

ROLLING INSPIRATION

ISSUE 4 2016 | R45.00

The lifestyle publication for people with mobility impairments

READY FOR RIO

Meet the amazing
Zanele Situ

ME BEFORE YOU

Is suicide the solution?

HEELS ON WHEELS

Ambassadors
for people with
disabilities

BUMPER MOBILITY FEATURE

Everything you need to know
about getting around

CHAEI DID COMRADES

But is participating the same
as competing?



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ZEALOUS ZANELE

Zanele Situ overcame various challenges to become the first black South African athlete to win a Paralympic gold medal. We look at her record. **P4**



DATE NIGHT

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UBER MEETS UA

London has just seen the introduction of UberWAV – vehicles that allow users with wheelchairs to travel in style and with ease. **P14**



HEELS ON WHEELS

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In the first of two bumper features, we bring you the latest information on all aspects of transport for both everyday living and leisure pursuits. **P17**



CALLING IN SICK

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IS SUICIDE THE SOLUTION?

The movie *Me Before You* has attracted controversy the world over. Now it has debuted in South Africa... **P30**



BUT WAIT A MOMENT...

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EQUAL *PLAYING FIELDS*

Two events of national importance may seem very different, but there are similarities



he first is the municipal elections, which took place on August 3; and the other is the 2016 Rio Olympics, followed by the Paralympics. These events might not appear to have much in common, but they both involve ways of ensuring the participation of people with disabilities.

For the municipal elections, a special registration process was set up to enable the participation of everyone who wished to vote. Everyone who registered for the special vote was visited at home to cast their vote – and the candidates we voted for should be those who are in touch with the needs of the people in their municipal area.


The rights of people with a disability are guaranteed in the United Nations Convention on the Rights of Disabled Persons (UNCPRD), which states that: “Parties shall guarantee to persons with disabilities political rights and the opportunity to enjoy them on an equal basis with others, and shall undertake ... to ensure that persons with disabilities can effectively and fully participate in political and public life on an equal basis with others, directly or through freely chosen representatives, including the right and opportunity for persons with disabilities to vote...”

With regards to the Olympic Games, various athletes representing South Africa will go to Rio de Janeiro and compete against the best athletes in the world. Two weeks after the Olympic Games it'll be the turn of athletes with a physical disability to compete at the same venues, share the same accommodation, use the same transport system and, hopefully, be successful in their events. Why, you may wonder, are these events not combined? I believe it is because people with a disability have different needs to those athletes with no disability. Yes, the facilities and

support services will be of the same need, but the specified equipment, rules and regulations need to be different for persons with a disability, to ensure equality of opportunity. With this in mind I wish the South African Paralympic team well with their preparation and for the competition in Brazil, and trust they will make us all proud.

“The UNCPRD principles remind us that we all have duties to our country

The UNCPRD states that, with a view to enabling persons with disabilities to participate on an equal basis with others in recreational, leisure and sporting activities, appropriate measures must be taken “to encourage and promote the participation, to the fullest extent possible, of persons with disabilities in mainstream sporting activities at all levels; to ensure that persons with disabilities have an opportunity to organise, develop and participate in disability-specific sporting and recreational activities and, to this end, encourage the provision, on an equal basis with others, of appropriate instruction, training and resources; to ensure that persons with disabilities have access to sporting, recreational and tourism venues”.

It's been instructive to view these two events in the light of the UNCPRD principles, which encourage our participation and remind us that we all have duties to our country – and to ourselves to exercise our rights in society. 



Raven Benny is the chairperson 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

WIN WITH CANON!

Share a picture of yourself doing something out of the ordinary, somewhere beautiful... make us laugh or feel inspired, preferably both!

You could win an EOS 1300D camera and EF-S 18-55 DC lens, to the value of R 5 999, from Canon SA.

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Our followers on our social media pages will be helping us select our winner, so share your best high resolution shots (no Photoshop!) and tag us @Rolling Inspiration Mag (Facebook) or @RollingMag (Twitter), with the reference #CanonPhotoComp.

Make sure you direct all your friends and family to our pages to like your picture and you could be our winner.

The competition will run until October 31, 2016.

Rolling Inspiration reserves the right to publish photographs submitted.



Canon

THAT'S HOW I ROLL

Our winning photo this time comes from Anandi Spies, a teacher at Frances Vorwerk School. The photo of the Grade R class was taken on July 26, when the school took the class to watch a 3D movie at Ster Kinekor at Southgate Mall.



Thanks for your submission, Anandi, and well done! You have won a Smergos Best Bag Forever (BBF) bag, worth R400. You also stand a chance to win a R1 000 shopping voucher from Spar, should you be chosen as our overall winner at the end of the competition.

How to enter:

- 1) Email photos to claire@charmونت.co.za
- 2) Put the title "That's how I roll" in the subject line.
- 3) Include your name, address and a contact telephone number.
- 4) Provide a caption (maximum 50 words) for your photograph, stating briefly what is happening in the photo and who is in it.
- 5) Include the date and location of the photo.

SOCIAL ROLLER OF THE MONTH

We have found our next winner – Tadhg Slattery! Tadhg, you have won a Smergos BBF bag.

Now the search is on for our next winner. All you have to do is interact with us through comments, likes, inboxes or retweets on our social media content and posts. If you are found to be the most interactive and engaged follower, you could be our next social roller of the month.

So what are you waiting for? Go on and like our Facebook (Rolling Inspiration Mag) and Twitter (@RollingMag) pages.

Karen Key

on Radio

The DISABILITY REPORT

...tune in every first Tuesday of the month @ 21h05

SAfm

104-107

ZEALOUS ZANELE

Zanele Situ overcame various challenges to become the first black South African athlete to win a Paralympic gold medal. CLAIRE RENCKEN looks at her record



orn in Matatiele in the Eastern Cape in 1971, Situ became paralysed in 1982 after contracting a TB infection, which affected her spinal cord.

While attending the Ikhwezi Lokusa Special School in Matatiele, she was encouraged to try her hand at field events and quickly found that she excelled in javelin, discus and shot put.

The rest, as they say, is history. This year Situ will be competing in her fifth Paralympic Games. Here is a brief summary of her Paralympic achievements to date:

- 2000: Gold in javelin (new world record); silver in discus
- 2004: Gold in javelin (and once again a new world record)
- 2008: 4th in javelin
- 2012: 4th in javelin

She is optimistic about this year's Games: "I am expecting good results. Naturally, I would like to do well, but what is most important is that I continue to improve. A medal would be a bonus." Javelin will once again be her main event, but she will also be competing in the discus event.

Situ says sport has helped her in many different ways. "Most importantly it helped me realise what I



am capable of, despite being a wheelchair user. My athletics career has also helped me to inspire other people, particularly athletes, with disabilities."

She offers the following advice to other young people with disabilities wanting to participate in sport at a competitive level: "Get involved; try out different sports to see what you like and what you're good at. From then on, just train hard and enjoy it!"

Her parting words of wisdom are as follows: "I would just like to encourage any parent who has a child with a disability to get them involved in a sport, because I know the difference it can make – just look how it changed my life."

Rolling Inspiration wishes Zanele everything of the best for the Games in Rio. We will be eagerly and proudly watching her progress. [R](#)





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7 Easy Ways to Speed up your Ride

DRIVING AMBITIONS DOES IT AGAIN

In June, Nic Bac, a quadriplegic and former pilot, obtained his driver's licence with the help of instructor Shaun Kanayee.

Thomas Rikhotso, who was new to driving when he joined Driving Ambitions, was a natural behind the wheel and after only five lessons with

Des Harmse, passed his driving test on the first attempt.

Des also had a double celebration on July 5, when both Samuel Mthimkulu and Daniel dos Santos passed their driving tests on their first attempts.

Well done guys!



From left: Daniel dos Santos, Samuel Mthimkulu, Nic Bac and Thomas Rikhotso.

QUADS 4 QUADS

This off-road motorbike event is coming up in September and October. About 600 quad-bike and two-wheel motorcycle riders, including several quadriplegic and paraplegic riders on adapted quads, will take part for the 13th time in the event which has made a remarkable difference to the lives of quadriplegics and paraplegics in South Africa.

The first stage kicks off in Johannesburg on September 29 and ends at Cane Cutters in Ballito on October 2. The return ride starts on October 6, arriving back at Carnival City on October 9.



UP YOUR GAME and join us this year for Casual Day
on Friday 2 September 2016

The QuadPara Association of South Africa (QASA) is a beneficiary of Casual Day.

