ROLLING ISSUE 6 2018 | R55.50 INSPIRATI

The thought leadership publication for people with mobility impairments

SAB FOUNDATION Clothes to Good bags

the Disability Award

CURE FOR SCI Wireless devices could be key

RAINBOW **CLASSROOMS**

Plans for more inclusive education





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ROLLING INSPIRATION

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MANAGING EDITOR

Ari Seirlis email: ceo@qasa.co.za

EDITOR

Charleen Clarke Cell: 083 601 0568 email: charleen@charmont.co.za

COPY EDITOR

Deborah Rudman email: deborahrudman12@gmail.com

JOURNALISTS

Mariska Morris Cell: 084 788 8399 email:mariska@charmont.co.za

PUBLISHER

Tina Monteiro Cell: 082 568 3181 email: tina@charmont.co.za

ADVERTISING SALES

Fezi Phaahla Cell: 072 770 3507 email: fezi@charmont.co.za

CIRCULATION MANAGER

Charmaine Harry email: charmaine@charmont.co.za

DESIGN AND LAYOUT

Nelio da Silva email: nelio@charmont.co.za

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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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Amputee corner Sport **Employment** Sexuality Hotspot news Backchat

ALL I WANT FOR 2019 IS

AS WE ENTER INTO A BRAND-NEW YEAR, WITH CHANGES HAPPENING ALL AROUND US, IT IS HELPFUL TO REFLECT ON THE RELATIONSHIPS BUILT IN THE PAST, APPRECIATE THE MOMENTS SHARED AND PLOT THE WAY AHEAD



ith the year drawing to a close, it's a good time to look back at all that 2018 brought. For the nation, there were highlights and low points, good experiences, negative events and plenty to endure. We could, for example, focus on data, like the crime stats, or processes that were supposedly

improved, like the South African Social Security Agency (SASSA) payments.

We could ask ourselves difficult questions, for example, were we better off before the political changes? Are we becoming immune to the ever-increasing instances of government failures and number of corrupt politicians?

This year, the South African economy took a battering. There was an increase in the Value Added Tax (VAT); fuel costs reached an all-time high; and unemployment increased as a result.

Various fact-finding commissions have been put in place to explore irregularities of certain banking institutions, the revenue services and state capture, which might not appear to affect us directly and personally, but they have a huge impact on the financial future of the entire country - and therefore us all!



The new Minster of Finance Tito Mboweni released a medium-term budget statement that raised a few eyebrows, especially among the opposition parties and labour movements. It seemed promising, in many ways, but will the changes be as effective as we hope?

Although new to the ministry, Tito Mboweni is not new to politics or to the financial sphere. He was the labour minister in the cabinet of late President Nelson Mandela in the 1990s and the Governor of the Reserve Bank for a few years. Now, he has the responsibility of guiding South Africa into a future that looks rather bleak for consumers and businesses.

It's not all doom and gloom as we head into the 2019 election year. But a positive result in the elections will depend on a united effort from all South African citizens. Just as we're all affected by the increase in the cost of living, we'll all face the consequences if nothing is done. I'd like to reflect on a few key areas where I'd like to see change occur in the New Year.

HEALTHCARE

The South African healthcare system is in bad shape. We're in the process of implementing National Health Insurance (NHI) but it's very uncertain whether we will be adding this new system on top of the current and broken system.

Mboweni announced that a few million rands will be allocated to improving the quality of staff, increasing the number of beds and reducing linen shortages in the health sector. I would like to see these funds applied to the most affected areas of the system and not misappropriated. This would be one welcome change.

EDUCATION

The South African education system should also be adapted to include activities relating to all sports, arts and culture throughout the education cycle, from early childhood development to tertiary education. It would be great for social cohesion and integration of different communities.

EMPLOYMENT

The way we do business and explore employment opportunities should also change to be innovative and inclusive of all persons despite the level of education or age. Any factor that prevents people from embracing their differences should be removed from the curriculum, policies and practices. Unity among all people should become the norm.

This principle includes racism, which should be buried in the past and not resurrected at every opportunity where someone feels excluded.

These are some of the changes I am hoping to see in 2019. I am very optimistic that they can become reality, especially with the opportunity to help bring about change at the ballot box come next May. \mathbb{R}



Raven Benny is a member of QASA. He has been a C5, 6 and 7 quadriplegic since 2000. He is married with 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

A DRIVING AMBITIONS FIRST

history when he became the first candidate in the Western Province to obtain his driver's licence. He did so with the help of the Western Cape Driving Ambitions programme, launched by QASA earlier this year. ROLLING INSPIRATION caught up with JC to learn more.

Why did you approach Driving Ambitions?

I needed my driver's licence to give me the independence I've always wanted. It allows me to go where ever whenever I want to. I no longer have to rely on other people to drive me around. For example, I can now drive myself to the Sports Science Institute in Cape Town, where I exercise. And I can totally independent.

What was your experience with the lessons and your test?

It was absolutely amazing to learn with Driving Ambitions. I had a brilliant instructor, Theuns, and I learned everything I needed to pass in ten lessons. Mind-blowing! On the day of the test, I felt extremely nervous but concentrated on what I needed to do.

What advice do you have for other people who want to get their licence?

Don't hesitate. If you have the opportunity change your life forever and give you the independence you always wanted.

What are your plans now?

It means the world to me to have my licence and I have very big plans. I can now train for the handcycling event at the 2024 Paralympics without worrying about transport. I also plan to participate in the Cape Town Cycle Tour and the Outeniqua Wheelchair Challenge (OCC) in 2019. We wish JC the very best of luck and will be watching his progress with great interest.

YOUNGSTERS FIGHT POLLUTION

Happy Valley Day & Edu Centre is a private preschool that offers excellent professional care for little ones. The educators at the pre-school recently approached QASA to join its Bread Tags and Bottle Caps Collection project. The youngsters are on a mission to rid the area of pollution and to create a healthier and happier environment.

The youngsters visited the QASA office, where Thokozile explained the project and talked about the positive impact of collecting these items. The kids were spellbound and had a lot of questions! QASA hopes that this initiative will encourage members of our future generation to be responsible citizens



SOLOMON'S NEW WHEELS

Solomon recently approached QASA with a request for a small contribution towards a wheelchair. QASA did more than make a contribution; it donated a wheelchair to him. A very happy Solomon says: "I wish to express appreciation and gratitude for QASA's generous donation of my new Rollability MK2 wheelchair.

"QASA has made my life easier with a more userfriendly chair with detachable wheels that I can fold and put in my car. I hope this important work of delivering assistance



to those in need will continue to benefit others. This is a humanitarian effort."

QASA wishes Solomon all the best on his journeys!



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



THE SAB FOUNDATION SOCIAL INNOVATION AND DISABILITY EMPOWERMENT AWARDS RETURNED THIS YEAR TO SUPPORT AND HELP GROW PROGRAMMES AND COMPANIES THAT EMPOWER COMMUNITIES AND PEOPLE WITH DISABILITIES. MARISKA MORRIS ATTENDED THE AWARDS TO LEARN MORE

he 20 winners of the 2018 SAB Foundation Social Innovation and Disability Empowerment Awards were announced on October 11, 2018, in Johannesburg. The first-place winners took home more than R1 million each for their innovations and will enjoy further support from the SAB Foundation to ensure that their businesses grow.

"Through the awards, the SAB Foundation finds, supports and scales social innovations that demonstrate a sustainable business model while solving a critical social problem," explains Ntandokazi Nodada, SAB Foundation

Social Innovation Project Manager.

"To date, the Foundation has committed more than R75 million towards promoting social innovations and supported 163 businesses that address social issues and provide solutions for people with disabilities," she added.

The Disability Empowerment awards recognise innovations that will improve the lives of people with disabilities through assistive devices, training or employment. Under the Disability Empowerment programme, there were six winners. Three were awarded a Development Award of R300 000 each: Pathfinder Smartcane, an artificialintelligence driven hand-held device; Hamba Nathi, an affordable ride-sharing service; and the Walking with Brandon Foundation, which runs advanced neurologicalrehabilitation programmes.

Of the remaining three candidates, third place, with prize money of R600 000, went to Voice Activated Quality of Life (VoQoL), a voice-activated tech device that gives quadriplegic and paraplegic individuals the ability to control elements in their home environments - such as lights, TVs, radios and air conditioners - using verbal commands. They can also access information online such as weather forecasts and news.

Steps Clubfoot Care received the second-place prize of R800 000. The non-profit organisation works with children born with clubfoot - a common birth defect that affects about 2 000 children in South Africa annually. Steps Clubfoot Care was also awarded the Audience Choice award of R100 000.

First place, of R1,2 million, was awarded to Clothes to Good, an enterprise that provides sustainable jobs and micro-business opportunities for people with disabilities and their families through a clothing-recycling programme. Clothing is sourced from school and staff donations, then sorted, washed, repaired or sold in bundles to various beneficiaries.

These can be resold at a substantial profit to enhance the seller's financial freedom, while reducing the waste of an average 24 000 tonnes of clothing that gets thrown away each year.

Jesse Naidoo, the founder, notes: "It all started with a brand-new pair of golf shoes that I received and didn't need. I asked my caddie, Lucky, if he'd like a new pair. The caddie master, on seeing the new golf shoes, said that he wanted them and the two got into an argument.

"Lucky was eventually fired from the club. What I thought was a nice gesture to a man who had served me for more than ten years ended up a disaster. At the same time Lucky's wife, Daisy, also lost her job as a seamstress because of the failing clothing-manufacturing industry in South Africa. Both were jobless, with three boys to support!"

While reading The Fortune at the Bottom of the Pyramid by CK Prahalad (and with some encouragement from his wife, who wanted a walk-in-wardrobe), Jesse realised that their old clothes could be resold by Lucky and Daisy. Of course, that wouldn't be enough old clothes.

"I approached then Crawford Pretoria principal lan McLeod (who passed away in 2017) to run a second-hand



clothing programme. Our commitment was to buy the clothes from the school to raise money for the Irene Farm School Library, which was under construction. Ian agreed. Little did we know that we would recycle just short of four tonnes of clothes within 30 days," Jesse says.

