

https://dspace.org/

Blurring the line: Durban Mental Health Support and Training Centre

Patel, Rashma Vinod

2011-04-20
http://hdl.handle.net/10539/9571

Downloaded from a DSpace repository. https://dspace.org/

Copyright Notice

The copyright of this thesis vests in the University of the Witwatersrand, Johannesburg, South Africa, in accordance with the University's Intellectual Property Policy.

No portion of the text may be reproduced, stored in a retrieval system, or transmitted in any form or by any means, including analogue and digital media, without prior written permission from the University. Extracts of or quotations from this thesis may, however, be made in terms of Sections 12 and 13 of the South African Copyright Act No. 98 of 1978 (as amended), for non-commercial or educational purposes. Full acknowledgement must be made to the author and the University.

An electronic version of this thesis is available on the Library webpage (www.wits.ac.za/library) under "Research Resources".

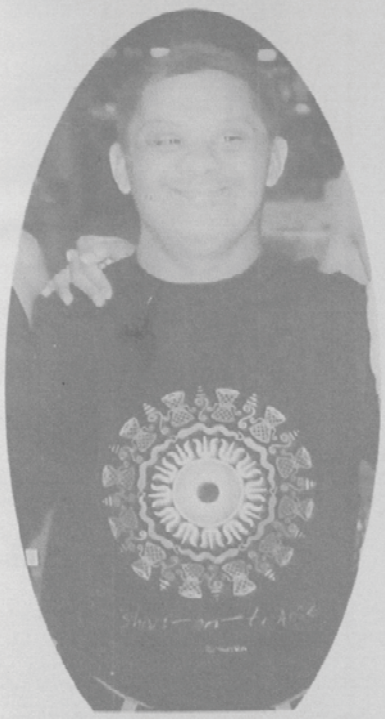
For permission requests, please contact the University Legal Office or the University Research Office (www.wits.ac.za)



Blurring the line

Blurring the line

Durban Mental Health Support and Training Centre



In loving memory of my late uncle
Bharath Lala Govind, who has been an
inspiration and my strength through this year

For the last 26 years of my life I had been fortunate to share my days and life experience with a very special individual. An individual who had the most colorful outlook on life, who made me understand that there isn't anything in the entire world that one can't do and that one needs to always remember that TRYING is accomplishment enough. An individual that gave new meaning to forgiveness and most importantly an individual who took each day as it came with little reservations and lived life to the fullest. This amazing individual was my uncle. The youngest child of 10, loved by everyone who knew him, Bharath Lala Govind, was born with Down Syndrome.

My families interest in making his life as normal as possible had me experience many mixed responses from able society when they unexpectedly were in his presence. I could never understand the reason for people's reaction. Was it because he looked different or was it because they had never seen someone with Down syndrome or did they believe that someone with this mental disability, should not be seen in public. From my experience all of the above, are to some degree true, and to some degree stemmed from pure ignorance.

ACKNOWLEDGMENTS

Thank you to all those who have contributed to my success. Without your support and love and encouragement I would not be where I am today. Special thanks to my parents who have supported me and loved me and made me the person I am today. To my sisters, thank you for the long lectures on keeping positive as well as staying up with me through all the late nights. Enrico Daffonchio, thank you for believing in me and encouraging me through the last four years. To the lectures at Wits, especially Ariana, thank you for all your support end encouragement, you kind words and positive energy has contributed to the success of this year.

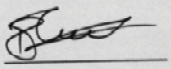
DECLARATION

I, Rashma Vinod Patel [9909852H] am a student registered for the course Master of Architecture [Professional] in the year 2008. I hereby declare the following:

I am aware that plagiarism is wrong. I confirm that the work submitted for assessment for the above course is my own unaided work except where I have stated explicitly otherwise. I have followed the required conventions in referencing thoughts, ideas, and visual materials of others. For this purpose, I have referred to the Graduate School of Engineering and the Built Environment style guide.I understand that the University of the Witwatersrand may take disciplinary action against me if there is a belief that this is not my unaided work or that I have failed to acknowledge the source of the ideas or words in my in my own work.

All images and drawings are authors own unless stated otherwise. All photograph used have been ethically cleared and permission obtained from the organisation concerned.

