the quay. I found this extremely odd as I wondered how anyone accesses this area in the rain! As a result, I decided simply to use room service, as this meant I didn't have to ask for assistance. The views from the accessible balcony made in-room dining worth it.

Happy travels! 



Mandy Latimore is a consultant in the disability sector in the fields of travel and access.
email: mandy@noveltravel.co.za

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ANOTHER SUCCESSFUL DISABILITY SUMMIT

THE DISABILITY SUMMIT AND CAREER EXPO RETURNED WITH A NEW LOCATION, MORE EXHIBITORS AND VERY EXCITED STUDENTS. MARISKA MORRIS REPORTS

The 2019 Disability Summit and Career Expo, sponsored by SABC, was held for the first time at the Nasrec Expo Centre in Johannesburg across two days, April 11 and 12. As always, the summit brought together entrepreneurs, organisations, businesses and people with disabilities to discuss employment.

The Hope School for children with disabilities in Westcliff teamed up with the Mandeville Disability Swimming club to host the event, formerly known as the Hope-Mandeville Career Expo. Proceeds go to the club, which trains swimmers with disabilities up to Paralympian level.

Delegates in attendance at the summit had the opportunity to chat to representatives of large corporations like OUTsurance about potential employment opportunities, test the various wheelchairs and accessories from Chairman Industries, try their hand at wheelchair tennis with Wheelchair Tennis South Africa, sit in the adapted vehicle used for driving lessons by QASA's Driving Ambitions programme, or engage with the entrepreneurs supported by the SAB Foundation.

As with the 2018 Summit, the SAB Foundation sponsored a number of its former winners to attend the event and improve their brand awareness and mingle with other potential investors. Every year, the foundation hosts its Social Innovation and Disability Empowerment Awards to assist entrepreneurs in the social and disability empowerment space to grow their businesses.

"Before the awards I didn't really understand the entrepreneurial space or appreciate it. The awards gave me the opportunity to meet other finalists and opened my eyes to the true entrepreneurial space," says Vuyani Lonzi, founder of Hamba Nathi, a ride-sharing service for people with disabilities.

He received a Development Award at the 2018 Social Innovation and Disability Empowerment Awards. He used his R300 000 prize money to fund the purchase of a vehicle and branded uniforms.

His advice to future entrepreneurs? "Do something you love and be genuine. Identify a problem and ask yourself why you are the best person to solve the problem."

Clothes 2 Good, the overall winner of the 2018 Disability Empowerment Award, was also in attendance. It provides

sustainable jobs and micro-business opportunities for people with disabilities and their families through a clothing-recycling programme. Tammy Greyling from Clothes 2 Good says that the prize money of R1,2 million has helped grow this business.

"We now have a bigger office space and are renting a space across the road. Our capacity has increased by 100 percent. We also employ four wheelchair users now. In the past, there was no space," she says.

I Love Coffee, the 2016 winner of the Disability Empowerment Award, was another representative of the SAB Foundation in attendance. This company was only five months old when it received the award. Founder Gary Hopkins says the timing couldn't have been more perfect.



ABOVE: The QASA Driving Ambitions adapted vehicle was on display at the Disability Summit and Career Expo. Driver trainer Des Harmse showed delegates how easy it is to operate the adapted vehicle.



LEFT: The 2018 winner of the SAB Foundation Development Award, Clothes 2 Good, exhibited at the Disability Summit along with fellow former winners.

"The building we were operating in was demolished a month after we won. We were able to relocate and continue our work," he explains. The café is operated mostly by baristas who are deaf or hard of hearing.

"The business is at occupational capacity; however, the summit does offer us great exposure and networking opportunities," Hopkins says. His advice to new entrepreneurs is not to give up. "Learn to fail and fast," he says. "Keep going. If it's good enough to serve, serve it. With time it will get perfect." *R*



ABOVE: The friendly OUTsurance team was happily chatting to delegates about the employment opportunities for people with disabilities at the 2019 Disability Summit and Career Expo.

JOIN THE OUTSURANCE FAMILY

AT THE 2019 DISABILITY SUMMIT AND CAREER EXPO, THE LEADING INSURANCE PROVIDER URGED PEOPLE WITH DISABILITIES TO CONSIDER A CAREER WITH ITS VIBRANT COMPANY

Boldly decorated in the iconic green and purple, the OUTsurance exhibit stood out in the grey hall of the Nasrec Expo Centre where the 2019 Disability Summit and Career Expo was held on April 11 and 12. While it was the first year that the insurance provider attended the annual conference, it is no stranger to the disability sector.

Since early last year, OUTsurance has been investing in the sector by supporting the QuadPara Association of South Africa (QASA) and actively advertising employment opportunities for people with disabilities. The expo offered OUTsurance a platform to engage directly with potential employees with disabilities.

"We are here to promote OUTsurance and employment opportunities. Our ethos is hire character and train skill. So, if you have the necessary qualifications, we will employ you," said Yvonne Modiba, Recruitment Team Manager at OUTsurance. The company currently has a number of positions available that require specific, industry related skills and qualifications, as well as several entry-level positions that require only a National Senior Certificate.

Jzaun Dreyer, Sales Team Manager and wheelchair user, is a great example of the opportunities offered within

OUTsurance. Dreyer started at the insurance provider as a sales advisor in 2016 and became team manager within two years.

"It's a great place to work and the company is pretty well equipped for my needs," Dreyer said.

"We have easy-access gates that allow me to enter and leave without hassle, and the general layout is very flat, ensuring total manoeuvrability. I've also been allocated a designated parking spot in the basement for easy access. The best parts, however, are the staff and the culture."

The OUTsurance team echoed Dreyer, singling out the company culture as one of the main reasons to consider a career with the insurance provider. "OUTsurance has a very relaxed culture, although we work very hard," Modiba said. "The dress code is casual and the office structure is open-plan. Not even the CEOs have offices."

The culture is young and vibrant, with a focus on teamwork and client service. OUTsurance also offers its employees many opportunities to grow and develop.

Aside from mingling with potential employees, OUTsurance also used the opportunity to network with other companies with which it could partner to increase its presence in the disability sector. We're sure to see a lot more of the company in the future – at the very least, we will see them at the next Disability Summit. [A](#)



NO MORE UTI FOR YOU AND ME

IT IS COMMON FOR PEOPLE WITH AN SCI TO RELY ON A FORM OF CATHETERISATION TO EMPTY THEIR BLADDER. THIS INCREASES THEIR RISK OF URINARY TRACT INFECTIONS, BUT THERE ARE MANY WAYS TO HELP PREVENT THE PROBLEM



After suffering a spinal cord injury, most people rely on a form of catheterisation or a bladder management programme, which puts them at great risk of urinary tract infections (UTIs). When individuals rely on a bowel management programme too, UTIs could be caused by bacteria from stool entering the bladder as it is being emptied.

People with full functional bladder control are able to empty their bladder completely and rid it of all bacteria. However, for many people with SCI it is impossible to empty the bladder completely – even with a good bladder management programme. Thus bacteria remain in the bladder and could result in a UTI.

The Model Systems Knowledge Translation Center points out some of the more vulnerable groups: "People with SCI who use an indwelling Foley or suprapubic catheter may be at higher risk for UTI than those who use a clean intermittent catheterisation technique or have an external sheath or condom catheter.

"Women may be at a higher risk for UTI than men, as the female urethra is shorter and located closer to the anus. This can make it easier for bacteria from the colon to enter the bladder through the urethra."

SINGLE-USE CATHETERS

The first step in lowering the incidence of UTIs is therefore to rely on single-use intermittent catheters, preferably those that include some form of lubrication (so that there is no need for the device to come into contact with potentially contaminated substances). Moreover, be sure never to reuse these catheters.

It is also important to make sure that your hands or those of the person performing the catheterisation are clean before beginning the process.

PREVENT A FULL BLADDER

It is important to empty your bladder on a regular basis and

ensure that it is completely empty, as this will help prevent overdistention of the bladder as well as bladder and kidney stones. When there is too much urine in the bladder, it overstretches, which could result in damage to the walls. Excess sediment and calcium can also form in the urine if the bladder is too full.

HYDRATE

Be sure to drink lots of water to stay hydrated and help your body flush out bacteria, maintain body temperature, ease the flow of stool through the bowel and keep skin healthy. The colour of your urine can assist in determining whether you are drinking enough water. The lighter the shade of yellow, the more water you are consuming. If the colour is bright or dark yellow, you are not drinking enough water. Be sure to consult a doctor if unsure, or if your urine is any other colour than yellow.