Needing somewhere to store all the donated clothes, Jesse rented the house of a neighbour who had emigrated and, in 2011, Clothes to Good was born. Today, the organisation has a number of clothing-exchange programmes, including Clothes to Cash; Clothes to Trees, in which people can contribute to the planting of trees; Clothes to Wheels, where people can subsidise a wheelchair; Clothes to Food, which packs meals in conjunction with Rise Against Hunger; and Clothes to Play, which assists with early childhood development kits made from recycled material.

Jesse was inspired to introduce more programmes after meeting Shona McDonald, founder of Shonaguip. He says: "Shona opened my eyes to the plight of people with disabilities and showed me how they are often trapped in poverty. She convinced me of the need to provide meaningful work and business opportunities for people with disabilities."

At the invitation of Tammy Greyling, co-founder of Pathways Pretoria school for children and adults with disabilities, the Clothes to Good recycling facility was run from the school. The adults were given the opportunity to test and improve their work-readiness skills at the facility.

"We discovered that within three months of integrating people with disabilities, the productivity of our so-called able-bodied staff increased on average by 20 percent. Tammy now leads our non-profit organisation Life Link 24/7 Cares," says Jesse, "and is responsible for the inclusion of people with disabilities in our eco system."

Clothes to Good runs other initiatives, including assisting people with disabilities and their employers with the employment process. The life-skills and employment

ABOVE: Walking with Brandon Foundation, Hamba Nathi and Pathfinder Smartcane all received a Development Award of R300 000 at the 2018 SAB Foundation Social Innovation and Disability Empowerment Awards.

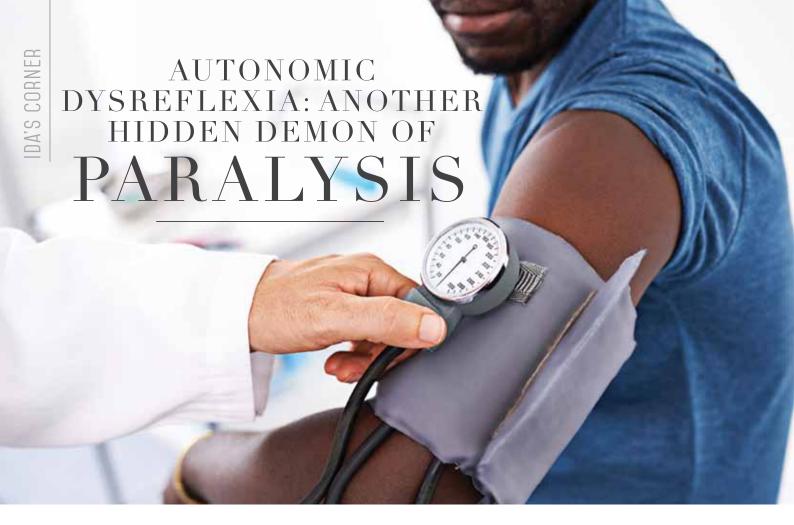
RIGHT: From the top: Clothes to Goods was awarded the first prize of R1,2 million at the 2018 SAB Foundation Social Innovation and Disability Empowerment Awards for their clothing recycling programmes that empower communities and people with disabilities. Steps Clubfoot Care was awarded second place and R800 000. The organisation also won the Audience Choice Award worth R100 000. VoQoL came in third with R600 000.

training at Clothes to Good facility will launch in 2019.

In addition to the financial benefit, winning the SAB Foundation Award has a special, personal meaning for its members. "It reinforces what Tammy and I believe: that South Africans care about the employment of people with disabilities; the empowerment of mothers of children with disabilities; and our environment," says Jesse. "We are excited that people with disabilities will be making a meaningful contribution to our country by recycling clothes and making toys for low-resourced early childhood development centres."

Learn more about the Clothes to Goods programmes by visiting the website at www.c2cx.co.za or contacting Jesse directly at jesse@c2cx.co.za or on 012 663 4168. Keep an eye on the fortnightly ROLLING INSPIRATION newsletter and the 2019 issues to learn more about how you can enter the SAB Foundation Social Innovation and Disability Empowerment Awards. R





CAREGIVERS USUALLY HAVE TIME TO CONSULT SOMEONE IF THEY ARE UNSURE HOW TO PERFORM SOME OF THEIR DUTIES. WITH AUTONOMIC DYSREFLEXIA, TIME IS VERY LIMITED AND IMMEDIATE ACTION IS NEEDED TO PREVENT SERIOUS CONSEQUENCES

utonomic Dysreflexia (AD) can cause strokes, heart attacks and even death. Probably the most troubling fact is that most doctors don't know that it exists. If they've heard of it, some just don't believe it's a real condition. A caregiver needs to be very aware of AD and be

confident enough to assist or advise bystanders and medical professionals if it happens to the person for whom they care or someone else.

You need to know who gets AD; the symptoms that occur during AD; how to prevent it; and what to do until medical assistance arrives. Most importantly, you need to know the naughty tricks that an individual with an SCI can pull to bring on AD. It should always be at the forefront of your mind.

Only people with an SCI of the sixth thoracic vertebra and higher can experience AD as it relates to damage to the autonomic nervous system (ANS), which regulates the functions of organs, heart and blood vessels.

It has two components that work together with largely opposite functions. The sympathetic system is responsible for quick responses, whereas the parasympathetic system is responsible for organ maintenance. With an SCI, the parasympathetic component (which comes directly from the brain) largely survives, while the sympathetic system can be damaged.

The extent of sympathetic nerve damage depends on the level of the SCI. It is either non-existent or only functions partially or erratically. The interactive functionality of the

two components of ANS is disrupted, often with dramatic consequences for the organs.

SYMPTOMS

The disrupted interplay between the sympathetic and parasympathetic nervous system can play havoc with blood pressure. It can push it up very high, with the extreme risk of causing a stroke, a heart attack or other complications.

If an AD attack is suspected, look out for complaints of a pounding headache and nausea; a flushed, red face; red blotches on the skin; sweating above the level of the SCI; and a cold clammy skin with goose bumps.

TRIGGERS

As the caregiver, you need to spot the triggers, and a doctor with knowledge of AD should be consulted. Many of the causes of spastic jerks or spasms are also potential causes of AD. Check for the following:

- An overfull bladder or rectum;
- Pressure sores, haemorrhoids (piles), ingrown toenails or any injury, burn wound (including sunburn), sprain or fracture below the level of the SCI;
- Suctioning of the upper airways.

Intercourse can also cause AD. If no obvious cause is identified, consult a doctor, as gallstones, kidney stones, renal tract infections and other hidden problems could also cause AD. Keep a written checklist on you at all times.

PREVENTION

A comprehensive care programme will go a long way to preventing or limiting the incidence of AD, and includes:

- · Good bowel and bladder care, including meticulous urinary catheter hygiene;
- Pressure relief to prevent pressure sores;
- Caution with water temperature during showers or bathing;
- · Avoid sunburn and use sunscreens;
- Maintain a reasonable body temperature by avoiding environments that are too hot or cold, and dressing appropriately;
- Frequently check the entire body for injuries, burns and even fractures.

66 Autonomic Dysreflexia (AD) can cause strokes, heart attacks and even death.

RESPONSE

If the person suffers an AD attack, do the following:

- Sit the patient up to help lower the blood pressure;
- · Loosen all tight clothing;
- Check for all the things that trigger AD (which is why a checklist in your wallet or pocket can be
- · Call a doctor with AD knowledge.

AD-RELATED SHENANIGANS

Athletes with an SCI are just as competitive as any other athletes, but have lower blood pressure and compromised blood flow regulation, which affects their performance, as they tire easily. In order to boost their performance, athletes with SCI might increase their blood pressure with actions that could also cause AD.

They might tie down catheters, so that their bladders become overfull, or they injure themselves (like breaking their big toe). My personal favourite in ridiculous acts is twisting and sitting on their own testicles. As Ouboet from Orkney Snork Nie used to say: "Ook maak lekker stupid." R

FACING OFF WITH AD

Anthony Ghillino shares his own experience with autonomic dysreflexia.

The most concerning aspect of AD is that there seems to be a lack of knowledge among medical practitioners in general hospitals. I've had a few hair-raising encounters.

On one occasion, I called an ambulance as I was feeling absolutely terrible due to AD. The medical personnel in the emergency room took my blood pressure. They thought the machine was faulty as my blood pressure was so high. They tested again on a different machine and stared in disbelief when they got the same reading.

They argued a third time that it could not be right and put the blood pressure machine on my leg despite the card I gave them with information on AD from QASA that I keep in my wallet. They got the same reading.

It is also extremely frustrating trying to convince the doctors that you're having an AD episode and explaining to staff how to make you comfortable. Unfortunately, they always feel they know better and often make the episode worse

For example, I try to avoid spasms during an AD episode, as spams seem to trigger a spike in AD. When people touch and work with me during an episode, it triggers spasms. Hospital staff might reposition a pillow under my leg, which will trigger a spasm and, in turn, trigger a spike in AD.

It's important to listen to your body and learn how your body reacts during an episode. When symptoms start (in my case, sweating and goose bumps), try to find the cause.

I'll make sure my urine bag is not full and check my catheter for any obstructions. Thereafter, I'll check for pressure on any part of my body. In my case, it is normally my foot or hip that is not positioned correctly. If all appears fine, I might change my position and see if that helps. I will also check my clothing for any folds.

My episodes are normally triggered by a bladder or catheter issue. I'll try to resolve it as quickly as possible. The longer the episode lasts, the worse the symptoms become. The headaches are literally indescribable. The pain is unbearable. It feels like someone is smashing me time my heart beats.

I know a number of quadriplegics who prefer to stay at home during an episode of AD rather than go to hospital, as their regular caregivers are aware of AD and how to respond. They would rather take the risk and stay at home than go to a hospital and have to deal with a lack of information. It is a dangerous situation.



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



Gautrain strives for accessibility!

Efforts are constantly being made by the Gautrain Management Agency to ensure that the Gautrain service is accessible and convenient for everyone. Gautrain's stations, trains, parking facilities, minibuses and buses are designed to provide easy access for persons with physical disabilities.

