

ROLLING INSPIRATION

ISSUE 6 2021

The leading magazine for people with mobility impairments

CARE BEHIND THE CHAIR

A tour of the CE Mobility
factory

PARALYMPIC CARE

Maintaining the right mindset

PAINFUL PROSTHESIS

Determining the cause

3X3 IS HAPPENING

Wheelchair basketball gets
more exciting



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Even with a spinal cord injury, it is important to take care of your spine.

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Wheelchair basketball has become even more exciting with three-a-side matches as Leon Fleiser explains.

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OUR CHILDREN AND THEIR FUTURE



Children with disabilities are at a significant disadvantage according to a UNICEF report. **RAVEN BENNY** discusses

With most of the school year completed and learners writing exams countrywide, I want to wish them and their loved ones well. This is a stressful time, but the rewards of their hard work will be sweet when the results are read.

When the United Nations Children’s Fund (UNICEF) published a report that examines the broad range of issues that UNICEF seeks to address in its mission to improve the lives of children globally, I was interested.

According to the report, there are 240 million children with disabilities worldwide – which shocked me! The report continues to mention that these children are disadvantaged in most measurements used to determine the wellbeing of a child when compared to their peers without disabilities.

This got me thinking about the words of former South African president Nelson Mandela: “The true character of a society is revealed in how it treats its children.” We know that he had a special place in his heart for children and often made mention of the importance of their education.

Staggering statistics are contained in the UNICEF report. It notes that children with disabilities are:

- 49 percent more likely to have never attended school;
- 47 percent more likely to be out of primary school;
- 33 percent more likely to be out of lower-secondary school; and
- 27 percent more likely to be out of upper secondary school.

Thus, nearly half of children with disabilities across the globe have very little education. This must be addressed! But how?




Raven Benny has been a C5, 6 and 7 quadriplegic since 2000. He is married and has five children, is mad about wheelchair rugby and represented South Africa in 2003 and 2005. He relocated from Cape Town to Durban, where he was appointed the Chief Operating Officer (COO) of QASA from August 1, 2019. email: coo@qasa.co.za.

Mandela went on to say: “One of the ways that we can build a better future for our children is by empowering them through allowing them to speak up for themselves. Of course, we, as adults, have to guide them and to take the ultimate responsibility; but that is something quite different from patronising them. The rights of children must, importantly, include the right to be themselves and to talk for themselves.”

It won’t be easy. The onus rests on us, the adult population. It requires serious intervention by all stakeholders. Here, our government needs to take responsibility, especially the Department of Basic Education and Department of Social Development. A combined effort is needed. As we know, it takes a village to raise a child.

I foresee health interventions, like vaccination drives as the South African Health Products Regulatory Authority declared vaccines safe for children from age 12 to 17 years. Their safety and security is vital as the abuse of children increases. This scourge must be eradicated. Other plans to encourage our teachers and parents in exploring alternative methods of educating our children with the use of technology would be very useful.

There are so many focus areas to consider in our quest to secure a better future for our children. It will be of no use to simply shift blame. Every generation seems to blame the one before. We need to invest in this generation now; provide guidance and support to assist them in helping themselves; fixing a broken systems and leave a decent legacy for them to capitalise on. 



Scan the QR Code
with your smartphone
camera to read the full
UNICEF report.

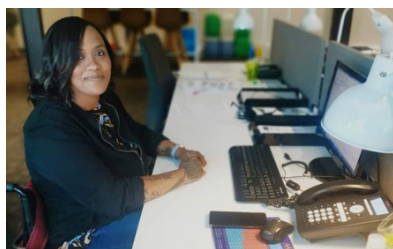
MAKING SOMETHING OF MYSELF

Letitia Kamfer is a former QASA Work Readiness Programme candidate who has achieved success after completing the programme. She thanks the organisation for the role it played in her success.

“I don’t know where to start, because QASA has changed the way I look at life,” Letitia says. “I was a young, pregnant paraplegic and, at the time, I was at home and unemployed. I had no purpose for life.”


She decided to apply to the programme and was accepted. Letitia recalls: “The great news could not have come at a better time, being a first time mommy. I needed to do something with my life not just for me, but for my unborn child.

“Because of the programme, I knew that I was ready to start putting the practical part of the training into practice. I was awarded the 12-month internship at Kemklean Hygiene Solutions. Little did I know that I would be able to achieve what



was expected of me. As time had passed I’ve learned a lot,” she adds.

“My line manager, Rushnee Adams, played a big part in my achievements. She never gave up on me, just like the colleagues at QASA. These people had my back since day one and made me so happy. They are willing to help me with anything. I can’t describe my gratitude. I have achieved a lot since I’ve become a member of QASA,” Letitia notes.

She thanks the QASA team: “I’m grateful for these changes in my life and it’s all thanks to QASA and to my colleagues who are always just a call away. Thank you for giving me the opportunity to make something of myself.” 



A STEPPING STONE TO SUCCESS

Khuliso David Nelwalani participated in the QASA Work Readiness Programme (WRP). He shares his experience and thanks.

“It has been a wonderful journey since the first day that I was introduced at QASA,” Khuliso says. “I started with the three-month WRP. It really was a stepping stone that helped me to be successfully placed at Mshindi Consulting on an internship programme.

“I can confidently say that I wouldn’t have grown and learned as much as I have for the past 12 months if it wasn’t for this great opportunity with constant support, feedback, guidance and mentorship from the QASA team,” Khuliso notes.


Since the internship, he was able to secure a permanent position at Mshindi Consulting as a senior recruitment consultant on an independent contract.

“I wish you and the QASA team all the best,” Khuliso concludes. 



BACK ON THE ROAD



Colland Johnathan Landman received new tyres for his power wheelchair from QASA. He thanks the organisation for their support: “I just want to thank QASA for all the support that they give. I applied for new tyres, because that’s my transport. Thanks to QASA, I can now get back on the road.” 



CARE BEHIND THE CHAIR

There is a lot more than nuts and bolts that go into a chair as **MARISKA MORRIS** found out with her recent tour of the CE Mobility factory

Walkers, manual or power wheelchairs. You have a range of assistive devices to choose from – all on display as you walk into the CE Mobility head office in Maraisburg, Johannesburg. In the serene building, shopping for your mobility device is pleasurable.

It is easy to forget that you are only a few metres away from the grime, sweat and dust that goes into manufacturing a wheelchair. While CE Mobility imports a fair number of chairs to meet the demands of its customers, it also manufactures thousands of manual and power wheelchairs for the entry and mid-level markets across South Africa and neighbouring countries like Namibia and Botswana. To find out more and to better understand what goes into building a wheelchair, we visited the factory.

A CHAOTIC BUSINESS

As we wind around the back buildings, the drone of machines grow loud with steel meeting steel, fire put to metal and engines driving the whole process. Candice Brunsdon, sales manager at CE Mobility, turns back. “Manufacturing is a highly complex and yet chaotic business,” she says as we turn the corner to the first step in the manufacturing process – manipulating the steel.

Metres and metres of metal are stacked near the entrance. The sheet metal is rolled up into disks, stacked atop each other. These metal strips are fed into a tube mill machine which slowly bends and then welds the strips into a round tube.

At the end of the large room, the tubing is stacked and stored in large shelving. The volume of tubing manufactured is impressive. To the right, the computer numerical control (CNC) cut-off machines cut the tubing to the desired lengths. From there, it is bent and shaped to create the frames, armrests and pushrims.



MAIN PHOTO: CE Mobility manufactures thousands of manual and power wheelchairs a month.

ABOVE: The manufacturing process starts with creating tubing from simple sheets of metal through a Tube Mill Machine.

MOULDED LIKE PLAYDOUGH

The tubing is fed into bending machines and ring rollers which mould the individual parts. Particularly captivating was seeing how easily the tubing is rounded to create the pushrims for the wheels. The lack of effort gave the impression that the steel was no more than playdough. The care and caution of the workers; however, gave an indication of the true strength that lay beneath the roar of machinery.

