

ROLLING INSPIRATION

ISSUE 5 2016 | R45.00

The lifestyle publication for people with mobility impairments

GAUTRAIN BRIDGES THE GAP

Easier commuting
for people
with mobility
impairments

MOBILITY FEATURE: PART 2

Everything you need to know
about public transport

TEAM SA SHINES IN RIO

Our Paralympic athletes
bring home 17 medals

A NIGHT AT THE OPERA

How accessible are South
African theatres?

THE GOOD, THE BAD AND THE FAIR

Competition in the
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GAUTRAIN BRIDGES THE GAP

Joseph Machweu, chairperson of QASA Gauteng South, has given Gautrain's accessibility his stamp of approval. **P6**



NOT FOR SISSIES

Spinal cord injury can exacerbate the inevitable ageing process – but there are a few ways to reduce the impact. **P10**



TEAM SA SHINES IN RIO

South Africa entered 44 athletes in the 2016 Paralympics in Rio de Janeiro, Brazil. Our team came home with 17 medals! **P12**



A NIGHT AT THE OPERA

We investigate how easy it is for theatregoers to attend a performance in comfort. **P19**



GETTING AROUND

In the second of a two-part series, we bring you the latest information on all aspects of public transport. **P20**



NO KIDDING

Being a parent is hard enough, but being a parent to a child amputee is a whole new challenge. We provide some pointers for parents. **P30**



THE GOOD, THE BAD AND THE FAIR

We explore what kind of effect competition has in the workplace. **P31**



DON'T SWEAT IT!

Injury to the spinal cord can usher in some unexpected problems. We look at one of those – body temperature regulation. **P34**

REGULARS

Upfront	2	Employment	31
QASA news	4	Sexuality	32
Travel	16	Rolling Kids	33
Accessibility	22	Medically speaking	34
Ida's corner	26	Classifieds	35
Disability Desk	29	Backchat	36
Amputee corner	30	Subscription form	36

CONTENTS





YES WE CAN....

A BBC advert that promoted the 2016 Paralympics contained an inspiring message about the capabilities of all participating athletes



he stars of the Paralympics in Rio did not disappoint. All of us observers were wowed by superb performances by many talented athletes from all over the world and the South African delegation did the country proud by accumulating 17 medals.

The Paralympics were well attended by enthusiastic spectators and were watched on TV by millions of people around the world. But it should not only be at the time of the Paralympics that the public is fascinated by the achievements of people with disabilities. Ideally, there should be a constant flow of information about how they go about living their lives like everyone else in society. However, this is not yet an ideal world: there are still various barriers that people with disabilities face when trying to navigate their way through life.


But we now have the White Paper on the Rights of Persons with Disabilities (WPRPD), which is a tool for removing these barriers. The WPRPD is intended to accelerate transformation and redress with regard to full inclusion, integration and equality for persons with disabilities. This piece of legislation in the making is a step in the right direction and it shows that the government cares about all its citizens.

Controversy remains, though. Finnish researcher Teppo Kröger has written: “Disability researchers have criticised the concept of care as well as the research based on this concept for infantilising disabled people

and showing them as protected passive dependants unable to make decisions about their own life. It is further argued that the concept of care locates power with the caregiver and promotes patronising attitudes towards the recipients of care, who become portrayed as a burden.” But this should not be because this thinking in itself is an attitudinal barrier which also needs to be broken down.

He adds: “Disability studies have gone on to examine the various ways in which the different ‘disabling barriers’ of society limit the life of disabled people. In addition to physical and attitudinal barriers, the discriminatory and disempowering practices of the current labour market and care service systems have become highlighted as major barriers.”

The vision of the WPRPD, which is “a free and just society inclusive of all persons with disabilities as equal citizens”, means that all policies and legislation, across all spheres of government and of every socio-economic sector, directly impacts on the lives of persons with disabilities. Thus, all policies and legislation that affect the lives of persons with disabilities will have to be reviewed.

This tool places people with disabilities in a situation where there is very little that prevents us from participating in everyday life. So the catchy tune of the advert was relevant not only for the Paralympics in Rio; it now carries hope for doing better in Tokyo in 2020 and every day in every way. Yes, we can participate; yes, we can enjoy life on an equal footing with everyone else. To watch the advert go to www.youtube.com/watch?v=xTjdpG8HL2o. 



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!

It's your last chance to win this fabulous prize – we will be announcing our winner in the next issue!

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.

This camera produces superb images thanks to a large 18 megapixel APS-C size sensor. You can print your images up to A2 size, or creatively crop them and still achieve great quality.

Atmospheric pictures in low light come out perfectly, thanks to the large ISO sensitivity range of ISO 100-6 400 (expandable to ISO 12 800), which reduces the need for a flash – so you can capture the natural ambience of every precious moment. You can also create stunning portrait shots that emphasise your subject against beautiful soft blurred backgrounds, thanks to the shallow depth of field associated with digital single-lens reflex (DSLR) photography.

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

It's time for us to announce our overall winner. We have run this competition over the last five issues of the magazine and each of our five winners received a Smergos Best Bag Forever (BBF) bags, worth R400. Now, as promised, our overall winner will receive a R1 000 shopping voucher from Spar!



And the winner is ... Johann Meintjes! He is a teacher at Laerskool Constantiapark, and sent in the winning photo for Issue 2, 2016. Thanks again for taking part in our competition, Johann, and well done! We do hope you enjoy your prize.



Above: Previous "That's how I roll" winner, Juanita Fourie, with her Smergos bag.

SOCIAL ROLLER OF THE MONTH

Our next winner is Lisa Lewis. Lisa, you have won yourself a Smergos BBF bag. Thank you for the interest you have shown in our publication.

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. Your comments could make you a winner.

Karen Key

on Radio

The DISABILITY REPORT

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

SAfm
104-107

SABAT RACE DAY

The South African Festival of Motoring, which took place recently at the revamped Kyalami Grand Prix circuit in Midrand, provided a vibrant and thrilling backdrop for the much-anticipated SABAT QuadPara Race Day, which celebrates the relationship between SABAT Batteries and QASA.

The Festival provided something for everyone – from car enthusiasts to families looking for a day out. The SABAT/QASA Race Day is a fine example of meaningful, hands-on corporate social responsibility. “There is a genuine relationship between our organisation and the team from SABAT,” says Ari Seirlis, CEO of QASA. “SABAT has provided our members with free batteries for powering wheelchairs over many years and you cannot put a price on the importance of mobility. But it is so much more than that. The SABAT retail agents link up with our members around the country and go out of their way to look after them.”



Above: Race participants and attendees enjoying the SABAT/QASA Race Day.

CANNONBALL RUN

This initiative, a project of Roundtable Sandown 150 organised by Ross Crichton, arrived in Bloemfontein in August to hand over two power wheelchairs and two commodes to recipients at the Jean Webber Home. QASA is the beneficiary of the Cannonball Run, which provides resources for its projects and services.



Representatives from the Cannonball Run in Bloemfontein in August.

WORLD SPINAL CORD INJURY DAY

Members of the QuadPara Association of the Western Cape created awareness about the prevention of spinal cord injury at the Cape Town Waterfront on Monday September 5, which was World Spinal Cord Injury Day. Tourists and shoppers had an opportunity to understand the benefits of wearing a seatbelt in the event of a car crash and to embrace the QASA slogan, “Buckle up – we don’t want new members!”



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

Charged up for Summer

7 Ways to Boost Your Battery Life

Odd couple

An old battery should not be paired with a new one - more power will be drawn from the new one causing it to deteriorate more quickly.

Summer Shower Alert

Joysticks, control boxes and batteries don't like the wet. Keep a shower cap or plastic bag handy to cover them in case of unexpected showers.

Don't wait until it's too late

Keep your batteries charging every evening. Regular charging extends battery life.

The perfect match

Use the correct charger for the type and voltage of the batteries. Using the incorrect charger is ineffective at best and explosive at worst!

Feeling Flat

Allowing flat batteries to stand will damage them irreparably. Charge fully before a period of non-use.

Unplugged

If you are not going to use your chair for some time, disconnect the batteries to prevent them discharging.

All good things come to an end

Even with expert care, batteries will deteriorate over time and need to be replaced.



GAUTRAIN

BRIDGES THE GAP

Joseph Machweu, chairperson of Impumelelo Self-help Centre in Springs, and chairperson of the QuadPara Association of Gauteng South, gave the Gautrain his stamp of approval



Machweu's life changed forever in an instant 10 years ago, when he was shot one morning on his way to work. "At the time, I worked at what was then known as Rannies Bank – now Bidvest Bank. It was my turn to get to work early that day as I had the key to unlock the

vault. But I never made it there."

He says for a long time he was in denial after receiving the news that he was a complete C5/C6 quadriplegic. "I didn't even want to talk about the shooting and what had happened. Eventually I met some people who coached me and pointed me in the right direction and I went to what is now the Life Riverfield Lodge Rehab Centre, near Fourways in Johannesburg. I was discharged in 2007 after four months. With the guidance of my physiotherapist, my occupational therapist and my social worker, I was able to carry on with my life."

Machweu then moved into the Impumelelo Self-Help Centre in Springs, but it wasn't long before there were problems with management and there was talk of the centre closing down. Fortunately, new management was brought in and Machweu was elected chairperson of the centre – a position he still holds today.

However, it was in his capacity as chairperson of the QuadPara Association of Gauteng South that Machweu was part of a group that took a tour as a region to test the accessibility of the Gautrain system for people with disabilities.

Gautrain's mission in terms of the disability sector is to provide convenient access for wheelchairs, and also to ease travelling for passengers with walking difficulties. According to Gautrain Management Agency CEO, Mr Jack van der Merwe, "Level boarding is a long-time feature of global underground railways. Matching the height and minimising the gap between Gautrain's coach floor and the platform means easy access for





Above: The accessible level of the ticket machine accommodates wheelchair users and those with mobility impairments.

Below: Joseph Machweu radiates optimism wherever he goes.



people with mobility impairments and wheelchair users. For people with difficulties in walking or balancing, features such as non-slip surfaces and handrails are provided. Space is also allocated for wheelchairs in a designated area on each train.”

It seems they have succeeded. Machweu comments: “I think the Gautrain is very accessible and user-friendly. The most impressive feature for me is that the platform

is actually in line with the height of the train, making it easy for wheelchair users to get in and out.”

Gautrain’s station environments are also designed to ease access for the mobility impaired. Wide access gates make provision for wheelchairs. The accessible levels of ticket vending machines, toilets and lift designs all accommodate wheelchair users and those with mobility impairments. The window level at the ticket office is within easy reach for those in wheelchairs.

In addition, passengers travelling to and from the airport will find several measures in place to ease mobility. Lifts at Gautrain’s OR Tambo International Airport are able to accommodate both luggage trolleys and walking aids or wheelchairs. Arrangements are in place with the Airports Company of South Africa to ensure a steady supply of luggage trolleys in the unpaid concourse. Design features at Sandton Station and the interiors of airport coaches accommodate the needs of wheelchair users or those with mobility impairments that are carrying luggage.