This document is submitted in partial fulfilment for the degree – masters of architecture (professional) at the University of Witwatersrand, Johannesburg, South Africa.



Rashma V. Patel (Miss)

ABSTRACT

This dissertation argues for a more responsive architectural platform that allows the meeting of the mentally disabled society and able society .This calls for architects to create balanced environments that emerges from and responds to societal and environmental needs. A critical analysis of the current interventions that exist to encourage this integration is provided.

CONTENTS

1.0	Proposition	1 - 2
2.0	Social Perceptions	3 - 10
3.0	Architectural Perceptions	11 - 14
4.0	Precedent Studies	15 - 25
5.0	The Client and Brief	26 - 28
6.0	Site Criteria	29
7.0	Site Selection	30 - 31
8.0	Site Mapping	32 - 41
9.0	Accommodation Schedule	42 - 43
10.0	Design Process	44 - 56
11.0	Final Design	57 - 65
12.0	References	66 - 68

PROPOSITION

INTRODUCTION

This thesis has been inspired by my late uncle, Bharath Lala Govind who was born with Down syndrome. His amazing out look on life together with my families interest in making his life as normal as possible, had me experience many mixed responses from able society. Most of these responses were negative and drenched with confusion. The underlining reason for this was simple; there wasn't enough contact with the disabled in everyday society, and therefore prejudices towards these differently able persons continue to dominate every sector of the social realm.

The idea for this thesis has stemmed from a personal view that, architecture should not in any way negate the valid place every person has in society and that **human perception of his environment** and the **effect of the environment on human behavior** is the essence of architecture. Whether the architect is designing for a person, a business or for a public space, he or she needs to understand the dynamics between the person and his space, the dynamics between people interacting in a space and finally how he as a space creator, begins to better the environment for the user.

Apart from practical social issues that need to be addressed, architectural design should facilitate the differently able in its space making. Spaces should exist where enough opportunity for **informal** contact between the able person and the differently able person can take place. This place should also be a space that will help the differently able to make a contribution to general society, with little supervision, ensuring a positive experience for all.

My theory base for this thesis lies in three subjects, the **perception of space and the idea of place**, the social study of **interaction** (the analysis of people interacting in a space) and finally the understanding of the **mind's sensitivity to its environment**. These three studies will focus on addressing the gap that exists between the differently able community and the able community.

To reach this goal I would be proposing a **centre** that will accommodate various social, educational and support facilities. This includes a conference hall, a training centre with living accommodation, a support centre a resource centre and an amphitheatre.

THE OBJECTIVE

The objective is to create spaces that the differently able person can access, orientate and maneuver with ease or with little help. It is also important to note that, by designing with this goal in mind, we as architects begin to aid in educating able society about the capabilities of the differently able person. By attempting to create such an environment we begin to inform by experience the true differences between both societies and hopefully change the negative perceptions that have been embedded in history.

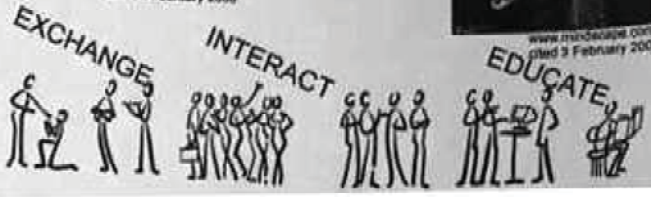
Another issue to be addressed is the possible design consideration that can aid in creating a stimulating environment for all. These common elements that can contribute to such an environment are natural light, colour, sound and textures. All four combined correctly may contribute in provoking the senses positively.



www.wolvsridge.com; cited 3 February 2008



www.mindscape.com; cited 3 February 2008



METHODOLOGY

The proposed architectural solution rests partly on social issues between the able and differently able society and partly on the lack of acknowledgement of these issues in architecture.

The first step was collecting evidence that indicated that a gap between these two societies exists. **Interviews** were conducted with 3 groups of people:

a) people who had little to no interaction with differently able people,
b) people who were in daily contact with the differently able community such as social workers, occupational therapists, etc
c) and with the differently able person who is able to contribute to everyday society but have found it difficult.

Research from journals such as the 'therapeutic recreation journal' also contributed in supporting the reality that a gap does exist between able and the disabled community.