Teams that work together win together so Up Your Game for Persons with disabilities and get your Casual Day stickers from QASA. Contact Wendy on 031 767 0352 or projectcoordinator@qasa.co.za

QuadPara **Casual Day**

EMPLOYMENT PROJECT

QASA understands that skills development and employment are key issues for persons with disabilities. We believe that it is essential for these people to gain the necessary skills so as to have the opportunity to gain meaningful employment, which in turn leads to independence, sustainability, social integration and dignity.



QASA aims to improve the participation of persons with disabilities by providing them with employment opportunities. In addition, the association encourages positive change in perception and attitudes within the corporate sector towards disabilities.

Our Employment Project is building an updated and comprehensive database of people with disabilities and their skills. CVs are stored on the QASA CV database and QASA engages with employers and recruitment agencies to facilitate opportunities for our members on the database.

For more information about our Employment Project, contact QASA on gm@qasa.co.za



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

FOR A SPINAL CORD INJURY-INCLUSIVE WORLD

The Southern African Spinal Cord Association (SASCA) and the QuadPara Association of South Africa (QASA) are partnering in the build-up and also the activities, to celebrate and create awareness about the first World Spinal Cord Injury Day that will be held on September 5




World Spinal Cord Injury Day aims to increase awareness of spinal cord injury. The slogan for the event is: "For a spinal cord injury-inclusive world".

It is anticipated that this awareness will facilitate an inclusive life for persons with disability and ensure greater chances of success of prevention programmes.

QASA provides projects, products and services to improve the life and lifestyles of quadriplegics and paraplegics in South Africa. For World Spinal Cord Injury Day, QASA will be committed to creating awareness about the causes of spinal cord injury as

a result of road accidents. QASA has a national road safety programme, encouraging the road-using public to use their seatbelts. The slogan "buckle up, we don't want new members", is well known under the QASA brand. Furthermore, QASA is encouraging people not to text and drive, or use their mobile phones whilst driving. Distracted driving is now the biggest cause of road accidents worldwide.

QASA members will be deployed in various activities to celebrate World Spinal Cord Injury Day. It considers the prevention of spinal cord injury to be equally important as the provision of projects and services for its existing members.

For more information, visit the official website: <http://worldsciday.org/> 

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MANAGING SPASTICITY

As a caregiver, there are steps you can take to make your client's life more comfortable and manageable



Spasticity is a reality in the lives of more than two thirds of people with spinal cord injuries (SCI), and is more common when neck and upper chest-level injuries have occurred. Think of it like this: the spinal cord nerves are like a bundle of telephone cables that communicate messages between the body and the brain. Some of the nerves take messages from the body to the brain and other nerves take messages in reverse. When we want to move, the brain sends a message down the spinal cord telling the muscles what to do. If the spinal cord is damaged, these messages cannot be sent.

So if the brain can no longer communicate with the muscles, what do they do? Like naughty children, they do what they like.

They can cause a general stiffening of the entire body or, if some muscles are stronger than others, they can pull the body into abnormal positions. Without the brain's guidance, muscles sometimes start contracting and relaxing rapidly, causing an arm or a leg to shake uncontrollably. (We call this clonus.) Or muscle

bundles gradually become tighter and tighter until they are too tight to contract any further. Then the muscles let go with force, causing an intense jerking movement (known as myoclonic jerks).

Spasticity is, clearly, not a pleasant thing to endure. But as persons with spasticity and their caregivers start to understand it, they get to know what causes these spasms as well as how to manage them. And in many cases they can reach a *modus vivendi* that can make life relatively comfortable.

I discussed this with Riona Rajkaran, a physiotherapist at the Spinal Unit at the Netcare Rehabilitation Hospital, who had some very useful tips on how to manage these spasms, so that the spasticity becomes more bearable. There are even ways in which we can make spasticity work in our favour.

First, you need to understand how much tone is normal for your client (the person you are caring for) and investigate possible triggers when there is an increase in the amount of tone. The things that trigger spasms, clonus or myoclonic jerks can be as simple as moving a limb or stretching a muscle or just being in the same position for a long time. But these spasms are



often also a sign of something amiss in your body – a bedsore, an ingrown toenail, clothes that are too tight, and so on. In the absence of pain sensation (which is often the case in SCI) spasms or jerks may be set off by contact with something very hot or cold – acting in a protective manner. You should also check when last the bladder was emptied or if there is a need for a bowel motion, since a full bladder or constipation can also trigger spasms or jerks.

What else can you as caregiver do to help make life more bearable for your client? In general, you should not try to break a spasm. If possible, allow it to pass before trying to move your client. The way to break a spasm may be as simple as just moving the limb gently and slowly into a more comfortable position. This helps especially for clonus and for ongoing myoclonic jerks. For sustained spasms, gentle but firm pressure on the area in spasm together with a gentle, slow, sustained pulling of the limb or trunk away from the direction of the spasm will often break it. But do not use rapid,

jerking, pulling or pushing actions, which could easily trigger further spasm.

During the day your client will most likely be in a wheelchair. Discomfort or any other trigger may cause spasms that can either pull the trunk forward, even to the point that they fall out of the chair, or it can pull on the back muscles, causing the shoulders to arch backward and the pelvis to slide forward. In both instances, gently but firmly push your client's trunk in the opposite direction to help break the spasm. It may be necessary to strap the ankles, thighs and trunk of your client to the chair – but don't do this while they are spasming.


If your client tends to get frequent and severe myoclonic jerks while seated in the wheelchair, further investigation is advised. Are the spasms caused by poor positioning in the wheelchair? If so, a seating assessment and adjustments need to be carried out by an experienced therapist.

Clonus is easier to manage; simply stroking the affected leg or arm with gentle but firm pressure while at the same time moving the limb into a different position will usually do the trick.

When transferring your client from the chair to bed or commode etc, be very mindful of spasms or clonus. Try to avoid moving them into a position that triggers spasms or clonus; but if this happens, get your client relaxed and comfortable before doing the transfer.

At night the best sleeping position is on the tummy. For people who are not used to this position, it is uncomfortable at first, but not only is it the best position to prevent bedsores, it is also the position that best relieves spasms. Try to aim for at least four hours a night on the tummy. In other sleeping positions the trick is to get the entire body into a comfortable, supported position that will allow your client to be the most relaxed without needing any effort to stay in that position. This includes careful positioning of the head and neck. As always, special care must be taken to ensure that potential pressure points are positioned in a way that prevents pressure sores. Make use of supports such as pillows at the back to prevent the person from rolling out of position.

Last thing at night and first thing in the morning are good opportunities to go through the range of passive movements of all the limbs to prevent the muscles from contracting.

The secret of good management of spasticity is to get to know what triggers spasms and how best to relieve them. I hope that these general guidelines will help caregivers a better understanding of what you are dealing with and how to help your clients to cope. 



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



Netcare

Rehabilitation Hospital

Specialised Services

The services provided in the Specialised Services unit at Netcare Rehabilitation Hospital include:

- Gait Lab, including Lokomat and Biodex
- Aquatherapy
- Seating clinic
- Upper limb clinic

THE GAIT LAB

The ability to walk is fundamental to a person's quality of life, yet a substantial portion of the population has difficulty walking. This includes people who have suffered a stroke, traumatic head injury, spinal cord injury, amputation or indeed any disabling illness or trauma that affects their lower limb function and mobility. Attaining a functionally efficient and as cosmetically "normal" a pattern of gait as possible is a high priority in the rehabilitation of patients with a physical limitation involving the lower limbs.

Rita Henn & Partners, with the support of Netcare Rehabilitation Hospital in Auckland Park, have combined the skills of trained physiotherapists with highly advanced specialised equipment to establish THE GAIT LAB. The Gait Lab is a gait retraining facility which aims at assisting patients during rehabilitation to achieve maximum independence and an optimal gait pattern in walking. Equipment utilised in the training includes the Lokomat® for robotic walking, the Biodex® Unweighing System for body-weight supported treadmill walking and Functional Electrical Stimulation to stimulate specific muscles needed during the various phases of walking.

Lokomat

The Lokomat® is an electromechanical-assisted device for gait training. It comprises an exoskeleton which facilitates the movement of the hips and knees during the phases of walking and can be used with or without body weight support. The patient is supported in a harness over a treadmill and the frame (exoskeleton) of the robot, attached by straps to the outside of the patient's legs, then facilitates the legs in a natural walking pattern. A computer controls the pace of walking and is able to measure the body's response to the movement.