HEALTHY DIET AND EXERCISE


While the food you eat and your activity levels do not necessarily relate directly to preventing UTIs, they do assist your body in fighting bacteria and infections. Make sure to eat balanced meals full of the essential vitamins, and consult a health professional before you start taking any form of supplements.

GOOD HYGIENE

Cleanliness is key to preventing the spread of bacteria. Always wash properly both before and after bladder and bowel management, and after accidents.

Overall, it's important to look out for early signs of infection or symptoms of UTI. Early signs of infection include gritty sediment or mucus in the urine, and dark, cloudy or foul-smelling urine.

Symptoms of a UTI include fever, feeling tired, chills, muscle spasms, nausea, headaches, lower back pain, and autonomic dysreflexia if the SCI is at T6 or above. ^[R]



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SPEEDICATH NAVI IS HERE

COLOPLAST HAS INTRODUCED SPEEDICATH® NAVI, ITS INNOVATIVE HYDROPHILIC COATED CATHETER. THE LATEST ADDITION TO THE SPEEDICATH® FAMILY IS MADE SPECIFICALLY FOR COLOPLAST'S EMERGING MARKETS, WITH THE AIM OF RAISING THE STANDARD OF CARE FOR CATHETER USERS WITH SOUTH AFRICA AS THE FIRST COUNTRY TO LAUNCH



any male catheter users prefer a soft catheter and there are good reasons for this preference. A soft catheter with a flexible tip ensures easy navigation, reduces the risk of complications, and ensures smooth passage through the natural curves and bends of the male urethra with the ability to better negotiate urethral strictures.

"We invest in our emerging markets and, as market leader, we are proud to offer superior products to help improve the quality of life for our catheter users in this region," says Andrew Robinson, senior vice president for Coloplast Emerging Markets.

"SpeediCath Navi is designed to meet the needs of the user's unique anatomy including hand dexterity."

READY TO USE

Like all SpeediCath® catheters, the SpeediCath® Navi is intended for single use, with a hydrophilic coating and packaged in a sterile saline solution. It requires no preparations and is designed to meet the needs of users' anatomies, including a range of various degrees of hand dexterity from normal to slightly reduced.

"SpeediCath® Navi is designed especially for users in our new and evolving markets, like South Africa, where reimbursement is lower compared to our mature markets," Robinson says. "The standard of care in South Africa has until recently been uncoated and reusable catheters. A shift in practice to sterile, single-use catheters was suggested in a study published by the South African Medical Journal in March, titled: Best practice recommendations for bladder management in spinal cord-afflicted patients in South Africa.

"With the launch of SpeediCath® Navi, we are increasing our efforts to raise the standard of care to hydrophilic catheters, much like we are doing elsewhere in the world.

"We sell our SpeediCath® standard catheters in South Africa today, but there is a clear preference for so-called soft catheters, and SpeediCath® Navi addresses this preference head on," he concludes.

Coloplast is the global market leader in continence care products, holding 40 percent of the market. SpeediCath® Navi will be launched in Coloplast's key emerging markets throughout 2019 and 2020. 

REWIRE YOUR NERVOUS SYSTEM

PHANTOM LIMB PAIN CAN BE A FRUSTRATING CHALLENGE FOR AMPUTEES. PHANTOM MOTOR EXECUTION, A NEW FORM OF REHABILITATION, COULD PUT AN END TO IT FOR GOOD

Physical rehabilitation that involves the fitting of a prosthesis is not without its growing pains. The road to being fully mobile and functional can sometimes be challenging. The speed bumps that could hinder a patients' physical restoration include delayed wound healing, falls, issues with socket comfort, and funding. However, none are as frustrating and difficult to treat as phantom limb pain.

HPCSA-registered trauma counselor Elma Hofmeyr recently visited our practice to introduce us to an exciting advancement in the field. Having dealt closely with amputees, she has a special interest in relieving amputees of this often debilitating problem.

Numerous solutions to treat phantom limb pain, including medication, mirror therapy and prosthetic treatment, have been tried and tested. One seems to stand out, though. It's called phantom motor execution (PME) and it brings new hope to amputees suffering from phantom limb pain by facilitating the treatment through a device called Neuromotus.

The concept, closely resembling mirror therapy, is based on augmented reality as opposed to virtual reality. You can "look" at the real world in real time on a screen, but it is augmented or changed. Patients sit in front of a screen, almost like the selfie mode on a phone, and are able to see themselves. However, a virtual limb is attached to the end of the residual limb.

Patients are able to use the residual limb's muscles to move the virtual limb and perform basic physical tasks like flexing or extending and pronating or supinating, and control objects in a game.


This form of therapy is believed to work by exploiting competitive neuroplasticity and provide a more integral normalisation of cortical, subcortical and spinal circuits compared with interventions that don't enable integration of sensory and motor information.

PME aims to reactivate the original central and peripheral circuitry involved in the motor control of the limb along with increasing the dexterity of stump muscles. The PME hypothesis entails that the training of phantom movements induces gradual neural changes similar to the changes found when perfecting a motor skill.

These purposefully induced neural changes disentangle pain-processing circuitry through competitive plasticity according to a 2018 study by Dr Max Ortiz Catalan and fellow researchers from Chalmers University of Technology in Sweden.

What's more, in a 2014 study, also by Ortiz Catalan, one patient with chronic phantom limb pain who had shown resistance to a variety of treatment for 48 years, showed satisfactory results after PME treatment with Neuromotus.

After the treatment, he reported that the sustained level of pain had been reduced to pain-free periods and that he was able to move his limb phantom pain free. In another 2014 study by Ortiz Catalan, 14 patients received 12 treatments of PME and, by the end of the treatment period, showed clinically significant improvements.

PME with Neuromotus is still in the early research phases, but it certainly poses a promising solution to many amputees suffering from phantom limb pain and gives new meaning to the words "hot-wiring your nervous system". 



Heinrich Grimsehl is a prosthetist in private practice and a member of the South African Orthotic and Prosthetic Association (SAOPA). email: info@hgprosthetics.co.za

Photo from Orbiz-Catalan et al, The Lancet, 2016.

ClaytonCare Group

Value Proposition for Low GCS and Medically Complex Rehabilitation

ClaytonCare Group operates two premium sub-acute facilities, Clayton House and Care@Midstream. Unfortunately, the term sub-acute has certain perceptions attached to it and in fact a more correct term to put it into perspective would be “equivalent care to hospital post-acute event and becoming medically stable”.

On a daily basis the medical fraternity bemoans not only the rates they receive from medical aids but also often feel that the managed health care model interferes with patient management. The question is whether this is inherently wrong in the continuum of care and whether alternatives exist to in fact add value and provide a better outcome in terms of the rehabilitation, social integration, empowering of families and allowing the patient to achieve the best possible result and equipped for the many potential changes in his or her life going forward post-acute event. If the focus is on the patient within a continuum of care from admission in an acute hospital to discharge from a ClaytonCare Group facility, we have to ask how we do it optimally and what the benefits are.

We acknowledge that specialists invest heavily in any acute episode whether that be traumatic, medical or elective. So much so that a perception may wrongly be created that the specialist is reluctant to let the patient go. From the funder perspective this

may appear to be a financial incentive as actuaries dissect the costs of an ICU admission.

In South Africa we have one of the highest numbers of ICU beds per 100 000 of the medical aid population so there is less bed pressure than possibly in the state health system. We also acknowledge that the “Transition of Care” of a patient from an acute hospital to a sub-acute hospital is often challenging.

The ClaytonCare Group further acknowledges that a mere reduction in price is not the ultimate solution and as such the group delivers uncompromising quality at the best price for the best outcome of the patient. The absolute measure applied would be a 6-month readmission rate. The objective and value proposition are therefore based around the fact that early transfer to a premium sub-acute rehabilitation facility decreases episode costs, provides exposure for the family and patient to a multi-disciplinary team and ultimately leads to an informed and empowered family.

When a patient has a low response GCS, is medically stable on a ventilator and ready to take the next step with an integrated and dedicated team of rehabilitation therapists and nurses and medical support, why should they be transferred?