Further **interviews and personal observation** took place following the initial interview goal. This part of the research was to identify the actual difficulties that the differently able face on a day to day basis. This was conducted in order to inform the architectural **program** and **design considerations**. Another reason for the interviews and observations was to understand the capabilities of the differently able community. The observations were carried out at various protective workshops, care centers and at hostels. The reason for this was to observe their capabilities in an environment that catered for them solely (a protected, movement friendly, easy access, prejudice free environment).

The research thus far, tackled social issues that prevented a positive integration of the differently able society into mainstream society. The subsequent architectural issues following were:

1) what is the current architectural response to the underlining social problem
2) how would/does architecture play an effective role in making a environment more user friendly for the differently able person
3) how could architecture contribute to best display their capabilities in society as well as create a better healthier environment for all users.

THE USER

The objective of this project is to blur the line that segregates mainstream society from the mentally challenged society. Bearing this objective in mind the users of this building can be determined. The users can be classified into 2 groups:

1) **Mentally challenged society** – this includes all those adult individuals that have learning difficulties. 'People with Down Syndrome, people who had a head injury and may have problems remembering and retaining information and people who have dyslexia are all included within this group. It is estimated that 20-30% of people with learning disabilities also have a physical disability, and 15-30% have epilepsy and approximately 30-40% of people with a learning disability also have some degree of sensory impairment that may compound their learning disability' (www.thelivinglink.co.za,cited 29 August 2008). **Mentally challenged individuals that are considered high skilled workers i.e. individuals that are able to work in the open labour market are the main focus, since it is these people that would need to be integrated in mainstream society and possibly work for a mainstream organization in order to achieve ultimate independence. This does not rule out the fact that mentally challenged individuals that are not regarded as high skilled workers are not welcomed in this building to use the facilities for events, training, support group meetings, skills enhancement, etc.**

2) **Able society** – All individuals who have full function of all their limbs, senses and are of medically sound of mind. This rules out those that suffer with mental illnesses such as chronic depression, etc.



service users preparing for casual day
authors own : 17 June 2008



founders of 'the living link'
www.thelivinglink.co.za : cited 17 September 2008

SOCIAL PERCEPTIONS

SOCIAL PERCEPTIONS

1. The Gap

"No Community can care for its handicapped until it meets them, until it has a chance to recognize the determination of the physically handicapped, the simplicity of the mentally handicapped, as positive and continuing contributions to itself. In the same way no architect or planner can design for the disabled until they meet them, learn their problems, their needs and their aspirations. It may take patience, but it's a courtesy a 'normal' client has a right to expect." (Schearer,1971:200)

As evident from the insert above, without any interaction between the able society and the mentally challenged society, awareness of the different skills and capabilities of the mentally challenged cannot be created. Hence it is crucial that a common ground exist whereby the able society is able to gain exposure to the world of the mentally challenged. In order to create this common ground the perceptions of the able and mentally challenged communities need to be investigated since it is the perceptions that shape the interaction between the two communities.

2. Perceptions

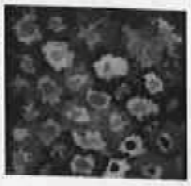
2.1 The Mentally Challenged Perceptions of Able Society

The 'Challenged' individual begins, in a way, to accept the stigma attached to being disabled. This results in emotions such as anger, embarrassment and anxiety and in turn shapes their perception of society. Society is now a place to avoid, in some cases, even if the 'stigmatized individual' is accompanied by a support structure such as a relative, friend or social worker, they still are afraid of being misunderstood by the able society. This fear of being misunderstood is indicated in the interviews found below that were conducted with the mentally challenged individuals.

According to behavioural studies, there are few challenged individuals that don't avoid public spaces, instead they enter these spaces in a defensive way, 'armed' with 'studied inattention (or ignorance), passive-aggression, confrontation and crusading – their weapons to handle the perceived negative attitudes of society'. (West 1984:73)

