



# PE&A NEWS

National Council for Persons with Physical Disabilities in South Africa

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## BIG BELL NEWS

### SARS ANNOUNCES PUBLICATION OF A LIST QUALIFYING EXPENDITURE AND DIAGNOSIS OF DISABILITY

In the past SARS circulated a draft list of qualifying physical impairment or disability expenditure and a criteria for diagnosis of disability for your comment. SARS has today made a media statement in this regard as contained below:

**"Pretoria, 20 April 2010** – The Commissioner for the South African Revenue Service (SARS) today announced the publication of the prescribed list of qualifying expenses relating to physical impairment or disability and the diagnostic criteria for disability.

Previously a person with disabilities could only claim their total medical expenses that were not covered by their medical aid if they were 65 years and older or if the Income Tax Act No 58, 1962 regarded them as handicapped. These limitations in the law were restrictive for people with a disability who were not handicapped. For example this meant a person would have to be deaf to the point that they relied on sign language to claim all expenses whereas a person requiring a hearing aid could not claim the expense incurred in full.

Recognising this, the Income Tax Act, 1962, was amended in 2008 (a change that came into effect on 1 March 2009) so that people with disabilities can claim all expenses, medical or otherwise, that enable them to function more fully in their daily lives. These new deductions apply if the taxpayer concerned, a child or spouse of the taxpayer has a disability.

The amendment also clarified which expenses SARS would allow as a deduction. However, for the aims of the law to be fully realised, the Commissioner is required to prescribe the qualifying expenses and the criteria for diagnosing a disability. Today's announcement provides for the list and the diagnostic criteria following extensive discussions with the representative bodies for people with disabilities, health professionals and other government departments.

Although the list of qualifying expenses is quite extensive, care has been taken to ensure that it does not exclude a legitimate expense that is not listed. Therefore, instead of a comprehensive list, it identifies broad categories of qualifying expenses and provides examples of expenditure that could be claimed.

With respect to the diagnostic criteria, disability is now viewed as an impairment to the body or mind that results in a moderate to severe limitation on a person's ability to perform daily functions. This increases the number of people who now may claim their expenses in full.

A person may now be diagnosed as permanently or temporarily disabled. In the case of a permanent disability, the diagnosis will be valid for five years and must be confirmed by a registered health practitioner at the end of that period while temporary disability diagnosis is valid for a year.

Claims by people who are not disabled but have physical impairments will still be subject to limitations. They may claim expenses related to their impairment only when such expenses exceed 7.5% of their taxable income.

Physical impairment is distinguished from disability by the fact that the severity of its effects can be overcome by a device or be corrected through therapy.

To claim the deductions, the person with a disability must obtain a confirmation of their disability from a registered health practitioner. People who had previously been declared handicapped must also follow this procedure.

The confirmation must be done on the prescribed form (ITR-DD) available from the SARS website ([www.sars.gov.za](http://www.sars.gov.za)) or from any SARS office. Please note that these forms must not be submitted together with the tax return but must be produced when requested to do so by SARS for audit purposes."

**Publication date:** 21 April 2010

Kindly find the List of Qualifying Physical Impairment or Disability Expenditure and the prescribed form (ITR-DD) may be obtained from SARS website [www.sars.gov.za](http://www.sars.gov.za). This may be distributed within your organisation.



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This newsletter is in line with Article 8 of the UN Convention on the rights of people with disabilities (Public Education & Awareness)



Design and compilation by  
Western Cape APD



## 2010 WORLD CUP - STATUS REPORT FOR THE DISABILITY SECTOR

I thought I would take the time to issue a status report on the preparation that the local organising committee has made on the status of the accessibility of the stadia, furthermore operational issues around the tournament.

The South African Disability Alliance (SADA) appointed a delegation which comprised of Musi Nkosi, Johan Viljoen, and myself to engage with the local organising committee regarding the minimum requirements which we expect out of the World Cup offering.

We appointed a universal design specialist, Phillip Thompson in order to provide technical expertise to the local organising committee.

Phillip in November conducted a stadium visit of most of the stadia. This was the official visit which included a large delegation from the local organising committee.