1. **Risk of a resistant bacterial** hospital acquired infection increases over time with prolonged ventilation;
2. **All ventilated patients are overseen by a physician.** We endeavor to have a good relationship with the referring specialist and we never take over the patient and would prefer to work with the specialist in a treatment plan and to be able to refer back to the doctor should the patient become acute or complicate suddenly;
3. **Early referral allows the family to be immediately integrated** into the team and they work towards the same goals. They are educated realistically and empowered in the process;
4. **Exposure to a full para medical team** of Physio, OT, Speech, neuro psychology, dietician, social worker and rehabilitation trained professional nurses;
5. **Treatment with the correct level** of nursing care at the appropriate levels for the appropriate number of hours per patient day;
6. **An integrated team working together** towards a common goal;
7. **Obtain equipment and supportive and assistive devices** early and working with them;
8. **Mobilization to upright in a tilt table** and then mobilized in wheelchair and in gym while on the ventilator;
9. **Regular family meeting with the team and the doctor** to keep family informed;
10. **Exceptional social workers** looking at challenges the family may be experiencing and working with the patient and the family;
11. **Providing an equivalent care environment;**
12. **Never compromising on patient safety** at all times and never taking a patient that the facilities cannot cope with;
13. **Delivering the correct combination of therapy** specifically for the patient based on tolerance and not based on time for reimbursement;
14. **Ultimately the final ace would be around the discharge planning with family and carer training** if indicated, on referral to out patient services, on referral to home nursing services and all role players being informed and knowing how to optimally interact and look after the patient;
15. **All patients are assessed with the specialist permission prior to admission** by a qualified network team that work within the various referring hospitals allocated to them to allow relationships with the hospital to be built up.

Anecdotal evidence as well as literature will tell us that most families are poorly informed about the true extent of the illness or injury that their loved ones have suffered. ClaytonCare Group bridges the information divide and the family are part of the process.

The summary is that early referral to an appropriate center for stable patients that may be ventilated, medically complex, Low GCS, is to the advantage of the patient and the family and ensures that we as a team in conjunction with the specialist achieve the optimal outcome on a case by case basis.

In conclusion, the question you have to ask yourself is: are we as a health care team from the acute setting via the continuum to home, achieving the best we can achieve for every patient. If there is doubt the answer may be that we can do more as a team.

For more information on the admission process, barriers of admissions and post-admission expectations can be directed to marketing@claytoncaregroup.co.za.



ClaytonCare Group

PLANNING YOUR JOURNEY TO WELLNESS



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CENTRES OF EXCELLENCE
FOR MEDICALLY COMPLEX AND VENTILATED REHABILITATION IN A SUB-ACUTE ENVIRONMENT

A VAN FOR EVERYONE



THE THIRD-GENERATION MERCEDES-BENZ SPRINTER HAS ARRIVED IN SOUTH AFRICA WITH THE PROMISE OF BEING "100 PERCENT FOR YOU". GAVIN MYERS GOT BEHIND THE WHEEL AT THE LAUNCH



Can you believe the Mercedes-Benz Sprinter will be 25 years old in 2020? Since the debut of this vehicle range, more than 3,4 million Sprints have been sold worldwide. The Sprinter has also racked up its fair share of accolades and achieved notable success – even in

South Africa, where vans of any size have to try hard to be noticed.

Nadia Trimmel, vice president of Mercedes-Benz Vans, states that, locally, the Sprinter holds the largest market share of the large-van segment in the world.

A key reason for this is its appeal with operators in the long-distance minibus-taxi market, who, she says, have collectively clocked up more than 40-billion kilometres in 20 years of running the Sprinter.

The third-generation Sprinter includes a significant locally developed model in its line-up: the Sprinter Inkanyezi 22-seater, excluding the driver. Designed to meet the needs of the minibus-taxi market, the Sprinter Inkanyezi comes in three different grades with options ranging from the basics like three-point safety belts on every seat to passenger USB ports, free-flow rear air-conditioning, rear speakers and an electric sliding side door at the top end.

Overall, the Sprinter range consists of 12 panel van variants and eight freight carrier variants, beginning with the new 311 CDI 3,49-t gross vehicle mass (GVM) model that allows drivers with a Code B (Code 8) licence to drive it without worrying about licence or weight restrictions.

All the various models can be adapted to suit the user's requirements. Trimmel explains: "The third generation Mercedes-Benz Sprinter is extremely versatile and modifications can be made effortlessly.

"With our VanPartners, which are approved body builders, the Sprinter helps to improve the lives of those with mobility impairments. All the Mercedes-Benz Vans approved VanPartners are authorised to carry out conversions to accommodate wheelchair users. Mercedes-Benz can assist with technical guidance and facilitation of the conversion."

The VanPartners include Angelo Kater, BusTruck, Climatic Technologies, Fitment Zone and SA Van Conversions. All the partners are ISO 9001-certified and are able to convert the vehicles into ambulances, wheelchair-accessible vehicles, custom luxury lounges on wheels or go-anywhere family camper-vans and more.

"The third generation Sprinter lives up to its claim of being 100 percent for you," Trimmel adds. "It is the most ideal vehicle to assist those with mobility impairments. With its spacious cabin, the Mercedes-Benz Sprinter offers ample space for people who depend on mobility aids."

The range of vehicles offers outstanding performance. The 311 models (3 490 and 3 550 kg) use the 84 kW/300 Nm version of the OM651 2,2-litre four-cylinder turbodiesel engine. Higher up the payload scale, the 316 (3 550 kg) and 516 (5 000 kg) models employ the 120 kW/380 Nm version of this engine.

Mercedes-Benz Vans claims that these high-output engines offer up to 10 kW more than its predecessor, while returning an 8,5 percent improvement in fuel consumption and a 4,5 percent reduction of cents per kilometre.

At the top of the Sprinter pecking order are the 519 models (5 000 and 5 500 kg), which boast the three-litre V6 turbodiesel that produces 140 kW and 440 Nm. New six-speed manual and Mercedes-Benz's 7G-Tronic seven-speed automatic transmissions are available.



As you would expect from Mercedes-Benz, the new Sprinter is really rather nice to drive. The engines of the various versions are all punchy and smooth and, while the manual transmissions aren't hard work, the 7G-Tronic is sure to find favour thanks to its quick response and seamless shifts. The ride is comfortable and refined, even when the vehicle is unladen.

The cabin is a similarly comfy place to be. Occupants sit in ergonomically designed seats and the minimalist design means the controls and switchgear are easy to operate. There's a multitude of handy storage spaces.

Visibility, even in the panel van models, is very good too, giving the driver the confidence to manoeuvre the vehicle into and around crowded spaces easily. Manoeuvrability is even easier when the Sprinter is equipped with the Parking Package, which includes

“It is the most ideal vehicle to assist those with mobility impairments.

which warns the driver of oncoming danger, as well as Cross Wind Assist and Hill Start Assist.

Moreover, the new Sprinter is one of few Mercedes-Benz vehicles locally with the advanced Mercedes-Benz User Experience (MBUX) infotainment system, which uses artificial intelligence to maximise driver convenience. It's available with either a seven- or 10,25-inch HD display,




a 360° camera (you can also have a reversing camera mounted in the vehicle's rear-view mirror).

