

JOHANNESBURG INDIAN SOCIAL WELFARE ASSOCIATION W.O. 103.

MEMORANDUM ON CARE AND TREATMENT FACILITIES
FOR HANDICAPPED INDIAN CASES

CRIPPLES:

Indian children suffering from an orthopaedic disability can obtain treatment through the orthopaedic clinics and departments of Provincial Hospitals in the Southern Transvaal (the area of jurisdiction of the Cripples' Care Association of the Transvaal). The Orthopaedic Out-Patient Clinics are attached to the following hospitals serving Non-European patients:

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|-----------------------------|-----------------------------------|
| Baragwanath Hospital, Jhb. | Discoverer's Hospital, Roodepoort |
| Coronation Hospital, Jhb. | Vereeniging Hospital |
| Non-European Hospital, Jhb. | Far East Rand Hospital, Springs |
| Germiston Hospital | Ermelo Hospital |
| Boksburg-Benoni Hospital | Standerton Hospital |
| Krugersdorp Hospital | Volkstrust Hospital |
| Klerksdorp Hospital | Wolmaranestad Hospital |
| Lichtenburg Hospital. | |

With the exception of the Boksburg-Benoni Hospital, Klerksdorp Hospital and Lichtenburg Hospital, field staff (either social workers or after-care nurses, or in the case of Johannesburg - both), employed by the Cripples' Care Association of the Transvaal and its local associations attend all the orthopaedic out-patient clinics and are responsible for the supervision, after-care and social services needed by cases in the district, including Indian children and adults. The provision of full-time after-care services at the three hospitals referred to are being investigated and immediately circumstances permit the necessary services will be instituted at these centres. The Cripples' Care Association is also exploring the establishment of an orthopaedic clinic with after-care services at Potchefstroom.

The services provided by field staff include the following:

- a) In case work advice is given to patients and parents.
- b) Home nursing care and supervision.
- c) Arrangements for examination, diagnosis and treatment at clinics.
- d) Arrangements for the supply of orthopaedic appliances and artificial limbs.
- e) Arrangements for admission to homes for cases requiring long-term treatment.
- f) Arrangements for physiotherapy, occupational therapy and speech therapy at hospitals and clinics.
- g) Finding employment for adults either in the open labour market or in sheltered employment or employment in their own homes.
- h) Transport to clinics, hospitals, special schools, orthopaedic workshops, sheltered workshops, places of employment, rehabilitation centres.
- i) Financial assistance for individual cases.
- j) Supply or loan of wheelchairs, special equipment for occupational therapy.
- k) Provision of food and clothing, if not available from other welfare sources.
- l) Special feeding schemes for Non-European cases attending Orthopaedic Workshops.
- m) Walking classes for Non-European crippled children.
- n) Assessment and Treatment Clinic for Non-European Cerebral Palsied Children.

As far as Indian orthopaedic cases are concerned experience has proved that the percentage of Indian cases compared to the total annual number of Non-European cases (3,655 in 1961) is very small indeed.

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Indian children in need of long-term convalescent care have been admitted to the Ezibelini Home for Bantu Crippled Children at Germiston and the Margaret Ballinger Home, Roodepoort.

It is anticipated, however, that with the enlargement of the Ezibelini Home at Germiston, and the removal of the Margaret Ballinger Home from Roodepoort, that the admission of Indian children may present difficulties in future.

In view of the limited specialised institutional facilities, lack of specialised personnel and specialist hospital services, the Cripples' Care Association and its affiliated organisations will not at this stage be able to observe the rule of race segregation too strictly.

Experience has further proved that the demand for treatment for crippled cases among the Indian community being comparatively small in this area, no urgent need had as yet arisen for the provision of facilities specifically for Indian cases.

At present there is provision for special educational facilities for Non-European children at the Ezibelini and Margaret Ballinger Homes. The Cripples' Care Association is also in the process of negotiating with the Department of Bantu Education for the establishment of a special school for crippled Bantu children in Johannesburg.

BLIND:

The Coloured and Indian Blind Welfare Association refers cases to the Natal Indian Blind Association in Natal where educational facilities exist at the Arthur Blaxall School. This school is the only institution in the Republic which offers training for blind Indian children.

Due to a departmental ruling the Athlone School for the Blind in the Cape now accepts Coloured patients only. Indian blind in the Cape have, therefore, also been sent to the Arthur Blaxall School in Natal.

The Society to Help Civilian Blind in Johannesburg caters only for European blind.

MENTAL HEALTH:

No services of any kind exist anywhere in the Republic for the care and training of Indian mentally defective children. The Indian Child Welfare Society of Durban is presently negotiating with the Durban Mental Health Society to start an occupational and training centre for Indian mentally deficient children.

Whether the negotiations will be fruitful or not depends on funds available. The Durban Mental Health Society finds itself in a very precarious financial position and will not be able to contribute materially towards this development.

DEAF:

Deaf Indian children are admitted to two schools in the Cape, which are

The Dominican School for Non-European Deaf at Wittebome near Wynberg (Cape) and

School for Non-European Deaf, Grey Street, Worcester, Cape.

In some of these cases parents arrange for their children to board

with Indian families locally while they attend these schools as day pupils. Steps are, however, being taken to establish a class for such children near the Arthur Blaxall School for the Blind in Durban.

A special sub-committee of the S.A. National Council for the Deaf is dealing with this matter and it is at present endeavouring to secure the services of a trained teacher for this class.

CEREBRAL PALSY CASES:

Cerebral Palsied Indian children are accepted at the United Cerebral Palsy Association's Non-European Clinic, which is located at the Jubilee Centre, Eloff Street, Johannesburg.

This is a temporary arrangement pending the removal of the Clinic to Baragwanath, scheduled to take place later this year. Preliminary discussions have been held with members of the Indian community with a view to the establishment of an Indian branch of the United Cerebral Palsy Association which would then operate a suitably located clinic for Indian victims of Cerebral Palsy.

The Johannesburg Indian Social Welfare Association was approached in 1960 by U.C.P.A. to assist in the formation and ground work involved in the establishment of a re-habilitation clinic for Cerebral Palsied children and a clinic was subsequently introduced by the Association. The specialist in charge had at that time indicated that he would conduct examinations of further groups but so far no further cases have been found.

SOURCES OF INFORMATION:

Cripples' Care Association of the Transvaal
Coloured and Indian Blind Welfare Association
Society to Help Civilian Blind
South African National Council for Mental Health
South African National Council for the Deaf
United Cerebral Palsy Association of South Africa.

J.P.
19/7/62

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Collection Number: AD1715

SOUTH AFRICAN INSTITUTE OF RACE RELATIONS (SAIRR), 1892-1974

PUBLISHER:

Collection Funder:- Atlantic Philanthropies Foundation

Publisher:- Historical Papers Research Archive

Location:- Johannesburg

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