The benefits of walking using the Lokomat system include:

- Task specific training – allows for an optimal walking pattern to be practiced more efficiently and sustainably over a longer period of time
- Strengthening of innervated muscles
- Improved circulation
- Reduced risk of osteoporosis (weight bearing exercise is known to increase bone mass and density)
- Reduced spasticity
- Increased range of movement in joints
- Improved proprioception (sense and awareness of the position in space of your body)
- Increased patient engagement through the emotive component of being able to stand and "walk"

Biodex Unweighing System

The Biodex Unweighing System allows partial weight-bearing walking training to be conducted with the assurance of patient confidence and safety, while still allowing the therapist hands-on access for manual assistance and correction. The patient is strapped into a harness which is then connected to an overhead platform that will take some of the patient's weight while standing and walking. This increases the safety of the patient and also allows the therapist the freedom to



concentrate on facilitating the patient's gait without having to hold the patient up at the same time. The Biodex can also be used with a treadmill if needed.

- **Functional Electrical Stimulation**

Functional Electrical Stimulation (FES) allows for the controlled electrical stimulation of specific muscles needed in the various phases of walking via carefully placed electrodes. Initially the therapist controls the specific placement of electrodes and the timing and strength of the impulses but once the parameters have been established for effective walking, the patients are empowered to set up and control the system themselves.

For example, the Odstock Dropped Foot Stimulator (ODFS) is a single channel neuromuscular stimulator used to correct drop foot, a condition commonly found in patients with stroke, incomplete spinal cord injury and peripheral nerve lesions.

AQUA THERAPY

Aqua therapy is physical therapy based in a heated pool which can be very beneficial for a range of disabilities. The advantage of hydrotherapy is that it negates a percentage of the patient's body weight thus making active and assisted movement much easier than on land. The water can also at the same time serve as a resistance medium for strengthening exercises and is able to provide a good medium of cardiovascular strengthening. A variety of different positions can be utilised in the pool with the support of the water that are not possible on land. Often just the comfort of the heated water can be beneficial to patients with painful conditions.

A full assessment needs to be done before the patient can be taken into the aqua therapy pool to establish contra-indications and precautions.

SEATING CLINIC

Optimal wheelchair seating is a fundamental principle in the rehabilitation of patients who are confined to wheelchairs. The correct seating is vital in order to prevent complications such as pressure sores and scoliosis. It also allows for maximal functional abilities within the wheelchair, as the correct posture and support is vital for upper limb function and reach. At our seating clinic, we utilise a sophisticated seating mapping system in order to objectively map the patient's position on a cushion and where the pressure areas are. The system can also be used as a strong visual tool when educating patients on effective pressure relief. Much time and effort is spent, in conjunction with the wheelchair suppliers, on assessing exactly which cushion and wheelchair is most optimal for our patients and best suits their unique needs.

UPPER LIMB CLINIC

The upper limb clinic is a new project in our special services unit. We are using specialised assessment and treatment tools/equipment to allow us to objectively measure and report on a patient's upper limb function, target function in therapy and monitor progress.

Other aims of the upper limb clinic are to educate patients on aspects of upper limb impairments and to make available appropriate upper limb assistive devices. In the future the upper limb clinic will also be looking into utilising high technology devices such as robotics for intensive upper limb treatment.



DATE NIGHT

The best things don't always happen spontaneously – most events need planning, reservations, parking and access. But that doesn't rule out a date night!



I asked newly married Nonhlanhla Bakasa to tell me what she and her husband Clinton do for “togetherness fun”. Nonhlanhla is an adrenaline junkie and nothing holds her back. Here are a few places with wheelchair access that they have explored:

ZIPLINING AT SUN CITY

Opened in 2004, Zip 2000 at Sun City is the world's original extreme Zip Slide. For over six years it held the title of the world's longest, highest and fastest zip slide. With an average speed of 120 km/h and reaching speeds up to 160 km/h, it's one of the world's longest zip slides (2 km). There are now higher and longer zip slides in Alaska and in South America.

A PRIVATE MEAL IN A BEAUTIFUL GARDEN

Gia's on Montrose, run by Wayne and Michelle Groenewald, is a relaxed coffee shop that also serves light meals and snacks, open daily in the scenic grounds of the Montrose Nursery in Sandton, Johannesburg. It's the ideal spot for a romantic brunch or lunch. The restaurant is wheelchair friendly. In winter there is a cosy fireplace in the main restaurant, but there are also blankets that you can wrap yourself in if you want to sit outside. For more information, contact Michelle on 011 326 5074.

MOVIE NIGHT

You can stay at home and watch some romcoms – Boxoffice on DStv has a variety of new releases. Nonhlanhla and Clinton prefer going to the cinema, though, and Greenstone Mall has a wheelchair-friendly

option with great bathroom facilities. However, the same can't be said about the wheelchair bathrooms of all movie theatres – often they also double as a storeroom.

PLAY DJ

Nonhlanhla compiled a list of songs for Clinton – her “rock”. There are countless songs with the word “rock” in the title, but these are her favourites: *Rock With You* – Michael Jackson; *You Make me Rock Hard* – Kiss; *Rock Me Gently* – Andy Kim; *Rock Your Body* – Justin Timberlake; *Roc Ya Body Mic Check* – MVP; and *Feel like a RockStar* – Tim McGraw.


MASSAGE EXPERIENCE FOR 2

Set in the tranquil bushveld gardens of the Indaba Hotel in Fourways, Sandton, the Mowana Spa is a wellness sanctuary that offers a rejuvenating experience. Enquire about the couples options. For more information, visit www.mowanaspas.co.za

OPEN-AIR CONCERTS

Fans of Joburg Day can diarise Saturday September 3 at Crocodile Creek Polo Club for the 2016 music festival, featuring Mi Casa, Matthew Mole, Kwesha, Timo ODV, GoodLuck, DJ Kent, Kyle and Shekhinah, AKA and Black Coffee.

Follow the feed on Twitter at @947Highveld and use the official hashtag #947JoburgDay, or check out www.joburgday.highveld.co.za

One important note: just being somewhere with your spouse isn't the same as *being* there with them. Remember, time together is just the start; if you are not 100 percent present in the activity, it's just time. 



Elna McIntosh is a sexologist and has for the past 30 years helped couples and individuals to explore their sexuality “outside of the box”. Her greatest claim to fame – surviving breast cancer ... twice. email: disa@icon.co.za

A PARADE OF PENGUINS

Boulders Beach in Table Mountain National Park combines access, nature and fun



Table Mountain National Park merges into and beyond the city of Cape Town, is a world heritage site and has been voted as one of the 7 New Natural Wonders of the World. There

are many attractions that are accessible for the mobility-impaired, like Cape Point, Buffelsfontein, Silvermine and Table Mountain itself, but pride of place in terms of access in the park goes to Boulders Beach and Penguin Colony, whether one wants to look at penguins, go to the bathing beach or visit the shop-cum-information centre.

HOW TO GET THERE

Boulders is in Simon's Town, a suburb of Cape Town on the western side of False Bay. It can be accessed



ACCESS ADAPTATIONS:

- The north-side boardwalk provides access to the penguin-viewing beach, allowing visitors the opportunity to watch and photograph without disturbing nesting and roosting birds.
- A concrete pathway on the southern side provides access to the bathing beach.
- Willis Boardwalk links the two main beaches.
- There are 3 separate UA ablutions, at the main entrance gate; along Willis Walk; and at the bathing beach.
- A wheelchair is available for free use.
- Ramps and swing gates are provided for wheelchair users and prams at all key locations.

via the M4 from North and South or via the M66 from the West.

More information (including rates) about Boulders, Table Mountain National Park or the other 20 national parks can be found on the SANParks' website www.sanparks.org. Designated UA units are kept on reserve for those who need them and can only be booked directly with SANParks on special request. Unlike other units they cannot be booked in advance online until the reserve period has expired. Visitors to parks pay a daily conservation fee to make use of park facilities and enjoy the natural heritage, but if you buy a Wild Card, that fee is waived. [R]



www.sanparks.org
reservations@sanparks.org
 +27 (0)12 428 9111



www.wildcard.co.za
wildcard@sanparks.org
 0861 GO WILD (46 9453)

UBER MEETS UA



London has just seen the introduction of UberWAV, vehicles that allow users with wheelchairs to travel in style and ease



In May this year Uber UK launched its newest service, UberWAV, into the Greater London area. This service was developed together with the support of the UK charities Scope, Whizz-Kidz and Transport for All.

Now people with disabilities are also able to make use of the Uber system and will be transported in wheelchair-accessible vehicles (WAVs) by drivers who have received disability equality training from Transport for All and Inclusion London.

Vehicles are large enough to accommodate a person in a standard reference size wheelchair. They are equipped with a rear-entry ramp, winch and restraints, enabling a wheelchair user to ride safely and comfortably with one additional passenger. The minimum internal space encompasses a height of 1377 mm, width 783 mm and length 1320 mm. If your wheelchair is much larger, you can email supportuk@uber.com for more information.

Here's how to request the service:

1. Download the Uber app and create your account.
2. Choose the 'UberWAV' option on the slider at the bottom of the screen.