On Gautrain’s dedicated Bus Link, low entrance floors, wide doorways and folding ramps make it easier for passengers who have walking difficulties or those who need to use wheelchairs. Inside the buses, wheelchair positions are fitted in accordance with the best practice designs available.

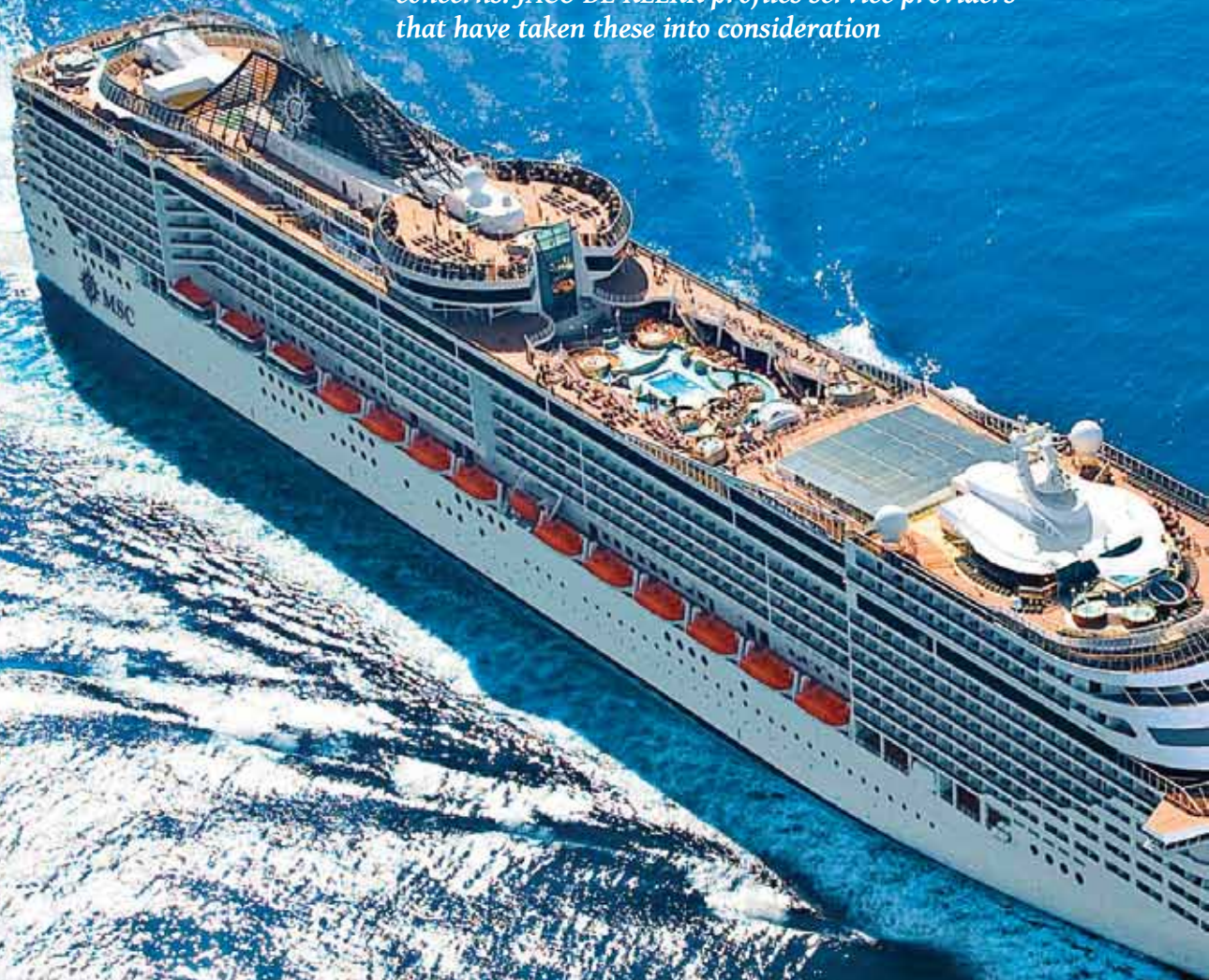
In all instances, Gautrain strives to comply with statutory requirements as well as industry best practices.

Machweu concludes: “It’s a comfortable way to travel and it saves so much time. The only disadvantage for those of us who live in the townships is that there are no stations there for us, so we can’t really make use of the system.” ^[7]

For more information visit www.gautrain.co.za or call 0800 42887246.

COME SAIL AWAY

Cruise passengers with disabilities have distinct concerns. JACO DE KLERK profiles service providers that have taken these into consideration





Can I open my stateroom door and smoothly roll my wheelchair inside? Can I easily take a shower? Is it possible to get off the ship in port? Will I be able to enjoy a swim in the ship pool? These are the types of questions you might have if you're a cruise passenger with a disability. Fortunately, the cruise-liner industry offers various helpful options.

CRUISES INTERNATIONAL

A great starting point is Cruises International, headquartered in Hyde Park, Johannesburg, which connects would-be travellers to some of the top cruise lines in the world. "Each year we send thousands of passengers on the voyage of their dreams," a representative says.

Founded in 1992 by George Argyropoulos, Cruises International was one of the first agencies to specialise in representing and marketing selected international cruise lines and is now the largest in South Africa. It represents Celebrity Cruises, Royal Caribbean International, Crystal Cruises, Seabourn, Azamara Club Cruises, Oceania Cruises, SeaDream Yacht Club and AmaWaterways, and arranges private yacht charters, conferences and incentives at sea.

Prospective travellers could also contact an array of cruise lines directly. These include:

CUNARD

"All three of Cunard's ships have wheelchair-accessible staterooms," notes Special Needs at Sea, a global provider of wheelchair, scooter, oxygen and other special needs equipment rentals. "About two percent of Cunard's rooms are accessible: The Queen Mary 2 has the most accessible staterooms (31 out of 1 296), followed by the Queen Victoria (20 out of 1 000) and the Queen Elizabeth with 20 out of 1 029."

Cunard's staterooms are across different categories, including the queen grill suites, princess grill suites, balcony, ocean view and inside rooms. Rooms are equipped with accessible closet rods, lowered shelves and bed heights of 22 inches (almost 56 cm). Stateroom

bathrooms are equipped with a roll-in shower, grab bars, lowered sink, fold-down shower stool, ramped threshold, toilet seat riser, sliding bathroom doors, hand-held mirror and portable hair dryer.

"Accessibility highlights of the ships themselves include room for 180 degree turns in wheelchairs, public rooms with gradual inclines, accessible seating for shows and accessible seating in the main dining hall. Cunard also provides embarkation and debarkation priority to guests with special needs," the provider points out.

MSC CRUISES

"All on-board staff receive special in-house training so that they are aware of the needs of guests with

disabilities or reduced mobility and are able to give them the necessary assistance," states its website.

"All decks, public areas and tenders are designed to be as accessible as possible for guests with reduced mobility. In addition, there are a number of specially fitted staterooms available on each ship in the fleet."

The Splendida, Fantasia, Musica, Opera and Poesia have the most accessible accommodation and the largest number of accessible staterooms, according to Special Needs at Sea. "These ships all have roll-in showers, grab bars in the bathroom and shower, raised toilet seats, adjustable shower heights and fold-down shower benches. The spa on each of these ships is also wheelchair-accessible."

There is wheelchair access to all public rooms, elevators support wheelchairs and scooters, the main dining room and casino have accessible tables and wheelchair spaces are available in the theatre.

PRINCESS CRUISES

"Our ships provide a quality of service and a variety of accessible features to make your voyage a relaxing and enjoyable experience," the cruise line says. "We are working on additional modifications to the fleet as well as our services to further enhance your guest experience."

Princess initiated its Princess AccessSM programme in 1992. All its vessels have a selection of wheelchair-accessible staterooms. "The Crown Class Ships, specifically the Emerald Princess and Ruby Princess, and the Diamond Class Ships, specifically the Diamond Princess and Sapphire Princess, have the most accessible staterooms, with 30 and 27 accessible staterooms, respectively, and are in a variety of categories."


Accessible rooms have widened doorways into the cabin and bathroom; wheel-in showers, hand-held showerheads and distress alarms; lowered closet railings, sinks, and handrails; and removed or revamped thresholds. "The Princess fleet also has access-friendly restaurants, theatres, spas, lounges and open deck space," Special Needs at Sea points out. "Elevators have at least a 36 inch (around 90 cm) doorway, and wheelchair seating is available in show lounges and other public spaces."

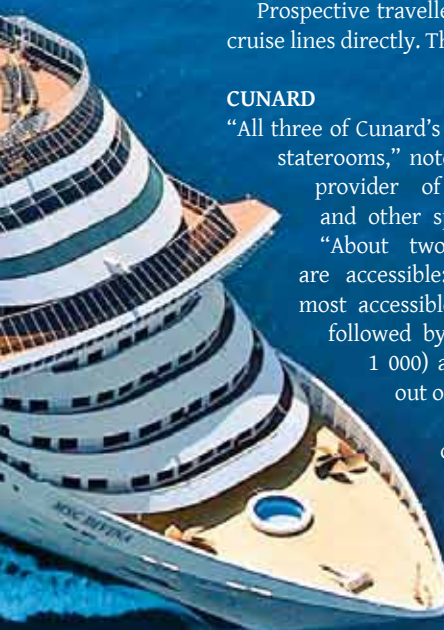
REGENT SEVEN SEAS CRUISES

Special Needs at Sea says that all of Regent's ships have accessible staterooms. "Seven Seas Mariner offers six accessible cabin suites; the Voyager and Navigator offer four, two of which are the highly desired Penthouse suites.

"As the ships do not have many accessible suites, it is highly advised to book early to reserve them. The staterooms are equipped with lowered closet rods and shelves. The bathrooms have a roll-in shower, grab bars, a lowered sink, a fold-down shower stool, a hand-held showerhead, a toilet seat riser and ramped thresholds."

The ships themselves are also accessible with space to enable 180 degree turns for wheelchairs; automatic doors; public rooms with gradual inclines; accessible gaming tables; accessible seating for the shows; and accessible seating in the main dining hall.

Happy sailing... 





NOT FOR SISSIES

Spinal cord injury can exacerbate the inevitable ageing process – but there are a few ways to reduce the impact. ZELMARIE GOOSEN reports



As we age, many of our physical systems are affected: our skin and hair start to thin, we lose height because of changes in posture and the compression of joints, spinal bones and discs, and our hearing and eyesight weaken.

SCI exacerbates the decline in particular in the musculoskeletal, cardiovascular, gastrointestinal (GI) and pulmonary systems.