All these parts are then welded together and sent for coating. Parts are sprayed with a powder paint with 26 colours to choose from, which is then baked at 200 degrees Celcius to ensure a uniform and durable finish.

PLASTIC PEBBLES

Wheelchairs aren't all cold steel. Many of the components require more malleable plastic parts. For this, CE Mobility uses what can only be described as “plastic pebbles” in an Injection Moulding Machine. The pebbles are melted, shaped in a mould and then cooled for mass production of plastic parts.

When asked whether CE Mobility recycles wheelchairs, Candice explained: “CE Mobility isn't involved in the end-of-life recycling of wheelchairs. We as South Africans tend to use



ABOVE FAR LEFT: Machinery is used to roll the tubing into wheel rims.

ABOVE CENTRE: Plastic parts are manufactured from pebble-like plastic, which is melted down and moulded.

ABOVE FAR RIGHT: The engineering room speaks volumes for the innovation, care and attention that goes into the CE Mobility chairs.

RIGHT: The assembly line where the wheelchairs finally take on an recognisable form.

our equipment until it is completely finished. Sometimes, we'd use wheelchairs for decades. But we do recycle our scrap metal and plastic used during manufacturing.

Whatever plastic and metal aren't used in the wheelchair manufacturing process are piled in a bin at the back of the buildings to be recycled.

INNOVATION

Most of the machinery at the factory is less glamorous and more practical in appearance. It gives the sense of simplicity and functionality rather than aesthetics. Except for the engineering room. Here CE Mobility staff design and manufacture the more complex components of the wheelchairs. The sleek designed, high-tech machinery ensures the best quality possible, while providing opportunities to make the parts more efficient.

The CNC lathes and high-tech CNC machining centres use precise design instructions and programs to manufacture parts to very exact specifications. CE Mobility plans to further expanding its capacity to build parts. While it waits on the necessary equipment to expand manufacturing, it uses 3D printing to make the parts! Talk about futuristic.

A LOUD BUSINESS

Once all the individual parts are constructed, they are brought to the main factory floor where an assembly line puts everything together. The tyres are put on rims, the upholstery fitted and screws tightened. The final product – in a form you can actually recognise as a chair – is lined up on the factory floor before it is

moved to the storage facilities.

The sheer volume of chairs leaves one awestruck. It is easy to forget just how many wheelchairs are truly needed to keep the disability community (and broader society) mobile.

Candice points to a room off to the right of the factory floor. As we pass through the doors, we are met with the women responsible for the upholstery of the chairs, safe behind their COVID screens. Aside from their smiles and friendly demeanour, I'm struck by how quiet the room feels compared to the hustle and bustle of the factory floor – worlds apart.


It seems manufacturing is a loud business too! Fortunately, CE Mobility takes care of its employees. Aside from adhering to COVID regulations with screens, social distancing and masks in place, traditional personal protective equipment, such as noise-cancelling headsets, are worn.

PEOPLE BEHIND THE PARTS

While the factory was undeniably loud, busy and possibly a little chaotic (as can be expected when producing such quantities), what truly stood out were the people. CE Mobility employs over 200 people across its eight branches.

When asked why the company decided to manufacture locally, CE Mobility managing director Rodney Outram explained: "CE Mobility is invested in our country. How better to show this investment than manufacturing wheelchairs locally?"

"This creates job opportunities, but also allows us to produce wheelchairs that are more affordable without compromising on quality. With our own innovations, we hope to offer our customers even more in the future," he says.

As for the staff at the factory in Maraisburg, everyone was friendly, patient and helpful. It is clear that the staff are passionate about what they do. They take care with each nut, bolt and wheel. What better way to ensure quality than dedicated, passionate staff? 



PARALYMPIC CARE

GEORGE LOUW looks at what it takes to prepare mindsets and pick up the pieces before and after a big event for professional athletes

When watching big sport events, we cheer the modern-day gladiators for putting their bodies on the line to out-perform their competitors. When they win, we celebrate. When they perform less well, we are disappointed. As couch-potatoes, we tend to think that the lives of sporting heroes must be great; all the glitz, glamour and accolades.

But while reading an interview with the wife of a great South African Springbok rugby player a few weeks ago, my eyes were opened to another reality: the sacrifices that underlie success and the toll that it places on emotions, relationships and life at large, not just for the athletes but also their families.

If this is so for athletes without disabilities, how much more are athletes with disabilities affected in their build-up to, during and in the aftermath of an event? To find out more, I interviewed the Paralympic team psychologist Kirsten van Heerden and doctor Carolette Cloete.

Kirsten was not able to accompany the team to Tokyo. She discusses the pre and post-care, while Carolette focussed on their time at the Paralympics.

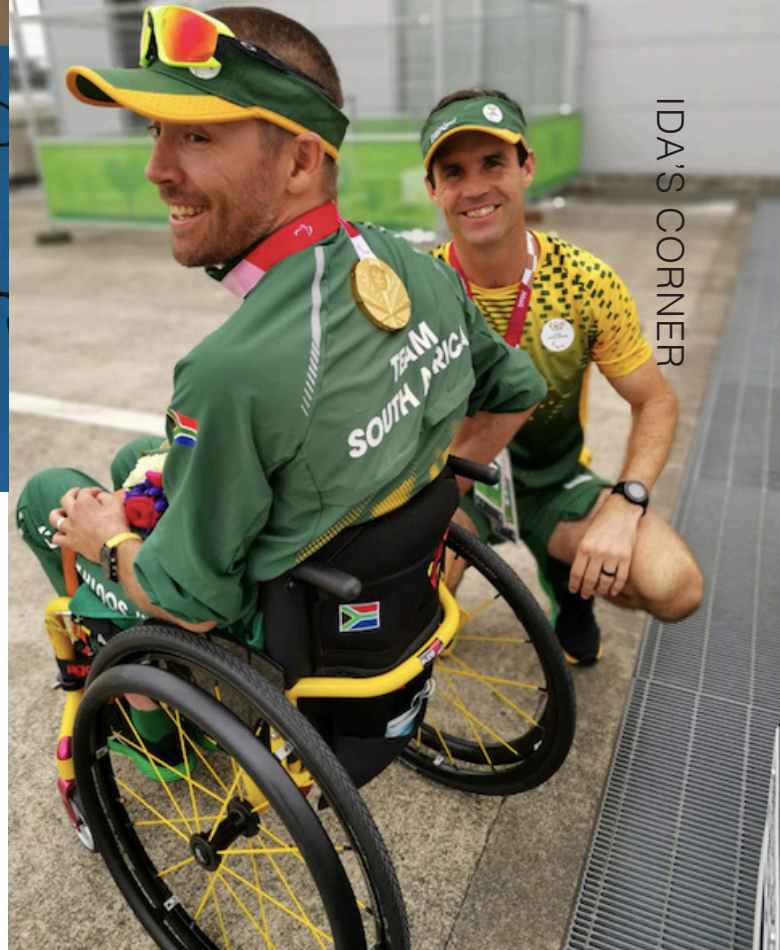
It must be noted that not all athletes react the same. Many take it in their stride and have the resilience to be unbothered by tough times. This article focuses on those who struggle, but are brave enough to compete and excel, despite their struggles; those with the courage to pick themselves up and try again when they fail or things go wrong.

PREPARING MINDSETS

Kirsten explains that the mental (and emotional) preparation of the team had the added challenge of athletes having to live in a bio-bubble at the Games and thus unable to mingle and socialise with athletes from other countries – often friends whom they had not seen for a long time.

Preparation took the form of two team workshops, which were aimed at mental preparation and

I AM
PURE
POSSIBILITY
DRIVEN
BY
LOVE



MAIN PHOTO: It was a long physical, but also an emotional journey to the 2020 Tokyo Paralympic Games as the event was delayed due to the global pandemic.

ABOVE: Team South Africa had some inspiring words to motivate them at the event.

RIGHT: Pieter du Preez were one of the athletes who excelled at the Games, winning gold in his event.

COVID-related logistics. This also provided the opportunity for the team members to get to know one another and to start building comradery.