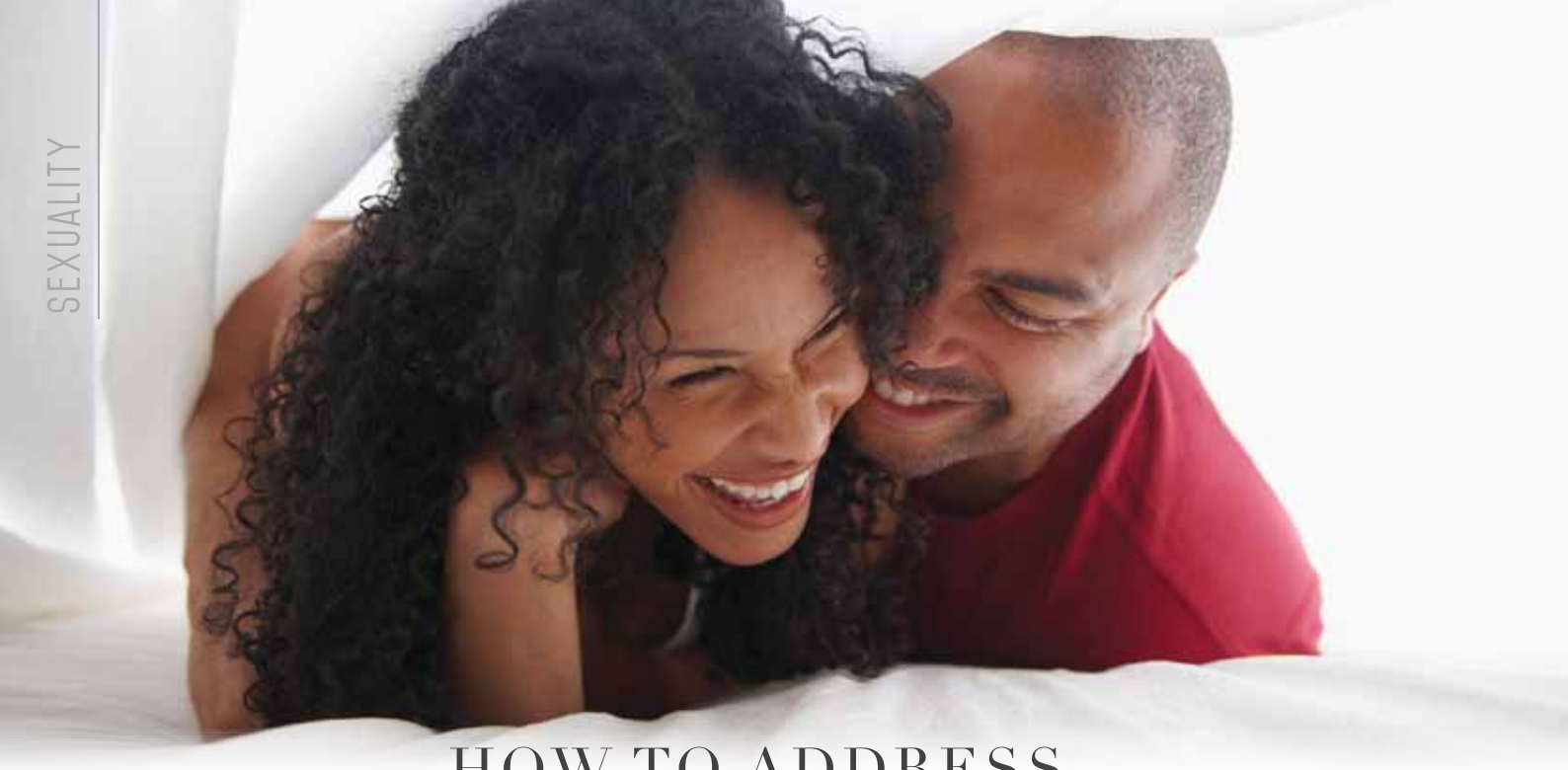
This system is among the impressive safety and convenience equipment on offer with the new Sprinter. Buyers can optionally spec up to five airbags, LED headlamps, Distronic, Lane Keeping Assist and Active Distance Assist Distronic, which automatically regulates the distance from the vehicle ahead. If the vehicle in front slows down, the system will slow the Sprinter down – even to a complete stop if this is safe.

The standard assistance systems available for the new Sprinter include rain-sensing wipers, Active Brake Assist,

controlled with touch-enabled steering wheel controls or an all-new voice control system.

Drivers will also appreciate the keyless start, wireless charging facilities and Type-C USB ports. No wonder Mercedes-Benz Vans proudly proclaims that the Sprinter offers a best-in-class range of features. The new Sprinter range starts from R461 783 and includes a five-year/100 000-km service plan (service intervals are 20 000 km), which is updatable to maintenance plans.

With the promise of performance, comfort and accessibility, the third-generation Sprinter should definitely be your first choice when purchasing a new vehicle! 



HOW TO ADDRESS SEXUAL CONCERNS

IT IS IMPORTANT FOR EVERY HUMAN TO BE ABLE TO EXPRESS THEIR SEXUALITY THROUGH INTIMACY, BUT FOR PEOPLE WITH DISABILITIES THIS MIGHT BE MORE DIFFICULT. HERE ARE A FEW SUGGESTIONS FOR RESOLVING SOME COMMON CONCERNS

Sexuality beyond the aim of reproduction is a major concern for people with SCI. The enjoyment of sex and intimacy is a natural part of being human, regardless of any injury or other disability. The difficulty is often that people don't know where to start when it comes to addressing their concerns. Here are a few solutions to common concerns.

The first and most important suggestion, regardless of the particular concern, is communication. Many people find it difficult to talk about their concerns related to sexuality. It is a very personal topic, and most are afraid of what others might think of them if they discuss their difficulties.

The truth is that there are numerous professionals who would be more than willing to assist you, but they can only do so if you ask. Similarly, communication with a partner is vital to a healthy relationship. What may feel like a major issue is often not such a big problem once you are able to talk about it with someone you trust.

In order to resolve a problem effectively, it helps to define it: for example, are you worried about sexual desire, arousal difficulties, orgasmic issues, ejaculatory issues, fertility or sexual pain? Defining the problem helps you to narrow who can help you with it and what can be done. It is important to distinguish between problems that were present before the SCI and complaints that are related to the injury or subsequent medication.

Consult with a medical doctors to ascertain which difficulties are related to SCI or medication. Although each

SCI is different, there are challenges that are more common when the injury is on a certain level. Learning about your specific injury and knowing what you can expect could be helpful in this regard.

For concerns relating to fertility, pregnancy and childbirth, it is recommended that you consult a specialist. Because of the unique challenges of an SCI, it would be best to do some homework to find a specialist who is experienced in working with SCI patients. Your doctor should be able to provide you with suggestions for specialists who meet this criterion.

The final group of professionals who can also be of assistance deals with the emotional and social aspects of sexuality. Consider seeing a psychologist or counsellor who has extensive knowledge of sexuality and SCI regarding these concerns. More often than you would think, the physical or medical concerns that people experience are owing to emotional and relational difficulties.

Problems with sexuality can often be linked to unresolved emotional distress and if it is not resolved, the problems may persist. Emotional causes are found in many common complaints, such as arousal, ejaculation, erectile dysfunction, pain and inability to achieve orgasm.

This might be difficult to recognise yourself, but one indication of unresolved emotional difficulties is when doctors can't seem to find a medical reason for your complaint and prescribed medication isn't helping. The feedback from people close to us are also valuable, as they can sometimes recognise the emotional struggle before we become aware of it ourselves. ^[2]



Danie Breedt is a passionate scholar-practitioner in the field of psychology. He divides his time between training, research and clinical practice. Danie works from an integrative interactional approach in psychotherapy, dealing with a wide range of emotional difficulties and sexual rehabilitation for patients with disabilities. He is the co-owner of Charis Psychological Services, a psychology practice that specialises in physical rehabilitation across South Africa.



BREAST CANCER PREVENTION: AN UPDATE

BREAST CANCER IS A COMMON CONDITION FACING SOUTH AFRICAN WOMEN. IT CAN BE CAUSED BY A NUMBER OF FACTORS. HERE IS AN UPDATE ON WHAT YOU NEED TO KNOW ABOUT THE CAUSES AND PREVENTION OF BREAST CANCER



Breast cancer is the most common cancer found in women, but it does afflict men too and can be as fatal in men as it is in women. Awareness of the disease as well as self-examination and early detection of suspicious lumps and bumps in the breast tissue can reduce the risk of death.

Although breast cancer is 100 times more common in women than in men, it has been said that males tend to have a poorer outcome – perhaps because awareness of the prevalence of the disease in men is not as acute as among women. As with most cancers, early detection and early treatment give people the best chances of survival and cure.

The following factors are important to note:

AGE

The disease is age-related. The risk of the disease is low in under-30-year-olds but rises with age.

FAMILY HISTORY

If there is a history of cancer in the family, then the risk is greater and relatives should have a heightened awareness. In addition, an episode of breast cancer in one breast increases the risk of cancer in the other breast. It can be associated with a gene mutation, for which you can be tested.

LIFESTYLE

Smoking, excessive alcohol intake, obesity, a low-fibre and a high-fat diet all increase the risk of developing breast cancer significantly.

OESTROGEN EXPOSURE

Oestrogen, along with progesterone, is responsible for the regulation of the menstrual cycle. Women who have a long exposure to oestrogen are at a greater risk of developing breast cancer in the long term. So women who commenced their menstrual cycle at an early age and have a late onset of menopause seem to be at greater risk. Oral contraceptives also increase the risk.

CHILDBIRTH

Women who haven't had children and did not breast-feed are at a higher risk. It is interesting to note that, with the convenience of powdered milk formulas, the incidence of breast cancer is rising in third-world countries.

PREVENTION

Prevention is better than cure. It's important to perform regular breast self-examination. Signs that should raise concern are any changes in the nipple, abnormal discharges, and changes in the skin with pain, swelling or dimpling of the skin.