Most of the research done on the correlation between SCI and ageing suggests that SCI not only represents a model or partial model for premature ageing but that it occurs in certain body systems because of additional stresses on physical systems and their ability to repair themselves. According to *Medscape.com*, a number of long-term follow-up studies and many authors have documented the tendency for individuals with SCI to age faster than the able-bodied population does.

MUSCULOSKELETAL SYSTEM

Premature ageing may occur in the femoral and hip regions in persons with SCI, as noted in Spinal Cord Injury Rehabilitation Evidence (the SCIRE project). It may be that declines in bone mass occur rapidly following injury, and reach a new steady state within three to eight years post injury, depending on the bone parameter and skeletal site.

WHAT YOU CAN DO

See a specialist for joint assessment, modification of equipment and equipment assessment and the implementation of protective manoeuvres to preserve joints.

CARDIOVASCULAR SYSTEM

SCIRE reports that greater levels of atherosclerotic

burden, higher levels of C-reactive protein levels and abnormal lipid profiles compared to the able-bodied population increase the risk of cardiovascular disease in persons with SCI.

WHAT YOU CAN DO

Increase your activity level, eat a balanced diet and have a cardiovascular assessment done.

GI SYSTEM

According to *Craighospital.org*, weight gain, increased constipation, increased incontinence and increased rectal bleeding and haemorrhoids are possibilities. Someone with SCI may also be more at risk than an able-bodied person for gallstones.


WHAT YOU CAN DO

Manage a routine bowel programme that fits your lifestyle, adjust medication and diet if necessary, have routine colorectal screenings, go on a weight-loss regimen if needed and consider the need for increased attendant care.

PULMONARY SYSTEM

Medscape.com further reports that the pulmonary system experiences decreased compliance or elasticity of the lung tissues, interfering with the lungs' ability to expand. In addition, the chest wall loses its flexibility and muscle strength, leading to a restriction of pulmonary function. Vital capacity, maximum voluntary ventilation, expiratory flow rate and forced expiratory ventilation all decline with ageing.

WHAT YOU CAN DO

Increase your activity level, get immunised against flu and pneumonia, go for respiratory assessment, practise deep breathing and (if you're a smoker) quit smoking. 

EVERY CHILD DESERVES A CHANCE

That is the motto of Frances Vorweg School in Haddon, Johannesburg, whose focus is the education of learners with cerebral palsy or with learning disabilities. CLAIRE RENCKEN paid the school a visit




The mission of Frances Vorweg School is to create an inclusive, supportive, stimulating and structured environment, in which the learner can feel emotionally and socially safe, in order to be able to work towards achieving his or her full potential and becoming an integrated member of society.

The school values and encourages learners to develop the following six characteristics: trustworthiness, respect, responsibility, fairness, caring and good citizenship.

In a previous edition of **Rolling Inspiration**, the Grade R class of the school was announced as the winner of our "That's how I roll" competition and won a Smergos BBF bag. The class teacher, Anandi Spies, decided that Juanita Fourie, an older learner

at the school, who helps out a lot with the Grade R class, would be the ideal recipient of the bag.

So, on Friday September 2, as pupils and teachers celebrated Casual Day, Fourie was presented with her bag and each Grade R learner was given a copy of **Rolling Inspiration** to take home to their families. 



Left: The Grade R pupils with their copies of *Rolling Inspiration*.

Right: *Rolling Inspiration* assistant editor, Claire Rencken, also gave Juanita Fourie (seated) and teacher Anandi Spies (standing, left) copies of the magazine.

A-Z GUIDE

LAST CHANCE TO ADVERTISE!

A fantastic A5 supplement to **Rolling Inspiration** magazine

Have you ever had a question, concern, problem or complaint that has gone unresolved because you couldn't figure out the proper agency or resource to contact? Well ... we have the solution. Our **A - Z Guide** will assist people to find exactly what they're looking for.

Don't miss out on the opportunity to advertise in this invaluable publication, which will help you reach thousands of potential customers! Plus, this supplement only comes out ONCE A YEAR. So it's a really good investment that offers real value for money.

For more information about advertising in this supplement, please contact Elsie van Wyk on (011) 782-1070 or elsie@charmونت.co.za



TEAM SA SHINES IN RIO

South Africa entered 44 athletes in the 2016 Paralympics in Rio de Janeiro, Brazil, which took place from September 7 to September 18. Our team won a total of 17 medals – seven gold, six silver and four bronze. CLAIRE RENCKEN reports

T

he South African team was made up of athletes who qualified in archery, athletics, canoeing, cycling, equestrian, power-lifting, rowing, swimming, shooting and wheelchair tennis. There were a few that stood out for their outstanding performances.

The first was swimmer Kevin Paul, who won for South Africa its first gold medal at this year's Games. Paul, 25, won the SB9 100 m breaststroke event in 1:04:86 seconds to win his second Paralympic gold medal (he won in Beijing eight years ago). In London four years ago, Paul had to settle for silver in his keynote event.

Paul, formerly of Port Elizabeth but now training in KwaZulu-Natal's Pinetown with national swimming coach Graham Hill, said of his race: "It wasn't my personal best, but tonight was never about time, it was

about getting into that pool and getting to the 100 m first. I can jump into the pool next week and swim a faster time, but it's not going to get me a Paralympic gold," Paul said.

The next athlete to get tongues wagging was our new blade runner – 14-year-old Ntando Mahlangu. He won a silver medal in the men's T42 200 m final. Mahlangu is a double leg above-the-knee amputee, who only learnt to walk four years ago after deciding to have his legs amputated as, until then, he had spent his life in a wheelchair.

When Team SA arrived back in Johannesburg from the Paralympic Games, it was probably Mahlangu who drew the loudest applause from the well-wishers at OR Tambo International Airport. However, despite the adulation, the level-headed high-school pupil still sees himself as "just another kid".

"This does not change me, I am still the same person



that I've always been," Mahlangu said. "I don't think I am famous or anything like that. I'm still a 14-year-old kid going to school, who is not better than anyone else."

Another name on everyone's lips – and not for the first time – was Ernst van Dyk. The veteran hand-cyclist picked up South Africa's 10th medal in Rio, after winning the cycling road race in a time of 1:37:49. It was van Dyk's eighth Paralympic medal, in his fifth Games (he is aiming for Tokyo 2020 in the marathon). The 43-year-old has now called time on his Paralympic Cycling career. It was his second career gold, after picking up a gold medal at the 2008 Beijing Games.

The closing ceremony in Rio was a mixture of joy and sadness, as Brazil handed over the baton for Tokyo 2020. While the night in Rio's Maracana stadium featured a joyful extravaganza of music and dance, it was tinged with sadness after the tragic death of Iranian paracyclist Bahman Golbarnezhad, following a crash in the Saturday's C4-5 road race. Golbarnezhad is the first Paralympian to have died in the history of the Games.

SOUTH AFRICA'S 17 MEDALLISTS ARE AS FOLLOWS:

Gold

- Kevin Paul - Swimming - Men's 100m Breaststroke - SB9
- Hilton Langenhoven - Athletics - Men's Long Jump - T12
- Charl du Toit - Athletics - Men's 100m - T37
- Ernst van Dyk - Cycling - Men's Road Race - H5
- Reinhardt Hamman - Athletics - Men's Javelin Throw - F38
- Charl du Toit - Athletics - Men's 400m - T37
- Dyan Buis - Athletics - Men's 400m - T38

Silver

- Ilse Hayes - Athletics - Women's 100m - T13
- Ntando Mahlangu - Athletics - Men's 200m - T42
- Anrune Liebenberg - Athletics - Women's 400m - T47
- Jonathan Ntutu - Athletics - Men's 100m - T12
- Ilse Hayes - Athletics - Women's 400m - T13
- Hilton Langenhoven - Athletics - Men's 200m - T12

Bronze

- Fanie van der Merwe - Athletics - Men's 100m - T37
- Tyrone Pillay - Athletics - Men's Shot Put - T42
- Zanele Situ - Athletics - Women's Javelin Throw - F54
- Dyan Buis - Athletics - Men's Long Jump - T38

Leon Fleiser, manager: team preparations and academy systems at SASCOC, and our very own sport columnist, had the following to say about the Games: "I was extremely proud and humbled to lead such a quality team. The Paralympics are the pinnacle for any athlete with a disability and Rio, despite all the media scrutiny before the Games, delivered a spectacle to remember. To the 44 athletes in the team and the wonderful management, coaches and medical personnel, I just want to say a huge thank you – you made my job as the Chef de Mission so easy. A big thank also goes out to the South African public that came out in their thousands to welcome us back in South Africa.

"Special thanks must also go to our Minister of Sport and Recreation, Fikile Mbalula, for all his support. He was in Rio to spur us on and was at the airport to welcome us back. Lastly, let's not forget to mention the sponsors who made it all possible: Nedbank, SASOL, Telkom, National Lotteries Commission, SAA, 361 and the Department of Sport and Recreation South Africa. Without them none of this would have been possible." [R](#)



Netcare

Rehabilitation Hospital

Stroke awareness –success stories -

“We don’t know how STRONG we are until being strong is the only CHOICE we have”

My story on stroke - Bongani Mkhabela

My name is Bongani Mkhabela. I was born in 1974 in Swaziland and am now staying in Boksburg Klippoortjie, EAST RAND. I’m a Father of two children, a girl (16 years) and a Boy (3 years). I have my own business working from home. My company does marketing and sales. We also do printing of marketing items and branding. We have just started a business to supply all Sasol products to mining companies.

The day I got sick

It was on July 22, 2016 on a Friday morning at about 8:30. I was driving to SARS offices. As I drove to the parking I felt my body changing from my left side. My body got frozen and I was shaking. I went inside the SARS offices and finished all that I had to do. And I drove off. As I got to Boksburg town I noticed that my hand could not work. I then parked the car on the side of the road and called my wife. She came over to rescue me and drove me to hospital. That is when I started noticing that I was sick. I got hospitalised at Sunward Park hospital in Boksburg. I was taken to ICU. After I was stabilized I was taken to Auckland Park Rehabilitation Hospital. That is where I joined the rehab group.

A few days later I was introduced to therapists doing different types of therapy, as I could not walk or move the left side of my body. The therapist that I was introduced to include the speech therapist, the physiotherapist, the occupational therapist, the dietician and the VOC specialist which I had to all work with to improve my condition.

The speech therapist is helping me with my speech and talking as well as my eating. The physiotherapist is helping me with my body movements. The occupational therapist is teaching me on my clothing and toilet movements because I can only use one arm. VOC will assist in going back to work.



Understanding of working with the rehab center

After being aware of all the teachings I felt so happy that I can be able to be in control of my life again. All the therapists were part of my healing from a stroke. They worked very hard to help me understand myself. With the sickness that I have I now understand and see life in a different way. The stroke I had made me understands and believes in faith. All the faith I had about getting healed became a true dream. I now believe that healing is possible through faith.