The 18-month delay for the Paralympics created pent-up stress that also had to be managed. When the Games finally arrived, it brought forth even more emotions that had to be channelled positively. However, despite the stresses and anxieties, the athletes were excited and raring to go.

Kirsten mentioned that, as a sport psychologist, she finds working with Paralympic athletes so fulfilling for this exact reason. She loves seeing people strive for excellence no matter their background or situation. This made the preparatory workshops to be a very positive experience.

Kirsten explains that, with her work, unlike physical skills that are already present, abilities often have to be honed from scratch through mental skills training with unique needs for each athletes. In order to really perform, mental skills must compliment physical skills. Training of the mind includes mental mindfulness, pre-competition routines and techniques that focus the mind.

For the athletes, these skills need to become a constant way of thinking. It is very much like physical fitness. To stay fit, you have to keep on training. In the same way, to remain mentally

aware or 'in the zone', you have to constantly work at it.

In a nutshell, sport psychology is caring for the person behind the athlete; to ensure an emotional resilience, tenacity and strength of mind that prevents the largeness of the event and surrounding circumstances to consume the person; to create a mental freedom that allows the athlete to excel physically. No matter how mentally tough an athlete is, if depression and anxiety sets in, it gnaws away at toughness...

TOKYO

Now that the mental preparations were done and dusted, the team finds itself in the Tokyo bio-bubble. This is where Carollette continues the experience of caring for the team. She does so with anecdotes that describe the team spirit and challenges during their stay in the Olympic Village. Starting with the very real effect that COVID had on the athletes before and during the Games.

Carollette mentions the travel and accommodation challenges experienced. The team showed courage, resilience, interdependence and a wonderful sense of humour that transformed the athletes into a close-knit community and even a family.



You can impress someone
with your success, but
you can influence them
with your scars!

-Kerwin #17 😊

RIGHT: Puseletso Michael Mabote at the 2020 Tokyo Paralympic Games.

ABOVE: Words by South African para athlete Kerwin Noemdo that helped keep Team South Africa focused and inspired for the 2020 Tokyo Paralympic Games.

The biggest impact of the pandemic on the team was the complete uncertainty that it caused. Will I stay healthy? Are we going to travel? Will the Games indeed happen? Some athletes recovered from COVID immediately before the Games and this caused doubt of their own body's abilities. Will they have the strength to excel? After they trained so hard! For so long...

Another concern was the effects of such a very long flight on the athletes, especially wheelchair users where the risks of pressure sores, swollen legs, and developing blood clots were a real possibility. Amputees can experience swelling of their stumps that could prevent them from fitting their prostheses on landing in Japan.

The challenge of the team doctor is to mitigate these in-flight challenges and similar obstacles during the Games. An amputee, for example, who develops a pressure sore on the stump cannot compete. Or, if they do, will struggle to compete optimally. So too a wheelchair athlete who developed a pressure sore.

During the Games, the athletes underwent daily COVID tests, which further added to anxieties. Fortunately, resilience prevailed. As one athlete remarked smilingly: "COVID did not steal my race from me. I tested negative, so, today I'm going to run!"

But for all their bravado, these athletes really needed nurturing. A comment from another

athlete: "You know, Carolette, we need people to care about us." They needed to be cared for as a person and not just as an athlete. This is what Carolette came to understand from her time as team doctor.

A blind girl discovers a blister on her foot, but cannot find the treatment room. It is the person that is troubled, not the athlete. The blister is an emergency for the athlete, but the fear is experienced by the person.

Carolette also experienced the comradery between team members; the way that they look out for one another. She gives the example of a visually impaired girl and another in a wheelchair who stayed together.

During one incident the athlete in the wheelchair couldn't pick up her dropped credit card because of impaired hand function. Then her roommate with a visual impairment couldn't find the card. It became an example of the first being the eyes and the other the hands to work together. Their jokes, humour and laughter about this became contagious.

The way in which the athletes mocked their own disabilities, making jokes and having fun, was inspiring. If you can laugh at yourself, you immediately are in a better space.

Just as inspiring is how the Paralympians picked themselves up to forge ahead. The absolute

tenacity shown. Many come from very difficult and challenging backgrounds, but they bounced back to tackle the challenges of life.

This makes them extremely resilient and fiercely competitive. They often perform despite injuries and significant pain. The team comradery was backed further by cheering each other on as they battle through their injuries and pain.

PICKING UP THE PIECES

The Games are over. The athletes back home. Those with medals celebrate, but all that really remain are the memories. Many take it in their stride. It happened. It is past. Life goes on. But, there are also casualties: mental and emotional. This is where Kirsten picks up again.

“ Just as inspiring is how the Paralympians picked themselves up to forge ahead. ”

Post-Olympic depression is well-known among athletes across all sporting events. They call it “Post Olympic Blues”. Michael Phelps narrated a piece called “The Weight of Gold”, which speaks of many Olympians and Paralympians who lived in “preparation-bubbles” during the preceding four year. Their whole lives revolving around this event. But, now, they are back home.

So, what now? It is sort of an anti-climax. You spend so many years preparing, then it is so fleeting. Was it worth the effort? The sacrifices? If you didn't perform well, there is the disappointment with which to deal. Even those who did well can have the morbes: “Did I give up my life for this chunk of metal?”

It is amazing in the moment. For a few days you bask in glory, but then you just return to normal



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: yorslo@icloud.com



ABOVE: For many athletes, the Paralympic Games are an opportunity to catch up with old friends from different countries. This year, athletes were in bubbles to prevent the spread of COVID. As a result, they were unable to socialise with athletes from other countries.


life. And often for persons with disability, “normal life” can be tough to re-integrate back into. There is a sense of loss.

Loss of Paralympic comradery, friendships, of sharing, nurturing and a loss of shared community. Going back can be very hard. I can attest to Kirsten's comments: “Soon after the Paralympians returned I asked one of the athletes, ‘Are you happy to be back home?’. After a rather pensive silence, she replied, ‘I suppose so, but I miss my Paralympic family terribly.’.”

This was what made me write this article. As onlookers we tend to say, ‘Hey, you were at the Paralympics. It must have been fantastic!’. To many, it was fantastic, but to others, not so much. It is tough and not always what it seems.

Post-Olympic and Paralympic care is something that we all need to get better at. We pour everything into the preparation and the event itself, but when it is over we say: “Well it is over now. Go home and have a nice rest.”

Often emotions are mixed, the athletes feel down and often somewhat confused. We cannot just leave them to their own devices. This period in their lives can often be quite traumatic, almost like a Post-Traumatic Stress Disorder.

We all know the saying: “It ain't over till the fat lady sings.” For some, the fat lady has not yet sung. We all need to be aware of this. 

TRAVELLING SAFELY WITH BATTERIES

With the holiday season upon us, **MANDY LATIMORE** takes a look at the best ways to travel safely with batteries and portable power packs

As we get ready for our December holiday season, South Africa is released off the red list of other countries, and flight travel is once again an option, I decided to look into the rules and regulations on how to travel with the various devices that require batteries.

We use batteries to charge most of our portable electronic devices (PEDs) as well as our motorised mobility devices. However, batteries can have serious safety consequences if they're not carried correctly when you're flying.

The batteries that power your phone, laptop and camera are usually under the 100 watt-hour (Wh) rating. Lithium Ion batteries, which have a 100 to 160Wh rating, are more powerful. These can be found in some mobility aids.

When flying, there is a limit of two spare batteries per person. The batteries must only be packed in carry-on luggage and should have their terminals individually protected to minimise the risk of contact with other metal objects in your luggage.

Lithium Ion batteries with a 160Wh rating and above can only be carried if they are for wheelchairs and other mobility aids. These batteries must be transported and declared as dangerous goods cargo. Thus, you need to contact your airline for guidance before travelling.

Some manufacturers will supply these devices with certificates of compliance for air travel. A copy of this certificate should be included in your document or travel wallet so that it may be presented at the necessary times.

PEDs, including iPads, laptops and Kindles, must not be plugged into the in-flight power when not in use. In other words, you can't simply charge the devices while onboard.