The trains allow for easy wheelchair access and have designated areas available for the wheelchair to be comfortably parked for the duration of the journey. Each station is also equipped for easy wheelchair access and every second bus is equipped with a ramp and bay for wheelchair access. Gautrain's bus drivers are trained and able to assist passengers accessing with wheelchairs.

The services also accommodate those with visual and hearing disabilities through the use of colour contrasts, clear signage, high-quality lighting and non-reflective surfaces. Announcements are made in audio as well as on clearly visible information boards. Where applicable, tactile and audible guidance and warning systems are also in place.

Gautrain does not discriminate against anyone. Persons who rely on working dogs for assistance are most welcome to use the service along with their qualified working dog. The S A Guide-Dogs Association train Guide, Service and Autism Support Dogs and regularly frequent the Gautrain services. The Gautrain staff have been trained to identify a working dog (via its branded jacket or harness) and are able to assist where necessary.

The Gautrain system is Gauteng's rapid rail link and connects Johannesburg, Tshwane and OR Tambo International Airport. It offers two services: a commuter north-south link between Johannesburg and Tshwane (Park, Rosebank, Sandton, Midrand, Centurion, Pretoria Central and Hatfield), and a dedicated airport link between Sandton and OR Tambo International Airport (east-west link, with stops at Marlboro and Rhodesfield stations).

There is a train every 10-minutes during peak times and every 20-minutes during off-peak times. On weekends and public holidays, trains depart at 30-minute intervals.

Gautrain's train, bus and parking services are all fully integrated and may be used separately or jointly by transferring from one to another by means of a Gautrain card.

For service information visit www.gautrain.co.za.









www.gautrain.co.za



IF YOU ARE LOOKING FOR A BEAUTIFUL "JUST OFF THE BEATEN PATH" PLACE TO HOLIDAY, THEN BRENTON-ON-SEA, A SMALL SEASIDE VILLAGE IN KNYSNA, IS THE SECRET THAT I'M SHARING WITH YOU



ituated on the cliffs above the beach, this little hamlet consists mainly of private homes used as permanent and holiday residences. However, there are also some self-catering establishments and guesthouses. I stayed in the wheelchair-accessible unit at the selfcatering Brenton-On-Sea Cottages. It has

log cabins that sleep six and two.

The larger unit has a ground floor with a lounge, kitchen, two bedrooms and bathrooms, and an upstairs loft bedroom, which has a shower room. The smaller, twoperson units are not accessible as they are reached via sets of steps. The accessible six-sleeper unit, number 18, is on Agapanthas Avenue and offers wonderful views of the sea.

If you leave your windows open at night, you can hear the waves crashing on the beach. The main bedroom has windows that face the sea. There is a double bed, but the space around the bed is only just accessible. As there are no headboards, it is possible to move the bed to one side to accommodate a larger wheelchair.

The cupboard has double rail hooks so that the rail can be moved to the lower position. There is a safe on the lower shelf, but it is quite small and doesn't hold a laptop. The bedside lights are mounted on the wall and are too high to reach when you're lying down. The second bedroom has twin beds.

The downstairs accessible bathroom has a step-free shower with a very small fold-down shower seat and rails that are not placed in useful spots. The toilet and basin, however, are at the correct heights. There is also a large mirrored cupboard that is accessible for storing toiletries.

The kitchen has been reduced to accommodate the larger ablution area, so entrance into it is limited. All essential crockery and cutlery are placed in the lower cupboards for easy access; however, the microwave is positioned on a shelf. At the front of the cottage is a braai area with tables and chairs, but getting to it requires a bit of manoeuvring over the grass.

The staff at the resort are fantastic and extremely helpful. They have agreed to adjust the unit so that it is more accessible. Although this is a self-catering property, a starter pack of tea and coffee is given to guests on arrival and free WiFi is offered.

The building housing the reception also has a branch of the local superette and a lovely restaurant and pub called the Nautical South, which offers room-service facilities to all the chalets. The best part of this service is that there is no extra charge! So, if you feel like a beer or a snack, just order and they will deliver it to your chalet.

The Blue Flag beach is not wheelchair accessible, but there is a lovely grassed area with a ramp access near the car park for the beach, where you can sit and watch



the whales frolic in the sea beyond! Nature plays a big role in this area and it is recovering from recent fires. I was lucky to visit when the spring flowers and heathers were in bloom and the grassy areas alongside the roads were full of colour.

There are amazing nature walks in the area, including a 4,5-km walk to Buffalo Bay – another lovely area with a spectacular caravan park right on the edge of the sea! Knysna, a scenic 16-km drive from Brenton-on-Sea, boasts more shops, restaurants – great for a night out.

This three-star property is rated as the Best Value for your Money and is definitely on my top ratings list for a good accessible restful holiday!

Happy travels... R



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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RESPECT THE SIGN

ROLLING INSPIRATION editor Charleen Clarke recently witnessed an incident where a woman with a hearing impairment chased a young girl off a priority seat reserved for people with mobility impairments, causing a bit of a scene.

"I could see that the young girl didn't realise that she had been sitting in the priority seat. She was sweet and innocent and ended up bursting into tears," says Charleen. To ascertain what the rules are, Charleen checked with QASA CEO Ari Seirlis, who said: "A priority seat is not designated for a person who has a hearing impairment or is deaf. It is for someone with a mobility impairment."

While people without mobility impairments need to respect priority seating, it is also important to remain calm in these situations and ask them politely to move.





ABOVE: Kgothatso (KG) Montjane is a power house in wheelchair tennis. Here she is concentrating just before serving during practice. Catch our interview with her in 2019

JD SEBENZA PLACES QUADRIPLEGICS IN LEARNERSHIPS

JD Sebenza successfully placed nine quadriplegics in CCTV off-site monitoring learnerships at a blue-chip company, thus giving them an empowered employment opportunity. JD Sebenza exclusively employs people with disabilities in an effort to improve their lives while keeping people safe.

Every candidate is taken through a stringent aptitude and training programme to determine whether they are right for the job. As the "leading South African remote off-site monitoring security company", it puts an emphasis on valuable job creation for people with disabilities.

Remote off-site monitoring entails the use of monitoring staff, resources and equipment dedicated to monitoring the client's property, personnel and procedures. JD Sebenza has structured its company and service offerings to maximise B-BBEE benefits for its clients.

Clients can obtain maximum B-BBEE Procurement points by procuring from a 51 percent black-owned company; obtain additional B-BBEE procurement points by procuring from a black-owned exempted micro enterprise; obtain B-BBEE Skills Development points through the funding of learnerships at JD Sebenza; and obtain Supplier or Enterprise Development points through the development of the company's training and care facilities for employees with disabilities.

To contact JD Sebenza, phone Wayne Biljoen at 082 321 6318 or email wayne@jdsebenza.co.za.



ABOVE: After his own near-permanent spinal cord injury, Julian Paterson was inspired to participate in the 2018 Kalahari Augrabies Extreme Marathon (KAEM) in support of QASA and people with SCIs. You can read more about him on page 31.



ACCESSIBLE TRANSPORT, MUCH LIKE A MOBILITY AID, HELPS PEOPLE WITH DISABILITIES TO BE MORE INDEPENDENT, ACCESS EMPLOYMENT OPPORTUNITIES AND PARTICIPATE IN SOCIETY. ROLLING INSPIRATION REPORTS



ew know better than Des Harmse that, with an adapted vehicle and driver's licence, you can experience even more independence. Des is a driver trainer at Driving Ambitions – a programme run by QASA to assist people with mobility impairments to obtain their driver's licence. He has been teaching

for eight years and says: "I have heard some horror stories from some of my students who used taxis and buses. One student told me that taxi drivers simply ignored them as they waited at the roadside or charged double as stopping wastes time and their mobility aid takes up space that could be filled by another paying commuter. Another person said that they were treated as if they had a disease. People would not sit next to them for fear they might catch something."

Even the formal public transport systems in South Africa, like buses and trains, still fail to offer a quality service to commuters with disabilities. Would-be passengers often have to wait a long time for a bus or train that can accommodate them; and they still have to deal with prejudice.

Johan Cillie, project engineer at Easy Drive, which carries out vehicle conversions, says: "When you compare the situation in South Africa with the trend overseas, you realise how far behind we really are. At the end of the day, it's all about independence and not having to rely on somebody else."

WHO CAN DRIVE?

A person with a disability who wishes to drive should

consult with an occupational therapist who is qualified to perform a driving assessment. Des says: "Quadriplegics and paraplegics who have been assessed and are fit to drive can be taught to drive with very few problems.

"An occupational therapist helps with the assessment of people with neurological impairments or quadriplegics." The driver's ability to operate the controls, reaction time, cognitive ability and visual acuity all need to be assessed.

BUYING A CAR

People with disabilities who purchase imported vehicles that require adaptation can have the import duties relieved. An application form needs to be completed and approved by the National Council for Persons with Physical Disabilities in South Africa (NCPPDSA), after which it needs to be approved by SARS. You can contact the NCPPDSA on 011 452 2774 or make an appointment with a tax consultant for more information.

When choosing a vehicle, keep in mind that the vehicle can be fitted with suitable hand controls and that drive-from-wheelchair, although expensive, is an option. "If a vehicle is going to be adapted, the size of the doors and the height of the seat will have an influence on how easily the individual can transfer from their wheelchair into the car," says Cillie.

Almost all vehicles can be adapted. Cillie adds: "The most important thing is to work with recognised service providers and builders who have your safety and best interests at heart." [?]



OVER THE YEARS MANY METHODS HAVE BEEN USED IN AN ATTEMPT TO RESTORE FUNCTION IN A PERSON WHO'S SUFFERED AN SCI. NOT ALL HAVE BEEN EFFECTIVE, BUT WIRELESS TECHNOLOGY MIGHT BE THE KEY



n SCI results in permanent and usually irreversible damage to the spinal cord. This has catastrophic neurological consequences, including paralysis at varying levels (paraplegia to quadraplegia), loss of bladder and bowel control, alteration of sexual function, pain,

spasticity, and loss of normal sensation.

Not to mention the psychological strain placed on the individual and their family post-injury. Scientists and researchers have always looked into the possibility of reversing the damage done in the acute injury phase and possible ways of repairing the damaged spinal cord.