Support that was given by my family has been so great. They did all they could do as a family with full support. I give credit to my wife who was taking care of everything at home for the children. Through faith we were blessed and did not have any problems with finances. She has always been very strong all through my sickness.

Awareness

All the support from friends and family was also so great. My value to other people was then noticed. Motivating other people with what I had would be a good thing to do.

Conclusion

Winning the battle of having a stroke was a great achievement through faith in God and people around me in the rehab and hospital. All the rehab did was very great for me to recover. Their teachings were so helpful for my recovery.

Mr Marais' Stroke Story

My name is Gerrit Marais and I am 54 years old. I have a beautiful wife and three beautiful daughters. I have 2 dogs. I worked as a supervisor in a vehicle workshop. I enjoy fishing and cycling. I am generally a healthy person who does not get sick.

On a Sunday in July 2016 I got a bad headache and started vomiting. I decided to stay at home and went to the hospital the next morning (Suikerbosrand Clinic). When I arrived I was admitted and diagnosed with meningitis. I was put into isolation. I was then transferred to Milpark for more medical treatment but unfortunately I suffered from a stroke (1 big stroke and 4 small strokes). I couldn't lift my right arm and right leg. My mouth was very sore and my speech was unclear. I had poor oral coordination when talking and eating.

I was feeling very down as I couldn't move by myself. I was unstable and had bad speech. I then came to Rita Henn and Partners, at Netcare Auckland Park Rehabilitation Hospital, where I did therapy daily. In speech therapy I had VitalStim and worked on my face movement and speech clarity. I can now eat without problems and my speech is getting better daily. I also went for a hearing test and learnt about my hearing loss. In physiotherapy I began sitting straight and rolling and standing independently and now I am walking. In OT I completed toilet training, eating and dressing which I am now able to complete more by myself. I used to wear an eye patch but then after a few weeks it improved so I don't need it anymore. I also attended different groups with all other people and we helped and stimulated each other. Rehab has been very good. You are not in bed, you are busy with sessions getting stronger all the time.



When I leave rehab I will go home and not go back to work yet. I will continue with therapy as an outpatient in Benoni. My goals for the future include:

- Walking without any support
- Being able to use both hands independently
- I want my face to "come right" and improve my speech
- I want to go fishing at the sea
- Do a run and complete more training
- I want to rest more by the sea and have a holiday

I have learnt a lot from the people I have met. I am a more patient man. I have learnt that your emotions can bring you down and that you need to be patient with yourself. My family has been so supportive with everything, physically and emotionally. I have learnt to look forward and not to dwell on the past. This is now a new start in my life.

For further information regarding any Physical Rehabilitation, contact us on 011 489 1111 or go to our website: www.netcare.co.za



TRAINS AND BOATS AND PLANES ... AND WHEELCHAIRS

As we gear up to planning our end-of-the-year holidays, we need to consider how we fly with our wheelchairs. Here are some pointers

Always contact the airline after confirmation of your flight booking to inform them that you are travelling with a wheelchair and require assistance. There may be extra forms to fill in or information to give telephonically, so have the details handy: the weight, its type and whether it folds.

Confirm that the airline has a record of your requests at least 48 hours before you travel and get to the airport early.

Before travelling make sure that your wheelchair is in full working order – get a maintenance check-up. Ensure that you have basic tools and parts for the chair's assembly and repair in case something goes wrong.

Power-wheelchair battery chargers with a typical 240 v charger will not work on mains in a country using 110 v. Your charger may be dual voltage and therefore be able to switch over, but if not, you may need a step-down transformer.

Take dry cell batteries (the sealed type), as most airlines will not carry a wet cell battery without a special lead-lined battery box.

Make sure that your name and address are on all items of equipment and that your chair has a gate delivery tag. Make sure you get one at the check-in counter and place it onto your chair.

Stay in your chair until you reach the door of the plane (either on the sky bridge or in the PAU). Often ground staff want you to use their transporter chair to the baggage claim area, but you must insist that your chair be brought to the plane door. It is your human right!

Remove seat cushions and any parts that could easily become separated from the chair. Take these items into the cabin with you. Attach instructions detailing how and where to disconnect the batteries as well as instructions for any other disassembly or preparations that may be necessary for transport. Be aware that some cargo openings are only 63 cm high, therefore disassembly may be required. Having instructions on your equipment is very important, because the crew who you deal with are not necessarily the crew who will load it and will definitely not be the crew who unload it!

Aisle chairs are narrow straight-backed chairs with small wheels underneath. It may take a couple of people to assist you to transfer to the chair safely. Always tell the staff how you prefer to be handled, and if you have a carer travelling with you, let them assist, as they know you best.

Before landing, remind the cabin crew that you will need your equipment brought to the door of the plane, so that they can radio ahead to make the arrangements.

Forward planning reduces stress and makes for happy travels! 



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

SPOIL YOURSELF AT KUZUKO LODGE

Kuzuko Lodge in Addo Elephant National Park offers a great combination: luxury, wilderness and access



any people know Addo Elephant National Park's main game viewing area, but the park has expanded in every direction to include several other Eastern Cape habitat biomes. Over the Zuurberg Mountains to the north and into the arid Little

Karoo is the park's Kuzuko Contractual Area and Kuzuko Lodge. The lodge is fully accessible for wheelchair users, and is an ideal place for the mobility-impaired to spoil themselves for honeymoons and other special occasions.

ACCESS ADAPTATIONS:

- Although it's on a hillside the main complex is equipped with ramps throughout, enabling ease of access.

himself – so he knows about access. Furthermore, the Disability Empowerment Concern (DEC) has 20 percent shares in the lodge.

HOW TO GET THERE

From Port Elizabeth to Kuzuko Lodge is 170 km via the N2, N10 and R400. From the interior it can be reached from Cradock, Somerset East and Jansenville.



More information (including rates) about Kuzuko, Addo Elephant 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 on line 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. [7]

- Three of the 24 private chalets are adapted for wheelchair users.
- While a few features are not yet up to Tourism Grading Council UA specifications, roll-in showers, grab rails, lowered wardrobes, paved ramps and flush thresholds are in place.
- A raised loading platform makes it easy for wheelchair users to go on game drives.

One of the directors of Kuzuko uses a wheelchair



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



www.wildcard.co.za
wildcard@sanparks.org
+27 (0)861 GO WILD (46 9453)

RAINBOW BOWLS

In August, Bedfordview Country Club was host to a three-week bowls festival, which culminated in a unique event, the Accumulo Rainbow Trips tournament



T

his event invited the country's top bowlers living with various disabilities to team up with some of the leading able-bodied bowlers and the top development bowlers in 48 teams of three (or trips).

Desiree Levin, a remarkable lady with Guillain-Barré syndrome, was one of the disability bowlers and the engine behind organising the event. She was also one of the participants in the

have grown and it has been our privilege to join hands with the Accumulo team as part of the Accumulo Bowls Festival." She said this year, more than 380 bowlers signed up for the Accumulo Festival, although in the end only 144 could take part in the trips.

Each team then had to play seven mini matches and deliver 294 bowls over the course of two days to determine the ultimate positions, but in truth there were no winners and losers, only winners.

Desiree said of the sport, "It is easy to learn, but hard to master," and that because it was relatively non-physical, anyone could participate. "Before, there used to be just black bowls balls but the image of the sport is changing from being 'old man's marbles' to a social sport requiring great skill which accommodates the youth. The greens of the Bedfordview Country Club were littered with some brightly coloured balls, which Desiree explained was also a move to get younger people excited about the sport. She noted




48 teams, each with a bowler in a wheelchair, or with prosthetic or missing limbs, cerebral palsy, polio etc., while others still had visual impairments and bowl with a director to guide them and help them aim... While of different ages, genders, races and varying abilities, the bowlers had one thing in common – they weren't going to let anything stand in the way of their passion for the sport.

Desiree shares that when she became disabled a few years ago, she decided she was not going to let her physical circumstances determine the course of her life. Already a member of the Lombardy East Bowling Club, she decided to initiate the Rainbow Trips tournament, which, as its name suggests, has a vision of bringing bowlers of all colours, creeds, ages and ability levels together under one roof. "Each year we



Desiree Levin scans the green as her brainchild unfolds.

that, ironically, becoming what society might label 'disabled' had in fact been the Launchpad for her dreams. "I have been to the World Championships, I have been a bowls analyst on TV and I have featured in many newspapers," she said. "I have become more focused as a person and more determined than ever to live my life and give of my best." 



A NIGHT AT THE OPERA

How easy is it for theatregoers to attend a stage performance in comfort?
DEBORAH LOUW buys a ticket



n evening at the theatre – watching a musical, a stage play or a symphony concert – is something that most of us enjoy. A live performance is really hard to beat, no matter how good the quality of your DVD player at home.

But if you have a disability, how easy is it to access a theatre, its foyer, bar area, parking and toilets? As things currently stand in South Africa, facilities vary widely. These are some of the disability-friendly spaces:

ARTSCAPE, CAPE TOWN

There is provision for two wheelchairs at each of the Artscape venues. Lifts are available to take patrons from the ground-floor foyer to the upstairs bars and upper levels of the auditorium. Management asks, though, that when you book, you let them know in advance what your particular requirements are. The CEO of Artscape Marlene le Roux is a member of the Presidential Working Group looking at disability issues, so we can expect more disability-focused initiatives in the future.

ELIZABETH SNEDDON THEATRE, DURBAN

One of the most user-friendly venues, it has specific seats that can be reserved through Computicket for patrons wishing to remain in their wheelchairs. They are located in the back row of the auditorium, close to the entrance doors (no stairs). The theatre's foyer and bar area, in addition to toilets for patrons in wheelchairs, are all easily accessible with no stairs.

TEATRO AT MONTECASINO, GAUTENG

Wheelchair access can be arranged; contact management on 011 510 7472 Monday to Friday 9am – 5pm to arrange wheelchair access. Certain aisle seats are available in the stalls for patrons who are able to

transfer from a chair into an aisle seat. (Ushers will safely store the chair until the end of the performance.)

THE FUGARD THEATRE, CAPE TOWN

Disabled facilities include special parking and toilet facilities.


THE JOBURG THEATRE (FORMERLY THE CIVIC), JOHANNESBURG

Good facilities are available for people with a disability – including toilets, a ramp and provision for wheelchairs in all of the venues. Service animals are also welcome.

“A live performance is really hard to beat, no matter how good the quality of your DVD player.”

THE BAXTER, CAPE TOWN

Wheelchair positions are located in the Theatre (stalls), Concert Hall and Golden Arrow Studio Theatre. When booking through Computicket, request a wheelchair space. Accessible toilets are located in the public toilets in the main foyer. A lift for wheelchairs in the main foyer allows access to the restaurant. Wheelchair designated parking is located at two of its entrances. (Front of House Manager: 021 680 3967.)

We look forward to the day when all performance spaces cater for people with disabilities – when going to the theatre will be enjoyable (and hassle-free) for everyone. 