Other commercially available batteries, such as Ni-Cad, (Nickel Cadmium) and alkaline, can be carried safely in either checked or carry-on baggage provided that they are adequately protected against a short circuit.

The older "wet-cell" batteries need a lead-lined travel box, but the latest "dry-cell" batteries just need to be disconnected and protected against a short circuit.

Damaged Lithium batteries can be dangerous whether they're dropped, smashed, overheated or mistreated in other ways. Lithium batteries can become unstable and have been known to ignite fires due to mistreatment.

Batteries will show clear signs of being unhealthy. These include:

- Bulging;
- Discolouration;
- Squashed or deformed;


- Spilt case; and
- Leaking fluid.

If your battery shows any of these signs, it should be replaced. It's also a good idea not to travel with your batteries fully charged. A charge level of 40 to 70 percent will keep the particles that store energy in their most stable state during travel, minimising the risk of thermal runaway.

Batteries don't last forever and it's important to monitor them. Continual discharges, overcharges and quick charges will eventually reduce the battery's overall capacity and health. Here are some tips to assist you when travelling:

- For Lithium Batteries of 160Wh and above, you must have approval from your airline before flying. If the battery is installed in a device, it can be carried in either checked or carry-on baggage.
- If the battery is by itself and not contained in equipment, it must be in your carry-on baggage only.

- Spare batteries, regardless of their size, are not to be carried in checked luggage.
- Never carry damaged batteries or equipment on an aircraft.
- All battery-powered equipment and devices must be packed in a way that prevents inadvertent activation. Spare batteries should be in the manufactures packaging where possible. If not, you must protect it from short circuiting or damaging. You can protect the battery from a short circuit by placing electrical tape over the terminals or by placing it in a protective case or strong plastic bag.

So, when travelling you need to know what batteries are in your PEDs and be prepared with the correct packaging and certificates of compliance so that passing through the airports can be as hassle-free as possible. Gathering as much information as possible before starting your trip helps prevent hassles and delays along the way. Happy travels! 



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

M.O.V.E Talks

Smergos' slogan is Inspiring Motion. Smergos is a social movement that is driven to create a more inclusive, accessible and empathetic world by shifting mindsets and building bridges between people with and without disabilities.

One of their initiatives is M.O.V.E Talks - free, bi-weekly, online events that host a range of guest speakers who are inspiring motion in unique ways to share their stories and knowledge.


M.O.V.E Talks are held every other Tuesday at 19:00 on Zoom. Join the movement by following Smergos on social media.


M.O.V.E TALKS

Smergos invites a guest speaker who has been inspiring motion in unique ways to share their stories and knowledge

19:00 - 20:00
on Zoom

Tuesdays, bi-weekly

 Smergos

 Smergos_sa

Social Media Tags

Facebook: Smergos
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A person in a wheelchair is silhouetted against a bright doorway, looking out towards a green landscape. The person is wearing glasses and a dark jacket. The wheelchair is a standard manual model with a large front wheel and a smaller rear wheel. The doorway is framed by dark wood or metal. The background shows lush green trees and a clear sky, suggesting a rural or semi-rural setting. The overall mood is contemplative and hopeful.

DISABILITY COMMUNITY WELLBEING DURING LOCKDOWN

Researchers surveyed the disability community to determine their financial and emotional wellbeing since the start of the global pandemic and national lockdown. Their findings call for more inclusion

The COVID-19 pandemic and national lockdown haven't left a stone unturned. No one has been immune to the impact the pandemic and lockdown have had on individual lives and the economy.

For some, the impact has been more of an inconvenience with less access to their favourite activities, visiting friends or family, or adapting to working from home. For others, the pandemic and lockdown has been completely devastating.

A group of researchers from the Human Science Research Council (HSRC) were interested in how the lockdown impacted on the lives of people with disabilities. To find out more, they ran a survey from July 1 to August 31, 2021.

The questionnaire received 1 857 responses. The majority of the respondents were above 18 and lived in Gauteng.

In October, the HSRC presented the results of the survey in a webinar titled: "Socioeconomic wellbeing and human rights-related experience of people with disabilities in COVID-19 times in South Africa".

There were several key findings from their research. The survey ran from July 1 to August 31 with 1 857 survey responses.

ECONOMIC WELLBEING

A key focus area for the HSRC was the financial wellbeing of people with disabilities during the

lockdown. First, they determined the living situation of the respondents before the virus struck.

The majority live in informal housing with 43 percent living in a township or RDP houses. A further 20 percent lived in the backyard shack or room within a township.

The majority (64 percent) relied on a government grant with 31 percent receiving a disability grant and 33 percent receiving the social relief distress grant, which was introduced after the first lockdown.

Most concerning was the income of the respondents. A shocking 73 percent earned R5 000 or less per month. Of these, 40 percent earned R2 500 or less, while 13 percent lived off less than R561 per month.

Understandably, the majority were concerned about their financial position with 78 percent stating that they were much more concerned for their economic wellbeing since the start of the COVID-19 pandemic.

The majority (76 percent) also agreed with the statement: “Due to my financial situation, as a result of lockdown, I have difficulties paying for my living expenses”. Of the people surveyed, 40 percent ran out of money to buy food, 39 percent experienced someone within their household going to bed hungry and 39 percent went to bed hungry themselves.

EMOTIONAL WELLBEING

The HSRC was also interested in determining how the lockdown and pandemic impacted the mental and emotional wellbeing of South Africans with disabilities. Understandably, most experienced negative emotions with 60 percent stating that they were stressed, 54 percent were depressed and 52 percent were scared.

Fortunately, 69 percent of the respondents addressed these negative emotions with 29 percent seeking out professional mental healthcare service. People also reached out to friends and family, read or consumed entertainment, and practiced physical activity and relaxation techniques.

CAREGIVER ACCESS

With many people with disabilities depending on a caregiver to assist with certain activities, the HSRC enquired about the access to caregiver

services. Of the respondents, 60 percent indicated that they require caregiver support. With lockdown, 46 percent of participants experienced interruptions in caregiver support. The reasons for these interruptions weren't mentioned.

Other factors included in the survey were engagements with law enforcement, the good and bad that came from the lockdown, and the perceptions around the vaccines. The respondents had the following to say:


- 69 percent were physically harassed by law enforcement;
- 57 percent said there was nothing good that came from the lockdown;
- 19 percent said the family time and staying home was the good that came from the lockdown; and
- 78 percent said that they would get vaccinated when it becomes available to them.

FINAL FINDINGS


Based on all the responses to the survey, the HSRC made a few conclusions and recommendations for the impact of the COVID-19 pandemic and national lockdown on the lives of people with disabilities.

For starters, the HSRC concluded that the disaster and risk framework for people with disabilities is far from complete with few disaster regulations focusing on people with disabilities.

Most notably, many of the services for people with disabilities (for example, access to caregivers) were interrupted. There was also little communication between government departments and disability organisations.

Finally, the HSRC highlighted the urgency of making the disaster and risk framework disability inclusive to assist the community to better recover from the impact of the lockdown and pandemic. The majority of the community (83 percent) indicated that they are happy to be monitored. 

View the slides from the webinar on the socio-economic wellbeing of South Africans with disabilities during the coronavirus pandemic by scanning the QR code with your smartphone.



BRIEF HISTORY OF DISABILITY ACTIVISM



With various days to commemorate disability rights in November and December, here is a short history of disability activism in South Africa

To honour the national Disability Rights Awareness Month (DRAM), which was celebrated from November 3 to December 3, and the International Day for People with Disabilities (celebrated on 3 December), we took a look at the history of disability, specifically disability activism, in South Africa.

Despite the vast number of people from all races, genders, and backgrounds with disabilities, the fight for better rights as a collective community is relatively young. Some disability organisations formed in the late 70s. For example, the QuadPara Association of South Africa (QASA) was established by a group of quadriplegics in 1978.

However, the national organisations that included several types of disabilities only sprung up several years later. The Disabled People South Africa (DPSA), for example, was established in 1984.