Hence, in general, able society is perceived to be an uncaring, unwelcoming and/or an uncomfortable space for the intellectually impaired individuals. Some may even feel intimidated by able persons because they understand that there are differences between themselves and the able society. Intimidation may be in the form of a simple stare from an able person which creates feelings of inferiority within the intellectually impaired individual. (West 1984 :73)





authors own : challenge July 2008



www.volkenroda.com,cited 14 may 2008



www.volkenroda.com,cited 14 may 2008



www.downsed.org,cited 13 may 2008

2.1.1. Interview with Mr. Yugen Naidoo (Mentally challenged individual able to work in the open labour market)

Yugen is a 46 years of age and he has been a service user at Durban Mental Health workshop, Challenge, for approximately 20 years. When Yugen matriculated he decided to **study fine arts at the University of Natal**. In his 20's he began to **abuse drugs** which resulted in him suffering a nervous breakdown in his late 20's which led to his current intellectual impairments. Currently, he is completely aware that his mental disability was a result of his miss use of drugs. Whilst conducting the interview, Yugen was keen to show off his talent in the form of **drawings and poetry**. It was then that it became evident that even though Yugen had a learning disability he still had his talent. When asked if he would be willing to sell some of his art and poetry in the open labour market he expressed his eagerness, however, he did also express his feelings of intimidation and fear of being misunderstood by able society.

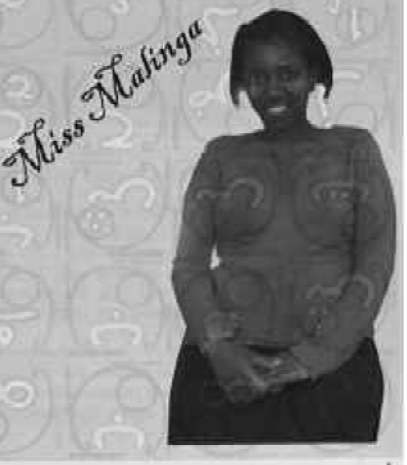
Throughout the interview Yugen portrayed a childlike persona however he indicated that he was fully capable of comprehending simple questions of which he was able to answer with an easy flow of words.

2.1.2. Interview with Samantha Malinga (Mentally challenged individual- able to work in the open labour market)

Samantha is currently 32 years old and unlike Yugen Naidoo she was born with a mental disability. For 8 years Samantha worked in the Durban Mental Health workshop, Challenge Unlimited, where she contract work just like the other service users. Today Samantha works in the Challenge hostel (Durban Mental Health hostel) where she works as a receptionist where her tasks are to file documents, answer calls, fax and receive documents. She has been in this position for approximately 2 years. When asked if she would prefer working in the open labour market her reply was similar to that of Yugen Naidoo and she admitted that she is hesitant because she is not sure that able society would be able to understand her and her needs. She also revealed that she is keen on developing computer skills, typing, etc.

The interview was concluded by her stating that if she could get the opportunity to develop her skills then she would be less hesitant to work in mainstream society.





Background image : calligraphy by yugen: September 2008

2.2. *Able Society's Perception of the Mentally Challenged Society*

A negative attitude can be one of the most powerful barriers that could prevent anyone from pursuing goals and aspirations. Historically people with disabilities have been subjected to negative attitudes from able society. Society has tended to stigmatize people who are different, as those who should be avoided or rejected. This stigma can instil animosity, pity or fear amongst the able society (Bedini, L.A., 2002). For example some people with disabilities have been compared to animals and children, in other situations they have been seen as a danger or menace to society (Goffan, 1963).

Some perceptions are not so extreme; some people believe that those that are disabled need constant care, and constant attention, resulting in them becoming a burden (Fine and Asch, 1988) or resulting in believing that the disabled individual is completely incapable of executing any menial task given to them creating complete dependence on the able society. As stated in the beginning – the users), intellectually challenged individuals may have physical disabilities, as well, as they may be born with a condition called down syndrome which is a condition that can be identified by particular facial and body structures. An able person may not be able to relate to a person with an intellectual impairment but an able person finds it easier to relate to a person with a physical disability such as a loss of a limb/s or the loss of the sense of sight or hearing. The reason for this is that an able person can envision and understand the impact a physical disability may have on functional day to day living. It is however, difficult to identify with those that are mentally challenged as their features are a symbol of their disability caused by genetic abnormalities.

On the contrary the able society may experience some degree of fear when given the chance to interact with a mentally challenged individual.