GETTING AROUND

In this second part of two features, MANDY LATIMORE brings you the latest information on public transport



Urban municipalities are all moving towards intermodal inclusive public transport systems that will include both motorised and non-motorised transport types and be universally accessible. To achieve this goal, planning has to start from information dissemination – websites need to provide specific information for people who require extra assistance.

BUSES

Bus Rapid Transit (BRT)

Gauteng has three systems currently in place – the Rea Vaya system that connects Soweto to Johannesburg city and the northern suburbs; the Areyeng system within Tshwane and a new system to be introduced in the Ekurhuleni municipal area.

Cape Town's MyCiTi system is probably the most advanced BRT system in South Africa at the moment. The routes connect areas such as Khayelitsha, Atlantis and Blouberg with the city centre where there is a hop-on/hop-off tourist bus, which is included in the system.

Websites: www.reavaya.org.za;

www.areyengtshwane.co.za; www.myciti.org.za

Standard municipal buses

Very few municipalities have accessible standard buses. Johannesburg Metro Bus has a couple on specific routes that run from Alexandra, Sandton, Naturena and Soweto to Johannesburg and one within Soweto. See www.joburg.org.za

George municipality has the gold standard for an accessible municipal bus service. The central service uses standard buses with ramps and the outer service provides accessible minibuses.

Long-distance buses

Most long-distance bus services do not have facilities to transport people with mobility impairments; however, some people with mobility impairments still use them because of cost constraints. It would be advisable to travel with your own assistant who knows how to lift and transfer you. Translux: www.translux.co.za; City Liner: www.cityliner.co.za; Greyhound: www.greyhound.co.za

TRAINS

Existing train tracks are the standard narrow gauge and therefore rolling stock is not wheelchair and mobility-aid accessible, with steep steps to enter the



each end of the carriages. Passengers can rail their vehicles on the trains as well.

Routes include return routes from two hubs – Johannesburg to Cape Town, Durban, Port Elizabeth and East London, and Cape Town to Queenstown and East London.

See www.shosholozameyl.co.za

Metrorail Western Cape has issued the following statement with regards to facilities for people with disabilities: “Advise Metrorail of any special needs requirements by contacting the nearest ticket office. Staff will assist and offer advice regarding disabled assistance, which is available by prior arrangement.” See www.capemetrorail.co.za

Gautrain

This rapid rail system has two routes, one south to north running from Park Station through Rosebank, Sandton, Marlborough, Midrand, Centurion and Pretoria to Hatfield. The second route runs west to east from Sandton, Marlborough and Rhodesfield to OR Tambo International Airport. There are shuttle bus services running into the surrounding suburbs from each station. The buses have very steep ramps for access, and therefore assistance is required.

See www.gautrain.co.za

MINIBUS TAXIS

This service is a difficult one to assess, as the taxis are privately owned and therefore difficult to regulate. Should you be able to convince a driver to load you and your wheelchair manually into the taxi, they will charge up to three times the standard fare, and there are no restraint systems and certainly no public liability insurance for passengers. The benefit of this service is that they are stationed outside every transport hub, shopping centre and public building, and will drop you off wherever you want along their routes.

METERED TAXIS

Most metered cab services are willing to assist wheelchair users provided that the individual is able to transfer out of their wheelchair into a standard seat. However, there are some wheelchair accessible vehicles (WAVs) that allow the passengers to travel in their wheelchairs.

Rikki's Taxis in Cape Town, for example, has a UK-style taxi cab with ramps and tie-downs that allow for transport in your own wheelchair. See www.rikkis.co.za

UBER

The South African arm of this organisation is exploring the possibilities of an accessible service. For now, it does offer the self-transfer service. Uber works on a cash-free system, which requires you to register your details, including credit card information. When you call, you quote your “pin number” and the costs are automatically charged to your credit card. It is fast, efficient and user-friendly. You can download the app, sign up and request a ride in minutes. [R](#)



carriages and narrow passages. However, they may be accessible to ambulatory people with mobility impairment. The newer commuter trains do have space at the entry doors to the carriages, but there is still no step-free access from the platforms.

Shosholozameyl is a long-distance passenger rail service with sleeper accommodation and dining facilities. There are communal ablution facilities at

PUBLIC TRANSPORT UPDATE

In 2008, the National Department of Transport launched a programme to upgrade public transport systems throughout South Africa. We take a look at what has happened since then

This project included the upgrading of transport systems for host cities of the 2010 FIFA World Cup. This was the first time there was a clear commitment to produce universally accessible (UA) public transport systems in South Africa. The requirement to achieve UA was reinforced by a National Treasury stipulation that UA was a precondition for the approval of funding for these projects. This has created an opportunity to look at the functionality and safety of commuters, especially those who have functional limitations.

Since 1990, various initiatives have been developed by organisations of persons with disabilities to promote and develop accessible public transport. While air travel enjoyed the benefit of international standards and accessible aircraft boarding systems, rail and road lagged behind. There were various attempts to produce levels of accessibility on existing commuter rail, but these have been bedevilled by aged rolling stock and variable ballast and out of date station infrastructure, where vertical and horizontal gaps are too challenging to achieve any reliable universal access. The 2010 World Cup accelerated the development of the new age Gautrain fast commuter rail system in Gauteng, including the City of Johannesburg and the City of Tshwane, which is the one exception, as this is a significantly accessible commuter rail service.

When the City of Johannesburg started developing its IRPTN for rollout in 2010, it received advice from a range of international agencies, and was strongly influenced to use high-floor buses. Based on this advice, and cost concerns, the first South African BRT System, the Rea Vaya, opted for a high-floor modality using bus bodies manufactured on high-level ladder chassis. This decision, however, caused operating challenges, as platform lifts became problematic, access ramps were

used to address the difference in level to gain access into the bus stations, and in many cases the ramps were at gradients that exceeded the minimum gradient specified in the Code 10400S, which is 1:12 or 8,3 percent (preferred gradient is 1:15 or 6,6 percent). Due to size constraints of the bus stations, with the effective floor height of these high-floor vehicles between 900 mm to 1000 mm from the road surface, access is difficult. The bus stations are located on the median islands, with access ramps on either side. This requires ramp lengths in excess of 15 metres long on either side of the station to achieve the required gradient and provide for a landing at the midpoint, adding a collective of more than 30 metres on each bus station. It is often difficult to accommodate the required length of these ramps, and as a consequence, the gradients had to be compromised.

This presents a difficult challenge when the feeder bus vehicles, which operate out of the trunk stations in a closed transfer system, have to deliver passengers with mobility limitations to the kerbside on the feeder bus routes. The feeder buses on the Rea Vaya system have been fitted with platform hoist systems, which are located at the second door from the front of the bus and have to be operated by the driver of the vehicle, requiring them to leave their seats, which is unsafe and an operationally non-compliant condition, but does allow a person in a wheelchair to board (and disembark from) the high-floor buses. The viability of using platform hoists as a genuine Universal Design and Universal Access solution is, by its very nature of operation and functionality, a contradiction.

As the planning for the next phase of service of the Rea Vaya moves ahead, the City of Johannesburg has made the fundamental shift to low-entry vehicles. Through this change it is hoped that the Rea Vaya will overcome some of the initial operational issues, to further increase its ridership numbers and to be able to offer a UA system to service commuters in Johannesburg. [\[1\]](#)



Universal Design Africa (UDAfrica) sees universal design as a vehicle to create and enhance the functionality of environments, services and products for the widest range of users, recognising the diversity of the human condition. The UDAfrica team aims to create awareness, disseminate information and improve lives.



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GET WET



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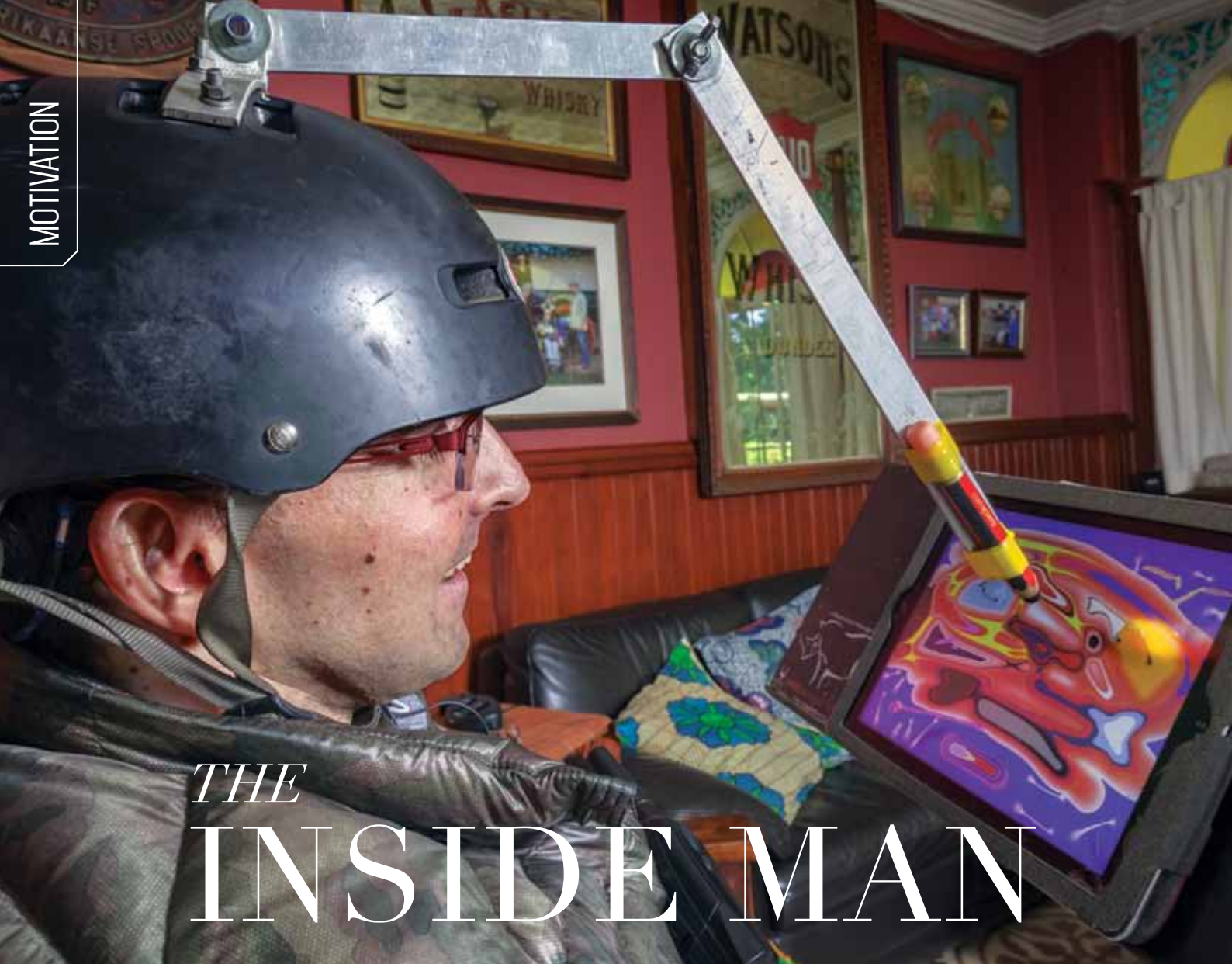
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THE INSIDE MAN

Thanks to a deep friendship with an extraordinary person, OBIE OBERHOLZER discovers the joy and richness of an indomitable spirit

Sometimes during the setting of the blue moon and the running of the gauntlets I have to stop and remove the flotsam that has gathered around me. Not the little bits-of-wood kind of flotsam but all the debris of ill-conceived thoughts and actions.