While Apartheid divided the South African people, people with disabilities from all races, cultures and ages were oppressed at the time (albeit to varying degrees). Colleen Howell and her team details the oppression in their research paper, *A History of the Disability Rights Movement in South Africa*:

“Under apartheid, the experiences of people with disabilities were also the experiences of a deeply divided people living in a profoundly unequal society. The lived experiences of black and white people with disabilities under apartheid were very different and reflected the general inequalities between white and black people in South Africa.


“For the majority of black people with disabilities, their lives were about struggling on a daily basis to cope with the poverty, deprivation and violence of the apartheid system, a struggle compounded by their disability. However, it is

important to recognise that under apartheid all people with disabilities, black and white, were discriminated against and marginalised because of their disability and had very limited access to fundamental-economic rights such as employment, education and appropriate health and welfare services.”

“Despite their relatively privileged position in relation to black people with disabilities at the time, [the experience of] white people with disabilities was one of being dependent on a health and welfare system run by people without disabilities. It was a system where professionals spoke on their behalf and generally created conditions in which people with disabilities were ‘cared for’, often in institutions separate from society, rather than living independently, integrated into mainstream society.”

With the fall of apartheid, more disability organisations emerged to empower the disability community. Today, people with disabilities have much better access to healthcare, employment and educational ventures.

QASA, for example, has spent the last half-century empowering its members through its programmes. The QASA Work Readiness Programme upskills people with disabilities to enter the formal work environment, while the Driving Ambitions programmes supports members to obtain their driver’s licence and independence.

While strides have been made, there is still a long way to go to ensure an inclusive and equal society for people with disabilities. There is still a large portion of the disability community who are excluded from work opportunities; who don’t have access to adequate healthcare; and who earn R2 500 or less per month. But with awareness and organisations fighting for a better future, there is hope. 

WAXED

With summer and the holidays here, many people are looking to remove unwanted hair. **JOY DUFFIELD** takes a look at some of the options available

Summer is here, which means it's time to expose parts of the body that have been hiding beneath the winter woollies' and cosy tracksuit pants. Whatever changes have happened over time in the beauty industry, one thing has remained consistent: Hair removal!

In fact, it is in higher demand now that men have bought into the idea of a hair-free body. For hair removal on general areas of the body, there are a variety of at-home treatment options:

- Razor or Electric razor. You can try this with or without the guard. The disadvantage of a razor is that the hair grows back in a day or two.
- Depilatory (hair removal) creams: Always do a small patch test first thing to check your skin sensitivity.
- Epilator: A device that mechanically grasps multiple hairs and pulls them out. It may be painful, but no danger of cuts or nicks.

PROFESSIONAL TREATMENTS

Waxing or sugaring is available for home use, however, it is not strongly advised! Both techniques require a sticky material or paste to be applied to the area on which you want to remove hair. Sugaring is made of natural ingredients (lemon, water and sugar). Waxes may be chemical or natural. Both of these methods pull the hair out at the roots, which, in turns, makes the hair weaker, softer and sparser.

Another advantage is that there are a few weeks in between treatment as opposed to shaving every other day. This treatment can be used anywhere on the body and face. It is not recommended to remove male facial hair with wax as it is rather painful.



Joy Duffield has been a C4-C5 quadriplegic since 2005. She is the owner of Beauty Academy International, an international training Institute for the beauty industry and a distributor of hair and beauty products in South Africa.

Laser pulse light treatments are also effective in softening and reducing the amount of hair by making use of the light that travels down the hair to the root to destroy it. This treatment is not effective on fair or grey hair and is often not advisable for dark skin. This is a great treatment for underarm or bikini line hair.

A little extra body hair on females is quite acceptable, but, when it comes to excessive facial hair, it can be a little embarrassing.

Excessive course facial hair on women should be medically investigated as it is often an indication of hormonal or endocrine system imbalance, which are treatable.

Menopausal women can often spot a couple of dark hairs on the chin or upper lip due to the lack of the female hormone oestrogen in the body.

Puberty, pregnancy and menopause are the most common terms to start sprouting some unwanted hairs. This definitely needs a trip to the salon where the therapist can advise on the best option. Unless you are a man, I would not recommend shaving the face as it will exacerbate the problem.

Electrolysis is a treatment option to consider if you are looking for something more permanent, particularly for those who suffer with excessive hair growth due to genetic or health conditions.

There are many salons who work in conjunction with endocrinologists and dermatologists to treat such conditions. This is not a once-off treatment and may take time, but is worth the end result. There is no reason for living with unwanted hair in these modern times. **R**

CARE FOR THE CARER

Parents and caregivers of children with disabilities are at risk of burning out. **Emma McKinney** highlights the need for the parents to take care of themselves as well

For many parents and caregivers of children with disabilities, their primary focus is on caring for and supporting their child or children with disabilities. There can be many additional things that we have to think about compared to parents of children without disabilities.

Some children require physical help with dressing, feeding, transferring into wheelchairs, turning, taking medication, personal hygiene and daily living tasks such as washing, toileting, catheterisation, diaper changing.

Some of us spend significant time, energy and resources ensuring that our children receive therapy, get to doctors and specialist appointments, have the food, medication and assistive devices they need, and that their daily needs are met. This can leave us feeling physically, emotionally and financially drained.

It is important that we make time for ourselves. Very often this is difficult to do as we feel guilty; that we should be with our children 24 hours, seven days a week; that our children won't cope without us; that we shouldn't be spending time on ourselves; and, that we will be judged by others.


This pressure often leads us to not take time off. We feel burned out, anxious and depleted. The pressures that we face often takes a toll on our relationships between partners, family members, and our friends.

It is important that you carefully plan some time off. This might involve careful logistics,

especially if your child needs medication, specialist feeding, routines or support. Find someone that you trust, this might be a friend or family member, to look after your child. This might only be possible for 30 minutes, but it will be so worth it!

While it is often very hard to do, we should try make some time for ourselves. Here are some ideas that you might want to try:

- Get outdoors. Just getting some fresh air and being in a different environment can lift your spirits and give you some perspective.
- Read a book or magazine. Find a quiet spot, away from your home, and just switch off.
- Organise to go for a walk, sit on a park bench, or have a coffee with a friend who you haven't seen for a while.
- Go on a lunch or dinner date with your partner and reconnect. If this is too much, pack a takeaway lunch or tea and go to a local park, sit in your car and look at a view.
- Listen to music that you enjoy, close your eyes and relax, or dance and have some fun.
- Sit on the beach and dig your feet in the sand or go for a swim.
- Have a haircut, look at something beautiful, or stroke or pat an animal.
- Make a call to a friend or family member, or write them a letter.
- Start a diary and jot down your feelings or just put ideas down.

While this might be very difficult at first, making time for yourself, even if it is 30 minutes once a week, can really give you energy and focus to keep going. 



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

PAINFUL PROSTHESIS

Not living your best life even after your amputation? It could have something to do with the treatment protocol used. **Heinrich Grimsehl** provides some insights

An amputation is traumatic. You must deal with the change in body image and your new level of mobility or disability, depending on your point of view. You must deal with the tremendous sense of loss, similar to losing a close relative.

Looking around, you might see amputees going for gold. You see senior amputees living a normal life. You see younger amputees doing weird and wonderful things with prostheses. You even see animals on artificial limbs living normal lives.


But, for you, this is not happening. Your prosthesis causes you daily pain and discomfort, and you don't know why? If this is the case, maybe I can assist you with a problem-solving check list.

Disclaimer: Please bear in mind that the following does not constitute any treatment protocols or treatment advice. Furthermore, it does not reflect negatively on any treatment that you might have received. I have no knowledge of you as a patient or your circumstances.

But, the following might help you to pinpoint what went wrong, and how to fix it, because not all prosthesis and treatment protocols are created equal. The following mostly applies to first-time amputees or patients who've had stump revisions. You can answer the following "Yes" or "No":

- Did a healthcare practitioner refer you to your current prosthetist?
- Did your prosthetist insist on a prescription from a healthcare practitioner?
- Did your prosthetist speak to the previous prosthetist who might have treated you?