### **Unfortunately:**

- Every single stadium in the host cities, fall short of the required number of seats for wheelchair users (0,5%).
  - ◇ There are some host cities who are well below the required number for example Durban has 50 odd seats instead of 340 seats!
  - ◇ The stadium which fares the worst in terms of accessibility is Loftus Versfeld in Pretoria.
- Most of the stadia toilet facilities do not comply with the National building regulations
- we have yet to be presented with the evacuation plan of the stadia
- very few of the host cities have announced and showed any evidence of their Transport plan.
- There are disability issues which differ from stadium to stadium, and the details of these can all be found in a report which were presented to SADA.

### **Regarding ticketing**

We have also had high-level meetings with MATCH, who are the agents dealing with the sale and distribution of tickets .

### **Unfortunately:**

- the fact that there is a shortage of seating in each stadium, means that tickets are not available to be sold.

- However, you can also understand that the particular space, which should be freed for wheelchair users, is already being sold as fixed seating by MATCH!
- We are also still trying to sort out the most effective way of verifying whether the purchaser of a ticket for a wheelchair position, is an actual wheelchair user.

- ◇ There is a possibility that we will perform a verification facility
- ◇ the exact logistics regarding verification will be announced shortly
- ◇ we have requested, that any collection points of tickets must also be accessible, which includes close to accessible Transport

- the FIFA WEB SITE, which has been the point of entry for booking of wheelchair tickets, has proven problematic over many months. The officials from MATCH, have stated that this website is now functional and tickets for wheelchair seats can be purchased online, or at least ordered.

- ◇ You may also order your tickets as a wheelchair user by going to your closest First National Bank and completing the form.
- ◇ Please be advised, that there is a big demand for these wheelchair seats as the number of seats available is far less than what was required.

We also had extensive discussions around the issue of volunteers with disabilities, it does not seem like there was any intention for them to accommodate people with disabilities.

We had discussions requesting the local organising committee to ensure that volunteers were sensitised. It does not seem that this programme will include orientation and sensitisation around disability.

We are still waiting to see whether there will be an accreditation process to allow people with disabilities to drive their vehicles into the security zone area of the stadium's. I will come back to you on this.

We have also requested that they provide sign language interpretation on the big screen for announcements. We are awaiting response from this request.



*continued from pg 2*

At a recent meeting of the members of the South African Disability Alliance, it was agreed that we are not satisfied with the level of cooperation that we have received from the local organising committee. Furthermore, we feel that the facilities which were the rights of people with disabilities have not been provided.

We have approached the Minister in the Ministry of women, children and persons with disabilities and asked her to intervene. We are awaiting action from the Ministry.

We have written to the Chairperson of the Parliamentary portfolio committee on Sport (interestingly, he is also a person with a disability), and asked for his high-level support. We are awaiting a response from him.

Just for interest, I informed everybody that the South African Disability Alliance has funded, the services of the consultant to provide the technical input to the local organising committee.

The South African Disability Alliance will within the next week be calling a high level press conference to announce our dissatisfaction with the provision of facilities and offering for people with disabilities in the 2010 World Cup.

I can assure you, that we have engaged at all levels on behalf on the disability sector to ensure that we can participate in this tournament as empowerment partners, volunteers, spectators, supporters and employees. The local organising committee have not taken the needs of people with disabilities (national and international) into consideration. Lip service is the most that we have experienced and even then, it is a battle to set up meetings, to get a response from communication, and information.

It is a sad day that I can state that having been present at all of the engagements with the various bodies involved in the World Cup, we have been compromised and avoided.

You are welcome to forward any queries back to myself and I will try and assist.

QASA will be operating a call centre number 0860ROLLING, which will be supplying information for people with mobility impairments, so that they are orientated in their environment.

This particular project has been established to assist people coming from abroad to feel comfortable in South Africa while they are here, however we are going to keep this particular project going, as I believe that there is a need for this type of service.

It will take us a little bit of time to develop the capacity and knowledge of the call centre operators, but we are going to commence with this in the next few days.

#### **Ari Seirlis**

National Director

**QuadPara Association of South Africa (QASA)**

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## **Making a difference with Doug on Radio 2000 - Disability issues discussed**

*Good Afternoon,*

***Please see below for a message from Doug Anderson. Important disability issues are discussed as well as employment opportunities.***

Hi,

I am pleased to announce that my radio show has been placed in a "prime" slot. As of today until 31 March 2011, Making A Difference with Doug will be on Radio 2000, 97.2 – 100fm Nationwide from **21:00 – 24:00 mon - fri**. Disability issues will be discussed between 21:00 and 22:00.