Those of us who walk our paths on earth with the froth of life's impurities and limitations have to dump them sometimes – cleanse ourselves of the bullshit to see the real again. I know a guy who makes me see beyond the daily, makes me realise life's values, makes me clarify my mind and re-energise my soul. He is 38-year-old Julius van der Wat, who lives his life in the Valley of the Beautiful Road.

This first time I saw him I was heavily under the influence of Bacchus's fermentation. He appeared as a half-focused, odd figure tied to the inside of a wheelchair. I peered down at him and said, "What on earth is wrong with you?" During the silence that followed I could hear a Boeing pass overhead, up heaven's way. Then he said, "I have spastic quadriplegic palsy." Just like that, just like it was, how it is and how it will be till the end

of days. That was 20 years ago. Through the years that followed I slowly realised that inside this man grew a field of flowers beneath the sun; that inside his outer shell of captivity, his physical jail, buzzed a beehive of intelligence, creativity and humour.

Once, I found myself driving around on large saltpan in the Northern Cape. This wasn't a place for the bacchanalian or the dagga smoker or the flotsam gatherer. This was the place for the existentialist, the truth chaser. I wanted to find what happens when you separate the body and the mind. This is not new; this is the ancient quest of trying to fly the mind, separate it from the physical restraints of the body. I achieved this by using my Willie Nelson bandana as a blindfold, then driving my bakkie on that saltpan at full speed until the physical loosened its grip on the mental, till the body floated away from the mind. After six minutes of darkness at 150 km per hour on the Verneuk Pan a kaleidoscope of images flashed in front of me, a thousand thoughts overtook my body and for a short time there was a sensation of floating, a feeling of knowing.

When I stopped in a sweaty panic, when all my parts had filtered back into a single me, I understood just a little the feelings of Julius van der Wat, whom I have



come to call “the Inside Man”. He must know this way of separation, the way his stiffened body holds a mind straddled by a great hall of thoughts and a different interpretation of life. I came to realise that these thoughts were mere extensions of my awkwardness, my feelings towards his outward oddity and not the greater being that resides within his mind. He speaks to me. I watch only the expression in his eyes and not the light that clothes his deformities. “Disabled means broken, but I am not broken, I am ‘differently abled’ and I just do and see things differently,” he says.

Being born a twin to his abled-bodied brother Koos and one of five boys, Julius often reflects on the frustrations and hardship of growing up. He fought not only society’s standards of expected normality, but also the prejudices towards his disability. He looks odd, so people stare at him without engaging him. They often speak only to his helper. Once, waiting outside the toilets in a shopping mall, he was approached by a young, unsupervised child, who touched his spastic hands and asked him why they were different. Julius, delighted to be recognised beyond his wheelchair, replied: “This is the way God made me.”

The boy’s eyes reflected his wonder and fascination. Is there a standardised normality in the society that we live in? “Yes and no” is the broad answer and in that lies the abnormality of normality. Julius’s “normal” is foreign to most able-bodied people. His difference was especially highlighted when he was growing up with Koos. During his teen years, he often questioned God: “Why me, why

not Koos?” One night, he remembers God’s reply: “Why are you pestering me? I have a purpose for you in your wheelchair and when that purpose has been fulfilled, I will take you up to heaven and you will walk.”

I want to say something but I don’t. I am not so tuned into the ways of the Lord. Then the observational genius of Julius the Inside Man says, “I know what you are thinking, just remember that the voice came to me and not to you.”

Now 38, Julius is content with who he is. His youthful jealousy is something of the past and although he still has daily frustrations, as we all do, he has coping mechanisms. He sees a psychologist regularly and he can discuss his frustrations. His way of life, or rather his advancement beyond his limitations, has been nurtured by the love and dedication of his parents, brothers and family. His previous and present helpers, Jacob and Jafta, are entwined in his life like a creeper that hugs a tree. They are his arms and his legs, his wheels, his assistants, his feeders of food, his bathers and where he goes they go.

Koos married a Frenchwoman and it all went suave – fashionable clothes, a lilt in his gait and a smile on his face. The wedding was held in Paris, so the whole Van der Wat family went to Paris. Jafta wheeled Julius down the Champs-Élysées.

Technology has contributed tremendously to his empowerment. He has been computer-literate since Grade 2 and now, thanks to a headset designed by his brother Izak, he punches the keys on his touch-screen iPad using a stylus (a plastic or metal stick with a conductive tip to which an iPad reacts in the same way as a finger). Every time I’ve seen him do it I’ve been humbled by this remarkable achievement. Just imagine typing out a letter with your head.

Of course, the Inside Man wanted more. Something much deeper and visual was lurking within him: something locked inside needed liberation. He wanted to illustrate his feelings, his love and often his sadness in graphic images. And so he found another voice through digital illustration. Using the app called Sketchbook Pro 1 for an iPad Julius can now draw his art works using the touch-screen stylus pen on his iPad. These illustrations are not Photoshop creations or computer-generated art: these artworks are drawn and designed from a blank screen. They spring from a mighty heart that feeds a unique mind.

They are laments from the soul. They are laborious to execute, but they move mountains in the mind of the creator. Jesse the Boerboel comes to lie under the chair next to Julius. I take a photo. Far above, close to heaven, a Boeing rides the sky to Europe. The Inside Man and I just sit. Sometimes sitting together means more than words. After a while Julius tells me a quotation from one of his famous teddy bear books, Winnie-the-Pooh by A.A. Milne. “Some people talk to animals. Not many listen though. That’s the problem.” ^[7]

*Obie Oberholzer, a photographer by trade, has been a family friend of the Van der Wats for many years and has always been inspired by Julius’s enthusiasm.

Right: Julius van der Wat with his faithful companion – Jesse the Boerboel.



GETTING FUNDING

If the motivation for funding for wheelchairs and appliances is clear, focused and timely, the battle is more than half won



I serve on the Management Committee of QASA and am also a medical adviser to a number of medical aid providers. I often review applications for ex gratia assistance for wheelchairs and other disability appliances, where medical aid benefits are not sufficient. So I am exposed to both sides of the problem: I experience the frustrations of rehabilitation staff and individuals with a spinal cord injury (SCI) when they are unable to convince organisations to fund appliances. But I also see the often inadequate ways in which the argument for these appliances is put forward.

In an effort to find a helpful way forward, I recently interviewed a few SCI individuals, a manufacturer of disability appliances, and physiotherapists and occupational therapists working in rehabilitation hospitals.

I also reviewed the commitments of the four major

funding organisations; the State, the Road Accident Fund (RAF), Compensation for Occupational Injuries and Diseases (COID) and medical aid providers. They all expressed a commitment to meeting the needs of persons with disabilities, but I discovered two factors that were common to all four. These were:

A POOR UNDERSTANDING OF THE NEEDS, INCLUDING:

- “One size fits all” benefit specifications
- Incomplete benefit specifications (essential appliances not covered)
- Inappropriate training (compounded by high staff turnover)
- Long replacement cycles

ADMINISTRATIVE INEFFICIENCIES, INCLUDING:

- Long waiting lists
- Delays in authorisation
- Delays in payment
- Budget constraints



will have a much shorter lifespan than the wheelchair of someone who resides in an independent living centre.

To address this, the South African Spinal Cord Association (SASCA) introduced a two-part booklet at its congress in April of this year. The first part explains what is needed per level of injury in terms of wheelchairs, wheelchair accessories, bathroom appliances, and so on. The second part explains why these are needed, by illustrating the level of the SCI, the fallout (extent of paralysis) and the impact of the paralysis. My view? The booklet is a good reference, but case-specific needs still need to be motivated further. (The SASCA Assistive Devices Guidelines for Persons with Mobility Impairment is available on the SASCA website www.sasca.org.za in printable PDF format.)


Most motivations detail what is required but make no mention of why. The nature of the injury is often just stated as paraplegic or quadriplegic, with no further explanation. And rehabilitation hospitals often send extensive progress reports, hoping to express the extent of the severity of the injury.

Compounding the problem is that different funders require different types of motivations. Some require short, succinct motivations while others require more detailed documents. I'd propose a motivation in the form of an executive summary with a more detailed report added as an annexure, where required.

For example, start with a brief description of the person and the nature/source of the injury: A 21-year old male with a C4-5 fracture following an MVA. Add a short description of the extent and nature of the paralysis and the impact on mobility, bowel, bladder, etc. Mention the home circumstances and sum up with what is required and why it is essential to have. (Funders don't like "nice-to-haves.") Cite the SASCA Guide as reference.

Remember to motivate timeously. Don't wait till a week before discharge. As soon as the outcome of rehabilitation is known with reasonable certainty, start motivating. Be honest. If a funder feels you are going overboard, you'll damage your own case.

When claiming from a medical aid, bear in mind that wheelchairs and daily living appliances are not Prescribed Minimum Benefits (PMB). Any above-benefit requirements will require ex gratia consideration. Ex gratia funding comes directly from the reserves of the medical aid. So the committee must weigh up the needs of the individual against the fairness to the collective membership. If the committee feels that the requests are excessive or could set an inappropriate precedent, they will not approve.

The inescapable fact is that, at every opportunity, we need to advocate, advocate, advocate... 