However, not all small lumps can be felt. So, in addition to self-examination, all women should have regular mammograms after the age of 40. Lifestyle changes are just as important: cutting back on smoking and alcohol consumption, maintaining a healthy weight, taking in enough dietary fibre and reducing your fat intake will help reduce your risk of cancer.

If you have any suspicious breast lesions or notice any changes, it would be sensible to consult your healthcare practitioner as soon as possible. ^[1]



Dr Ed Baalbergen is the medical officer at the Vincent Pallotti Rehabilitation Centre (Cape Town) and is a member of the International Spinal Cord Society and the Southern African Neurological Rehabilitation Association.
email: ed.baalbergen@lifehealthcare.co.za

TOYOTA SPONSORS BIGGEST PARA SPORTING EVENT IN SOUTH AFRICA



IN MARCH, ATHLETES WITH DISABILITIES GATHERED IN STELLENBOSCH FOR THE SOUTH AFRICA SPORT ASSOCIATION FOR PEOPLE WITH DISABILITIES (SASAPD) NATIONAL CHAMPIONSHIPS, SPONSORED BY TOYOTA. MARISKA MORRIS AND DEBORAH RUDMAN REPORT

SASAPD teamed up with Toyota South Africa Motors to host its National Championships for athletes with disabilities. The event ran from Sunday, March 17, to Thursday, March 21, with eight of the Paralympic sports on offer, including boccia, para powerlifting, judo for the blind, cerebral palsy football, para swimming, goalball, para athletics and para cycling.

SASAPD is a federation that promotes sport for athletes with disabilities and visual impairments from grass-roots to Paralympic level. It currently caters for 12 regions throughout the country and for five disability groups, including spinal cord injuries, amputees, cerebral palsied, visually impaired and blind, and les autres (a category for Paralympic competitors whose disability does not fit into the other five categories).

This epic five-day event is arguably one of the most important sporting events for athletes with disabilities in South Africa as it offers them the opportunity to showcase their talent at an internationally recognised event.

"The National Championships are probably the most important for any athlete with a disability who participates in the eight sporting codes we offer. It is the last opportunity for these athletes to showcase their athletic ability. It offers them the opportunity to break South African or international records, which are then recognised," Moekie Grobbelaar, SASAPD president, says.

All the sporting events at the Toyota SASAPD National Championships are in line with the International Paralympic Committee (IPC) regulations, so that new records are recognised by the IPC. With support from Toyota South

Africa Motors, Grobbelaar noted, it is a lot easier to host the event, which is very expensive.

"People always ask me what the SASAPD reinvests into the athlete. Unfortunately, we don't have the opportunity to send every athlete overseas, but we can offer them the opportunity to participate at the National Championships, showcase their talents and be recognised. They don't have the same platform on club or provincial level, as the club sports aren't standardised," she says.

"If the event is not sanctioned by the IPC, the athlete can't be ranked internationally. Today, sport is all about international ranking. It is how you are measured. This year's Championships are particularly important and so is the backing from Toyota South Africa Motors, as we need to select the team for the 2019 World Para Athletics Championships."

SASAPD advises the South African Sports Confederation and Olympic Committee (SASCOC) on the team that should be at the World Championship and Paralympic Games. However, SASCOC makes the final decision. The Toyota SASAPD National Championships offer athletes the opportunity to qualify for the World Para Athletics Championships, which will be held in Dubai, United Arab Emirates, from November 7 to 15.

As adaptive sports become more competitive, it is more difficult for athletes to be selected to represent their country. Grobbelaar explains that if a country can get 30 athletes to the World Championships, it would be fortunate to receive 12 slots for the Paralympic Games.

"We need to send as many athletes as we can so that we can get more slots at the Paralympic Games. Toyota's

sponsorship of the National Championship is key in achieving this goal," she adds.

While Grobbelaar is excited and grateful to have high-performance athletes like Ntando Mahlangu, who won silver at the 2016 Rio Paralympic Games, at the event, she is equally excited about the upcoming athletes.

"The core function for the SASAPD is to develop the sport codes and build athletes from grass roots. That is why we have schools and clubs. I'm interested in the newcomers or wild-card athletes, as it shows me whether there is development in the sport," she explains.

People with disabilities are monitored by SASCOC as soon as they become high-performance athletes. SASAPD is thus more interested in talent that needs to be developed.

SASAPD's work in developing sport has already reaped results, with junior athletes making up the majority of the 795 athletes at the Championships. With Toyota's support, the number of participating athletes will surely only grow.

While there are high stakes for the Paralympians competing at the Nationals, for many other athletes it provides an opportunity to measure their performance against the best in South Africa or their personal best. Jonathan Swanepoel is one of those athletes – soft-spoken and a little shy, he has a smile that lights up the Coetzenburg athletics track.

The 2019 National Championships, lauded the best ever at Coetzenburg stadium, were organised by the Local Organising Committee, which consist of only six members! An astonishing amount of work is done before, during and after the event by chairperson Mark Beack and his team.

Praise was received from the various provinces and the SASAPD team. "This year's event is really incredible," Johan Grobbelaar from the SASAPD notes. "All the sporting events



A T54 wheelchair competitor representing Western Province, Swanepoel completed the 100 m in a respectable time, powering to the line one second behind the leading pair (just over 18 seconds). It was satisfying progress for Swanepoel, 21, who has been racing competitively for the past three years and is determined to improve every year.

To make this progress happen, he trains up to five days a week – on the track in summer and in the gym in winter. In 2018, he graduated from the Cape Peninsula University of Technology with a qualification in office administration.

For others, it was their first time competing at the National Championships. This was the case for 14-year-old Mpumi Ngozo, who was delighted to have completed the T36 100-m girls' race. One of her teachers, spotting the youngster's sporting potential, encouraged her to take up running a couple of years ago – which she's done with enthusiasm and dedication. "Third place this year," Ngozo says with a smile, "but next year, it'll be first!"

are only a few minutes away from each other and located on the same campus, which makes it so much better."

His sentiments are echoed by Jan Wahl, chairperson of the Free State Sports Association for the Physically Disabled (FSSAPD).

"The event is very well organised and offers a great platform for some incredible athletes," he says.

"Stellenbosch is also a very central place to host the event and it is wonderful to have the athletes go see the other sports on offer."

Toyota has entered into a three-year partnership with the SASAPD to promote the sporting codes offered at Paralympic level for athletes with disabilities.

"At Toyota, we believe that movement and mobility in all its definitions is all around us. Sport has the power to connect people. This where we learn the true power of sport – it can challenge us, inspire us and, most importantly, unify us," says Glenn Crompton, Vice President: Marketing at Toyota South Africa Motors.

"As the Worldwide Official Mobility Partner of the International Olympic Committee and the International Paralympic Committee, Toyota shares the vision to inspire people to push onward – past their finish line, past their impossible. We have seen so many examples of people achieving the impossible at the Toyota SASAPD National Championships.

"Toyota believes that you can achieve great things when you move. This is why we are a proud partner of the SASAPD National Championships. We are wholeheartedly committed to unleashing human potential through the power of movement," he explains.

Good luck to the athletes who have qualified for the World Para Athletics Championships! The rest of us can look forward to the 2020 Toyota SASAPD National Championships, which will surely be even more spectacular. [\[7\]](#)



NEW WORLD RECORDS IN THE YEAR OF CHAMPIONSHIPS

AS THE FIRST QUARTER OF 2019 COMES TO AN END, WE REFLECT ON THE VARIOUS SPORTING EVENTS THAT TOOK PLACE



ow, I can't believe we are already through our first quarter of the year. The sporting season has started in earnest following the Toyota SASAPD National Championships. What an awesome event it was! I was lucky enough to be able to go around and watch all the sport. I had a brilliant time.

I am always in awe when watching the athletes with severe disabilities compete in boccia. I enjoy the competitiveness and tactical aspect of the game. A big shout-out to Toyota South Africa Motors for coming on board and sponsoring these important games. I know this partnership will go from strength to strength.

It was very nostalgic for me to attend the championships in Stellenbosch as that is where my first ever National Championships took place a very long time ago. Little did I know then that sport would become my passion and occupation.

The highlight of the event, though, was when 14-year old Simone Kruger broke the world record in the F38 Discus. This young lady has so much talent and is a legend in the making. Overall a total of seven world records were broken at the championships. Kudos to Athletics South Africa (ASA)

for having its National Championships, which took place from April 25 to 27 in Germiston, ratified by the World Para Athletics so that our para athletes could also take part in the championships and have their results recognised.