Please could you circulate to your database of PWD's and those working in the sector. If disability shows such as mine are to remain on air, the disability sector needs to support such shows.

If there are any suggestions as to content and topics you would like to be covered – with an inclusive view in mind – please let me know.

Looking forward to your participation in the show in the year ahead J

Regards

Doug Anderson

Presenter

[doug@radio2000.co.za](mailto:doug@radio2000.co.za)

**083 285 8376**

## **WORLD CUP TICKETS FOR WHEELCHAIR USERS**

A dedicated hotline has been set up to assist wheelchair customers in purchasing Tickets. Additionally people can also purchase Tickets over the counter in one of our 11 FIFA Ticketing Centres. To purchase Tickets via the hotline, please call +27 (011) 885-7100.

## FROM THE PEN OF

... Fanie Du Toit



### THE CHANGING OF PERCEPTIONS

What is your opinion regarding allegations that persons with disabilities are to a large extent, a "stumbling block" or a "problem" in society?

Why do people still refer to "normal persons" .....and persons with disabilities, "normal schools" .....and schools for "the disabled". Is this one of the reasons why parents fear the possibility their child will possibly be born physically, mentally disabled, deaf or blind ? Negative perceptions regarding disability still exist, even though the school of thought of acceptance is becoming the trend in communities.

**Where then lies the problem?** Our country has the best legislation possible.

How can children with disabilities be protected against negative thoughts and prejudice? The reality is: many children with disabilities feel left out from an early age. In the country area, parents very much have to fend for themselves regarding support and education of their child with a disability. A shortage of support systems and facilities for development still exists. How can this situation be changed?

**Do we really listen enough to the opinions of persons with disabilities** about things that worry them, or do we just accept –"we know how they feel and what they need?"

The principle of human rights and social integration, equal integration, equal admission to education and community responsibility is set out broadly in the SA Constitution and the Bill of Rights. It thus unconstitutional if any child or adult is excluded and/or deprived of opportunities, respect and future vision and that parent's feel inferior and despondent over their child.

It is worrying that people with disabilities do not feel part of the **FIFA World Cup, 2010**. They feel excluded, because their needs regarding access to the soccer stadia were not taken into consideration. What are the real reasons for this situation? We saw recently in the media how persons with disabilities showed their frustrations in a protest march to bring this to the attention of the authorities. Do you think the recent protest actions by persons with disabilities themselves, had any effect on the thought patterns regarding the real impact of disability? The broader society sees these actions and wonder: "**What does the future hold for the citizens of our beautiful country ?**"

Fanie du Toit  
Manager: Public Education & Awareness (P&A)  
National Council for Persons with  
Physical Disabilities in South Africa ( NCPDSA )  
Website: [www.ncppdsa.org.za](http://www.ncppdsa.org.za)  
National Institute for the Deaf(NID)  
Website: [www.deafnet.co.za](http://www.deafnet.co.za)

P.O. Box/Posbus 1758  
Worcester 6849

Cell: 082 820 7358(sms only)  
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## RADIO STATIONS COVERING DISABILITY ISSUES

*'A request is made to all PE&A roleplayers to share your involvement with the following radio stations with us -*

1. *Community radio stations*
2. *Commercial radio stations*
3. *National radio stations*

*Relevant information will appear in the table below for information.*

<b>RSG (Radio Sonder Grense)</b>	<a href="http://www.rsg.co.za">www.rsg.co.za</a>
<b>LESEDI FM</b>	<a href="http://www.lesedifm.co.za">www.lesedifm.co.za</a>
<b>RADIO PULPIT / KANSEL</b>	<a href="http://www.radiopulpit.co.za">www.radiopulpit.co.za</a>
<b>COMMUNITY RADIOS</b>	<p><i>Community radio stations currently broadcasting programmes on disability issues are as follows -</i></p> <ul style="list-style-type: none"> <li>Radio Rosestad: Bloemfontein</li> <li>CCFM: Muizenberg</li> <li>Radio Namakwaland: Vredendal</li> <li>Radio Kingfisher: Port Elizabeth</li> <li>Radio Lichtenburg</li> <li>Kovsie FM: Bloemfontein</li> <li>Radio Kragbron: Witbank</li> <li>KCFM Huguenoot: Paarl</li> <li>Radio Laeveld: Nelspruit</li> <li>Vallei FM: Worcester</li> <li>Radio Riverside: Upington</li> <li>Radio Gamkaland : Beaufort West</li> <li>Kingfisher FM : Port Elizabeth (Open Door)</li> <li>Nfm: Okiep Namaqualand</li> <li>Transworld Radio: DSTV (channel 155)</li> </ul> <p><i>* Contact Fanie Du Toit for more detail</i></p>



## NEWSPAPERS COVERING DISABILITY ISSUES

A request is made to all PE&A roleplayers to share your involvement with the following newspapers with us -

1. Community newspapers (including newsletters, church tracts, etc.)
2. Commercial newspapers
3. National newspapers

Relevant information will appear in the table below for information.