Back in the 1980s, the focus was on preventing secondary damage by reducing any compression of the cord with surgery or early reductions of dislocations. (This is still an important consideration.)

At one time it was believed that very high doses of steroids altered the way the cord responded to trauma. This was believed to possibly reduce secondary damage through swelling. This has now been disproved and these large doses of steroids are no longer used in the acute injury phase. More recently, in the late 1990s, the use of stem cells from non-human sources was believed to be beneficial.

Stem cells in the body can divide and become differentiated. When an organism grows, stem cells specialise and take specific functions. Initially stem cell therapy was offered as a wonder cure for SCIs, and many people around the world spent a lot of money on stem cell transplants from animals such as sharks.

Unfortunately, these treatments have shown to have had

no value and could be potentially harmful. Now, stem cells taken from the patient's own body (olfactory ensheathing cells or umbilical cord cells) have been used to try and repair the spinal cord at the site of the injury.

Although animal models have shown some promise, there is no hard evidence that it is safe or that it can reverse serious injuries. There are, however, still people who attempt these therapies.

> 66 Wireless devices can bridge the gap at the damaged cord.

More recently, funds have been made available through various research foundations to look at alternatives to stem cells (although research in stem cells continues).

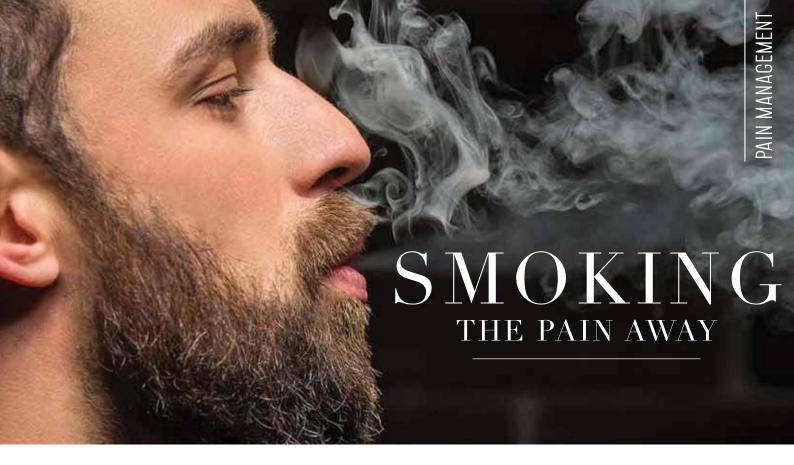
For example, it has been found that wireless devices can bridge the gap at the damaged cord, allowing the transfer of impulses through the device.

Research on animals and humans involving implanted wireless devices has given some hope: in some case studies in the US patients who have had these wireless devices implanted into the injured area have had some function return in a once-paralysed limb.

This research is still at the early stages, but it is hoped that with the rapidly developing age of wireless technology, these devices will offer a better chance at some recovery and restoration of quality of life in SCI than stem cells. $\mathbb R$



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



MARIJUANA IS SAID TO BE A NATURAL PAINKILLER. WITH THE RECENT LEGALISATION OF MARIJUANA FOR MEDICAL USE IN SOUTH AFRICA, WE SET OUT TO LEARN THE TRUTH, THE BENEFITS AND THE PERILS FOR PEOPLE WITH SCI. ROLLING INSPIRATION REPORTS

dvocates promoting the medicinal qualities of cannabis or marijuana (informally known as dagga or weed) believe that it could provide a natural, less harmful alternative to potentially addictive opioid painkillers.

According to the National Centre for Biotechnology Information, more than 120 phytocannabinoids (cannabinoids that occur naturally in the cannabis plant) have been isolated from cannabis, including tetrahydrocannabinol (THC) and cannabidiol (CBD).

THC is responsible for the psychoactive constituents of paranoia and hallucinations that some people experience while under the influence of marijuana. CBD, considered by many to be one of the most medically beneficial chemical compounds found in cannabis, has a calming effect on the user and relieves pain.

Researchers by numerous organisations suggest that cannabis may provide relief for a variety of ailments, including neuropathy, muscle spasticity, nerve pain and inflammation.

Organisations such as the Cannabis Development Council of South Africa (CDCSA) hope that clarification regarding the legal use of cannabis will encourage more people to consider natural alternatives to what it calls "toxic medication". Addiction to traditional painkillers is common.

"In therapeutic doses, the side effects of medical marijuana are limited. We are using this time to showcase how people can be treated with an equally effective natural remedy and free themselves from negative side effects. We want people to get up in the morning feeling fresh and ready to take on the day," says Krithi Thaver, founder of Canna Culture and chair of the KwaZulu-

Natal branch of the CDCSA.

He suggests that people who want to try medical marijuana consult a doctor to ensure that the appropriate product is prescribed and that there are no contraindications or interactions with any other medication.

South African law makes provision for traditional healers to cultivate and prescribe cannabis-based medicine to patients. This is what initiated the relationship between Canna Culture and traditional healers.

clarification regarding the legal use of cannabis will encourage more people to consider natural alternatives.

Thaver points out: "It is important to note that these are not witch doctors, but healers experienced in plant-based medicine. We have become part of the growing process and help them select and produce cannabis that offers a full spectrum of compounds to treat a wide variety of ailments.

"After cultivation and further processing into oils, and other products, samples are sent to Pretoria for testing and assured fit for human consumption."

Very little research has been conducted into the long-term effects of marijuana on an individual, and anyone considering its use for medical purposes should consult medical professionals and buy the substance from a reputable source. $\boxed{\mathbb{R}}$



MOBILITY FOR ALL CAMPAIGN GETS GOING

AS PART OF ITS GLOBAL "START YOUR IMPOSSIBLE CAMPAIGN", WHICH ROLLED OUT LATE LAST YEAR IN 21 COUNTRIES, TOYOTA HAS LAUNCHED ITS MOBILITY FOR ALL WEBSITE

n anticipation of the Tokyo 2020 Olympics and Paralympic Games, Toyota South Africa Motors has launched a new website under the Media24 umbrella entitled Mobility for All to help drive its "Start your Impossible" campaign. It reflects the Olympic and Paralympic spirit of encouragement, challenge and progress, a spirit that is

aligned with Toyota's global vision. Since Toyota entered the global partnership with

International Olympic and Paralympic committees many interesting projects worldwide have begun. In fact, Toyota's philosophy of "Mobility for All" aims to transform the way people move throughout the world and create solutions to the mobility barriers that limit human potential - from optimised public transportation systems for large cities to individual solutions for people with physical impairments.

For Toyota, mobility goes far beyond cars. It's about overcoming challenges and making dreams come true. Nowhere is this more apparent than in the official "Start your Impossible" campaign advertisement entitled The Spot, which is featured on the website.

Directed by Australian director John Hillcoat, it spotlights 100 people in every stage of life, from a toddler and a Paralympic fencer to an elderly woman getting assistance from a Toyota "human support robot".

Bringing the campaign closer to home, Toyota South Africa shares some insightful, inspirational and heartwarming stories from locals who explain how they've overcome obstacles, while achieving excellence in their personal and professional lives. The stories are diverse and

cover a broad spectrum of topics, from sports to personal accomplishments.

One needs to look no further than Julia Albu, an 80-year-old granny who embarked on an epic journey from Cape Town to London in her 20-year old Toyota Conquest. Readers will also be encouraged to share their "Start your impossible" stories and in the process put themselves in line to win awesome prizes. More details can be found on the website. Under the sports banner, the website features Toyota Free State Cheetahs' and now also Springbok player, Ox Nché.

The website also highlights some of Toyota South Africa's top Corporate Social Responsibility projects. There are insightful and motivational video interviews where three organisations and their project managers share how they started their impossible, and demonstrate the values of humility, hard work and sheer grit.

"As a worldwide partner of the Olympics and the Paralympics, Toyota's aim is to encourage the formation of a peaceful society without discrimination through sports and a commitment to creating a sustainable society through mobility.

"Toyota's values of continuous improvement and respect for people are shared by the Olympic Games, which brings together the entire world in friendship and solidarity to celebrate the highest realisation of human potential. This is a message we certainly want to spread," says Andrew Kirby, president and CEO of Toyota South Africa Motors.

You can visit the site at mobilityforall.news24.com or go to www.toyota.co.za and click on the "Mobility for All"



GETUSED TO

SEEINGME

JE HERE

START YOUR IMPOSSIBLE

TOYOTA



Workswide



WHEN WE ARE FREE TO MOVE, ANYTHING IS POSSIBLE.

52017 Javeta Mater Composition, All matrix reserves



NEW YEAR'S RESOLUTIONS FOR THE DISABILITY COMMUNITY

OVER THE DECADES, MASSIVE STRIDES HAVE BEEN MADE IN ASSISTIVE DEVICES, EMPLOYMENT AND THE RIGHTS OF PEOPLE WITH DISABILITIES. HOWEVER, THERE IS ROOM FOR IMPROVEMENT. MARISKA MORRIS CHATS TO THE ROLLING INSPIRATION CONTRIBUTORS AND TEAM TO HEAR THEIR VIEWS

his year saw several encouraging developments. In the United Kingdom, for example, activists pushed for accessible bathrooms with changing tables; the world's lightest wheelchair, made from graphene, was designed by Swiss firm Küschall; and NASA engineer Salim Nasser introduced

a new wheel that reduces shoulder injuries among manual wheelchair users.

Locally, QASA launched its Driving Ambitions programme in Cape Town, while wheelchair tennis player Kgothatso Montjane became the first black South African female tennis player to compete at the Wimbledon Championship.

However, there is still much that needs to be improved. For QASA CEO Ari Seirlis, the biggest stride in improving the lives of people with disabilities was the publication of the White Paper on the rights of people with disabilities.

"The challenge is to ensure that all people with disabilities understand the significance of this document. They are slowly starting to understand that they have rights with legal support mechanisms," Seirlis says. He argues that it is important for government to support the legislation with a sufficient budget.

The Department of Health, for example, needs to provide people with disabilities with the necessary assistive devices and quality, affordable healthcare, while the Department of Transport needs to ensure there is sufficient, accessible transport available.

