

APD

Association for Persons with Disabilities

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The National Council for Persons
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6 August 2007

Ms Zola Vice
Committee Secretary: Portfolio Committee on Social Development
Parliament
PO Box 15
8000 Cape Town

Dear Ms Vice

Herewith our submission to the Submission on the Children's Amendment Bill

[B 19B-2006]

Yours faithfully

A handwritten signature in black ink, appearing to read 'Dorothy-Anne Howitson', written in a cursive style.

**DOROTHY-ANNE HOWITSON
CHAIRPERSON**

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Submission on the Children's Amendment Bill
[B 19B-2006] to the Portfolio Committee on Social Development
by the
ASSOCIATION FOR PERSONS WITH DISABILITIES:
NORTHERN CAPE

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Introduction

Our greatest problem lies in the accommodating of children in institutions where children have been removed from their parents and all court proceedings have been finalized. This problem is the same in case where children have disabilities ranging from physical-, intellectual- and multi-impairments. We believe that the Children's Amendment Bill has the potential to protect the rights of these children.

The following are specific areas that our organisation has had to deal with recently:

1. Child and youth care centres

There are numerous examples of children who have been placed in the Helen Bishop Home rather than a Children's Home as Children's Homes are not prepared to accept children with disabilities and neither are these Homes accessible for children with disabilities. This crisis repeats itself regarding children who are deaf.

- The Helen Bishop Orthopaedic Aftercare Home has the services of a Physiotherapist (this includes hydro-therapy and horse-therapy). It further relies on the services of an Occupational Therapist who is doing her compulsory duty for the Hospital. Regular clinics are held by a Paediatrician and Orthopaedic Surgeon. The Home also has a Schnoozel Room. This is a Belgian concept and consists of different methods of relaxation for children with spasms. It consists of different objects, textures, lights with varying colours, a dark room where objects glow or reflect off mirrors, a bed on which the child can lie, with loudspeakers underneath, so that the child, especially multi-disabled children, can experience the therapy of music. The children attend school and some even play sport.
- The impact of placing a disabled child here, rather than in children's homes is that Helen Bishop Orthopaedic Aftercare Home focuses on rehabilitation and nursing care. Therefore, it leans more to the medical model than the social model.
- The barriers of access to Children's Homes are the continuous negative attitudes towards disability / limited knowledge / lack of physical access / a general lack of will to go the extra mile.

The following account illustrates the impact of the lack of services for children with disability:

Roger had TB Meningitis which led to both physical and mental impairments. During his stay at Helen Bishop Home (an Orthopaedic After-care Centre), rehabilitation rectified the physical disability.

Roger then went to Jannie Brink School (a school for children with mental impairments). He regularly ran away or vandalized the school; often damages running into R1000.00's. Finally the school could no longer accommodate him; neither could he stay at Helen Bishop Home as he was not attending school and did not need rehabilitation either. No Children's Home would accept Roger; firstly, because of his disability and secondly, because there was no other school to accommodate him.

Finally he was placed back in the care of his parents where he plundered and vandalized everything and where he is exposed to his parent's alcohol abuse. De Aar, where he now lives, has no "pilot" mainstream school to accommodate him. He spends weeks at home, but the mainstream school does not query this fact due to his disability. The teacher and the children in the classroom find his presence distracting and a stumbling-block.

What could have made a difference for Roger is if the Bill addresses the lack of the ability of the current social welfare system to accommodate Roger's vulnerability by the following:

- increased capacity of children's homes (child and youth care centres) to accommodate children with disability, including appropriate staff training
- increased collaboration between schools and social welfare to ensure the protection and development of children
- greater focus on prevention and early intervention for the whole family

A Child such as Roger needs structure in his life, more supervision, more control. A Home such as Helen Bishop (mentioned above) does not cater for his needs; perhaps an Industrial School or Children Home would meet his needs.

2. Foster Care

Despite the need for children with disability for foster care, many potential foster parents are reluctant to take them. This is because they perceive these children as having many additional costs, and being demanding in terms of the care that they require.

We recommend that:

- As there is currently Professional Foster Care available for Children at Risk, such as children who have broken the law. If the same system is followed where the grant is higher and the foster parents receive special training, the situation could be rectified.
- Training of Social Workers in the placement for foster care
- Selection process/criteria of foster parents
- Support to foster parents
- Monitoring of foster care placements