

# SOUTHERN TRANSVAAL WELFARE BOARD.

## REPORT BY SUB-COMMITTEE

on

# PROVISION FOR MENTALLY DEFECTIVE CHILDREN.

At the last meeting of the Southern Transvaal Local Welfare Board, held early in October, 1952, a sub-committee, consisting of Mr. D.N. Murray (Convener), Mrs. Aletta Nel, Mrs. I. Jacobson and Mr. W. Cohen (with power to co-opt), was appointed to consider the question of the adequacy and of the provisions made for mentally defective children. This matter arose out of a request from the Border Local Welfare Board for support from the Southern Transvaal Board, in connection with requests to the Government for more provision to be made for Non-European mentally defective children.

The sub-committee has carefully considered this matter, and for the purposes of the discussion thereon co-opted Mr. T.J. van Rooyen, National Secretary of the National Council for Mental Health, and Mrs. Enfield, Secretary of the Mental Health Society of the Witwatersrand.

## I. Grades of Mental Deficiency.

In order that we may have a clear conception of the grades of mental deficiency involved when we are considering certifiable mentally defectives, we wish to set out the grades of mental deficiencies, as stated in the Mental Disorders Act.

- (a) An idiot, that is to say, a person so deeply defective in mind from birth, or from an early age, as to be unable to guard himself against common physical dangers.
- (b) An imbecile, that is to say, a person in whose case there exists from birth or from an early age, mental defectiveness not amounting to idiocy and who, although capable of guarding himself against common dangers, is incapable of managing himself or his affairs, or, if he is a child, of being taught to do so.
- (c) A feebleminded person, that is to say, a person in whose case there exists from birth or from an early age mental defectiveness, not amounting to imbecility so that he is incapable of competing on equal terms with his normal fellows or of managing himself and his affairs with ordinary prudence and who requires care, supervision and control for his own protection or for the protection of others, or if he is a child, appears by reason of such defectiveness to be permanently incapable of receiving proper benefit from the education and training in a special school or class.

(d) A socially defective person, that is to say, a person who suffers from mental abnormality associated with anti-social conduct, and who by reason of such abnormality and conduct requires care, supervision and control for his own protection or in the public interest.

The criteria given by the Interdepartmental Committee on Deviate Children when considering non-certifiable mental defectives is:

### General criteria.

As general criteria for attendance at special schools or special classes it is laid down that pupils must, firstly, be definitely in need of special educational effort on their behalf which the ordinary classes cannot provide, and secondly, that they must be educable, that is, they show capacity for deriving benefit from the instruction and training provided by special classes or special schools. Ineducables, such as idiots, imbeciles and certain children suffering from multiple defects (for example, where mental defect is superimposed on deafness), are not considered candidates for special classes or special schools.

In conformance with this criteria, pupils from the following groups have, after selection, been placed in special classes or special schools:-

- (i) The sub-normals or non-certifiable mentally retarded with an I.Q. of between 50 (and slightly less) and 80 (and slightly above).
- (ii) Dull normals (I.Q. approximately 80 90) who show temperamental or volitional defects.
- (iii) Children who are educationally seriously retarded (temporary retardation); in other words those with a retardation of at least three years.

# II. Possible numbers of Mentally Defective Children.

It has been found extremely difficult to obtain any figures or percentages of mentally defective persons in South Africa. It was hoped that from these figures we would be enabled to state the dimensions of the problem in relation to the provision required for mentally deficient children in the Union. However, the nearest we can, at this stage, get to statistics is the following extract from a paper recently given by Robert Gibson, M.D., Ch.B., D.P.M., Lecturer in Mental Deficiency, University of St. Andrew, Scotland:-

"The number of defectives in the community has been variously estimated, and is probably about 2%. This is a considerable figure, and even if we refrain from adding the much larger borderline group the magnitude of the subject is obvious."

Applying the 2% suggested by Dr. Gibson to the population of the Union insofar as children are concerned, it could be estimated that there are approximately 20,000 European children, 70,000 Native children and 6,000 Indian and Coloured children under 19 years of age who would be classified as mentally defective. In general, it would appear that these figures are somewhat high. This applies particularly to Native children, and the more so as there are no adequate tests of mental deficiency available in South Africa in respect of Non-European children. However, Mrs. Henderson, a Welfare Officer of the Johannesburg Municipal Non-European Affairs Department, has stated that she alone has had 80 cases of mentally defective children over the past year or two. These were cases that she did not look for, but which were brought to her, notwithstanding the fact that she had made it clear that there was nothing that could be done for them. There can be no doubt, therefore, that the problem of the provision of accommodation for mentally defective children is a very substantial one.