3. Place the pin at your pickup location – make sure it's somewhere safe for your driver to stop the car.
4. Tap the "Set pickup location" bar. You'll be asked to confirm your wish to request a wheelchair-accessible car.
5. Tap "Request UberWAV".
6. Once your request is confirmed, your driver will be on the way to collect you. You can get in touch



at any point by sliding the block with the driver's details upwards and tapping "Contact".

This is a great facility in an international city that already offers top-class public and private transport. So what about here at home? A "little birdie" has been whispering in my ear that there are current discussions with Uber South Africa to look into this option for our country ... so watch this space!

Happy travels. 



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

HEELS ON WHEELS

As August is the month when we celebrate National Women's Day, now seems to be the perfect time to reflect on the remarkable things that women with disabilities have done.
CLAIRE RENCKEN reports



Veronica Baloyi (37) from Soshanguve has overcome many challenges. In spite of her traumatic past, after being pushed from the sixth floor of a block of flats in Pretoria, her positive attitude has become an inspiration to everyone she meets. "I was only 16 years old when I woke up after being in a coma for six weeks. They told me that I was paralysed and would never be able to conceive a child as a result of my injuries. I now have not one, but two, miracle daughters. I think what saved me was the fact that I accepted my fate immediately and have tried to lead a positive life ever since," she says.

Veronica has won numerous awards as a result of her disability. She is also an ambassador for Ottobock. She donates wheelchairs to the needy and also gives motivational talks to youths at schools. Furthermore, she represents people with disabilities at her workplace – Transnet. "I believe that businesses should strive to empower their employees with disabilities to become young leaders so that they can represent the disability sector on various levels in business, civil society and the public sector," says Veronica.

Then there's 32-year-old Caroline Bowers. "I was born in 1984 in Cape Town at the old District 6 hospital. At birth, I was diagnosed with spina bifida, which occurs in different degrees – I was diagnosed as 'lumbar 4'. This meant that I had normal brain function, but with

severe paralysis of my lower body, poor bowel control and very little sensitivity in my feet."

Doctors told Caroline's parents that she would probably only live to the age of about 16, because of the severity of her paralysis and the impact that it

Veronica Baloyi (right) and Caroline Bowers (below) are both ambassadors for people with disabilities.



would have on her kidneys. "Today, with the support of my dedicated parents and the grace from above, I have managed to reach a mature age of 32 and I'm still going strong!"

In fact, Caroline has become something of an ambassador for people with disabilities. She is a finalist in the Ms RSA Posh Plus national beauty pageant, which is taking place at the end of the year.

"I know I can make difference on a bigger platform. I am ready to take on the world. However, I have learnt over the years that you have to work hard and make sacrifices in order to succeed and make your dreams come true," she concludes. *R*

THE MYSTERY OF THE PHANTOM LIMB

What is the phenomenon known as phantom limb pain, and how do you reduce the pain of something that isn't there?



For many years, people tried to solve the case of the phantom limb sensation. They believed the Freudian theory that the pain is part of a mourning process for the lost limb. These days, the go-to explanation is that it is confusion in the brain's relation to its body.

Globally, amputations are performed at the bone-rattling rate of one amputation every 30 seconds. That means that there are more than one-million new amputees each year and almost every single one of them will experience phantom limb pain. These sensations, which are felt where the limb used to be, can be a shooting, burning or stabbing pain, and may also take the form of electric shocks and cold sensations. I know of patients getting up in the middle of the night and falling because they completely forgot that the limb is no longer there.


These sensations might decrease in intensity over time, but they may never go away completely.

For as I long can remember, many experiments have been carried out to try and "trick" the brain into thinking that the amputated limb is still there, or accepting that it is no longer there. These experiments also try to persuade the brain that there's no need to take revenge on the body by causing blood-curdling pain. These experiments can sometimes be successful, but mostly they're not.

But now someone has come up with a new answer – it's not the brain, it's the body!

In a recent study, Israeli and Albanian researchers have found the primary source of phantom limb syndrome is a bundle of nerves near the spine – and they managed to alleviate the associated pain. Their work shows that phantom limbs are not "imagined" in the brain, but "felt" in the body.

Guided by medical imaging, the researchers injected 31 lower limb amputees with local anaesthetic near the area where the nerves from their amputated legs entered the spinal cord. Within minutes, phantom limb sensation and pain were temporarily reduced or eliminated in all the amputees. The researchers say: "The neurons in the spinal cord probably begin terrorising the brain with abnormal signals when the limb they innervate is amputated, causing the pain and other sensations associated with phantom limb syndrome. The anaesthetic appears to block signals associated with the syndrome from reaching the brain."

I have noticed that wearing a prosthetic limb significantly reduces the number of complaints about phantom limb pain. It is a positive thought that amputees have at least one more solution to their discomfort. Doctors may be able to "amputate" phantom limbs for the first time in a thousand years, and the words "mind over matter" can have a whole new meaning for amputees. 



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



MOBILITY

BUMPER FEATURE: PART 1
Your guide to getting around



GO ANYWHERE, DO ANYTHING

Henno Ellis's eyes light up as he describes his love for an active lifestyle and tackling the great outdoors. He tells GAVIN MYERS why the Ford Ranger is the ideal vehicle for him



him lead an active life.

Ellis has always led an active life. Originally a commercial diver, his job took him to the country's oceans and rivers of Africa. But it was a diving accident in 1999 that left him – then 23 – as a C6 complete paraplegic. Now his Ford Ranger 3.2 Wildtrak helps

to completely lower the seat to climb in. He uses a home-made, non-slip plank to bridge the gap between his chair and the driver's seat.

"Getting in is the only difficult part," says Ellis. "I don't usually use a plank with a normal car, but I made one for this car because of the height and distance in. It takes some work and it looks crazy, but I do it."

Ellis's can-do spirit has even resulted in him fabricating a special tool that allows him to easily remove the wheels from his chair. Once the wheels are off he puts them and the chair on the back seat.

"My fingers are paralysed. People have seen the tool and think it's brilliant," he laughs.


The conversion to the Ranger is minimal as well. "Even though my hands are paralysed, I don't have any additional devices on the wheel to help me turn it. It's personal, I don't like things like that," he says.

The only indication that the Ranger has been converted is a push-pull hand control mounted underneath the steering column by Easy Drive Systems.

Although this vehicle is only really used on weekends and for holidays, Ellis puts it to full use.

"It has a lot of space to load and pack into – I always take extra wheels (for the chair) with me, for example. The interior is like a car. It's a vehicle we can drive down to Cape Town and back and can go off-roading or reach far-out places. It's nice to have a bakkie that can go everywhere," he adds.

"This is a fantastic vehicle – it looks *windgat!* It ticks all the boxes ... it has everything that I need."

As we conclude our meeting, Ellis mentions the updated, facelifted Ford Ranger introduced at the end of last year. His eyes light up. There might soon be another Ford in his driveway. 



Ellis uses a home-made, non-slip plank to bridge the gap between his chair and the driver's seat.

"I had a bakkie before I broke my neck and I wanted one again, but couldn't have one because it needed to be automatic. I then found out that the Ranger was one of the first new-generation bakkies with an auto," he explains, adding that there's so much more to the vehicle that makes it ideally suited to his needs. "A big thing is that it has electric seats, which helps me easily position the seat to get in and out of the vehicle." Because of the Ranger's height, it is necessary for Ellis

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GETTING AROUND

In this first part of two features, MANDY LATIMORE brings you the latest information on all aspects of transport for both everyday living and leisure pursuits





CAR HIRE

The different car hire companies require different lead times to make the specific vehicle available for rental, so you need to make your arrangements as far in advance as possible. The hand control systems vary and may not

be suited to everyone's needs. Get detailed information about the specific system prior to committing yourself to the rental.

There are some car rental companies that offer adapted vehicles with hand controls. Avis chauffeur drive www.avis.co.za

QASA has vehicles for rental in Cape Town, Durban and Johannesburg (031 767 0348) secretary@qasa.co.za

Bidvest Car Rental promises you a comfortable journey. This service offers a range of

hand control units that can be fitted to vehicles www.bidvest.co.za

Easy Drive Western Cape – This new service for long-term rentals has just been launched. It targets international tourists or locals who would like to travel throughout South Africa. The vehicle is a VW Caddy manual, with a lowered floor for passengers only and has ramped access. Contact: 021 851 9592.