Leon Fleiser, sports contributor for ROLLING INSPIRATION, believes budget is also a challenge for the sporting community. Athletes with disabilities are included in more mainstream sports, but require more funding.

He notes: "All sporting codes need to embrace this principle of including people with disabilities and more funding is needed for the development and equipment for adaptive sports."

ROLLING INSPIRATION employment contributor Rustim Ariefdien believes that the Employment Equity and Skills Development Act is making a difference, but that there needs to be a drastic uptake in employment to achieve the 7,5 percent target.

"Skills development opportunities have increased tremendously over the past year. As BBBEE becomes more stringent, companies are trying to obtain additional points that include disability," he explains.

Learnerships offered through the BBBEE system offer people with disabilities the opportunity to learn valuable skills and earn a stipend. Learnerships offered through QASA has even led to permanent employment for some members.

Ariefdien explains: "According to the latest report from the Commission, only a small percent of the formal working population is persons with disabilities. A target of 7,5 percent should be achieved. A greater uptake in learnerships would have a significant impact on disability employment."

He adds that the Department of Labour has started a programme to provide 12-month skills interventions for 3,45 million people over the next three years, which should include



over 330 000 learners with disabilities, theoretically.

Ariefdien has set his own ambitious goals for 2019: "I hope to catalyse at least 10 000 learnerships for persons with disabilities in 2019. To date, I have only achieved about 500 on average – a personal very, very tall order!"

Deborah Rudman, ROLLING INSPIRATION's copy editor, says: "From what I've seen in South Africa over the past 13 years, discernible improvements have been made in the approach towards, and provision made for, people with disabilities: access to shops, banks, transport, theatres, toilets and parking areas has improved. Legislative tools have been introduced to combat discrimination in employment.

"People without disabilities, though, appear to remain largely unaware of the challenges faced by those with disabilities, or if they are aware, the initial reaction often seems to be to turn away. This is a mind-set that can be changed – like anything, you need to be exposed to something before you can understand it or put yourself in that person's shoes.

"How about a TV channel? There are so many already, dedicated to numerous interests - cooking, home makeovers, fashion, entertainment, soccer, celebs famous for nothing more than, well, being famous. Think how much we could learn from watching a regular channel featuring people with disabilities from all walks of life, vocations and interests, from sport and careers

to general living!

"Doing things like other people - with the same aspirations, achievements and hopes, with the same sense of fun ... And the title of the programme? 'A World of Ability'."

Editor of ROLLING INSPIRATION, Charleen Clarke notes: "In South Africa, I believe that we have a long way to go if we want to make massive changes to the lives of people with disabilities. First and foremost, I would like to see a massive – and tangible – change in the mindsets of big companies and their approach to people with disabilities.

"I would encourage our readers to take a look at the pages of ROLLING INSPIRATION. How many big companies do you see that are supporting this magazine?"

The same can be said for other initiatives aimed at supporting people with disabilities. Clarke urges companies to spend less on expensive team-building exercises and invest more in people with disabilities.

"They could very easily make a small investment in ROLLING INSPIRATION. In so doing, they would be investing in the lives of wheelchair users and people with disabilities. ROLLING INSPIRATION is a lifeline to many wheelchair users. It's absolutely invaluable! I know this thanks to the regular messages I receive from our readers. I just wish that the corporate fat cats could share my sentiments," Clarke concludes.

As the lifestyle publication for people with mobility impairments in South Africa, we aim to continue to publish inspirational and informative articles to help our readers live a full life in an inaccessible society. You can assist us with submitting inspirational stories, suggestions or commentary to mariska@charmont.co.za. Let's make 2019 a year for disability awareness! $\overline{\mathbb{A}}$



0860 23 66 24 . www.cemobility.co.za

TEAM REHAB

REHABILITATION IS A TEAM EFFORT AND PROSTHETIC REHABILITATION IS NO DIFFERENT. IT ALL STARTS THE MOMENT THE DECISION IS MADE TO AMPUTATE A LIMB



mputation is life-changing and the need to learn how to navigate this new, changed life is of cardinal importance. Adapting to life as an amputee has many facets, each with very specific goals and dedicated professionals trained to help you reach these goals. The prosthetic process

essentially starts with the surgeon.

Nursing staff help nurse you back to health and prepare you for the rehabilitation process. Specialised rehabilitation centres have integrated therapy programmes



ABOVE: During prosthetic training the amputee is fitted with the prosthesis and participates in several physical and occupational therapy-training sessions.

and professionals who focus on patient rehabilitation and excellence. An amputee should not feel rushed to get up and walk as soon as possible.

Key aspects of rehabilitation must be carefully selected and structured to ensure the amputee has the very best chance of continuing with life as normally as possible. It is important to take the time to ensure every step of the rehabilitation process is done properly.

A new amputee will encounter many different professionals during their stay in a rehabilitation facility physiotherapists, occupational therapists, social workers, psychologists, medical doctors with a special interest in physical rehabilitation medicine, and prosthetists.

Pre-prosthetic therapy properly prepares the amputee for prosthetic fitting and the use of a prosthesis. Communication between all the members of the multidisciplinary team is essential.

Regular (daily) check-ups with both the prosthetist and other therapists ensure the treatment protocol is followed

During the prosthetic fitting process, the therapists and doctors constantly communicate with the prosthetist and the patient to ensure all the needs of the patient are met. During prosthetic training the amputee is fitted with the prosthesis and participates in several physical and occupational therapy-training sessions.

During these sessions adjustments are constantly made to achieve optimal socket comfort and patient function. The team works together to improve the quality of life and functional abilities of the patient.

I have often met amputees for whom certain aspects of their rehabilitation process were neglected in some way or the other. What is dismaying about this scenario is that complications occur that could have been avoided with the appropriate rehabilitation protocol.

Today, short cuts seem often to be the rule rather than the exception. If some procedures can be done faster and more cost-effectively, all parties benefit. However, if it translates into wasting money and gambling with the quality of someone's life, short cuts offer no solution at all... R



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

DREAMING OF TRUE RAINBOW-NATION CLASSROOMS

INCLUSIVE EDUCATION WAS ON THE AGENDA FOR THE DELEGATES OF THE ANNUAL DISABILITY RIGHTS CONFERENCE HELD IN PRETORIA IN NOVEMBER. MARISKA MORRIS ATTENDED

he Centre for Human Rights, located within the Faculty of Law at the University of Pretoria, in partnership with Open Society Foundation, hosted its annual Disability Rights Conference from November 6 to 7 at the Saint George Hotel in Pretoria. The event brings together various specialists,

researchers and organisations to discuss the rights of people with disabilities.

This year, the focus was on providing quality, inclusive education to children with disabilities. In his welcoming address, André Boraine, Dean of the Faculty of Law at the University of Pretoria, noted: "Education is seen as a fundamental human right. Barriers to education often lead to barriers to economic opportunity."

Frans Viljoen, director of the Centre for Human Rights, said: "People talk about inclusive education, but what does it mean? The challenges are in the details." This sentiment was echoed by many of the speakers, who pointed to some practical barriers that prevent inclusive education.

Inclusive education would, theoretically, allow children with disabilities to attend mainstream schools in the same class as their peers without physical disabilities. The concept would remove the need for special schools or classes.

CBM education advisor and lecturer at the University of the Western Cape Emma McKinney discussed some of the challenges of implementing inclusive education in southern Africa.

Barriers take the form not only of getting into school, but also remaining in school. A barrier could be the stigma attached to children with disabilities, the lack of appropriate assistive devices and infrastructure, or a lack of access to water or food," she said.

She argued that it was important for the entire staff at a school to be trained in assisting children with disabilities rather than using "cascade training" (train the trainer), which is often the case. It is also important to educate the parents on the value of educating their child with a disability and working with the elders, who are often gatekeepers in their communities.

Fatma Wangare, from Inclusive Africa, suggested that the curriculum and standardised testing models should be adapted. As she noted: "Not all children learn the same. At the moment, children with disabilities are told not to attend examinations or are not marked."

Even in areas where children attend schools for free, Wangare said that parents often struggle to afford the additional costs of stationery, uniforms or even transport. Inclusive education would need to provide the children with services to overcome these barriers.

Els Heijnen, former senior education advisor at Save the Children Uganda, noted that inclusive education should not be a separate programme, but should be an integral part of a country's educational policies.

Allan Tumbo and Omolara Akintoye, researcher advisers at the South African Human Rights Commission, shared their findings on how South Africa could design and implement an Afrocentric Universal Design for Learning (UDL) system.



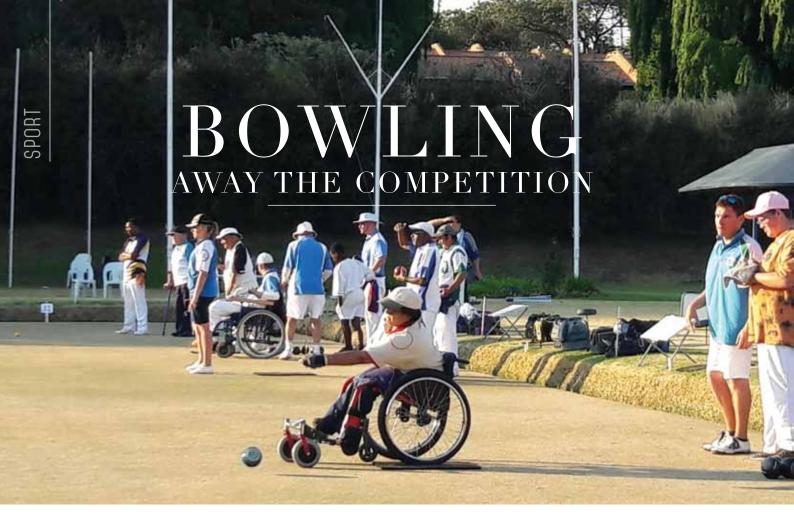
From the left: Richard Mukaga, Emma McKinney, Els Heijnen, Nkatha Murungi and Fatma Wangare during a panel discussion.

UDL suggests that all children of all races, abilities, backgrounds and class are taught in the same class at their own pace. Teachers will need to give more personal attention to each child and be able to teach in every language to children of all abilities.