<b>NATIONAL</b>	
<b>COMMUNITY</b>	Die Volksblad : Bloemfontein Ons Kontrei : Vredendal Worcester Standard : Worcester Table Talk : Milnerton George Herald : George Die Courier : Beaufort West

## AUDIO DATABASE

We are compiling a database of audio files containing information on the content of disability issues. These may be ordered from the National office per e-mail.

\*Transcripts of these audio files are available.

<b>Vehicle Rebates</b>	English (3,75MB) , Afrikaans (4,63MB), Xhosa (4.48MB)
<b>Beach permits</b>	English (3,9MB) & Afrikaans (4,8MB)
<b>Physical Disabilities</b>	English (1.4MB), Afrikaans (2.3MB) & Xhosa (1.7MB)
<b>Hearing Loss</b>	English ( MB), Afrikaans ( MB) & Xhosa ( MB)



## FEEDBACK RECEIVED

*These are examples of the correspondence we receive via e-mail. We also receive many phone calls, SMS's and hand-written letters. We contact each of them, even if it is just to listen. However, we try to refer them to provincial structures or the relevant NGO's for support. Sometimes names are removed for the protection of privacy.*

### TV JOURNALIST LOSES LEGS IN BAGHDAD BOMBING

Baghdad - Militants planted a bomb in an eastern Baghdad liquor store on Tuesday, killing the Christian owner and two others, while a TV reporter had his legs blown off by a bomb attached to his car in scattered violence across the city.

The political coalition led by Iraqi Prime Minister Nuri al-Maliki, meanwhile, delayed a press conference in which it was expected to announce an alliance with a rival Shi'a bloc, showing that wrangling continues over forming a new government.

There has been an uptake of violence in Iraq in the wake of the March 7 elections, which left no clear winner across Iraq's fractured political landscape.

At noon in the neighbourhood of Zayouna, attackers posing as customers left behind a black plastic bag filled with explosives. Three people died, seven were also wounded and nearby stores were damaged.

An hour earlier, a sticky bomb attached to the car of Iraqi TV reporter Omar Ibrahim Rasheed exploded and blew his legs off, said Dr Hazim Ajrawi, director of al-Yarmouk hospital in western Baghdad.

"We are doing our best to keep him alive," Ajrawi said, adding that the reporter, who works for the small independent al-Rasheed TV, was in critical condition. Journalists are often targeted by insurgents or just factions who disagree with their reporting.

### COMMENCEMENT OF THE CHILDRENS ACT, 2005, THE CHILDREN'S AMENDMENT ACT, 2007 AND THE OLDER PERSONS ACT, 2006

Colleagues

On 26 March 2010 Deputy President Motlanthe signed the necessary proclamations for the commencement on 1 April 2010 of the Children's Act, 2005, the Children's Amendment Act, 2007 and the Older Persons Act, 2006. Earlier the Minister of Social Development approved regulations made in terms of the abovementioned Acts. These Acts and regulations will come into operation on 1 April 2010.

Proclamations and regulations under the Children's Act, 2005 and Children's Amendment Act, 2007 will be published in Gazette 33076 of 1 April 2010.

The Proclamation and regulations under the Older Persons Act, 2006 will be published in Gazette 33075 of 1 April 2010.

Regards  
Pierre du Preez  
Director: Legislative Drafting and Review

### INFOLINE FOR MOBILITY IMPAIRED 0860ROLLING

QASA has launched a new project to provide information for persons with mobility impairment via a call centre.



This concept came out of the need to supply info for wheelchair users coming to South Africa for the World Cup and as a Legacy, we continue this service and measure the demand and the impact.

### 0860ROLLING

Unathi, an intern employee of QASA's will manage the phone line from 8am to 4pm and provide the information requested as well as keep a database of enquiries.