Thank you and congratulations to ASA on hosting an awesome event! The first World Championships took place on April 29: the World Para Marathon Championships, which formed part of the London Marathon. There were two South African entrants, namely the blind runner Louzanne Coetzee and the wheelchair ace Ernst van Dyk.

They finished ninth and sixth respectively. Coetzee also has a chance of qualifying for the World Para Athletics Championships later in the year.

The Sasol Wheelchair Basketball team took part in the tenth Fazza Wheelchair Basketball Tournament, which was held in Dubai, United Arab Emirates (UAE), from May 4 to 11. Many of the games went down to the wire. Our team played the UAE for the seventh- and eighth-place playoff, but could have been playing for a medal, so close were the games.

The Grand Prix season will be starting soon and some of our top athletes will be competing. Let's get behind them as they try to qualify for Tokyo 2020! [\[1\]](#)



Leon Fleiser has been involved with sport in the disability sector since 1992, when he started playing wheelchair basketball. He captained the national team to the Sydney Paralympic Games and the 2002 World Championships. He started working for Disability Sport South Africa in 2001 as a Coordinator for High Performance. It merged into SASCOC in 2005 and he is now the Manager for Team Preparation and Academy Systems. He has delivered Team South Africa to numerous Olympic, Paralympic, Commonwealth and African Games.

DON'T TURN ME AWAY BECAUSE OF MY WHEELCHAIR

MOST INDUSTRIES NEED TO BE MORE INCLUSIVE. PEOPLE WITH DISABILITIES WHO ATTEMPT TO BREAK THE NORM SHOULD AT LEAST BE GIVEN AN OPPORTUNITY – NOT DISCRIMINATED AGAINST SOLELY BECAUSE OF THEIR DISABILITY

Growing up, I struggled with my body as my legs are uneven, with the left shorter and thinner because I'd had polio. I lacked self-confidence and self-esteem ... at least until I started modelling. For so long, I questioned why there aren't more representation of wheelchair users and people with disabilities in this industry.

In South Africa, especially, I feel we are lagging behind. Other countries are moving towards disability inclusion by including people with disabilities in fashion and other related industries. Why? We need to be seen more. A significant contributing factor to prejudices against people with disabilities is the perception that they aren't competent enough.

So what happens when someone fashionable rolls proudly in a wheelchair at Soweto Fashion Week? For some it was a very interesting experience because the fashion industry is not used to people with disabilities. As a matter of fact, I was the only person in a wheelchair at this event. Although, I can understand why – it shouldn't be like this.

As a runway model in a wheelchair who has faced adversity and learnt to love, accept and embrace her uniqueness, I came to realise that the media bombard us constantly with information about how to be perfect and flawless. But let's face it: no one is perfect. We have to stop striving to be perfect and instead embrace our own beauty and the different types of beauty.


It meant a lot to me to be a model at the Soweto Fashion Week and represent people with disabilities. Fashion is for all, so there should be more people with disabilities in the fashion industry without shocking people. However, not

everyone is as open to incorporating models or other people with disabilities.

Unfortunately I've faced discrimination simply because I'm in a wheelchair. At times I was not even given a chance. Regardless of what I look like, I would be refused based on prejudice. It made me wonder: am I supposed not to tell people that I'm in a wheelchair so that I'm not discriminated against? But my wheelchair is part of me. I should never hide it!

I'm up for challenges and like breaking stereotypes. Knowing what I'm trying to accomplish as a model in a wheelchair is somewhat of a challenge that makes it interesting and pushes me to go forward to pave the way for others, hopefully. At the same time, I'm not okay with knowing that some doors have been shut completely just because I'm a wheelchair user.

I don't mind rejection based on reasonable arguments like I don't have the look you are going for, but don't refuse even to give me an opportunity to audition just because of my wheelchair. If all this is new to you, let me ask you: how would you like to be refused the opportunity just because you do things differently or look different compared with most people?

There must be more acceptance, tolerance and diversity inclusion! 



Lebohang Monyatsi was diagnosed with polio at the age of three. She studied at North-West University and now resides in Vanderbijlpark, where she works in human resources. In 2017, she travelled to Sweden to participate in the Miss Wheelchair World competition and was crowned First Princess.



PROMOTING AND SUPPORTING EMPOWERMENT



BUSINESSES SHOULD SUPPORT AND PROMOTE EMPOWERMENT THROUGH EQUAL LEARNING OPPORTUNITIES

The fourth pillar of the White Paper on the Rights of Persons with Disabilities (WPRPD) is promoting and supporting the empowerment of people with disabilities. It states: "Persons with disabilities must have access to inclusive learning opportunities throughout their lives where they learn in an inclusive barrier-free setting."

To realise this goal, the following should be considered:

- Reasonable accommodation should focus on the specific requirements of the individual;
- Individual support should be provided in the education system to provide people with disabilities with more valuable education and social development; and
- People with disabilities should be enabled to learn life and social development skills to facilitate their full and equal participation in their community.

Specified reasonable accommodation measures are:

- Learning braille, alternative script, augmentative and alternative modes, means and formats of communication, orientation and mobility with peer support and mentoring;
- Learning South African Sign Language (SASL) and promoting the linguistic identity of the deaf community;
- Ensuring that the education of people and children, who are blind, deaf, hearing-impaired, non-speaking autistic or deaf-blind is delivered in the most appropriate language, mode and means of communication in an environment that maximises development;
- Employing teachers, including those with disabilities, who

are qualified in SASL and/or braille. Training professionals and staff who work at all levels of education, which incorporates disability awareness and the use of appropriate augmentative and alternative modes, means and formats of communication, educational techniques and materials; and

- Ensuring that people with disabilities are able to access general tertiary education, vocational training, adult education and lifelong learning without discrimination by, among others, providing reasonable accommodation.

Further education and training institutions should ensure that their programmes can reasonably accommodate people with disabilities.

Learnerships are popular for the skills development of people with disabilities. About 30 percent of the learnership is a theoretical learning component and 70 percent is an experiential component of a specific qualification registered with the South African Qualifications Authority over a 12-month period. Participants are employed full-time with a stipend for the duration of the learnership. Grant funding is available through the Sector Education and Training Authorities (SETAs), some of which pay a disability grant to the lead employer and a disability allowance to the learner over and above the stipend.

Employers benefit from claimable incentives, including employee tax incentives of up to R12 000 per employee over 12 months and a tax allowance of R120 000 per learner. Education and skills development are fundamental rights. Once the environment is conducive to learning, people with disabilities can make a positive contribution to society. ^[1]



Rustim Ariefdien is a disability expert extraordinaire who assists businesses to "let the Ability of disAbility enAble their profitAbility" through BBBEE, skills development, employment equity and socio-economic development. He ensures that businesses are able to maximise their points on the BBBEE scorecard and become compliant with legislative requirements as stipulated in the Employment Equity and Skills Development Acts. His purpose is the economic empowerment of persons with disability in Africa. As a person with a disability himself, he has extensive experience in the development and empowerment of persons with disability.

GET A GRIP

WITH THE CORRECT ASSISTIVE DEVICE, MOST MOBILITY IMPAIRMENTS CAN BE OVERCOME. PHILIP CASE REVIEWS THE QUADTOOLS REACHER, WHICH HAS HELPED HIM OVERCOME HIS LIMITED HAND FUNCTION



Mark Twain once wrote: "Out of all the things I have lost, I miss my mind the most." As a quadriplegic with no hand function, I miss many things but the use of my hands must be near the top of my list. I had searched for and experimented with all kinds of solutions unsuccessfully until I finally stumbled upon a gadget that works for me.

It is called the Quadtools Reacher. You can find it and an array of variants on the website www.quadtools.com. All you require to use this nifty piece of engineering is some wrist extension. Even a weak pull will close the jaws with a fair amount of force. Believe me! I tried it on myself and have an impressive bruise on my leg to prove it.

It is an American product that you order directly from the website. You download a template, print it out and get someone to cut along the dotted lines. You then use the cutout to measure your wrist and around your palm. You also measure the length and circumference of your forearm. It sounds more complicated than it is and there are complete instructions on the website to assist.

They use these measurements to create a custom fit for you that really helps it feel more like an extension of your arm. Pun intended. I ordered the medium length (28 cm) "heavy duty" Reacher as I wanted the option of picking up some bulkier, heavier items when needed. I was in luck, as a friend travelled to the United States and brought it back for


me. So I saved on postage costs, but I did confirm with the owner that they are happy to ship anywhere.