"I remember being really afraid when I had to work with a boy who couldn't talk verbally but had a pencil coming from his head and had a word board. The thing that scared me the most was the fact that I didn't know if he understood what I said. We just talked in a different way. By the end of the day, I realized that I wanted to continue working with the disabled and I no longer saw them as different"(www.martensnetwork.net, cited 31 May 2008).

This clearly indicates that there is a percentage of people in the able society that are willing to help and interact with the mentally challenged, however, due to the lack of information that they receive with regards to the mentally challenged and their impairments, the able society approaches them with a certain amount of fear.

"Many times the non-disabled are not aware of the many disabilities that exist. Due to the lack of knowledge the non-disabled person may assume all disabilities have the same exact diagnosis. They may look similar, but by no means the same" (www.martensnetwork.net, cited 31 May 2008).

"I do not mind helping them, but I am afraid that I might not understand them and in turn do something wrong" – Rochelle, 46, Sherwood

"I have never really come into contact with someone mentally challenged so I would not know what to do if I were to help in any way" – Peter, 33, Sherwood

"Some of them are funny looking" – Ntombi, 20, Cato Manor

"I don't know what Down Syndrome is." – Maya, 24, Sydenham

2.3. *Social Workers Perceptions of the Mentally Challenged Society*

"Mental retardation is not a disease; it is however a result of pathological process in the brain characterized by limitations in intellectual and adaptive functions" (Kaplan and Sadock's 2003: 1161). However the American Association of Mental Retardation (AAMR) 'promotes a view of mental retardation as a functional interaction between an individual and the environment instead of a static description of a person's limitations' (Kaplan and Sadocks 2003:1161)

The AAMR's perspective of the mentally challenged person is supported by the many social workers, care gives and individuals who are constantly in contact with the mentally challenged.

Interviews were conducted with social workers whom work on a daily basis alongside the mentally challenged individuals. These interviews were conducted in order to gain understanding of the type of work the mentally challenged are able to cope with on a daily basis and their attitude towards their work. More insight was also required with respect to missing development programs such a community integration which should be in place to improve the lives of the mentally challenged and bring fulfilment. With this understanding it would then be possible to recognize which are the programs that are currently not in place or are in lack there of and which programs should be improved.

2.3.1. Interview with Ms Angie Govender – Manager of Merebank Protective Workshop

Mrs Govender has 20 years of experience with working with people with both mental and physical disabilities. In the Merebank workshop, there currently exist 100 service users, these 100 service users are under the care of 3 supervisors. According to Mrs Govender 10% of the service users are regarded as high skilled workers implying that they are capable of working in the open labour market. However, she goes on to explain, that it is not feasible to allow them to work in the open labour market, due to the lack of skills development programs, integration programs and support structures currently in place. She explains that having these programs and support structures in place will give the high skilled workers the opportunity to improve on their skills and in turn build their self confidence to work in main stream society.

Currently the service users get contracted work. Careful consideration is made when choosing the contracts. The reason for this is because mentally challenged individuals require work that is sequential in method yet not monotonous. The contracts are successfully completed in protective workshops by streamlining the process by utilizing the production line method.

This method compartmentalizes the job into separate tasks. A task is then allocated to each service user. Each task is a simple instruction which is then followed by the service user. The service users tasks are rotated in order to avoid monotony and to improve skills. Mrs Govender states that they approach each task with sheer enthusiasm, dedication and when confronted with difficulties they tend to persevere, which is due to the commitment they make to do their job without error.

In conclusion Mrs Govender stressed the fact that she considers her job to be exceptionally rewarding and that each differently able individual has brought joy to her life for they are the most humble people who forgive almost immediately after being wronged and love unconditionally and all they ask in return is patience and kindness.



Developing hand and eye co-ordination by teaching bead work.

2.3.2. *Interview with Ingrid and Julia – Founders of The Living Link*

Julia and Ingrid founded The Living Link, a non-profitable organization in year 2000.Julia and Ingrid are mother and daughter and were inspired to establish such an organization by Julia's sibling, Nadine, who has an intellectual impairment. When interviewed, Julia and Ingrid, expressed the importance for the mentally challenged to feel independent, confident and in turn develop a sense of self worthiness and to have a sense of contentment. They believe that their organization focuses on meeting the their needs by implementing development and enhancement programs for the intellectually impaired adults.