To this, I'd add:

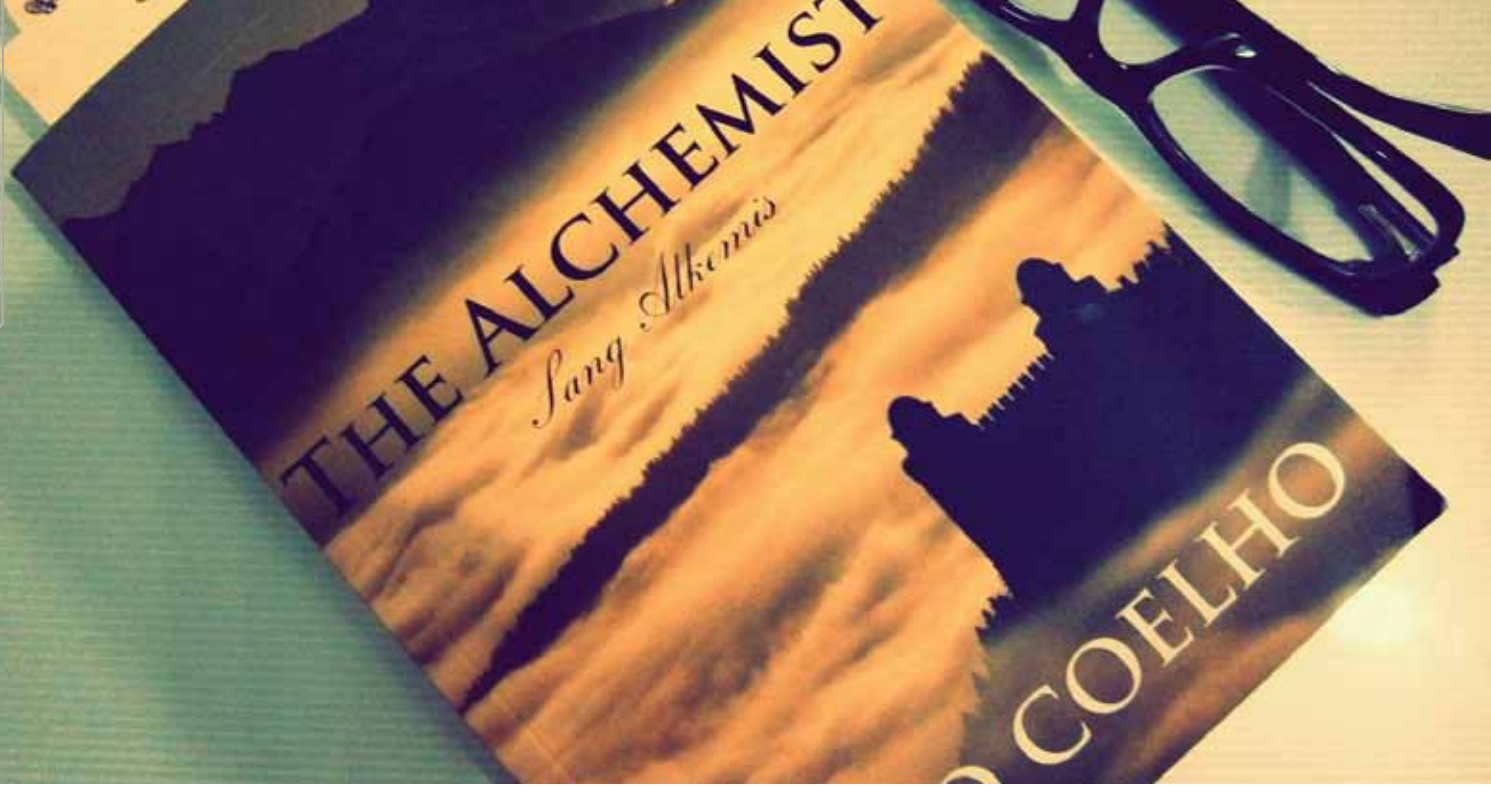
- Inability to adequately motivate the needs of the SCI individual

The reality of "a poor understanding of needs" is that the actuaries who design benefits as well as the medical and nursing staff who assess requests for assistance generally have had little exposure to the realities of quadriplegia and paraplegia. They do not understand why, for example, a C5 quadriplegic needs a chair with tilt-in space and recline facilities, a sophisticated (expensive) cushion as well as chest straps, back and arm support and other essential accessories.

Or that the wheelchair of a SCI person who lives in a shack in an informal settlement with uneven terrain



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



WHERE TREASURE LIES

An extraordinary tale of one young boy's search for fulfilment has a message for people everywhere

Santiago, an adventurous shepherd boy from a small Andalusian town, is the protagonist in *The Alchemist* by Paulo Coelho. Throughout the novel, the term “personal legend” describes a person’s willingness to accomplish their greatest desire. The treasure that Santiago seeks, as metaphorically described in the book, lies at the foot of the Egyptian pyramids.

The boy resists his parents’ wishes to follow the traditional career path of becoming a priest and instead chooses to work as a shepherd: “Everyone seems to have a clear idea of how other people should lead their lives, but none about his or her own.”

Santiago starts to wonder if his sheep are like human beings, being preoccupied with physical contentment and no deeper appreciation for life. Santiago’s thoughts imply that he must seek a higher purpose in life if he wants to be happy.

Melchizedek, a mysterious old man who claims to be the king of Salem, appears and reveals to Santiago the magical powers of nature, encouraging him to become a spiritual seeker in search of his own destiny.

The word “maktub” – meaning “it is written” – appears throughout the novel. It suggests that all people are aware of their destiny from an early age,

but, as time passes, a mysterious force convinces them that they’re incapable of succeeding.


Fear features throughout Santiago’s journey as the primary obstacle to his achieving his goal. Santiago meets a 200-year-old practitioner of alchemy and tells him that his heart does not want him to continue, because it fears it will lose everything. The alchemist tells him: “To pursue a dream is to encounter God.” The desert, with its harsh conditions and tribal wars, symbolises the difficulties confronting a person in pursuit of their personal legend. It also serves as an important teacher for Santiago during his journey to the pyramids.

Alchemists seek to rid metals of impurities in order to reveal the “Soul of the World”, just as Santiago must purify himself from material concerns and external pressures in order to focus on his personal legend.

For Santiago, the value of his journey does not lie in the treasure at the end, but in the knowledge and experience he gains from the journey itself.

As the elements of the world evolve in this way, they grow in accordance with a pyramid, resembling a “unified whole”. Santiago tells the sun that once something achieves its purpose, it evolves into something “new and better”.

As Santiago gets up to embrace his treasure, the pyramids seem to be laughing at him, but “he laughed back, as his heart is bursting with joy.”

RI rating: 10/10 



A DECADE OF AWARENESS

The International Day of Persons with Disabilities is approaching, and it's an opportunity to see what's been done and what's still required

The annual observance of the International Day of Persons with Disabilities was proclaimed in 1992 by the United Nations (UN) General Assembly resolution 47/3. It aims to promote an understanding of disability rights and mobilise support for the dignity, rights and wellbeing of persons with disabilities. It also seeks to increase awareness of gains to be derived from the integration of persons with disabilities in every aspect of political, social, economic and cultural life.

South Africa joined the family of nations by observing and celebrating this day as the national day of persons with disabilities in 1997.

Friday Mavuso was one of the founding members of Disabled People South Africa (DPSA). The slogan “Nothing about us, without us” was born and used throughout the world. It is this slogan that is engraved on the pen that Mr Kofi Annan used to sign the declaration on disability at the United Nations.

The theme this year is “Achieving 17 Goals for the Future We Want”, which notes the recent adoption of the 17 Sustainable Development Goals (SDGs). This year's objectives include an assessment of the current status of the Convention on the Rights of Persons with Disabilities (CRPD) and SDGs and laying the foundation for future of greater inclusion for people with disabilities.

The observation of the 2016 IDPD coincides with the 10th year anniversary of the adoption of the CRPD, one of the most swiftly and widely ratified international treaties established by the UN. South Africa was among the first 10 countries to sign the CRPD. In addition, this year's IDPD will pay special attention to issues concerning accessibility and inclusion of people with disabilities in the context of urban development.

Considerable progress has been made in improving the lives of people with disabilities in many areas,

including participation in democratic governance, access to quality education and skills development, health care and increased participation in the economy. However, unemployment, poverty and inequality, as well as social ills such as crime and substance abuse, continue to have a negative impact.



Zain Bulbulia representing South African people with disabilities at the United Nations headquarters in New York, during the session on the Convention on the Rights of Persons with Disabilities.

While the status of women in South Africa has improved considerably since 1994, efforts should be focused on the advancement of women with disabilities. Against this backdrop, the key objectives of the activities marking this anniversary should be to:

- Draw attention to the IDPD and to honour disability activists.
- Harness the energies of people with disabilities as active participants in South Africa's development.
- Inculcate a spirit of active citizenship through a civic-education campaign emphasising the rights and responsibilities of people with disabilities.
- Demonstrate commitment by, for example, profiling progress made in disability development since 1994 and facilitating access to services and development opportunities in the public and private sectors.

These objectives can be achieved – it requires application and a clear idea of the outcomes that are hoped for. [\[i\]](#)



Zain Bulbulia led the South African government delegation team to the United Nations (UN), New York, for the ratification and signing of the UN Convention of the Rights of Persons with Disabilities. He is currently the acting head for gender, youth and disability in the planning commission of the Premier of Gauteng. email: zain.bulbulia@gauteng.gov.za

NO KIDDING

Being a parent is hard enough, but being a parent to a child amputee is a whole new challenge. Here are some pointers for parents



As prosthetists, our expertise lies in treating patients who have lost a limb. Often we are faced with parents who are in just as much need of rehabilitation as the child themselves. As parents you know that, if you could, you'd gladly move a mountain

for your child, and in most cases you as a parent would happily take your child's place without thinking twice. It is then easy to understand that the parents who enter our doors are going through a very difficult time.

In most cases they blame themselves for the child's limb loss and are desperate to find solutions. In addition, children tend to shift extra blame onto their parents for what they are going through, which makes prosthetic rehabilitation more emotionally charged than it needs to be.

Children are also far smarter than we sometimes realise. They tend to sometimes feed off and replicate the emotions of the parents. Because of this, the therapist may tell you at some stage to go off and drink a coffee while they are treating your most precious possession. Please do not take it personally.


Children must make many physical and emotional adjustments to major body changes, but they do deal with the entire amputation rehabilitation situation more easily than adults. So I think that it would be a mistake to think that the child is experiencing the same emotional roller-coaster ride that you are experiencing.

Being a parent myself, I am going to throw the professional rule book out of the window and tell you what I would do if I were in your shoes. Tell the therapist, without the child present, exactly how you feel and what problems you are facing. I would even go as far as to let the therapist know, in a non-confrontational way, just how much this child means to you and how you are hurting inside.



Then I would give the therapist a little space to do what they do best: having angry parents breathe down your neck can unsettle the most experienced person. The last thing you want to do is (even unwittingly) prevent the therapist from optimising their treatment.

If you have any questions regarding treatment (or anything else), do ask until you fully understand. Question the treatment as much as you like but communicate honestly with your rehab team. It is part of the therapist's job to inform you in full.

Lastly, trust your parental instincts and do what we, as parents, do the best: put on that brave face! 



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

THE GOOD, THE BAD AND THE FAIR

What kind of effect does competition have in the workplace?



Watching the Rio Olympic and Paralympic Games on television, and seeing the way in which these competitions spur the participants to amazing achievements, made me think about one of the great debates in the work arena: is competition in the workplace positive or negative? And how does a competitive workplace affect people with disabilities?

Many managers firmly believe that healthy competition can be a positive incentive in the workplace. Studies have shown that competition drives creativity and the skills required for innovation such as problem-solving.