- Were you explained, in detail, what outcomes to expect once your treatment was complete?
- Was your residual limb (stump) measured and coned with an elastic bandage for at least three weeks?
- Were regular stump measurements taken?
- Did your prosthetist ask the referring healthcare practitioner if they can start the coning process before they did?
- Did you have a trial silicone liner wearing period before you were cast for the limb?
- Were you informed on how to wash your stump and the liner down to the very last detail?
- Did you receive an initial test prosthesis consisting of an adjustable see-through socket (looking like glass) that can be fully adjusted with a bit of heat?
- Were your wounds healed a 100 percent before the prosthetic fitting started?
- Did you wear the "glass" test socket for at least a couple of weeks to see if it is comfortable and if your stump still reduces in size?
- Was your prosthetic alignment assessed and optimized with every consultation?
- Was a fully adjustable final socket manufactured that can be reduced in size at will and that can be adjusted for bony prominences?
- Was your treatment protocol longer than five months before the prosthesis was complete?
- Did you receive extensive gait training by a person qualified to do so? For example, a physiotherapist.

If your answer is no to more than one of these questions, maybe you should have a look at the drawing board. It might just produce surprising solutions to your problems. 



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

IMPORTANCE OF A CV

A Curriculum Vitae (CV) plays an important role in giving potential employers insight into who you are. **RUSTIM ARIEFDIEN** explains

Your CV is a vital tool in your quest to find employment. It represents who you are, what you've achieved, your competencies and what you offer a prospective employer. A well-written CV will get you to the all important next step in your employment endeavours: an interview. So, what makes a good CV?

BE RELEVANT

Your CV needs to speak to the job for which you are applying. It needs to present the education, skills and experience you have gained relevant to the job.

MIND YOUR LANGUAGE

The words that you use need to be relevant and clearly describe your education, skills, and experience. Avoid general phrases. Rather be specific. Try not to use clichés such as “hard working”, “team player” or “enthusiastic”.

PAY ATTENTION TO DETAIL

Only include details that are relevant. Proof read your CV and ask someone to also read through your CV.

KEEP IT SHORT

Ensure that the detail in your CV is concise and best describes what you are communicating. Avoid long-winded sentences. Make use of bullet points.

BE ACCURATE

The information that you put in your CV needs to be accurate and honest. Backing your achievements up with tangible evidence is a great way to quantify your value to employers.

PRESENTATION

Use a CV template so that the format is congruent and easy to read. Keep to a page or two. Your CV needs to be structured for easy navigation. Microsoft Word is the most-used CV format.



Rustim Ariefdien is a disability expert extraordinaire who assists businesses to “let the Ability of disAbility enAble their profitAbility” through BBBEE, skills development, employment equity and socio-economic development. His purpose is the economic empowerment of persons with disability in Africa. As a person with a disability himself, he has extensive experience in the development and empowerment of persons with disability.

DISABILITY INFORMATION

There are advantageous to including relevant disability information as employers are incentivised to employ persons with disabilities. Indicate your disability, the category (physical or psychosocial) and diagnosis, for example, paraplegic.

REASONABLE ACCOMMODATION

Indicate what reasonable accommodation you would need. For example, if you use a wheelchair, you need wheelchair access to your work area. Indicate if you need any special assistive devices or services.

INCLUDE PERSONAL INTERESTS


Include your interests and hobbies as this shows the reader who you are.

MULTIMEDIA

If relevant, include a high-resolution photo and/or a short video that describes why the employer needs to consider your application. The typical outline of your CV includes these sections:

- Contact details;
- Personal profile;
- Core skills;
- Work experience;
- Education and qualifications;
- Disability information; and
- Interests.

When you identify a job for which to apply, adjust your CV to make it relevant to the application. Send off your CV and follow up if possible.

Besides the traditional channels to look for employment, consider networking in your geographical area and/or in the industries that best suits your skills set. Be positive. The employer is looking for you. 



REASONABLE ACCOMMODATION IN THE WORKPLACE

Despite hesitation by businesses, reasonable accommodation is essential to an equal workplace. **JUSTENE SMITH**, disability specialist at Progression, explains

Reasonable accommodation is covered under so many elements of the law, both internationally and in South Africa. Yet, it is still so misunderstood, often under-implemented or avoided by businesses as something that would be costly, time-consuming or have a negative impact on the operations of a business. In fact, it's quite the opposite.

The United Nations Council for the Rights of Persons with Disabilities defines it as “necessary and appropriate modifications and adjustments not imposing a disproportionate or undue burden, where needed in a particular case, to ensure persons with disabilities the enjoyment or exercise on an equal basis with others of all human rights and fundamental freedoms.”

So, it's not just a 'recommendation' or a 'suggestion', but forms part of our fundamental human rights to be treated equally at work. It underpins that ever-pertinent principle of equality. With this in mind, isn't it high time that we start to raise more awareness about its benefits to individuals and businesses as a whole?

The practical implementation of reasonable accommodation is often the missing link between identifying a suitable candidate with a disability and empowering them to perform the inherent requirements of the job at their highest potential.

Reasonable accommodation is often mistaken for structural changes such as lifts, accessible ablution facilities and ramps. These are what could be termed as structural accommodations, linked to building regulations and minimum standards, while reasonable accommodations are the changes related directly to the inherent requirements of the job. Both need to be

considered but not mistaken for one another.


Some of the benefits of reasonable accommodation to the employee include:

- The right tools to meet the inherent requirements of the role.
- Feel comfortable and safe at work.
- Ability to participate equally in the workplace and contribute.
- Access to career development opportunities as would any employee without a disability.
- Opportunity to reach targets.
- Overall job satisfaction.
- Improved productivity support.
- Advance diversity in the workplace.

The benefits don't just sit with the employee but also positively impact the business if done right. Managed well, these benefits incorporate:

- Decreased absenteeism;
- Increased productivity, which leads to increased profit margin;
- Better customer experience;
- Higher staff retention rates;
- Fewer chances of litigation relating to discriminatory practices;
- Improved staff morale; and
- Positive business reputation.

In finding this balance, we take another step in promoting inclusive workplaces that embrace our rainbow nation's diversity and work towards building a stronger economy for all South Africans. With that said, businesses and individuals need to know their rights and responsibilities.

The Codes of Good Practice for the Management of Disability in the workplace is a good place to start or explore the services of some of the experts in the business for advice. 

SUPPORTING YOUR SPINE

Even with a spinal cord injury (SCI), it is important to take care of your spine to ensure good postures and prevent respiratory issues

After a spinal cord injury, it might be tempting to write the spine off as pointless, but it still plays an important role in good posture. For people with a SCI, good posture is essential to preventing respiratory challenges as slouching can compress the lungs. In addition, good posture can assist with digestion (as the stomach is not constricted), improves blood flow and keeps the nervous system healthy.

Poor posture is often a result of a weak trunk, inactivity or a decrease in physical fitness or bad sitting habits. For example, a wheelchair user might hook the same arm on the chair back for support or lean to one side.

Equipment could also be a big contributor to poor posture. If the equipment is old or ill-fitting, it can exacerbate the poor habits such as leaning.

Fortunately, there is a lot that can be done to support and improve your posture and care for your spine. If you are concerned with hurting your spine with any of the exercises, please consult a medical professional before attempting the exercises.

CARING FOR YOUR SPINE

The first step to improving your spine health is to care for it. This starts with ensuring that your spine has sufficient time to rest, and adequate support. Ensuring you have the right equipment and are positioned correctly while sleeping play an important role.

RESTFUL NIGHT

You want your spine to relax and recover from

the strain placed on it during the day while you sleep. A firm or medium-firm mattress is recommended to best support your spine. Soft mattresses often result in the spine sagging into an unnatural position. Ideally, the spine should be in its natural alignment.

When sleeping on your back, place a pillow beneath your knees to remove the stress placed on your lower back. When sleeping on your side, place a pillow between your knees. This ensures that the hips are balanced. A neck pillow can also assist with supporting the cervical spine.