He will learn along the way and if not able to give information immediately, will respond to the caller when the information has been sourced.

**This info line should develop to give solutions and information to any enquiry mobility related.**



## DISABLED ABANDONED AND LOCKED UP

This article was published in The Star Newspaper on 11 March 2010 by Quraysha Ismail Sooliman

Disabled and abandoned, three-year-old Domingo was left alone in the shack he identified as "home" for four days.

He was found by social worker Tawanda Danda, who renders service to people with disabilities in Pretoria West.

Caregiver Charmaine du Toit said Domingo was traumatised and abused when she received him. "He had marks on his body showing he had been tied up. Domingo is special - you must know how to handle him, how to pick him up and place him down," says Du Toit.

Neighbours informed the police of the child's plight and he was taken to the Little Abel's Sanctuary - one of Gauteng North centres which render service to people with disability (SPD) projects. Besides being abused, Domingo also suffers from hydrocephalus. "This is a condition where water accumulates in the brain and exerts pressure on it. Domingo's shunt is dysfunctional and needs to be replaced, but we are facing obstacles with the Steve Biko Academic Hospital staff who say they cannot treat him as he is thought to be a foreign national," said Dr Laetitia Botha, director of SPD.

SPD depends on public donations for its operations. "The sanctuary has tried for four years to get a subsidy from the Department of Health, but this has been in vain," said Botha.

Domingo was only 12.5kg when he was brought to the sanctuary but has put on 500g.

"Other patients and visitors keep asking me, 'Why did you adopt a black child? He is a cabbage. Why didn't you just leave him? But what about the right to love, to live or die with dignity?"

"The abuse that Domingo suffered has taken away something from him," says Du Toit, adding, discrimination against disabled children was widespread. The Steve Biko Academic Hospital said they would contact Du Toit and investigate the matter.

**This is a tragedy that can't be put into words. This is not the 1<sup>st</sup> case of abuse of a person with a disability which has appeared in the media this year. Our society is in desperate need of a massive campaign on awareness regarding:**

- **the rights of persons with disabilities**
- **society's responsibility in reporting abuses**
- **law enforcement authorities role in enforcing justice**
- **society's commitment to bato pele principles**
- **governments responsibility to treat / assist persons with disabilities irrespective of their country of origin.**

**Matters such as the above should be discussed at forthcoming Conference.**

Sincerely

DOROTHY-ANNE HOWITSON

CHAIRPERSON: SOCIAL DEVELOPMENT COMMITTEE

NATIONAL COUNCIL for PERSONS with PHYSICAL DISABILITIES in SA

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## DISABLED WOMAN "HORRENDOUSLY" ABUSED

**BUFFALO, N.Y.** A mother and her son were charged Friday in the death of the woman's 23-year-old mentally disabled daughter who investigators said was repeatedly raped, beaten and scalded and had her face pushed into feces.

An Erie County grand jury returned a multi-count indictment against 51-year-old Eva Cummings and her 31-year-old son, Luke Wright, both of North Collins outside Buffalo, in a case that was described by Sheriff's Capt. Ronald Kenyon as "horrendous" and "beyond description."

Cummings was charged with second-degree murder for allegedly suffocating Laura Cummings in their home Jan. 21 following years of abuse. Both mother and son face additional charges including predatory sexual assault, unlawful imprisonment as a hate crime and endangering a disabled person's welfare.

Both have been held without bail since their arrests Jan. 30. Arraignment in Erie County Court was scheduled for Monday.

Laura Cummings was repeatedly tied to a chair, all night at times, for the last two years and often with a hood over her head, according to the indictment. She was sodomized with a broomstick, forced to put her face in her own feces, repeatedly beaten and was scalded with water at least twice before she died, the investigation found.

Wright also is charged with several sex offences, including raping his half-sister, District Attorney Frank Sedita's office said.

Following their arrests, Kenyon said investigators had found evidence of physical and mental abuse going back to 1995 and that the abuse had escalated in the months before her death. The victim's 22-year-old brother told reporters he had been concerned about his sister's treatment and had called county social services agencies from his Air Force base in North Carolina in an unsuccessful attempt to get her removed from the home.

County officials have said confidentiality rules prevent them from discussing individual cases.

"This is a horrifically sad case from many aspects," said Wright's attorney, John Nuchereno, who said Wright himself was "a victim of lifelong abuse."