On the other hand, too much competition, or the wrong kind of competition, can kill morale, raise stress levels – and generally undermine productivity and lead to a toxic organisational culture.

The Olympics – and the Paralympics – are a shining tribute to the positive aspects of competition; but the negative is also always present in the form of doping, cheating and sheer bad sportsmanship.

The rules against doping, for example, are put in place to try and ensure that the playing fields are level. But what if the playing field cannot be levelled? Isn't that why the Olympics and the Paralympics are two separate events?

In a competitive workplace environment, should there be a “separate playing field” for people with disabilities? Is that practical, or even desirable? Is it necessary? How then does the principle, “Employ the

person who is suitable qualified for the job” manifest itself in performance evaluation?

Because high performance and achievement in the workplace often has a monetary reward, it is essential that the field is as level as possible. A company should ensure that at a minimum the following eight policies are thought through. If not, they could significantly disadvantage people with disabilities:

- Performance management – issues of expectations, standards or quality of work, behaviour or attitude as well as concrete delivery against set objectives
- Remuneration – with bonuses often linked to performance, is it fair to people with disabilities?
- Tools of trade or equipment policy – ensuring people with disabilities have the right equipment or tools to do their jobs well
- Training and development policy – do all employees receive the training they require to do their current roles well and have prospects of promotion?
- Employee relations and wellness – policies that relate to discipline and a harmonious workplace
- Universal Access – the physical environment and the way in which work is organised; as well as management accessibility
- Succession planning – are people with disabilities prioritised and part of the succession plan?
- Procurement – does this promote access to suppliers whose ownership and management control is by people with disabilities?

Until the playing the fields are levelled, competition remains unfair. [2]



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



GREAT SEXUAL HEALTH WEBSITES

Sex online? There's a wealth of useful information available – at the click of a mouse



ere are some social media and reputable websites, which are good sources of information:

DATING PARAPLEGICS: THE ULTIMATE GUIDE
(Streetsie.com/dating-paraplegics-guide)

This website is a great read for anyone dating a wheelchair user. Here are two of my favourite quotes from it:

TRUE OR FALSE

No sex: Dating a paraplegic wheelchair user means no sex. They can't feel it so they don't enjoy sex or

make love very often.

False: Sex is not usually one of the things we talk about on a first date. Most men and women dating paraplegics do report a healthy active sex life.

Erections: All wheelchair users have trouble getting and keeping an erection.

False: What you need to know is if their spinal cord injury (SCI) is "complete" or "incomplete." Most SCIs are incomplete. A male can get an erection by touching or rubbing his penis; a girl can get wet by rubbing her clitoris. Generally it is only men with a complete SCI who find it hard to get and keep an erection.

DR MITCHELL TEPPER – CLINICAL SEXOLOGIST
(Drmittcheltepper.com)


You don't have to break your neck to be a great lover, but you can learn a lot from someone who has!

Sexologist Dr Mitch Tepper brings a lifetime of experience as a person living well with a chronic condition and a disability. He has a master's degree in public health from Yale University. He is also certified as a sexuality educator, educator supervisor, approved CE provider, sexuality counsellor, and a licensed Pairs instructor.

SEXUALITY AND DISABILITY
(Sexualityanddisability.org)

This is definitely the most informative website. I love this quote:

"It surprised me when I realised [after my accident] that I could still get turned on. Since I don't have any feeling down there, I never noticed that when I'm excited I get this fluttery feeling in my chest. It's not new, I just never paid attention to it before."

From *The Ultimate Guide to Sex and Disability*, ed. Kaufman, Silverberg and Odette, 2003 



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

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GET DRESSED

Some children with disabilities experience difficulty performing activities of daily living (ADLs), such as eating, bathing and toileting. Here we look at the activity of dressing


Dressing is an important aspect of independent and daily living. It involves a number of skills including fine motor (fastening buttons and zips); gross motor (standing on one leg to pull on a pair of jeans); cognitive (remembering which clothing goes on which body part); language (naming the colours, types, sizes); and awareness of time and space (what clothes we wear in summer, for differing occasions, etc).

Here are some helpful tips:

- Fasten small loops into the waist of trousers, skirts or shorts, which can be used to pull on clothing.
- Some children find it easier to “wriggle” into clothing while lying on their backs or sides on a bed or the floor.
- Let the child hold or lean onto walls, chairs, counters or rails for support.
- Get a child to use their other leg, arm, elbow etc to push down or kick or push off clothing.
- If a child has a weaker limb, encourage them to dress that one first.
- Use shoes with a Velcro fastener or elastic instead of laces.
- Choose appropriate shoes/boots sizes for children using aids such as AFOs/splints.
- Let the child put on their shoes while seated on the floor, in a chair or wheelchair. Some find it easier to cross their legs or pull one foot across the body.
- Use Velcro strips, elastic or draw-string instead of clasps, buckles and buttons on clothing.

- Play games and teach fastening rhymes to teach shoe lace typing (i.e. 1 loop method, 2 loop method - bunny ears).
- Start by teaching a child to undress: it is easier to take clothes off than to put them on.
- Start with easy-to-dress clothing. Underwear is often easier to pull on or take off.
- Make sure that you give a child sufficient time to get dressed, and praise and encourage them.
- Let the child select their clothes: this often encourages and motivates them to self-dress.

There are some fun games to encourage children with dressing especially if they need some practice and motivation. These include:

- Timing: when a child is more confident, use a stopwatch to time how long it takes the child to dress. The following day play it again and encourage the child to improve their speed.
- Dress up paper dolls: have a selection of winter and summer clothes and accessories such as hats and scarves. Let the child choose how they would like to dress their doll. This is a fun game for children who are not able to dress themselves, as they still get to make their own choices.
- Bread tag and ribbon game: Have a piece of wide ribbon and get the child to clip on the plastic bread tags. This helps with fine motor development, assisting with zipping and buttoning.
- Button, zip and lace book: make a material book and sew old zips and buttons and laces of differing sizes, shapes and colours onto each page for the child to choose and practise with. 



Dr Emma McKinney is a “children with disabilities” specialist, is a post-doctoral fellow at Stellenbosch University and owns a company called Disability Included. email: emma@disabilityincluded.co.za



DON'T SWEAT IT!

Injury to the spinal cord can usher in some unexpected problems. We look at one of those – body temperature!

People who have a spinal cord injury (SCI) often experience abnormal sweating, and when it happens to female patients, they often wonder whether this is a symptom of menopause. That's not necessarily the case...

The ability of the human body to regulate its temperature – known as thermoregulation – is the function of an area in the brain called the hypothalamus, which is the heat-regulation centre or the “thermostat” of your body. The hypothalamus is situated in the base of the brain and receives messages from thermosensitive receptors in the skin, abdominal organs and spinal cord. So, much like your domestic oven, the temperature of the oven is regulated by the thermostat receiving temperature information and switching the oven element on and off, thus regulating a constant temperature. In SCI the flow of information to the hypothalamus is interrupted and therefore the ability of that individual to self-regulate the body temperature is impaired.

There are several ways in which the human body is able to regulate its temperature. First, when cold, the body reduces the flow of blood to non-vital areas such as the skin and allows the body to conserve heat by reducing temperature loss through radiation. In addition, the body is able to elevate the hairs on the arms and legs (gooseflesh) to trap a layer of warm air between the skin and cold air. Finally, shivering creates warmth by burning what is known as “brown fat”. This is the most efficient means of generating heat in the human body. In SCI individuals, these three

mechanisms do not work in areas below the level of the injury; therefore a patient with a spinal lesion will lose heat easily and be susceptible to low body temperature (hypothermia).

On the other hand, when it's hot, the body can help cool itself by several mechanisms. Vasodilation or increasing the flow of blood to the skin helps to reduce heat by radiation. An intact spinal cord allows the body to sweat, which allows loss of temperature by evaporation. Again, with SCI, these mechanisms do not work well, making the individual susceptible to heatstroke and overheating.

Often sweating can occur profusely in the areas of the body above the level of the injury, which results in drenching. This is thought to be a mechanism triggered to compensate for the loss of thermoregulatory sweating below the level of the lesion. Although this tends to stabilise over time, it can be most uncomfortable. Note that a new onset of abnormal sweating needs further investigation.

Yes, in women it may be a sign of menopausal symptoms but more importantly it may be an indication of a syringomyelia – a cavity filling with fluid in the damaged spinal cord. This condition needs to be managed appropriately.

My take-home message is that thermoregulation in SCI does not function as it should: SCI individuals are prone to excessive heat loss in the colder months and excessive heat gain in the hot summer months. Both can bring risks, and appropriate measures should be taken to prevent hypothermia or heat stroke with appropriate clothing and the use of heating or cooling appliances in susceptible persons. ☒



*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.
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Be sure to diarise these important
 upcoming events

**NOVEMBER 4: NETCARE REHABILITATION HOSPITAL
 SPORTS DAY**

This is an annual event, originally started in
 2000. It focuses on patients who have suffered
 spinal cord and head injuries as well as strokes
 and amputations.

**DECEMBER 3: INTERNATIONAL DAY FOR PERSONS
 WITH DISABILITIES**

This day is marked around the world annually,
 to promote awareness and mobilise support
 for critical issues pertaining to the inclusion of
 persons with disabilities in society.

TRUSTING THE PROCESS

How you get through difficult times in your life will largely be determined by whether you can reach for your courage, or whether you turn away



It is vital to keep your mind and body as strong as possible. Eat well, exercise and allow yourself plenty of sleep. Even if going through the motions feels hollow, the actions are powerful, and powerful actions will nourish your courage.

After two months of “lowness” after I lost my job, I just got tired of feeling sorry for myself and decided enough was enough. Have you had a moment where you cried all the time until you eventually started to laugh and you didn’t know what you were laughing about? Well, I reached that point where through my struggles and frustrations, through my anguish and pain, something within me cried out for me to stop and reflect on my life.

My situation reminded me of the character Job in the Bible, who found himself in some trouble. He lost everything, including his own family. One thing I realised was that I needed to let myself go through the emotions to appreciate my survival outcome.

Some friends had distanced themselves from

my situation but I got to appreciate those friends who remained and the support they provided. It is through these times that we find out what our relationships meant to each of us. I discovered another side to my friends that I didn’t know existed. And through this bond, I regained my will to pick myself up again.

I started working out every day, I started eating well again and drinking lemon water regularly, I reflected on my life and what I would like to happen moving forward. I read inspirational books daily and listened to that inner soft voice to guide my every move and choice. Today, I lost most of the unwanted weight, I’m in an excellent shape and I’m making progress. God has been faithful, as He always is.

This year might have been extremely challenging for most of us. But nine months down the line, can you honestly say that your situation has remained the same? If you look closely I bet you will realise that not much is unchanged. Be grateful of what the universe is resolving for you and on your behalf. The process might not have been easy, but there is light at the end of each tunnel. Trust me I know!



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. email: emilie.olifant@gmail.com

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