MASSAGE THE MUSCLES

A professional massage offers many therapeutic benefits including increasing blood flow to an area, loosening muscles and boosting the feeling of relaxation. Consider booking yourself a regular, professional massage to ease the pressure on your back.

UPDATE EQUIPMENT

Equipment, such as wheelchairs and cushions, play an important role in maintaining good posture. Ill-fitting equipment can exacerbate bad behaviour such as slouching or leaning. As equipment is used it becomes worn and damaged. As a result, it might not function as well as before. Consider a cushion that might be more worn on one side that results in the user leaning to one side.

There could also be newer technology that is better suited to your injury or level of mobility. It is not uncommon for your mobility to decline with age. You might need to swap from a manual to a power chair to better support the spine and reduce the strain on your shoulders.

When purchasing equipment, be sure to consult an expert. A seating specialist, for example, can assist you with finding a chair or cushion that helps you distribute your weight evenly.

ADDRESSING POSTURE

In addition to supporting the spine and providing it with enough rest, it is important to address your posture. One of the best ways to improve posture is through exercise to strength the trunk or core (stomach) muscles, and back.

Exercising in a pool by, for example swimming laps, is a great way to strengthen your upper body without placing additional pressure or strain on the back. The water offers a more gentle form of resistance.

There are a few exercises, specifically for people with a spinal cord injury, that can strengthen the core and back to assist with posture.

TRUNK TILTS

The “trunk” refers to your full upper body (including chest, stomach and full back). Trunk tilts require you to lean with your full upper body in every direction (sides, forwards and backwards). Try to lean without using your arms for assistance or balance. Also make sure that you aren’t simply using your neck, but leaning with your body.

Depending on your strength and mobility, move as much of your upper body as possible without falling over. If possible, try staying in the leaning position for a few moments before returning. Do this exercise slowly to really challenge your core and back.

TRUNK EXTENSION

Sit at the edge of your chair. Keeping your back straight and core engaged, slowly lean back until you touch the backrest of the wheelchair with your back. Hold there for five seconds before slowly returning to an upright position.


REACHES

This exercise will require you to reach for items on different heights and directions. To simplify the exercise, place stickers on the wall at different heights. Number the stickers so that you can touch them in order. Avoid putting the stickers in order so that the exercise is more challenging.

Tap the targets with your right hand, then left, followed by both hands simultaneously.

A friend or family member can also assist you with this exercise by holding out their hand on different heights for you to high five. Try to only use your core and back to balance when reaching for your target.

PUSH UPS

While in your chair, with the brakes locked, lift your body up by placing your hands on the armrests and pushing down. Try to keep your core and back engaged. Keep your shoulders back when pushing up. Slowly lower yourself back into your chair and repeat for as many times as possible. 




Read more about correct seating position.

TOP EXERCISE TIPS

Engaging your core could be a strange concept if you’ve never actively worked your core. To engage or “activate” your core, suck in your stomach. Think of it as pulling your stomach to your spine. You should be able to breath comfortable while feeling your stomach muscles compress. Depending on how strong your stomach muscles are, this might be very or not so obvious.

Similarly, if you want to “activate” your back, focus on contracting your back. Unlike the stomach, which you want to pull towards your back, you want your back to contract into itself. Think of the back muscles pulling towards your spine.

The simplest way to practice contracting your back muscles is by pulling your shoulders back and down. By pulling in your stomach, you will also feel muscles in your lower back contract in response.

All of this, of course, depends on your level of mobility. Keep this in mind when exercising and consult a professional if you are unsure whether you are doing the exercises correctly or are afraid that you will injure your back or core. 

RENTAL AGENT RIGHTS AND OBLIGATIONS



Better understanding the role of a rental agent can make it easier to benefit from renting your property or lodge complaints. **CILNA STEYN** provides some insights

Persons with disabilities need to rent properties and manage their existing properties that they may want to rent out. There are many challenges with finding properties that will suit their specific needs and, if they are wanting to put their property onto the rental market, it is always daunting as there are so many stories of nightmare tenants and complicated leases with hidden clauses. To assist with these processes one needs to have a good knowledge of the process and good agents.

Like with most professions, the general public has, at best, a very limited understanding of or, at worst, absolutely no idea what a particular profession entails, and the internal functioning of the particular industry. This is no different to the estate agency industry. There are many kinds of estate agents with vastly different rights and obligations.

SALES AGENT

Among estate agents are the sales agents who focus mainly on the advertising and selling immovable properties, be this a house, office or any other form of property.

RENTAL AGENTS

This is an estate agent who focuses on the advertising or “listing” of properties available to buy or rent, finding potential tenants and undergoing the vetting of potential tenants.

Vetting is the process of determining whether the person would be suitable to rent the property and, in doing so, the agent will focus on the potential tenant’s credit rating, potential judgments or defaults against their name, confirmation of employment and income, reference checks with previous landlords and so on. The rental agent will then introduce the tenant (if successful on application) to the landlord and assist the parties to conclude a lease agreement.

MANAGING AGENT

This is an estate agent who focuses on sectional title complexes. They assist the members of the body corporate, specifically the trustees, with the day-to-day management of the complex. This will include sending out levy invoices, attending to the annual general meetings, assisting in compiling the conduct rules for the specific complex, and many more functions. Managing agents are vastly different to a sales or rental agent with regards to their functions, rights, and responsibilities, the biggest difference being that they play no role in introducing a tenant/buyer to a property owner.

VALUE OF RENTAL AGENTS

For many property investors, the decision to appoint a rental agent may seem to be an expensive one that scrapes the potential profit from the top of a rental property. This is very

often a mistaken belief. Most rental agents have a good understanding of the market, possess the knowledge and resources that could turn your rental property and interaction with your tenant from an absolute nightmare into a long term successful, high-return investment.

MANDATE AGREEMENT IS ESSENTIAL

The document governing the relationship between the landlord and the rental agent is not the lease agreement, as is often assumed, but is in fact the mandate agreement. A lease agreement can never be an agreement concluded between three parties. This agreement is exclusively between the landlord and the tenant.

The mandate agreement is between the landlord and the agent. This is a very important document and many landlords, unfortunately, are reluctant to conclude a written mandate agreement – to their own detriment. The mandate agreement contains the rights and obligations of both parties – a contract clearly sets out what can be expected from the other party and the counter performance for those duties. With this, the risks of conflict and disputes are reduced dramatically.

OBLIGATIONS AND RIGHTS

The standard obligations of a rental agent would be set out in the mandate agreement, but the more specific rights and obligations of the parties will differ according to the landlord instructions on either a procurement mandate (placement mandate) or a management mandate.

In a procurement mandate, the agent will advertise, vet and conclude the lease agreement between the landlord and the tenant. This is where the obligation stops. There is no requirement for this agent to do any of the required inspections, invoicing and general administration and management of your tenant.

A management mandate requires the agent to do everything a procurement agent does as well as be responsible for the monthly invoicing of the tenant, handling of the rental deposit, collecting rental payments on behalf of the landlord, attend to inspections of the property as required by the Rental Housing Act No. 50 of 1999 and to take the necessary


steps against a tenant who has defaulted on their rental obligations.

That being said, none of these mandates will place an obligation on the agent to attend to the collection of unpaid rental or the eviction of the non-paying tenant. A rental agent also does not have the obligation to attend to the physical maintenance of the property. Meaning, should there be, for instance, a burst geyser or a requirement to repaint the property, the rental agent will only be obligated to arranging contractors under special conditions in the mandate agreement or a separate service level agreement.

As this is clearly a separate instruction, the agents' remuneration in the form of commission will not cover these special instructions to the agent. To the contrary, the rights and obligations as described above are standard rights and obligations under both procurement and management mandates.

“ Most rental agents could turn your rental property into a long-term success. ”

When a landlord would like an agent to attend to duties outside of these standard obligations, the parties would have to negotiate a fee for the work done by the agent. This can include a wide array of things, including attending to the Rental Housing Tribunal on behalf of the landlord, arranging contractors to attend to maintenance on behalf of the landlord and so on.