The Quadtools Reacher is hardcore, with no flimsy plastic or wires that can break. It is made of laser-cut stainless steel and the quality is superb. I have no doubt it will outlast me. It uses a simple but highly effective lever, spring and rod system to actuate the jaws that clamp down on the object of your desire and spring back open as soon as you release.

I have tried the plastic alternatives that you can buy locally, but they require finger dexterity and what they can actually retrieve is limited. I have literally lifted a brick with the Quadtools Reacher. That said, you can easily manipulate and pick up tiny items as well, since the jaws have a unique wavy edge that facilitates some very fine movements.

If I could keep it with me at all times I would. I pick up things from the floor, take cups out of the cupboard, pull clothes from my wardrobe and more. I braaied completely on my own for the first time using these bad boys ... Now *that* was a moment to savour. There are a number of videos on YouTube demonstrating its various uses, and all the reviews are positive.

There is one major downside – the price.

The version I bought cost US\$ 189 (about R2 700). For many that is out of the question, which is heart-breaking as the independence that this tool has given me is priceless. Perhaps one of our budding entrepreneurs could come up with a local solution at a fraction of the cost? 



Philip Case became a quadriplegic in the '90s, when 56k modems were considered hi-tech. Over the years he has gained a reputation for a mild obsession with gadgets and accessibility devices. He has conquered a number of Quads4Quads rides on his adapted side-by-side and built a smart home in Paternoster on the West Coast, and continues to figure out ways to make the world more accessible using technology.

KICK GUILT TO THE KERB

ALL PARENTS EXPERIENCE A DEGREE OF GUILT ABOUT THEIR SHORTCOMINGS, BUT IS IT ANY DIFFERENT FOR A PARENT WITH A DISABILITY?



Guilt is a concept most parents experience at some point. Whether it is because they feel they work too much, miss sport events too often or aren't the best cook, guilt rears its ugly head in every parent's lifetime. It's no different when parenting from a wheelchair ... or maybe it is?

Looking back on my early days as a parent in my chair, I vividly remember having intense feelings of guilt. However, that guilt didn't come from the same place as my earlier guilt-related feelings as a "walking" parent. These new feelings came from a more profound, heavier place.

WILL I BE GOOD ENOUGH?

Like a lot of other parents with a range of various challenges, I had so many concerns about being "good enough" as a "wheelchair parent" to my kids. I was riddled with internalised questions like: How would I play with them?

How would I pick them up when they needed a hug? How would I catch them when they fell? Even worse, how would I rush them to the emergency room if they were hurt?

CHALLENGE THE DARK DAYS

There were dark days when I felt so guilty for burdening them with having a "substandard" parent. During those days my negative self-talk and limiting self-belief had the best pity parties, leading me to believe that my children would be better off without me.

With a little help, and mustering my professional background, I soon realised that I – like any walking parent

– needed to work on checking my unrealistic feelings of guilt. I needed to weigh them, measure them and the minute I found them wanting I had to kick them to the kerb!

KEEPING IT REAL

So I did, and it worked. Like any other parent, there were things I could and couldn't do for my kids. There were, however, other things that my children experienced and learnt as a result of my newfound parenting role. And as strange as it may sound, I wouldn't change any of it for the world.

My son couldn't run into my arms as I pick him up and twirl him around like I used to do after a day at preschool. But he could run and jump onto my lap, catching the coolest lift to the car while being envied by all of his friends!

The moment I reminded myself and wrapped my head around the fact that every household has challenges, things started getting better. When I realised that my challenges as a parent were perhaps mainly physical and that we could work them out as we went along, I could let go of my irrational guilt about parenting from my chair.

I could relax in the knowledge that it did not take anything away from my being a mom, being there to nurture and to care in my own way, and that it would be good enough for my kids.

After all, it's about just keeping it real and remembering that parenting is not about how you get around, it's about being around.

Do you experience deep feelings of guilt because of your challenges? How do you deal with those feelings? [A](#)



Wanda Boshoff is a wife, mother and qualified occupational therapist who also happens to be a paraplegic. Thanks to her experience in these fields she is able to assist others in similar situations. Before her accident in 1998, she ran a successful private practice specialising in children – particularly those with childhood-development and school-related issues. Over the past 20 years she has been running her own businesses, and become a blogger and the owner of a guest house.



TEACHER AND LEARNER SENSITISATION

OUR THIRD ARTICLE ON INTEGRATING CHILDREN WITH DISABILITIES INTO AN INCLUSIVE CLASSROOM LOOKS AT THE IMPORTANCE OF SENSITISING TEACHERS AND LEARNERS

Last articles focussed on the importance of parents and or learners disclosing their disabilities to the school, with some practical tips on information sharing between the learners, parents, teachers and the principal. In this article, we discuss how sensitising the school, including learners and teachers, towards disability before a learner with a physical disability arrives at the school is crucial in full integration and inclusion.

Some learners with disabilities experience challenges, such as being teased and bullied by other learners in their classes and schools; having teachers either over- or under-accommodate their needs; teachers and learners making assumptions about their capabilities; and exposure to incorrect and sometimes derogatory words and phrases.

Yet many of the above examples can be addressed and prevented if teachers, learners, school management teams and parental bodies receive disability sensitisation training. It is important that this training is conducted by a person who is qualified, experienced and able to adapt the content to meet the needs of all the stakeholders.

For example, the words, content and way someone teaches a class of Grade 3 learners will differ from those used with school management teams. Ideally, the sensitisation training should be run by someone with a disability themselves. This training might include:

- Positive examples showing the capabilities of people with disabilities using pictures, video clips or personal stories if available;
- Emphasising the fact that disability is deeply personal and individual. No two people with disabilities are the same. Each has their own strengths and challenges;

- Highlighting the importance of using correct terminology, as well as the impact of using out-dated or derogatory words and phrases;
- Giving accurate information in a sensitive way instead of using "scare tactics";
- Talking about some of the challenges that some people with disabilities may have and what can be done to make the experience more welcoming and inclusive;
- Providing an overview of disability followed by more specific information relating to the learners' disability;
- Only sharing information that the learners and their parents are happy to share, and that is important for participants to understand; and
- Encouraging all participants to ask questions.

It is important that the information, content and examples are age- and level-appropriate. Teachers, for example, may need additional information on how to accommodate the learner practically and how to deal with the reactions and comments from other learners in the class in a sensitive and appropriate manner.

Many disability organisations and non-governmental agencies provide disability sensitisation training, and schools should be encouraged to partner with them to gain information, training and support. It is most important that the learner with a disability and their parents are fully involved and in agreement with the process because the training will have a direct impact on how the learner is accommodated and included in the school.

The next article in this series will provide teachers and learners with some practical tips on what they can do to help and include a new learner with a disability in their school and classroom. [\[7\]](#)



Dr Emma McKinney is a lecturer at the University of the Western Cape. She is also the owner of Disability Included, a company specialising in disability research, children, and employment of adults with disabilities. email: emma@disabilityincluded.co.za

STRUMMING AGAIN AFTER A DECADE

When actor and newsreader Erik Holm suffered a spinal injury that resulted in reduced hand dexterity, he lost his ability to play the guitar – something he would miss dearly. “When I left the hospital, on my list of things I’d like to do again walking was around number seven or eight while playing guitar was around three or four,” Holm reflects.

With the help of guitar builder Mervyn Davis, Holm was able to play guitar again after more than a decade. Holm’s sisters had heard about the guitar-building courses that Davis offers and contacted him to ask whether he’d build an adapted guitar for their brother – and he agreed.



“I went through to show Merv what I can and can’t do. He worked around that to make the guitar,” explains Holm, who is able to move his wrist, arm and shoulder. “It sounds just like a normal guitar. It is as close to the real thing as it can be.”

Davis recalls: “After identifying the available hand, arm and shoulder dexterity, these motions had to be translated into mechanical movements that would replace the fingers without losing the touch sensation.

“It comes with a specific guitar branded SmoothTalker, which has been built and sold to guitarists all over the world for the past 20 years. The modular design features a very long detachable neck that makes it suitable for an attachment like the one we used,” says Davis.

The mechanism Davis designed is controlled by a joystick that only requires three different movements in the player’s arm, shoulder and wrist to slide it up and down the neck

on rails. This mechanism makes contact with the strings through forward, backward and twisting movements.

Holm can play up to 26 chords on his adapted guitar. The instrument can be played by anyone as long as they have some shoulder, arm and wrist dexterity.

At the moment, adapted guitars are built on demand and can be costly. Davis and Holm are looking into producing the instrument at a more affordable cost and launching it internationally.