AIR TRAVEL

All major airports have staff members who are specifically employed to assist passengers who require help moving from the drop-off areas through the airport buildings and onto the plane. It is important that you book assistance and get it confirmed BEFORE you arrive at the airport. Once you have made your booking online and received your reference number, you need to contact the airline and request your assistance. Some airlines require you to fill in and submit a form; others will take your details over the phone. If you are booking through a travel agent, give them details of what assistance you require, and notify them if you have any mobility aids. Should you have a good or bad experience, please contact the ACSA

Customer Care by SMS to 32691 with details of your flight and the experience and also advise QASA on info@qasa.co.za

MOTOR VEHICLES AND ADVENTURE

All motorists who drive in any form of adapted vehicle must have an endorsed licence stating they are licensed to drive an adapted vehicle.

Individuals who previously had a valid licence before an injury or onset of a degenerative condition are required to be re-tested at a DLTC and have their licences reissued. Certain features can assist people with mobility impairments to get in and out of the vehicle and drive it – such as extra-wide doors, the height of the driver's seat in relation to the wheelchair, >



electronic seat adjustments, power steering and boot space. It is highly recommended that an assessment is done by an occupational therapist to offer the best guidance regarding the type of vehicle and adaptations that will optimise the drivers' abilities. Caroline Rule from Rolling Rehab is considered the expert in this field and can refer you to experts in other areas. rule@global.co.za; www.rollingrehab.co.za



Off-road Wheelchairs & Adaptations

An All-Terrain Wheelchair needs to be able to transition from urban to rural life, which means that it needs to have a strong frame and rear tyres that do not puncture. The front castors need to have a larger than usual diameter to offer an easier path through sand or over uneven surfaces. Most wheelchair suppliers will have a wheelchair frame that suits and then will be able to fit the adaptations for the user.



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instead of lifting. Most wheelchair companies supply these.

Quadrislide – is a slide with a seat that moves along two tracks of marbles www.transferboard.co.za

Transfer Platform or Tip up Plate – these are fitted next to the seat and swivel down next to the seat in a horizontal position for the transfer and then either removed or swivelled up and away when not in use. If there is a large height difference between wheelchair and seat, the platform can

Driving Schools

There are increasing numbers of driving schools that offer tuition on adapted vehicles.

A list of driving schools is available on the Rolling Rehab website www.rollingrehab.co.za

Rebates

There are a number of criteria when looking at rebated imported vehicles for people with disabilities. You may choose to import the vehicle yourself, or through a motor dealer.

There are three different categories: driver, passenger or organisation. As a driver you need to be assessed by a panel in order to confirm that you will be eligible. The application forms are available from NCPPDSA and GPAPD. You may only sign the vehicle order to purchase once you have received the rebate permit, which takes six to eight weeks. However, you will need documentation from the dealer about the vehicle, which needs to be submitted with your rebate application. NCPPDSA 011 452 2774; GPAPD 011 838 3012/16.

Transfer Methods

There are various devices to assist with transferring into and out of a vehicle for both driver and passenger. One needs to find a secure leverage place to grip, and position the legs to suit the individual, and have sufficient strength to move from the chair into the seat of the vehicle. There are many assistive devices including:

Transfer board – this enables the user to slide across



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be adapted to an electronic version, which will lift the user from the door sill height to the seat, and back. Shoprider 012 653 1817, EZ Drive 071 362 9350, Easy Drive WC 021 851 9592.

Handibar grab handle that fits into the door latch – Shoprider 012 6531817.



AutoAdapt Turney Seat & Guidosimplex Transfer System Lift – lifts the entire seat and swivels it out of the car and lowers it to the preferred height for transfer, and then takes the individual back up and into

the car. Shoprider 012 653 1817, EZ Drive 071 362 9350, Easy Drive WC 021 851 9592.

Loading Methods

Driver and passenger solutions to load the wheelchair or mobility aid include:

Ramps These may be portable, which would include flat plate type or separate “gutter” type and fixed ramps that are electronically or manually operated.

Hoists They lift the wheelchair into the vehicle. They are available from Shoprider, EZ Drive, Easy Drive WC, Leda Medical 021 557 6774 and Barry Edy 082 657 3734. The roof OMNIGO hoist is locally made by SWC Lifts 082 872 2290, which lifts the wheelchair onto the roof of the vehicle.

Conversions

A range of custom-built conversions are available from several companies throughout South Africa. Driving conversions include hand and ancillary controls, assistive steering devices, adapted foot pedals and adapted seats.

Chairman Industries has been developing, manufacturing and improving radial hand controls for over 30 years. It is one of the most popular systems available, with a 10-year guarantee. The system fits any automatic vehicle and can be transferred from



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- Clutch Conversions
- Indicator Conversions
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- Steering Wheel Spinners



Fitment Centres

- | | | |
|----------------|------------------|----------------------|
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| ● Bloemfontein | ● East London | ● Namibia, Windhoek |
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one vehicle to the next with minor adjustments with installation only taking a day. The action for this control is pushing forward to brake and down towards your lap to accelerate. Extra care is taken to match and preserve the interior of the vehicle. Chairman Industries hand control fitment takes only one day at the workshop in Jeppestown, Johannesburg. The hand controls are also fitted by the company's agents around the country, as well as in Botswana and Zimbabwe. Contact: 011 624 1222 or www.chairmanind.co.za

Other companies that provide similar services are: EZ Drive Pretoria 071 362 9350; Easy Drive Western Cape 021 851 9592; Easy Rider 082 778 0735; Lee Motors 083 661 0117; Leon Pistorius 083 264 5815; Ronnie's AutoMobility 074 942 8204; Shoprider 012 653 1817; VS Hydraulics 082 411 0889.

Nicky's Drive is a registered NPO that assists people with disabilities with funding for car adaptations. Nicky Abdinor 021 555 3298, www.nickysdrive.com

Lifts

They lift the passenger and wheelchair into a vehicle and can be supplied by: Shoprider 012 6531817, SWC Lifts 082 872 2290, EZ Drive 071 362 9350, Easy Drive WC 021 851 9592, BusTruck 011 826 3222, Angelo Kater Motor trimmers 021 552 9485, Climatic Technologies 021 905 6193/4, GEA Refrigeration 021 555 9000, Unicape 021 951 6262 / 031 701 2575 and Leda Medical 021 557 6774.



Off-road Tyres

Extra-large tyres with treads are used for sand and snow, while the standard 25" with a width of 2,5" tyre with a deeper tread may be used for rough terrain. Most wheelchair suppliers will supply these.

Freewheel

The Freewheel is an extra wheel that clips onto the front of the wheelchair, lifting the existing front castors off the ground and allowing east access over any terrain. www.chairmanindustries.co.za

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Power Assist devices

SmartDrive clips onto a manual wheelchair and as you push normally, the SmartDrive maintains the speed. To brake, tap the push rim. www.cemobility.co.za; Benoit Light Drive is a drive system that converts a standard push wheelchair into a power chair with easy clip-on batteries, power and control unit. www.sitwell.co.za

Next issue: We look at public transport, and more. [\[7\]](#)

HAND CONTROLS



Hand Controls
Accelerator, Brake & Clutch - Conversions

GRIPS



SECONDARY CONTROLS

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TAILOR-MADE



The Hyundai Tucson has been a favourite SUV for 12 years. Now the third generation has landed on local shores – and it looks like a great option for people with mobility impairments



SUVs have grown in prominence among South African consumers due to their soft-road ability; versatility and practicality; and the feeling of safety that the raised ride height imparts. The medium-sized SUV, such as this Hyundai Tucson, is among the

most popular of the SUV genre.

It's probably the practicality aspect that will appeal most to people with disabilities. Take the Tucson's 488 litres of cargo capacity, which expands to a commodious 1 478 litres when the rear seats are folded flat. It's also rated to carry 100 kg when fitted with a roof rack, making it an ideal vehicle for a roof-mounted wheelchair rack.

The Tucson holds another ace up its sleeve: while it may not look it, it is among the shortest (4 475 mm length and 1 655 mm height) of its direct rivals. More importantly, it has a ground clearance of only 182 mm; meaning entry and egress is eased while not losing the ride-height sought by SUV buyers.

Once aboard occupants are greeted by a luxurious and ergonomic interior environment. The seats are large, comfy and electrically adjustable* (the rears can be manually adjusted, too). All switchgear falls easily to hand and operates with a solid, premium feel. Hyundai has paid significant attention to the quality of build and materials used in the Tucson, and has included a wide array of interior stowage options.

It's safe, too, with six airbags, anti-lock brakes

with Electronic Brakeforce Distribution and up to five other electronic safety systems*. Other luxuries include cruise control*, a reversing camera and – on top-spec Elite models – Rear Cross Traffic Alert, Lane Change Assist, Blind Spot Detection and a panoramic sun roof.

Two petrol engines are available, one of which is a two-litre. However, Hyundai's turbocharged 1,6-litre TGD I Gamma engine is the star of the range. It sips fuel at a mere 8,3 l/100 km and, when paired to the company's seven-speed dual-clutch transmission, provides smooth, refined and punchy performance.