Akintoye noted: "The curriculum, along with the classroom space, should be as flexible as possible. UDL will help all children including children with a language barrier." Socialising children with or without disabilities from an early age will give both the necessary social skills and make disability a norm for all children rather than something that most children only encounter later in their lives.

Tumbo pointed out that the current ratio of teachers to children is problematic. In special schools the ratio is 1:30 rather than the suggested 1:15. Public school classes are generally around 40 students or more per class.

There's a long struggle ahead before fully inclusive education is a reality in South Africa, but there's something to cheer about: steps are being taken towards educating society on what inclusive education entails and why it is important. \mathbb{R}



ROLLING INSPIRATION CONTRIBUTOR MANDY LATIMORE PARTICIPATED IN THE RAINBOW TRIPS ULTIMATE PERFORMANCE BOWLS COMPETITION. SHE SHARES HER EXPERIENCE

ow in its fifth year, the Rainbow Trips Ultimate Performance Bowls Competition was sponsored by Ultimate Performance with a total prize purse of R30 000. More than 200 entrants signed up.

"The aim of the event, while raising funds for bowlers with physical disabilities,

is to promote the development of the sport through inclusiveness," says Desiree Levin, founder and co-ordinator of the competition.

A true reflection of a rainbow, this competition caters for every type of bowler in one competition, including: youth (under 35); bowlers with disabilities (physically, visually or intellectually impaired); and bowlers without disabilities of all ages.

Trips Bowls means playing together in teams of three. Each team had to have a player from three of the four categories: under 55; people of colour; people with disabilities; bowlers without physical disabilities. Teams were entered without disclosing the strength of each player, which made it difficult to seed everyone as accurately as is common with league bowls. The organisers, however, did a sterling job. They even assissted teams who had a member pull out at the last minute by using some bowlers with disabilities and some youth players to play in two teams in order to enable these teams to compete!

This year, the competition saw double the number of entrants of last year, with the youngest being seven years old and the oldest 87, proving the slogan Bowls1Sport4Life really is true! There were a large number of development bowlers from Roosevelt Park, Belgravia and the Wanderers, who are all school kids.

It was great to play against them, and to observe their focus and dedication to the sport. Competing were some of our Protea Bowlers such as Princess and Tracy (blind bowlers), Desiree, Annatjie, Wimpie, Tobie and Eddie and our only quadriplegic bowler Handre, who uses a specially modified bowl-dispenser rail.

Some of the novice players included Ina Rowles, who played with her team from Groenkloof Bowling Club, and Versha Rowjee, who is a local bowler who joined the teams that travelled from the Chatsworth Bowls Club in KwaZulu-Natal for the competition. Each team was given an identifying name for fun and in keeping with the spirit of the competition.

The format of play, also unique, is where Sections, Divisions and Teams are seeded so that broad categories of competency and experience can be established. Having so many entrants meant that three greens were needed and Edenvale Bowls Club stepped up to host the competition.

In each match, points were awarded for each end won and overall points for a win were added together. On Sunday, at the Bowl qualifiers, the top two teams of each division, of each section and the two best scores of third place of each section came together at Lombardy Club to play for the Bowl (Edenvale needed one of their greens for their usual members).

Sadly, this meant that we were split from our mates and couldn't watch them and there had to be two prize-giving events. The winners of the Bowl were the Sensational Seaweed team comprising Margie Robertson (able), Dolf Scheepers (person of colour) and Graham Rater (under 35).

Joint second were the Naughty Nineties and the Avid Avos consisting of Mandy Latimore with her team mates Robbie



Thompson and Dunkeld Bowls Club greens keeper Isaac Goliath.

Winners of the Shield were the Cocky Canoes with Carmen Fourie (Youth), Jonty Rhodes (person of colour) and Andre Momberg (able). The Plate was awarded to the Marvellous Melons, consisiting Ina Rowles (wheelchair user), Johannes (the Groenkloof greens keeper and person of colour) and able-bodied Johan Engelbrecht.

Although the top six teams in the Bowl and the top three in each of the Shield and Plate section won money, everyone received a prize of some sort, from travel mugs to umbrellas and buckets. Half of all the bowling teams in the top 24 teams included people with disabilities.

Overall it was a great weekend of bowls, fun, making new friends and meeting up with old ones. Bowls is a wonderful sport for persons with disabilities to compete on an equal level with able-bodied people. This competition attracted at least seven new bowlers for Disability Bowls.

For more information contact either Desiree Levin on 072 371 5204 or beneft1986@gmail.com or Eddie van Heiden on 082 453 6439 or eddievan@vodamail.co.za. 🛭



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

BRING ON 2019!

As another sporting season ends, we can start looking forward to all that 2019 promises

Apart from wheelchair tennis, the sporting season has come to an end. As promised, here's a quick update on the Supersport Wheelchair Basketball Series winners. A big congratulations to Lions from North West for an absolutely brilliant win in the final. Hope you caught it live on SuperSport.

The Vodacom National Championships was won by the ever-improving Central Gauteng Team (no bias here...).

My trip to Madrid, Spain for the International Paralympic Committee Membership Gathering was epic. Huge strides will be taken to ensure that Para sport evolves and improves going forward and I am humbled to be part of it. Since the new president has been in charge, he has taken the organisation to new heights, which is not easy. Watch this space.

I also had my second visit to Tokyo to assist in the preparations for the 2020 Paralympic Games. Things have vastly improved since my last visit but there is still some work to do, especially in providing more barrier-free rooms in their hotels. This is now law, but only for new hotels and hotels that will be refurbished before the Games.

We are moving into the 2019 season – the most important season for preparation and qualification for the Paralympic Games. There are some great events coming up next year and the stand-out will be the South African Sports Association for the Physically Disabled National Championships in Stellenbosch in March.

This will be the trials for the World Para Athletics and Swimming Championships later in 2019. Let's give our athletes our best wishes during their off season and let's once again get behind them next year, cheering them on for glory!



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.



FROM SEPTEMBER 29 TO OCTOBER 2, QASA HOSTED ITS ANNUAL QUADS4QUADS JOURNEY TO RAISE FUNDS. AS ALWAYS, THE TRIP WAS FILLED WITH MUD, DUST, DRAMA AND GOOD COMPANY. QASA CEO ARI SEIRLIS SHARES SOME OF THE HIGHLIGHTS OF THE EVENT



n Saturday, September 29, the 250 participants of the 2018 Quads4Quads journey gathered at Carnival City, Johannesburg, with their motorbikes and backups in preparation for the epic fourday 900-km off-road journey to Richards Bay.

At the start of the event, we had the opportunity to thank everyone on behalf of QASA and to receive 14 wheelchairs from the Cotton Road and Chinese Club. Certificates of thanks were handed over to some generous participants, including Phil Nixon for his R60 000 donation.

The QASA team received generous sponsorships from a number of companies, including Avis, Sir Juice and Simon Smith (Q20). From the QASA team, eight people participated including myself, Happy, Paul, Dave, Alan, Louise, Clinton and Crawford.

At 09h30, the sound of off-road motorbikes sparked adrenaline in the participants and we were off. The morning saw much excitement amid lots of mine dust. We stopped at the Fortuna Resort for lunch. Another four hours lay ahead until we reached Standerton, where we were hosted by Toz and Andre of Tozandre's Guest Lodge.

A big thank you goes to Heinrich, who supplied onekilogram T-bone steaks for us. While our meat was sizzling, we watched the Springboks dominate the Aussies. The refreshment station was pumping and everybody seemed to put their bill on the account for Kamer 11 (room 11).

After a huge breakfast of everything that Toz could throw at us and settling the refreshment accounts, we were back on the road heading towards Wakkerstroom. Drama was to follow. Just before Perdekop, Louise misjudged a crossing, losing control of her motorbike and crashing. Luckily, the paramedics were close by and we managed to stabilise her.

Paul rushed her in one of the buses to the Newcastle hospital where she had X-rays, which showed a broken shoulder and fractured wrist. Our spirits were dampened by this injury of a QASA team member, but at least we had the opportunity to meet up with her again that evening at our accommodation on a farm in Wakkerstroom.

We had a braai, a beautiful sunset and the company of three Jack Russells for the evening. We called for backup to get Louise back to Durban, and Shaun from the QASA office came up with the QASA bus and took her home. Luckily, she is on the mend.

Day three was a long haul to Vryheid, which included some very technical sections. It was very hot and there was plenty of dust. The afternoon technical section was scary for most, but Clinton and David were up for the challenge. We had a great lunch at the Lutheran Church halfway to Vryheid. They certainly know how to cater for hungry off-road bikers. Thank you for that!

That evening at the resort in Vryheid, the QASA flag was flown at the auction where R50 000 was raised. Before the event started, QASA had already received R150 000 from generous donors and participants. Team Awesome were in a generous mood at the auction over and above their initial contribution of R20 000 through Cybicom.

We were also visited by Damien, Nicole and Ronel Delport. What a lovely surprise. Lots of droë wors was consumed around the motorbikes and we enjoyed the socialising. Surprisingly, we got in earlier than expected and had some well-deserved rest.

On Tuesday morning, breakfast was served at 06h00 and by 07h00, we were ready for the longest leg of the journey - the remaining 260 km to Richards Bay. Temperatures exceeded 32°C. The cases of water sponsored by Avis and the cold-pressed fruit juice from Sir Juice came in handy!



Avis also sponsored two buses for the QASA team, 30 soccer balls and beanies. There was ample Q20 for the participants, courtesy of Simon Smith, to ensure the participants were all well oiled.

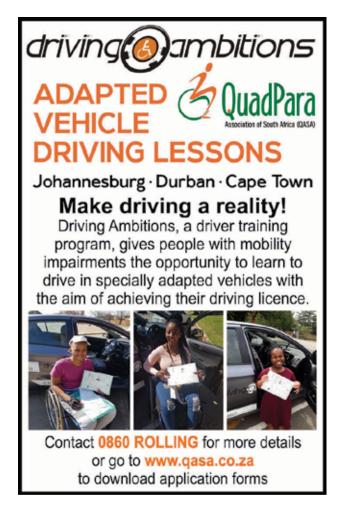
On arriving at Ulundi, the participants met the Mayor and QASA handed over ten wheelchairs for his community. By 15h00 on Tuesday afternoon, we celebrated the end of the Quads4Quads Journey with a cold beer. Over those four days we rode 1 000 km, saw some incredible landscape, and we identified pockets of poverty and lots of opportunity. We will be back.