"There was abuse in that household that had been known for years and years by many, many people and Luke was an unfortunate victim, as was his sister," the attorney said. He described Wright as marginally functional, though more advanced than Laura Cummings, who has been described as having the mental capacity of a pre-teen. Wright had held jobs mucking stalls or helping plow, Nuchereno said.

Cummings' attorney, Joseph Terranova, declined Friday to comment on the indictment because he had not yet seen it.

If convicted, Cummings faces a sentence of 83 years to life in prison. Her son faces a sentence of 133 years to life.

REFERENCE: [www.winnipeg.sun.com](http://www.winnipeg.sun.com)

## EK EN MY "BIKE"



**Leone  
Taljaard**

Soos jy sê, die alternatiewe manier van maatskaplik doen, met my kantoor op my rug! Vinnig en effektief!!

Soos net die Noordkaap kan ...

## SA Tafeltenniskampioenskappe vir Liggaamlik Gestremdes (Seniors en Vetereane)

Datum: 5-9 Aug 2010

Venue: Mayebuy Sportsentrum, Kimberley

Stuur asb 'n voorlopige naamlys van moontlike spelers, en gee Tafeltennis klassifikasie, bv TT5, TT9, ens

Navrae: Eljoh Koortzen Selnr 083 235 1881

E-pos: [izakelcon@telkomsa.net](mailto:izakelcon@telkomsa.net)

Dankie vir kennisname! Vra as u meer inligting nodig het.

Izak Gelderblom

## LOTTO PAYS OUT WHOPPING R1.9 BILLION TO BENEFICIARIES IN PAST YEAR INCLUDING SIGNIFICANT GRANTS TO 2010 AND HIV/AIDS PROJECTS



### BAFANA AND LOC AMONG 2285 RECIPIENTS

The National Lottery Distribution Trust Fund (NLDTF) has paid R1.869 billion to 2285 beneficiaries in the 2009/2010 financial year.

R471 million alone was allocated for projects linked to the 2010 World Cup event including a grant of R170 million for 3 legacy soccer fields in every province as well as R20 million for the Bafana Bafana training camps in Brazil and Germany. A further R20 million was awarded to the LOC towards the opening and closing ceremonies of the 2010 World Cup.

The NLDTF has also made an R88 million grant to the Trust for Health Systems and Planning for the procurement of HIV Testing Kits and TB Prophylaxis. This is in addition to the R140 million allocated by the NLDTF to NGO's across South Africa that care for people living with chronic illnesses in 2009/2010.

A list of all the beneficiaries that derived benefit through the National Lottery Distribution Trust Fund will soon be available on the Board's website and will also be included in the Board's annual report to Parliament.

The Chairperson of the Board, Professor Ntshengedzeni Nevhutanda, said that the Board and the Distributing Agencies would like to acknowledge the support of all who play the National Lottery. Without lottery players, there will be less funds available to projects of National and international significance.

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## CHECKOUT <http://www.nawwd.co.za> FOR e- LIBRARY DEVELOPED TO SUPPORT WOMEN WITH DISABILITIES

The Secretariat of the African Decade of Persons with Disabilities (SADPD), funded by the Disabled People's Organisation of Denmark (DPOd)/ Danida, commissioned Disability Action Research Team (DART) and CBR Education & Training for Empowerment (CREATE) to strengthen the Network of African Women with Disabilities (NAWWD) in September 2009.

The brief included development of this e-library.

Electronic resources were collated during a systematic review of information relating to women with disabilities in Africa. The website domain contains a collection of articles, research reports, factsheets, documents and training packs produced between 1994-2009.

Searches were conducted on the websites of key international Non-Government Organisations (INGOs) and Disabled People's Organisations (DPOs,) as well as several other international bodies such as the African Union (AU).

The searches took place over a period of 3 weeks and were restricted to documents which are available at no cost; all of these are in English, but where Portuguese or French versions were available, these are included. Electronic copies of all the articles cited here are available in different formats (MS Word and PDF).

In addition, there is a list of websites and organizations which may be useful resources to women with disabilities on the continent..

A Directory of organisations for and of women with disabilities in Africa as well as a Brochure & Newsletter was produced for the Network of African Women with Disabilities (NAWWD).