The Hyundai Tucson is priced between R369 900 and R519 900. Hyundai's five-year/150 000 km manufacturer's warranty, enhanced by the additional new groundbreaking seven-year/200 000 km drivetrain warranty, comes standard with the all-new Hyundai Tucson package, as well as roadside assistance for five-years or 150 000 km. All derivatives come with a five-year/90 000 km service plan; service intervals are spaced at 15 000 km.

*Elite and Executive spec 

CALLING IN SICK

What can people with disabilities expect when they have to take additional time off work because of a complication or consequence of their disability?

In terms of the Basic Conditions of Employment Act, every employee is entitled to one day's sick leave per month – or 36 days in a rolling three-year cycle. Once the allocation of sick leave is exhausted, the employee's sick leave will be deducted from their annual leave allocation. If the employee has no sick leave or annual leave left, any leave taken will be considered unpaid.

In the context of disability management, South African legislation and Codes of Good Practice on Disability require that employers “reasonably accommodate” employees with physical, mental impairments or any other disabilities. The concept of reasonable accommodation is not open-ended and it usually differs from one employer to another.

If an employee is unable to do the job for which they were employed – for example, if they are unable to come to the office for lengthy periods – how far can an employer be expected to go in accommodating these absences?

While the employer cannot demand that an ill or incapacitated employee come to the office, if alternative work arrangements (such as the employee working from home or taking another position in the organisation) are not feasible, the employer may have no other option but to initiate a process to terminate the employment

arrangement – or have the employee medically boarded.

Medical boarding is a complex process and must be carried out in accordance with the Labour Relations Act.

The employee should be allowed the opportunity to state a case in response and to be assisted by a trade union representative or fellow employee.

The legislation provides guidelines in cases of potential dismissal arising from ill-health or injury. The employer must first assess the extent to which the employee is able to perform the work. It must then consider whether the work environment could be adapted to accommodate disability, or, if this is not possible, whether the employee's duties could be adapted. The employer also needs to consider whether any suitable work alternative is available.

All this means that the decision to dismiss cannot be taken lightly and must follow an incapacity enquiry, which has to include evaluating what alternative and reasonable accommodation can be made.

While it's not always possible to anticipate all events that might affect a person's ability to perform their job, some are foreseeable. For example, additional time off for doctor's visits or to collect medicine can be negotiated when discussing the initial employment contract. For anything less predictable, each situation would depend on the circumstances of both the employee and the employer. It's therefore important that a company has an unambiguous process for ensuring that employees can freely declare their disability status. ^[1]



Dr Jerry Gule is the chairman of South African Employers for Disability (SAE4D). email: majaheni.gule@gmail.com



THERESA CUPIDO
ATN Group

When I was a girl, I'd come home from school and get to work in the family grocery store. I'd do my homework in the evenings and wake up early to receive deliveries. Even as a youngster I understood the value of hard work. It's wonderfully fulfilling. Especially when your work is creating opportunities for others.

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**I'M A WIFE,
A MOTHER AND
2014'S JOB CREATOR
OF THE YEAR.***

IS SUICIDE THE SOLUTION?

Me Before You has attracted controversy the world over. Now it has debuted in South Africa, meaning that the debate surrounding assisted suicide for people with disabilities has taken on a local flavour. CHARLEEN CLARKE discovers that, while opinion is mixed, it's uniformly vehement ...



he ending of *Me Before You* is the worst-kept secret on the planet. Even before the movie opened in South Africa, we all knew the ending: Will Traynor chooses assisted suicide rather than life as a quadriplegic. Not surprisingly, this story line has elicited strong reactions.

Not everyone has slammed the movie. Phillip Thompson, the foremost specialist in the field of environmental accessibility and universal design within South Africa, says one needs to consider that a lot of people with spinal injuries do consider suicide. "Maybe this movie is an accurate reflection of the despair experienced by some people with disabilities. After my spinal injury I was hospitalised with a fireman who was really upbeat and positive around the ward. He offered a lot of support to the other spinal-injured patients at the then HF Verwoerd Hospital. He was discharged before me and, three days after the discharge, we got feedback that he had committed suicide at home!" reveals Thompson.

"While we can never support suicide as a defensible option for someone who has experienced spinal injury trauma, I wonder what the statistics show both locally and globally? Maybe there is more reality in this movie than we would like to admit?" he questions.

Heinrich Grimsehl, medical orthotist/prosthetist at Netcare Rehabilitation Hospital, concurs. "The movie is not offensive. It deals with reality; I have seen this scenario play out in real life," he says.

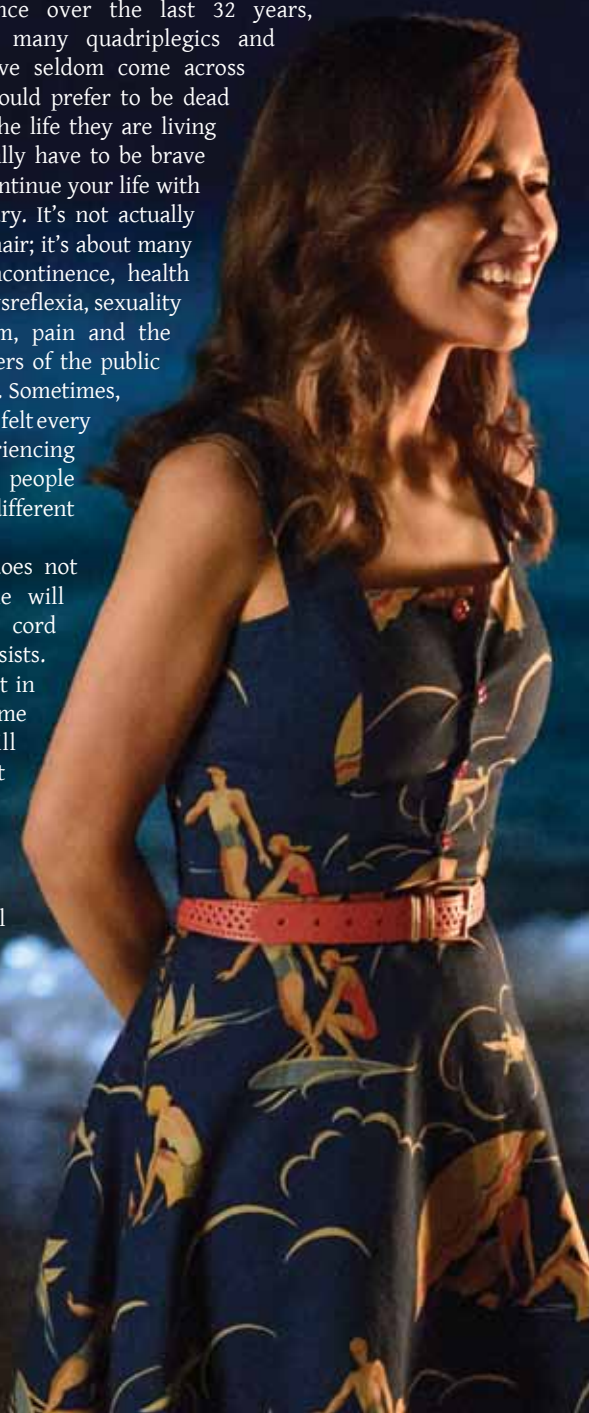
But others are disappointed. QASA CEO Ari Seirlis is one. "While this is the reality of filmmaking, it's sad that the lead actor is not quadriplegic and that the director spent no time at all talking to high-level quadriplegics about life or the choice of death over life. I guess the screenplay sounded perfect for a romantic blockbuster with buckets of tears at the end. After his tragic accident, Christopher Reeve played a lead part as a quadriplegic in

a murder thriller and did it well. Opportunity missed," Seirlis tells **Rolling Inspiration**.

However, it is the ending that really troubles Seirlis. "It is sad that – as per the ending in *Million Dollar Baby* – a quadriplegic chooses death rather than to continue with life."

Seirlis says this isn't necessarily a realistic scenario. "In my experience over the last 32 years, interacting with many quadriplegics and paraplegics, I have seldom come across somebody who would prefer to be dead rather than live the life they are living now. Yes, you really have to be brave and resilient to continue your life with a spinal cord injury. It's not actually about the wheelchair; it's about many other things – incontinence, health risk, autonomic dysreflexia, sexuality adjustment, spasm, pain and the insensitive members of the public (not all, but most). Sometimes, the greatest pain is felt every day, when experiencing the ignorance of people shown in many different ways," he reveals.