We had made lots of friends along the way. Everyone thanked QASA for the incredible experience. All thanks must go to the Adventure Company and their staff for putting on an excellent event. The Quads4Quads Journey is 15 years old and has raised more than R7 million for QASA.

Most importantly, the event provides a wonderful off-road experience through the mountains and valleys of South Africa. We hope this event continues for many more years. Thank you to everyone in the QASA team for all the roles they played. You made a difference and you helped us fly the flag. R



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







IT CAN BE CHALLENGING TO SAVE FOR A NEW MOBILITY DEVICE AND STILL GO SEE THE LATEST AVENGERS FILM AT THE CINEMA. HERE ARE A FEW BASIC FINANCIAL TIPS TO HELP YOU MAKE EVERY CENT COUNT



anaging finances can be daunting for people with disabilities, especially since employment opportunities are few and expenses are many. However, smart financial planning could help you stretch your last couple of rands a little more. Here are a few tips to get you started.

TAKE ADVANTAGE OF GOVERNMENT **PROGRAMMES**

Be sure to make use of all the government programmes available to assist people with disabilities. Apply for a disability grant and disability tax rebates. It could make all the difference, especially when you have to buy a new mobility aid or adapted vehicle.

If you are not sure what forms are needed for tax rebates or how the process works, contact a tax consultant for more information.

BUDGET, PLAN AND BUDGET SOME MORE

Every household needs to have a budget. It helps you to see what you spend your money on and where you can save. Set up a budget at the beginning of each month with your planned expenses. Be sure to leave some room for unexpected expenses such as tyre punctures. Try to keep to the budget you set and review your progress at the end of the month.

SAVE EVERY CENT

It can be difficult to save, but a good habit to learn is to put a little into a savings account before paying any bills. Then, resist the urge to dip into those savings - instead, budget for less spending.

There are tax-free saving accounts available, 32-day notice accounts and various other investment options to help you grow the little that you are able to save. Discuss the alternatives with a financial advisor.

DON'T SKIMP ON THE IMPORTANT THINGS

Be sure to sign on for a good medical aid and avoid reusing

catheters. While this might mean you have less money to spend on other things, they can save you much more in the long run. Reusing catheters increases your changes of contracting a urinary tract infection, while medical aids play an important role in paying medical expenses, from doctor visits to hospital care.

There are other ways of saving, including sharing a flat or renting out an additional room in your home; cooking all your meals; and reducing water and electricity

Eating healthily, exercising and going for regular checkups can help reduce medical expenses by lessening your risk of illnesses such as high cholesterol and diabetes.

TAKE ADVANTAGE OF DISCOUNTS

Many shops offer rewards programmes similar to the Pick n Pay Smart Shopper programme. These can make a big difference if you're living off a small food budget or in a month where you have reduced spending money.

DO ODD JOBS WHEN POSSIBLE

Even if you are employed, a little extra cash can assist in making it through a particularly difficult month. Take on extra part-time work where you can. Consider giving a motivational speech at a school in your area, becoming an Uber driver or helping out in a store.

Play to your strengths and be creative in finding odd jobs. When you do earn a little extra either through an occasional stint or through receiving a bonus at work, try and save most of that windfall for unforeseen expenses.

Other ways to keep your budget under control include: staying debt free; creating a safety net by owning assets such as property (you can also be a part-owner if you can't afford to buy a property on your own); or consider making use of crowdsourcing platforms when buying expensive equipment.

With a little planning and discipline, it is possible for you to enjoy your money and save for that dream wheelchair! R



IS DISABILITY EMPLOYMENT EQUITY FAILING US?

WITH TOO FEW EMPLOYMENT OPPORTUNITIES FOR PEOPLE WITH DISABILITIES, ONE HAS TO WONDER WHETHER THE SOUTH AFRICAN LEGAL FRAMEWORK IS FAILING THEM



outh Africa has one of the best legal frameworks in the world, but it seems to fail people with disabilities. For example, the Employment Equity Act (EEA) is meant to redress the imbalance of employment of people with disabilities. In its Code of Good Practice Employment Equity, it

provides guidelines for employers to assist with Employment Equity Targets. It refers employers to information supplied by Stats SA and the latest national census. It is generally accepted that the Disability Employment Equity target is 7,5 percent.

The EEA also provides guidance on the reasonable accommodation of persons with disabilities in the workplace through its Code of Good Practice on Key Aspects on the Employment of Persons with Disabilities and the Technical Assistance Guide.

However, according to the latest Commission on Employment Equity Report, only one percent of the labour force are persons with disabilities – significantly less than the 7,5 percent target. This has been the position for the last couple of years. So, why is this the case and what should be done about it?

There is a disconnect between business and civil society. Employers have to comply with legislation, but they generally do not refer to the disability organisations with the knowledge and skills to recruit and support persons with disabilities in the workplace. This has resulted in the unsatisfactory employment of persons with disabilities.

There remains a lack of adequate reasonable accommodation, which has tainted the abilities of persons with disabilities in the workplace and often led to the termination of employment. There needs to be

conversations between the disability sector and organised businesses in order to effectively achieve the goals set out in the Employment Equity Act.

A good starting point would be a collaboration between the Chambers of Commerce and employer organisations such as the Association of Personnel Services Organisations (APSO). The business imperative to stimulate such discussions is entrenched in our legislative framework and policies.

The BBBEE Scorecard is a compelling mechanism for business to achieve Disability Employment Equity by scoring the six disability bonus points on offer. Employers should have Disability Employment Equity established through their transformation structures at a senior management level.

There should be a disability strategy in place that guides the five-year Employment Equity Plan, which is monitored through their annual Employment Equity Reports. Companies should be leveraging their skills development strategy to provide the necessary training interventions with annual work skills plans and monitoring progress with annual training reports.

The financial benefits include employee tax incentives, tax allowances and grants from the relevant SETA.

Disability organisations should become aware of the needs of employers by offering services, such as consulting on disability strategy and employment; the recruitment of persons with disabilities; assisting with universal design; providing disability awareness and supporting the employee through their initial employment journey.

Bringing about the symbiosis between employers and disabled persons organisations will greatly contribute to achieving Disability Employment Equity in South Africa. \square



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.

JZAUN DREYER

MEGA MOTIVATED AND UTTERLY EXTRAODINARY

AS A RACING DRIVER, COMEDIAN, WHEELCHAIR RUGBY PLAYER AND TEAM MANAGER AT THE WORLD-CLASS OUTSURANCE CALL CENTRE, JZAUN DREYER DOESN'T LET ANYTHING GET IN HIS WAY. WE'RE JUST SURPRISED HE FOUND THE TIME TO SPEAK TO US!

zaun Dreyer broke his neck during a highschool rugby match in 2006, which left him a C5/C6 incomplete quadriplegic. He is a beneficiary of the Chris Burger/Petro Jackson Players' Fund, which has helped him cope better with his disabilities.

"The Fund covers the cost of my custom wheelchair every four years as well as the hand controls in my cars. These two factors alone amount to thousands of rands. I consider myself fortunate and really feel for those who do not have this kind of support and the independence it brings," Jzaun says.

Despite the accident, he remains passionate about rugby and life. He is motivated by people who say he won't be able to do something - and his aim is to prove them wrong.

How has comedy helped you cope?

Comedy has brought a huge change in my life. It has opened so many doors for me and it has helped me develop a level of self-confidence that fuels my bravery. From my first open spot to the point where I featured on Comedy Central, I knew it was an opportunity for me to change people's perceptions about people with disabilities. The material I write is based on the everyday challenges of a wheelchair user and other disabilities.

What impact has your racing career had?

It's been a dream come true for me to start my own racing team: JD Racing SA. I've always had a big love for cars. My brother and my uncle share this passion with me and had a big influence on me starting this venture.

> I currently race in the Michelin Cup ZA - a sponsored motor racing championship held over eight months every year featuring various types of cars. I race my Subaru Impreza WRX, which got me to seventh place out of 15. My daily drive is a 2005 Subaru Impreza 2.5RS.



ABOVE: Jzaun Dreyer is a racing driver, comedian, wheechair rugby player and team manager at OUTsurance call centre.

Do you still have a passion for rugby?

Yes! In 2015, I started playing wheelchair rugby for the University of Pretoria, which helped me develop close bonds with others in the same situation. It was also great to feel part of a team again.

Currently, I play for Impalas at club level and I'm a proud member of the Leopards Wheelchair Rugby Team, which competes at the National Wheelchair Rugby Tournament.

How has your career with OUTsurance affected you?

I started at OUTsurance in October 2016 as a sales advisor in the outbound department. Within two years, I was promoted to a team manager role. It's a great place to work and the company is pretty well equipped for my needs. 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 part, however, is the staff and the culture. Everyone is really helpful - my colleagues, the cleaning staff and even the CEO! They all make me feel like there is no wheelchair and that I'm just like everyone else. \mathbb{R}



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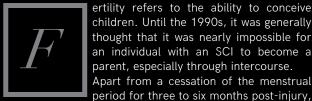
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You always get something out.



DESPITE THE BELIEF THAT PEOPLE WHO SUFFER AN SCI CAN'T HAVE CHILDREN. IT IS POSSIBLE FOR BOTH MEN AND WOMEN WITH SCIS TO HAVE CHILDREN POST-INJURY



ertility refers to the ability to conceive children. Until the 1990s, it was generally thought that it was nearly impossible for an individual with an SCI to become a parent, especially through intercourse. Apart from a cessation of the menstrual

SCI has no direct effect on female fertility. For males it is a little more complicated, but in the past few decades the prospects have improved significantly.

SCI affects a man's ability to achieve an erection and ejaculation. The sperm count in the ejaculate is also reduced. As the ejaculate contains more than just sperm, the volume of the ejaculate is not necessarily proportionate to the number of sperm. Often there are a number of challenges that impair fertility in 90 to 95 percent of men with SCI.

However, due to medical advances in the field of assisted reproduction over the past few decades, many of these problems have been overcome. Since these advances, about 80 percent of all men with an SCI have the potential to become biological fathers.