Once you understand the role of a rental agent and the importance of the mandate agreement, this knowledge becomes a very powerful tool when it comes to appointing a rental agent, which could be a massive benefit in your property investment journey. 



Cilna Steyn is the managing Director at SSLR Inc. Attorneys. She completed her LLB Degree at Unisa, after which she was admitted as an attorney in 2007. She co-founded Steyn & Steyn Attorneys. She regularly presents training sessions, where she advises groups of rental agents and private landlords on matters relating to Landlord and Tenant Disputes and broader scope Property Law related matters.



MILLIONS AWARDED BY SAB FOUNDATION

The SAB Foundation awarded a total of R16 million to South African entrepreneurs for their social innovations or disability empowerment

Launched in 2011, the SAB Foundation Social Innovation and Disability Empowerment Awards returned this year to award a total of R16,15 million to South African entrepreneurs who are empowering communities through their social innovations. There is a dedicated award to businesses and entrepreneurs who empower the disability community.

In the past, first prize was awarded to entrepreneurs with disabilities, projects that employ people with disabilities, as well as innovations that improve the lives of people with disabilities.

On November 30, the Foundation hosted an awards ceremony to announce the winners. Attendance was limited due to the COVID regulations and lockdown restrictions. Fortunately, the event was also streamed to Facebook. The following businesses and entrepreneurs were awarded prize money at the event.

RUBY WHEELCHAIR

Entrepreneur Ernest Majenge was awarded first prize to the value of R1,3 million at the event for his Ruby Wheelchair – a manual wheelchair that allows people with mobility impairments to navigate stairs more easily.

PADPERCH

Jennifer Webster earned second place and R750 000 for her Padperch innovation – a low-tech solution that allows people with visual impairment to use smart devices as a hands-free magnifier.

SIGN LANGUAGE TEACHER'S TRAINING PROGRAMME


Pieter Smal came in third with R550 000 awarded for his training programme that enables deaf teaching assistance and persons who are deaf to become qualified sign language teachers.

An additional R300 000 was awarded to Tieho Tsiane, Shakila Maharaj and Edwina Makgamatha each for their innovations to assist with developing it further.

Tieho designed Ka-Dah Device – a device that assists visually impaired individuals to navigate their phones without the need to touch, hold or tap the screens.

Shakila is the innovator behind the Shazacin Mobile Application that enables visually impaired individuals access to visual content through the use of audio descriptions.

Edwina started the Thusanang Enabling Support Services, an out-patient clinic that offers a multidisciplinary approach to wound care management.

Congratulations to all the winners and good luck with further developing and expanding your businesses! 

View the full awards ceremony by scanning the QR Code.



MAIN PHOTO: (From the left) SAB Foundation Trustee William Rowland awards first prize in the Disability Empowerment category to Ernest Majenge for the Ruby Wheelchair.

MYTHS AND MISCONCEPTIONS ABOUT SEX DEBUNKED

To help people with spinal cord injuries to live a sexually fulfilling life, **DANIE BREEDT** debunks some of the misconceptions about sex after an injury

There are many misconceptions regarding sexuality and sex, which can cause emotions such as fear and guilt to name but a few. Sexual rehabilitation for people with spinal cord injuries (SCIs) involves educating and empowering them to have fulfilling and satisfying sexual experiences – a process that is unique to everyone. In this article, four myths about sexuality after a SCI is debunked.

“AFTER THE SCI, I WON’T BE ABLE TO HAVE SEX”

A person with a SCI will be able to have sex. What is the most important sexual organ? The brain! The way in which the person has sex will change. The ability to be creative and playful will be vital. There are other options available that facilitate a sexual experience for the person with a SCI.

This will also be largely dependent on the site of the injury and whether there is sensation. There are many people with SCIs who have satisfying and rewarding sexual experiences.

“I WON’T BE ABLE TO SATISFY MY PARTNER’S SEXUAL NEEDS”

The challenge is to speak to your partner about what switches them on sexually and to share your sexual needs. This allows each party to have a better understanding on how to pleasure their partner. Some partners of people with SCIs have shared that the sex after the injury is more fulfilling.


“MY PARTNER WILL LEAVE ME BECAUSE I CAN’T SATISFY HIS/HER NEEDS SEXUALLY”

Sexuality is a human need, but it is only one aspect of a person. There are numerous factors that contribute to who we are, for example, social factors, spiritual beliefs, hobbies and personal interests. Relationships include many needs and are seldom based on only one.

The focus in relationships should be the mutual fulfilment of each other’s needs. Focusing just on the sexual part of a relationship is short-sighted and can be unfulfilling if other aspects don’t also receive attention.

“I CAN’T HAVE CHILDREN BECAUSE OF THE SPINAL CORD INJURY”

This is unique to every individual and many factors come into play. After the SCI, you may be able to impregnate your partner and, if female, you could still become pregnant. It is important to speak to a sexologist and medical professional to find out what the options in your case might be. The SCI itself doesn’t cause infertility.

In order to have a satisfying sexual experience, it is important to be aware of the misconceptions and myths that exist as this can be limiting. The foundation of a fulfilling sexual experience consists of communicating about the misconceptions and expressing sexual needs in an effective manner. 



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



3X3 IS HAPPENING!

And no, it's not a car. Wheelchair basketball has become more exciting with three-a-side matches. **LEON FLEISER** provides some insights

As the world craves more excitement and entertainment, the sports world has been adapting for this. Just look at T20 cricket, seven's rugby or action netball. So too has basketball started evolving from five-man to three-a-side. The athletes without disabilities started first. It is even now an Olympic sport.

Wheelchair basketball has now followed suit and, although it's not a Paralympic sport as yet, it is in the Birmingham 2022 Commonwealth Games. Wheelchair Basketball South Africa hosted the qualification tournament for Africa at the Vodacom Mandeville Indoor Centre from October 6 to 10, 2021. The following countries were represented:

- Gambia Men's team;
- Namibia Men's team;
- Rwanda Men's team;
- Kenya Men's and Women's team; and
- South Africa Men's and Women's team.


I'm happy to say that both the South African

men's and women's teams have qualified for the Birmingham 2022 Commonwealth Games. We wish them all the best.

These games are the only international multi-coded games that are fully integrated. The other para sports that will be at these games are:

- Para Athletics;
- Para Swimming;
- Para Cycling;
- Para Powerlifting;
- Para Table Tennis; and
- Para Triathlon.

We will hopefully qualify athletes in most of these sports and keep a proud tradition of getting many medals at the Commonwealth Games.

On a sad note, another hero has fallen. Dr Chris Carey, a talented sportsman and a great doctor. He was my hero when I started playing wheelchair basketball and my doctor for many years. Rest in peace, my friend. 



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

CROCHET BEARS FOR COMFORT


Being diagnosed with a rare disease can be overwhelming and lonely. For this reason, Rare Diseases South Africa decided to give its members a little comfort through crochet bears. The organisation started its Rare Bear Project.

As it states: “We wanted bears that were RARE for our rare warriors so that they could have a friend with them through their tough times, and to remind them that they have support from their rare family.”

This also provided an opportunity to create employment for women from local townships who earn a portion of the profits from the bear sales.

As the organisation says: “We start a skills clinic with the ladies living in KyaSands.

“We wanted to teach them a skill that could sustain them, as well as one that could be passed down to their children, and thus crochet lessons began!” The unique touch that each lady gives to their bears make them rare.

Bears can be purchased from the project for R180 or donates to a warrior for R150. To learn more about the project, visit the website at www.rarebearproject.org or contact the Rare Bear Project at hello@rarebearproject.org or on 072 476 7552. 

IN THE NEXT ISSUE

THE BEKKERS



Meet Hugo and Leandra Bekkers, the family behind the Little Africa Safari Lodge in Hoedspruit.

NEWLY CROWNED



We interview the winner from the first-ever Miss Wheelchair South Africa competition, which was held in December 2021.

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Contact the QASA Head Office for all projects and services, including Driving Ambitions, Work Readiness Programme and QuadPar Transport, an accessible transport service based in Gauteng.



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