"The ending does not do justice to the will of us with spinal cord injuries," Seirlis insists. "There is no doubt in my mind that some moviegoers will think that it is not worth living as a quadriplegic. Hopefully the inspiration of the Paralympics will soon get rid of



the lasting thoughts of *Me Before You*,” he says.

Melanie Harding, physiotherapist and clinical head of the rehabilitation unit at Muelmed Hospital Pretoria, agrees. “I have worked with quadriplegic persons for many years. I know that most have a determined will to live even through the hard times. Suicide is such a waste of a life that could be meaningful and productive; that is why we provide rehabilitation for these amazing people who survive spinal cord injury. I know so many successful quads who live amazing full lives! This movie portrays the outside world’s opinion that there is no hope after spinal injury. I do not accept this belief; in fact, I oppose it vehemently,” she tells **Rolling Inspiration**.

Motivational speaker Tracy Todd expresses similar sentiments (check out her superb blog, writingtracytodd.wordpress.com). “The movie has caused outrage among many in the disability sector. Most of the quads I know are tired of the media portraying our disability in a negative light and really wish that the storytellers in our world would do more research before creating unrealistic characters who pander to their own ignorance and insecurities. We don’t all want to die. Many of us are living full, meaningful lives and contributing positively to society and some are doing more than a lot of able-bodied folk. Most of us are too busy living to get busy dying!” she stresses.

Todd says that the movie sends out the wrong messages. “Do people think that I should also just kill myself because I am paralysed from the neck down? I keep reminding myself that this is only a story with one fictional character’s negative outlook on life. It certainly doesn’t represent who I am as a proud quadriplegic woman,” she comments.


While *Me Before You* has its disadvantages, Todd believes that “there is no such thing as bad publicity”. “The controversy over this movie has highlighted the plight of quadriplegics the world over and ignited discussions around disability in general. That in itself is a good thing,” she points out.

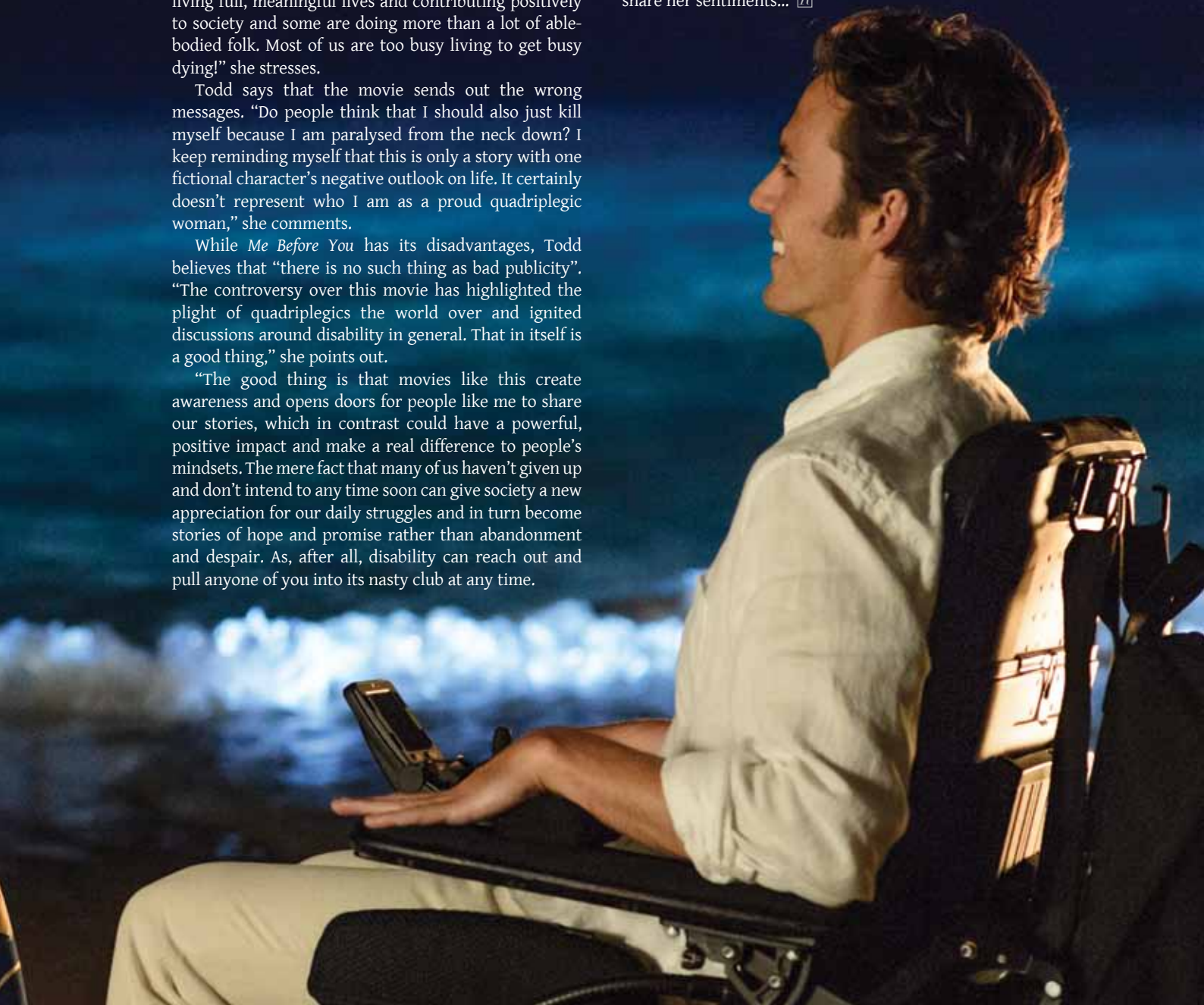
“The good thing is that movies like this create awareness and opens doors for people like me to share our stories, which in contrast could have a powerful, positive impact and make a real difference to people’s mindsets. The mere fact that many of us haven’t given up and don’t intend to any time soon can give society a new appreciation for our daily struggles and in turn become stories of hope and promise rather than abandonment and despair. As, after all, disability can reach out and pull anyone of you into its nasty club at any time.

“I think that the film producers missed a perfect opportunity here to make a real difference to our world. Think about how powerful and transforming this movie could have been if it had had a different outcome? And, I’ve no doubt that the story would still have been a massive hit,” she contends.

At the end of the day, Todd notes that *Me Before You* is a story about one character’s freedom of choice. “Isn’t that what many of us fight for? Our freedom to choose. Who are we to judge? It does worry me, however, that his choice is presented not as selfish and cowardly, but as sacrificial, brave and even noble. Should I also be sparing my family the burden of caring for me? Am I the one being selfish by choosing to live?” she questions.

Ultimately Todd insists that she wants people to know that there is life (and love) after a devastating spinal cord injury. “It can be a good quality life, depending on one’s attitude. I certainly don’t want to kill myself or be pitied in any way. What happened to fairy-tales with happy endings? They do exist in real life. I know because I’m lucky enough to be living one at present,” she concludes.

It’s a pity that the Will Traynor character doesn’t share her sentiments... 



ONE SIZE DOES NOT FIT ALL

One of the key components of an effective bladder management regimen is finding the right catheter to suit your own individual needs. Claire Rencken speaks to Anton Engelbrecht to gain some insight.


Engelbrecht has been a quadriplegic since August 1988, when a rugby injury left the then 22-year-old with a C5/C6 incomplete lesion. He underwent a posterior spinal fusion soon after his injury and was discharged from rehab with a permanent catheter after six months. Because he has some sensory saving – enabling him to feel when his bladder is full – and limited motor function, which has also improved over time, he soon realised that his best way forward would be to self-catheterise. So he and his urologist decided on the best course of action.

For the past two or three years, he has been using Coloplast's Easicath (hydrophilic catheters). For him, this is the best option. He re-uses the catheters a maximum of three times before using a new one. He has tried Speedicath but still prefers Easicath.

Engelbrecht says he can confidently say that he now gets fewer – about one or two – urinary tract

infections (UTIs) per year, whereas two years ago he was getting them six to eight times a year. This is partially due to using the right catheter, but he notes that there are other contributing factors too: “You also need to watch your diet – eat healthy, regular meals. Cut down on sugar and wheat – these substances impact the colonisation of bacteria in the bladder. And you should ensure that you're getting enough rest and sleep.

“Your choice of the right catheter, which should cause minimal damage to your urethra and bladder neck, is like the final key to unlocking the right bladder management solution for you personally. But you always have to look at the big picture,” he explains. The end goal is to not experience any UTIs, which requires that there is no re-use of the catheter at all.

Engelbrecht is still in the process of getting his medical aid to pay for his catheters. His advice to others going through this process is to work with the medical aid as a team – then they will know you are not trying to exploit the system and will be more likely to accommodate your request. 