### For information about NAWWD please contact:

- Dr Jackie Ndona , Secretary NAWWD, Democratic Republic of Congo, [jknadona@yahoo.fr](mailto:jknadona@yahoo.fr)
- Ms Doris, Deputy Secretary NAWWD, Ghana, [dorisofori@hotmail.com](mailto:dorisofori@hotmail.com)
- Ms Aida Sarr, African Decade Steering Committee, Senegal , [aidasarr64@yahoo.fr](mailto:aidasarr64@yahoo.fr)

Enquiries about e-library: Dr Pam McLaren & Sue Philpott [Disability Action Research Team (DART)]

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## BIPOLAR DISORDER (manic depression)

### WHAT IS A BIPOLAR DISORDER?

Bipolar disorder is a physical illness marked by extreme changes in mood, energy and behaviour. That's why doctors classify it as a mood disorder.

Bipolar disorder – also known as manic-depressive illness – is a mental illness involving episodes of serious mania and depression. The person's mood usually swings from overly "high" and irritable to sad and hopeless, and then back again, with periods of normal mood in between.

Bipolar disorder typically begins in adolescence or early adulthood and continues throughout life. It is often not recognised as an illness, and people who have it may suffer needlessly for years or even decades.

### WHAT CAUSES BIPOLAR DISORDER (OR MANIC DEPRESSION)?

The exact cause of manic depression is not known, but it is believed to be a combination of factors.

**Biochemistry** : Research has shown that this disorder is associated with a chemical imbalance in the brain, which can be corrected with appropriated medication.

**Genetics / Hereditary** : Bipolar disorder tends to run in families. Researchers have identified a number of genes that may be linked to the disorder. However, if you have bipolar disorder and your spouse does not, there is only a 1 in 7 chance that your child will develop it.

**Biological Clocks** : Mania and depression are often cyclical, occurring at particular times of the year. Changes in biological rhythms, including sleep and hormone changes, characterise the illness. Changes in the seasons are often associated triggers.

**Psychological Stress** : People who are genetically susceptible may have a faulty "switch-off" point – emotional excitement may keep escalating into mania: setbacks may worsen into profound depression.

Sometimes a stressful life event such as a loss of a job, marital difficulties, or a death in the family may trigger an episode of mania or depression. At other times, episodes occur for no apparent reason.

### WHO GETS MANIC DEPRESSION?

Manic depression is common – affecting about 1% of the population. Men and women are equally affected. While the disorder has been seen in children, the usual age of onset is late adolescence and early adulthood. Mania, occasionally appears for the first time in the elderly, and when it does, it is often related to another medical disorder. Manic depression is not restricted to any social or educational class, race, or nationality. Although an equal number of men and women develop the illness, men tend to have more manic episodes. Women experience more depressive episodes.

### IS MANIC DEPRESSION TREATABLE?

Fortunately, the answer to this question is "yes". Treatment in the form of medication and counselling can be effective for most people with manic depression. The earlier treatment is started, the more effective it may be in preventing future episodes.

Bipolar disorder is similar to other lifelong illnesses – such as high blood pressure and diabetes – in that it cannot be "cured". It can, however, be managed successfully through proper treatment, which allows most patients to return to productive lives.

### SYMPTOMS

#### Manic

- Feeling unusually "high", euphoric or irritable
- Little sleep, but great amounts of energy
- Talking fast— others can't follow your thinking
- Racing thoughts
- Easily distracted
- Inflated feeling of power or importance
- Reckless behaviour
- Abuse of alcohol or drugs

#### Depressive

- Feeling sad, "blue" or down in the dumps
- Trouble sleeping or sleeping too much
- Loss of appetite or eating too much
- Problems concentrating or making decisions
- Feeling slowed down or too agitated to sit still
- Low self-esteem
- Loss of energy
- Prolonged sadness or crying spells
- Pessimism or indifference
- Thoughts of suicide or death
- Hallucination or delusions

### HOW DO I GET HELP?

If you suspect that you, a family member, or a friend has manic depression, you should consult a mental health professional. Since proper diagnosis is essential for effective treatment, see someone who is knowledgeable about manic depression. Psychiatrists are medical doctors who specialize in the diagnosis and treatment of mental illness. In addition to providing counselling, they are the only mental health professionals who can prescribe medication. Clinical psychologists, clinical social workers and nurse specialists can also diagnose and provide counselling and psychotherapy.

The outlook for people with bipolar disorder today is optimistic. Many new and promising treatments are being developed and with the right treatment most should be able to lead full and productive lives.