Perhaps it should be added that in 1932 the Carnegie Committee calculated that 10.34% of all school children in the Union had an I.Q. below 85, while 4.6% were below 80. Thus, although the figures quoted earlier regarding the number of mentally defective children in the Union would appear high, from this statement of the Carnegie Committee it may be assumed that the figures are not very much above what the actual position in the Union would be found to be if an accurate survey of the incidence of mental deficiency amongst children were possible.

## III. Accommodation for Mentally Defective Children.

#### 1. European Mental Defectives - Children.

- (a) There are at present three State institutions for Europeans, namely Witrand at Potchefstroom, Alexandra at Cape Town and Umgeni at Howick, Natal. According to the 1950 Annual Report of the Commissioner for Mental Hygiene, 2,263 European feebleminded persons were accommodated in Government institutions and hospitals during that year. It is not known how many of them were under 19 years of age, but it seems as if the great majority were under that age. According to reports from our Mental Health Societies and other Welfare Organisations it frequently happens that children cannot be committed because of lack of accommodation. In respect of European feebleminded persons the lack of accommodation is felt and more facilities are urgently needed.
- (b) There are several Occupational Centres and Sheltered Employment Projects for the higher grade feebleminded Europeans. The Mental Health Societies of Witwatersrand, East London and Durban have an Occupational Centre, Special School and Boys! Club respectively.
- (c) The educable type of feebleminded person can benefit by the training given in the special classes provided by Provincial authorities.

# 2. Position re Non-European Mental Defective or Feebleminded Children.

In this respect the position is deplorable as there are no facilities for them at all.

(a) The report of the Commissioner of Mental Hygiene, 1950, states that there are no institutions for Non-European mentally defective persons.

The position in regard to Non-Europeans accommodated at Witrand Institution for the Feebleminded, Potchefstroom, Transvaal, and Alexandra Institution for the Feebleminded, Maitland, C.P., is as follows:-

Both these institutions accommodate a certain number of Native and Coloured patients. None are certified as mentally defective or admitted as direct admissions through the Magistrate. They are all transferred from other Government institutions because of overcrowding; all of them must be capable of being usefully occupied working in the grounds or on building projects. The majority are chronic psychotics, although there might be a mental defective among them.

For many years representations have been made to the Government authorities to provide special institutions for Non-Europeans, but without success. As far back as 1944 mention was made by the Commissioner for Mental Hygiene that such institutions were urgently needed. During 1949 the Secretary for Health mentioned in a letter that it was the Department's intention to provide "Two separate institutions, one in the Cape Peninsula for Cape Coloureds and another in the most suitable area for Natives." During February 1951 a letter was received from the Commissioner for Mental Hygiene in which he stated that thus far no provision has been made in the estimates for such institutions. The position is at present unchanged.

- (b) There is at present limited private accommodation for Non-European feebleminded. The Cape Mental Health Society has started a Home for Coloured feebleminded boys, which accommodates only 12 boys. The Brackenfell Institution has accommodation for a few Coloured girls. The management of Adams Farm (Cape Town) intends providing accommodation for a number of feebleminded Coloured children, but this project will not be ready for a considerable time. No such accommodation exists for Natives or Asiatics.
- (c) There are no occupational centres, special classes, etc., for Non-Europeans.
- 3. The position in respect of Feebleminded Children in South Africa can be summarised as follows:-
  - (i) Europeans: Three Government institutions but there is still a lack of accommodation. There are several private homes, schools, occupational centres, etc.
  - (ii) Coloureds: Two private institutions which accommodate probably 30 children.
  - (iii) Natives: No facilities.
    - (iv) Asiatics: No facilities.

# IV. Recommendations.

It will be seen that the provision for mentally defective children falls very short indeed of the requirements in South Africa. This is particularly so when consideration is given to the lack of the facilities for Non-European children, especially Native children.

The Southern Transvaal Welfare Board recommends to the National Welfare Board that it should support the representations which, we understand, the National Council for Mental Health is making to the Minister of Health as follows:-

- (a) In respect of low-grade Non-European mentally defective children, the promised institutions for Cape Coloureds in the Cape Peninsula, and an institution for Natives in a suitable area.
- (b) In respect of high-grade Non-European mentally defective children, one school in the Transkei and one special school for detribalised Native children on the Witwatersrand.
- (c) More accommodation for European mentally defective children, especially for low-grade mentally defectives.
- (d) Without detracting from the Government's responsibility in this regard; in view of the serious position, especially with regard to Non-European mentally defective children, the Government be asked to give liberal subsidy to any competent voluntary body that is prepared to undertake work for Non-European mentally defective children.
- (e) That special provision be made by the Governmendt for mentally retarded children who are multiply handicapped.

D. N. MURRAY.

SUB-COMMITTEE ON ACCOMMODATION FOR MENTALLY DEFECTIVE CHILDREN.

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