CATCHING UP WITH INTERNATIONAL STANDARDS OF CARE

A symposium hosted by QASA, and accredited by the South African Medical Association (SAMA), was recently held in Johannesburg, where Professor Andrei Krassioukov, aka Dr K, one of the world's leading specialists in rehabilitation medicine, did a presentation on bladder management in people with spinal cord injuries (SCI) and afflictions.

Dr K led a panel of international and South African speakers who presented their clinical experience, bladder management guidelines, and health law to SCI individuals and medical aid advisors.

The purpose of the symposium was to educate those in decision-making roles regarding policy

development and reimbursement by medical schemes, government, the Road Accident Fund (RAF) and Commissioner for Occupational Injuries on Duty (COID) as well as public and private hospital rehabilitation units.

A good mix of over 70 delegates attended what was considered to be the first of its kind to be held in South Africa, where many learned about the risks associated with bladder catheterisation techniques, such as urinary tract infections (UTIs) and how these can be reduced by using single-use catheters.

It was recommended that the decision to prescribe the use of single-use catheters needs to take into account specific individual conditions, as well as social and economic circumstances. The responsibility is on the medical practitioner to advise on all alternatives, benefits, risks and costs. The symposium concluded with consensus that policy makers, such as medical aids, should work with medical practitioners working in rehabilitation medicine and SCI, towards achieving the best possible outcomes for people with SCI.

Professor Andrei Krassioukov, aka Dr K.



BUT WAIT A MOMENT...

Participating in the Comrades Marathon is not the same as competing – it's not yet the achievement we want, says ARI SEIRLIS



ongratulations to Chaeli Mycroft and Anita Engelbrecht for enduring just over 10 hours of bouncing around over 90 km in their wheelchair joggers, being courageously pushed by James Chevallier, Brett Glen, and Hilton Murray.

I was fortunate enough to witness these two teams on the road on Comrades Day and applauded as they passed.

I then asked myself, "Who am I applauding? The pushers? The passengers? The concept of two people with disabilities being pushed 90 km?" I don't know the answer but I do have a view on this activity.

An extract from the media release states: "There was extra pressure on us to do well, with this being the first time that wheelchair athletes were participating in the Comrades. Getting a bronze medal proved that we have a right to be part of this amazing race and this opens the door for participation by other wheelchair athletes."

The Achilles Athletics Club of South Africa has been in discussions with the Comrades Marathon Association (CMA) for many years, with patience and understanding on both sides, to ensure that when the opportunity exists to provide equitable support and the environment for athletes with disabilities to participate in the Comrades Marathon – emulating the same categories and organisation that is applied in the New York Marathon – then athletes with disabilities in South Africa can celebrate the opportunity to compete in the Comrades Marathon.

I have had the privilege of competing in the New York Marathon twice, and it gave me an opportunity to understand the difference between competing and participating.

What these two resilient women did was participate, not compete. The objective is to be able to compete in various categories and then we can truly celebrate the



Chaeli Mycroft (left) and Anita Engelbrecht.

achievement of integrating people with disabilities into the Comrades Marathon. I'm afraid this was a case of the CMA being placed under duress, and legal instruction from ASA to allow Chaeli and Anita into the field.

There needs to be an element of self-propulsion in the case of a wheelchair user and self-mobilisation in the case of any other disability for you to classify yourself as competing, and for that you earn a medal and an achievement that you can boast about.

The rest is just participating, whether you are a spectator, a marshal, a volunteer at a seconding station or participating by being pushed the whole way, as was the case with Chaeli and Anita.

The way forward would be for athletes with disabilities through the Achilles Club to engage further and with more vigour, to find the right recipe that is safe and accessible for successful integration of all athletes with disabilities into this event, so that barriers can truly be broken. [R](#)

ANNUAL DISABILITY CONFERENCE

“Not everyone with a disability experiences their condition in the same way. It therefore follows that reasonable accommodation cannot be the same for every individual with a disability.” So how does an employer “reasonably accommodate” a person with a disability in their workplace? This was just one of the key topics at this year’s fifth Annual Disability Conference, hosted by the Progression team (for the first time in Cape Town) on June 9, which explored the tools, technologies and systems for reasonably accommodating people with disabilities in the workplace. (We also explore this topic in our article on page 28 of this issue.)

The conference was well attended by human resources and employment equity managers, transformation specialists, health and wellness practitioners and CEOs from around South Africa.



Tarryn Mason, general manager at Progression and host for the 2016 event, guided speakers through a variety of topics linked to reasonable accommodation in the workplace in an informal “Q&A” style format, providing a unique opportunity for the audience to build on ideas and actively contribute to the value of the discussions.

WALK THE TALK FOR MS

What did you do on July 24? **Rolling Inspiration** editor Charleen Clarke did the Walk the Talk. Her cause? She was raising awareness of multiple sclerosis (MS), an unpredictable, often disabling disease of the central nervous system that disrupts the flow of information within the brain, and between the brain and body. Charleen joined a team of some 120 walkers, who were all raising awareness about MS. The team was put together by Brian Eades, who has MS. Hats off to Brian for completing the five-kilometre walk. In support of Charleen’s efforts, **Rolling Inspiration** donated R4 000 to the MS Society. After parking a loooooong two kilometres from the start, Charleen ended up walking 19 km in total. Many thanks to Sanofi Genzyme for sponsoring the kit for the team.



Brian Eades being helped across the finish line by his teammates.

2016 ALBIE SACHS OTASA AWARD



The biennial national congress of the Occupational Therapy Association of South Africa (OTASA) was held at the Birchwood Hotel and Conference Centre in Johannesburg on July 14-16.

During the opening presentation on the first day, Caroline Rule, part of the **Rolling Inspiration** family, was awarded the Albie Sachs OTASA award for her contribution to the field of occupational therapy (OT) and to people with disabilities. “I love my job; I love being an OT. We all do. That’s why it’s such an honour to be singled out like this,” said Rule when she accepted the award from Nina Strydom of the Life Healthcare Group.

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SEPTEMBER 5

World Spinal Cord Injury Day

SEPTEMBER 17

QASA AGM

SEPTEMBER 29 – OCTOBER 2 AND OCTOBER 6-9

Quads 4 Quads

DECEMBER 3

International day for persons with disabilities

WAKE UP. KICK ASS. REPEAT

With a positive attitude, we can turn most things around, even major setbacks like retrenchment and depression!




These past three months have been a rollercoaster for me. I went from suffering work stress and being unfairly dismissed to experiencing extreme mental fatigue. When you're a breadwinner and you get to this point, there's nothing anyone can say or do to change the way you view your situation. And this can lead to severe depression – and that's a lot of emotions to cope with. Trust me, I would never wish this on anyone, especially if you have a disability, because this is when you get to see just how unfair the world can be towards you.

Everyone and everything in our lives is there to give us the lesson we need most at a particular time. When you reach a point where your faith gets challenged, remember that the key is to focus on the higher power. The higher power knows what is beneficial to us; through that inner soft voice, we will be guided to the right path. Not knowing what to do can be worrying and challenging, but breaking your inner barriers and allowing yourself to be vulnerable for once can do you good.

I took myself down memory lane to remind myself how far I've come: what I've been through, especially since my car accident in 2003, and what has always sustained me.

I realised that throughout all my life and with each experience, I get to know who I am. And this is what builds my mental and emotional wellbeing. God has been faithful to me. He's never let me down, even when I didn't give Him much attention. He's always been there for me, watching over me and reminding me always who I am.

Of course, having a secure nine-to-five job is great. Strutting your stuff and proving yourself and getting paid for doing that is wonderful. But what happens when you don't have that secure job any longer? When you still have all the bills to pay and no other source of income? What then happens to your great talent? Will your talent die with your job or would you look at it as an opportunity to take you to the next level? I took a deep breath ... and then I had an a-ha moment! My gift is what is going to sustain me through whatever comes next. Ultimately, I'm continuing to create a better me!

Tomorrow, no matter what, I will pick up from where I left off and create a better future. 



Emilie Olifant is a disability activist, entrepreneur and motivational speaker. She is the director of the Emilie Olifant Foundation, an organisation that strives to address socio-economic issues experienced by people with disabilities.
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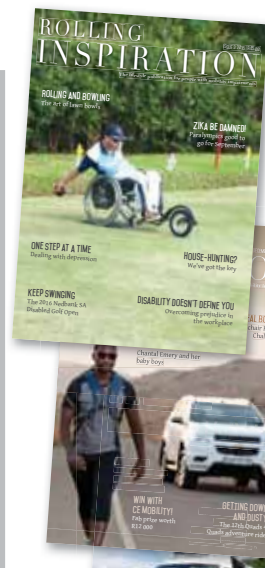
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