There are numerous methods to obtaining sperm without ejaculation; the methods for artificial insemination have improved. Men with an SCI have roughly the same chance of becoming a biological father as do the rest of the male population.

The first option is the do-it-yourself method, where the male attempts to increase his sperm count. Medication or a

vacuum pump can be used to assist in getting an erection. During the orgasmic phase, a vibrator is placed under the penis to assist the ejaculation of more sperm and thus increase the likelihood of conception.

Vibratory stimulation is the most cost-effective and convenient method, and should be the first method that a couple attempts.

The second option is medical intervention. If the method with the vibrator doesn't work, there are other more expensive and invasive methods. A consultation with a urologist or fertility expert is recommended to do the necessary tests and find the option that fits your unique situation best.

Electro-ejaculation and a punch biopsy are two popular options. In electro-ejaculation a long instrument is placed adjacent to the prostate and electrical stimulation causes the hypogastric nerve to trigger ejaculation.

In a punch biopsy, a sample of testicular tissue is surgically removed and used to harvest sperm microscopically. Sperm can also be withdrawn from the vas deferens with a thin

The next step is usually in vitro fertilisation, during which an egg is fertilised in a test tube and reinserted into the woman's uterus. There is also a modern type of in vitro fertilisation called intracytoplasmic sperm injection, where the sperm is injected directly into the egg. The aim is ultimately to make it as easy as possible for the sperm to fertilise the egg. \overline{R}



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 specialise in physical rehabilitation across South-Africa.

WHEELCHAIR TENNIS STAR DRIVES AWAY WITH AUDI Q2

On September 12, Kgothatso (KG) Montjane drove away from the Audi Centre Polokwane in her new Audi Q2. She is the first black South African female wheelchair tennis player ever to compete at Wimbledon and reach the semi-finals.

When asked what inspired the dealership to support KG, the team at Audi Centre Polokwane said: "We were impressed by her achievements, discipline and humble beginnings. She will be an inspiration to Limpopo kids." The Centre chose the Audi Q2 for her because it's practical for all road conditions and very spacious.

"I find it's so comfortable, roomy and powerful. My wish has always been to drive a vehicle that runs quietly. That's what Audi has given to me. I'm just loving every drive in it," KG said. Her love of her new vehicle is evident in her frequent social media updates about the adventures she is able to experience, thanks to Audi.

The Centre and other sponsors have made it possible for her to participate in international tournaments where she can



ABOVE: KG proudly poses with her new Audi Q2 and the Audi Centre Polokwane team.

accumulate points to improve her ranking. There'll be more updates about KG, her sponsors and wheelchair tennis in 2019. Contact Audi Centre Polokwane at 015 590 8800 to book a test drive in the Audi Q2.

WALKING A MARATHON FOR PEOPLE WITH SCI

Julian Paterson participated in the Kalahari Augrabies Extreme Marathon (KAEM) in support of QASA and people with spinal cord injuries. He shares his motivation to walk.

I have always been an active person and from a very young age preferred the outdoors to being cooped up inside. Diving became my career when I obtained qualifications as a South African Navy and commercial diver, and a certificate as a recreational diving instructor.

In 2012, I decided on a whim to enter the KAEM. I completed it successfully and the experience was a life-changer. I entered again in 2015, but a serious accident shortly before the race left me in ICU for two weeks. I strongly believe it was the fitness from KAEM training that saved my life.

In January 2017, I was exercising while at work offshore when my left hand slipped from the pull-up bar and I landed badly. My stubbornness showed and I refused medical assistance despite extreme pain, numbness and what felt like electric shocks down both legs.

After three days, I was medevacked to Lagos, Nigeria, where scans showed an unstable burst fracture of my L1 vertebra with

a bone splinter lodged nicely in my spinal cord. Dr Nick Kruger motivated an emergency medevac from Lagos to Cape Town where he operated to stabilise my L1.

He was able to put the bone splinter back in place. I was extremely fortunate in that my bone structure is slightly different to the normal, which prevented serious injury.

Today, I don't notice any strength deficit, although I have large numb areas. After the surgery, my wound became infected and required a complete washout and donor bone removal.

Dr Piet Polderman came to my rescue. I'm forever grateful for the skills and expertise received from both Dr Kruger and Dr Polderman.

Not long after recovering, I learned of an old diving colleague, Mike Heim, who had just suffered a near-fatal parachuting accident and sustained extensive spinal cord damage. I became aware of how many people are affected by SCIs and just how lucky I'd been in escaping serious injury.

Midway through 2017, I set myself three goals: to run five kilometres without stopping; to regain my fit-to-dive medical certificate; and to cross the finish line of the 2018 KAEM. It dawned on me that there is an opportunity to use the KAEM as a platform to assist people with SCIs. I was put in touch with QASA CEO Ari Seirlis and we agreed that I would walk for QASA.

Julian completed the KAEM in October. Read his full story on the ROLLING INSPIRATION website.



OBESITY - DO YOU HAVE A CHOICE?

FOR MOST PEOPLE, THEIR WEIGHT IS A LIFESTYLE CHOICE. WITH A FEW SMALL CHANGES, YOU CAN SAY GOODBYE TO BEING OVERWEIGHT!

o begin your weight-loss journey, you need to understand how your metabolism works, as it has the biggest impact on your weight. Metabolism refers to the speed at which food is broken down and exits the body.

Some people naturally have

a faster metabolism. Certain factors such as fitness, gender and age also affect its speed.

The less growth hormone there is in your body, the slower the metabolism, which is why it slows down as you age.

There are two types of metabolism: anabolic and catabolic. The anabolic metabolism functions in the daytime, when your body breaks down fat in the body, food consumed and cells in the body.

The catabolic metabolism builds and repairs cells, and

prepares and builds nutrients in the body – this happens at night while you sleep. For the catabolic metabolism to be effective, it is important that you get enough sleep and sleep

deeply. It's recommended that you get at least seven to eight hours of sleep a night.

The speed of your metabolism should be a factor that you take into account when deciding what you eat. For example, if you have a slower metabolism, try to eat less or choose certain foods (consult a nutritionist for the best options). By exercising and making better food choices, you can also speed up your metabolism. Eat a lot of vegetables, fruits and white meat, such as chicken or fish.

It's advisable to consult your doctor before making big changes to your diet. A doctor can test for other diseases or conditions that could be impacting your weight. \square



Emilie Olifant is a disability champion, an entrepreneur, author and inspirational speaker. She is the CEO and 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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ROLLING INSPIBATION

COMING SOO

YOU HAVE LOTS TO LOOK FORWARD TO! DON'T MISS THESE AMAZING FEATURES IN THE NEXT ISSUE OF ROLLING INSPIRATION AND THESE UPCOMING EVENTS. ISSUE 1 OF ROLLING INSIPIRATION FOR 2019 WILL BE PACKED WITH FABULOUS ARTICLES, LOOK OUT FOR:



REHABILITATION CENTRES

We look at the various rehabilitation centres in South Africa and some of the latest technologies they use.



SKIN AND WOUND CARE

Whether it is to prevent pressure ulcers or rashes, there are various effective methods to keep your skin and wounds heathy.



MEDICAL AIDS

We take a closer look at the medical aids on offer and some of the important things to keep in mind when picking a service provider.



WHEELCHAIR ACCESSORIES

From bags that sling over your chair to interesting wheels, we go browsing for the trendy accessories available to wheelchair users.

WOULD YOU LIKE TO SUBMIT 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:

3 NOVEMBER - 3 DECEMBER DISABILITY RIGHTS AWARENESS MONTH 2018

South Africa commemorates National Disability Rights Awareness Month annually from November 3 to December 3, giving the country the opportunity to reflect on progress made in promoting the rights of persons with disabilities and to support their emancipation.

3 DECEMBER NATIONAL DAY OF PERSONS WITH DISABILITIES |

Disability Awareness Month ends on the International Day of Persons with Disabilities, which is aimed at raising awareness of the challenges faced by people with disabilities and providing solutions. Learn more by visiting www.gov.za/ International Day of Persons with Disabilities 2018.

17 FEBRUARY OUTENIQUA WHEELCHAIR CHALLENGE

The annual Outeniqua Wheelchair Challenge (OCC) held in George will return on Sunday, February 17, 2019. Participants can compete in the 10-km, 21-km or 42-km race or simply enjoy the 5-km fun run.

TBC GEORGE DISABLED GAMES

The Disabled Road Race Foundation (DRRF), which organises the OCC, is planning to host a George Disabled Games so that athletes with disabilities can compete in other sporting codes in the week prior to the OCC. No date has been confirmed.

15 - 21 MARCH NATIONAL CHAMPIONSHIP FOR PHYSICALLY DISABLED AND VISUALLY IMPAIRED

The South Africa Sport Association for the Physically Disabled (SASAPD) will once again host its annual SASAPD National Championship for the Physically Disabled and Visually Impaired from March 15 to 21 in Stellenbosch. The Championship includes a number of adaptive sports.

5 MAY WINGS FOR LIFE WORLD RUN

The Wings for Life Foundation will once again host its annual Wings for Life World Run in Centurion on Sunday, May 5. Join people from across the globe in running for those who can't, with the aim of raising funds for research into a cure for spinal cord injuries. How far will you be able to run before the Catcher Car passes you?

GentleCath™ Glide

ConvaTec's GentleCath Glide intermittent catheter was tested by 16 Rolling Inspiration readers. With these results, is it right for you?





have reduced or greatly reduced dexterity



75%

have been using an intermittent catheter for more than three years



have a spinal cord injury (SCI)

The results



88%

were somewhat, very or extremely satisfied with the lubrication



82%

felt very or extremely clean after using GentleCath Glide



95%

claim it is somewhat, very or extremely easy to use the GentleCath Glide "no-touch sleeve"



claim that GentleCath Glide performed better than their current catheter



were satisfied with the GentleCath Gl<u>ide</u>



76%

claim it is very or extremely easy to open the packaging



claim it is extremely easy to order a sample of GentleCath

Glide catheter online

80%



63%

said they are switching to GentleCath Glide after the survey



To order your GentleCath Glide intermittent catheter sample, visit www.uhcare.com today!