While the desire to play guitar was very personal for Holm, he says it has numerous other benefits. “The fine motor skills I acquired from playing the adapted guitar has impacted other parts of my life. I’m able to hold a pen better, for example. I want every rehabilitation centre to have this instrument. It means so much to a person – physically and spiritually.”

Holm will be performing with his adapted guitar at the Subterranean Rhythm & Blues Experiences (STRAB) festival in Ponta Malongane, Mozambique, from May 22 to 25.

For more information, call Holm on 076 335 4262 or email calamitykid@gmail.com.

THE BEST WINGMEN AND WOMEN

The annual Wings for Life World Run returned to Centurion on Sunday, May 5, when 120 000 runners across the globe participated at the same time to spread awareness of spinal cord injuries and raise funds for a cure. The local event took place at the Irene Agriculture Farm in Pretoria.

In total, the event raised €3,5 million (about R56 million) globally, which will be put towards research to find a cure for SCI. The Wings for Life Foundation has already had a breakthrough, with three patients recovering muscle control in one of the research projects. Read more about the event and the foundation on the ROLLING INSPIRATION website.



MY X MATTERS

POLITICAL PARTIES SHOULD BE HELD TO THEIR PROMISES, BUT WE SHOULD ALSO BE ASKING THE RIGHT QUESTIONS. WHEN YOU MADE YOUR MARK, HOW DID YOU EFFECT CHANGE THIS ELECTION SEASON?



While it is equally important for us – the voters – to have made our mark next to a political party that we feel will address our socio-economic issues, we need these parties to stick to the promises they made during their electoral campaign.

Every election year all the political parties campaign across the country for our support and vote, promising us a better life for all. They're all saying the same thing. They promise jobs that they've been promising since 1994. And houses.


Our current president promised a million houses in Alexandra, Johannesburg. Everyone is promising land, and the funniest promise is fighting corruption. The sad part is that, 25 years after the dawn of our democracy, there's a lot to be done and the basic necessities are still a dream to the poorest of the poor – the majority of South African voters.

How is it that no one is talking about focusing on

empowerment especially for youth with disabilities, young men who are doing drugs, are unemployed and still fathering new babies? Why is there no approach and drive against having children when you cannot afford it and when you are a child yourself? Why are politicians quiet about that?

One party spoke about creating jobs for persons with disabilities. I laughed because, unless organisations and persons with disabilities are consulted, they will continue to create "learnership" programmes that only target the youth. Most people who are 35 years and older struggle to find permanent employment.

Why is no political party talking about creating ways of dealing with mental health challenges in the country? Mental health is a national disaster! So many people suffer from depression and other mental health issues. We need a long-term approach that is intertwined with addressing powerlessness coming from poverty and lack of jobs.

My X is my weapon. My X is my truth. 



Emilie E Olifant is a disability champion, an entrepreneur, an author and an inspirational speaker. She is accredited by the Education, Training and Development Practices (ETDP) SETA and is the founder of the Emilie Olifant Foundation, an organisation that strives to integrate persons with disabilities in the workplace and/or society. email: emilie.olifant@gmail.com

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COMING SOON!

YOU HAVE LOTS TO LOOK FORWARD TO! DON'T MISS THESE UPCOMING EVENTS OR THE AMAZING FEATURES IN THE NEXT ISSUE OF ROLLING INSPIRATION. THE FOURTH EDITION OF ROLLING INSPIRATION IN 2019 WILL BE PACKED WITH FABULOUS ARTICLES. HERE'S WHAT TO EXPECT:



AGEING WITH SCI

We share some insights into what it is like to age with a spinal cord injury and share some tips for managing it.



HOME ACCESSORIES

From ramps to grabrails, we take a look at accessories that help make a home accessible.



VEHICLE CONVERSIONS

We research the conversions needed for drivers with disabilities.



CAR SEATS

We take a look at some of the car seats for children with disabilities, as well as other vehicle accessories.

ARE YOU INTERESTED IN SUBMITTING EDITORIAL FOR THESE FEATURES? EMAIL CHARLEEN@CHARMONT.CO.ZA
WOULD YOU LIKE TO ADVERTISE IN THESE FEATURES? EMAIL FEZI@CHARMONT.CO.ZA

CALENDAR OF EVENTS

THERE ARE PLENTY OF EVENTS HAPPENING OVER THE NEXT COUPLE OF MONTHS. HERE ARE SOME OF THE HIGHLIGHTS:

SEPTEMBER: MUSCULAR DYSTROPHY AWARENESS MONTH

Muscular Dystrophy (MD) is a genetic disease that causes progressive weakness and loss of muscle mass. The most common adult form of MD affects one in 8 000 people worldwide. September is global MD awareness month. For more information on the disease, visit the Muscular Dystrophy Association website at www.mda.org.

5 SEPTEMBER: WORLD SCI DAY

World Spinal Cord Injury Day is observed every year on September 5 to create awareness about SCIs, to promote better inclusivity and to ensure greater success of prevention programmes. SCI affects between 250 000 and 500 000 people globally. For more information, visit www.worldsciday.org.

6 SEPTEMBER: CASUAL DAY

Casual Day, the flagship awareness and fundraising project of the National Council of and for Persons with Disabilities, will take place on September 6. The theme is "Time to shine with persons with disabilities". Buy a sticker for R10 and support people with disabilities. Visit www.casualday.co.za for more.

14 SEPTEMBER: QASA ANNUAL GENERAL MEETING

The QuadPara Association of South Africa (QASA) will have its annual general meeting on Saturday, September 14, and everyone is welcome. For more information, keep an eye on our social media sites or visit the QASA website at www.qasa.co.za.

21 SEPTEMBER: QUADS4QUADS

The epic four-day off-road journey from Johannesburg to Richards Bay returns in September. Join the Quads4Quads journey on your dirt bike, quad bike or side-by-side and help raise funds for the QuadPara Association of South Africa. For more, visit www.qasa.co.za.

1 – 3 OCTOBER: DISABLING NORMATIVITIES

The Wits Centre for Diversity Studies (WiCDS) will host an international conference from October 1 to 3 at the University of Witwatersrand with the theme "Disabling Normativities". It aims to look at the disabling effects of normative social relations and ways of reducing them. Visit www.disablingnormativities.com to find out more.

Quality Immobility Solutions

Rental
Options
Available



Pressure Injury Prevention

Therapy Mattress Replacement Solutions

Pentaflex™ range is manufactured using high quality foams known for their extensive service life.

Alpha Active™ 4 is a cost effective solution ideal for Pressure Injury prevention; higher risk patients; unable to be frequently repositioned.

Auto Logic™ provides automatic, self-setting therapy options with the benefit of a battery-powered active transportation function and optional Seat Cushion.

The Nimbus™ Mattress Replacement System combines automatic cell pressures, Heel guard™ and unique vent valve technology to provide effective pressure relief and improved solutions.



Medical Beds

The foundation for patient and well-being. Long term care medical beds that allow good infection control, offer enhanced ergonomics, comfort, safety and ease of use that promotes effective risk management.

Minuet™ Long-Term Care Bed Enhanced pressure and shear reduction with excellent postural support and exceptional comfort

Enterprise™1000 Bed Manually Operated Bed Range delivers significant benefits to patients, caregivers and healthcare facilities alike. Arjo has focused on key customer needs common to all healthcare environments. With Improved clinical management and safe management of heavier patients that is robust and durable.



Safe Patient Handling Systems

Simple, safe, comfortable and dignified transfers.

Sara™ Stedy is a successful aid promoting support tool that encourages patients to stand up independently - SWL of 182 kg.

Maxi 500™ Passive Mobile Lift Combines proven lifting technology with the latest standards in safety, security and comfort for both resident and carer alike. Compatible with a full range of head and body support slings, the electrically-operated Maxi 500 allows carers to give their undivided attention to the resident during handling routines.

Maxi Sky™ is a ceiling lift for patient transfers providing an efficient and safe working environment.



Hygiene

Arjo hygiene products help to reduce workload, increase efficiency and improve quality of life for patients.

The Bolero™ lift bath trolley allows one single attendant to take a dependent resident from bed to bath, and back again without any manual lifting or extra transfers.

Carevo™ Shower Trolley provides a comfortable and dignified hygiene experience for dependent patients. With superior design and an intuitive user interface.

Carendo™ Multi-purpose Hygiene Chair improves quality of life by making assisted showering and other hygiene routines comfortable, more dignified experience.

The **Carino®**, shower and hygiene chair offers an efficient, safe and ergonomic solution for assisted showering.

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