Both Julia and Ingrid believe that an organization sustains the following benefits when employing intellectually impaired individuals. These benefits are as follows

- the dedication and reliability of a mentally challenged individual.
- cutback on organization's overtime when employing a Mentally challenged individual.
- streamline workload.
- reduce the lower level tasks that higher level staff do by employing a mentally challenged individual which in turn increases the output of the higher level staff



Julia and Ingrid at the convention for Disabilities 2008

3. FACILITIES AND PROGRAMS

3.1. Durban Mental Health

3.1.1. Interview with Suraya Paruk – Assistant Director of Durban Mental Health

Within the province of Kwa-Zulu Natal there are currently 9 protected workshops for the mentally challenged adults. Each workshop has approximu with the exception of Challenge which has a total of 200 users. Th of ± 1200 users whereby 10% of the users are bale to work in t market (such as factories shops, restaurants, etc).

SA Federation for Mental Health

An interview with Suraya Paruk on the 28th February 2008, the Assistant Director of Durban Mental Health, was arranged and conducted. The objective was to understand and gather information of systems/programs put in place or proposed, that are aimed to improve the mentally challenged individuals lifestyle such as skills training and "better life " programs as well as programs that involve the community and are aimed to encourage interaction between the mentally challenged community and able society. The following 'transforming' programs were revealed that are currently in place:

- **Block making project:** Service users are given the opportunity to learn block making which is still a skill that is required in mainstream society. The objective was not only to teach them the skill of block making but to be able to sell to the product to construction companies.



Ernest and Orbit mixing cement and sand



Final product

- **Open market labour:** There are currently 25 service users from various challenge workshops around Durban that have been placed in factories as part of the supported employment program. Fortnightly personal from the Durban Mental Health evaluate the progress of the service user. However this program seems to not work as intended due to the able society's inexperience with the mentally challenged which in turn implies the lack of support structure in place to support the mentally challenged and the organisation who employed the mentally challenged.

- **The protective employment workshop** provides appropriate work for individuals who have been diagnosed with mental illness or intellectual disabilities in a secure and safe environment.



service users at protective workshc working in a production line: July 2

- **Clubs (Psycho – Social Clubs)** : There are two existing psycho-social club; club 91 and club 92. These clubs focus on assisting psychiatrically ill persons to develop a positive and empowering attitude to their illness. My visit to club 91 was an eye opener. Their creative ability and products produced can be likened to the commercial market. Their products range from cards for every occasion to fridge magnets to decorative vases and other ornaments.



service users at Psyco - Social Club doing participating in arts and crafts: July 2008

3.2. The Living Link

3.2.1. Interview with Julia and Ingrid – Founders of The Living Link organization

This organization specializes in integrating the mentally impaired into able society by having an Adult Integration program in place which involves the following sub-programs

- skills development program
- job sampling
- independence camp
- relationship coaching
- parent workshops
- work assessments

'The Adult Integration program is aimed at achieving independence at home and at work' (Annexure 3)

Support structures are also in place in order to offer support to the MC and mainstream organizations when the MC is successfully placed in the open labour market. Independent Living is another program that is offered at The Living Link which 'facilitates the transition of the Adult Integration Program graduates who are employed from family living to independent living in the community' Social clubs are also in existence in The Living Link. The social club allows intellectually challenged individuals to experience social events and exposes them to a variety of venues, which in turn helps them achieve integration in the community and helps the adults to maintain social contact. (Annexure 3)



Kgonotso at work



Bronwyn at work



Lynette at work

www.thelivinglink.co.za



www.thelivinglink.co.za

3.3. Epilepsy Foundation South Africa

This foundation was established to assist those individuals that have been diagnosed with epilepsy. Epicare, the Epilepsy Foundation's support group, aims to provide support and information about the condition of Epilepsy as well as other related issues. (Annexure 1)

"People with epilepsy, like other people, face the normal challenges in life but in addition they are faced with discrimination, the negative attitude of society and rejection" (Annexure 2)
The organization aims to do the following:

- Have programs in place to help people with epilepsy to lead a normal life as possible
- Have programs and campaigns to create positive awareness in communities to de-stigmatize the condition as well as to educate communities about the condition
- Media publications and radio talks
- Displays at libraries and distribution of literature (Annexure 2)

Awareness campaigns generally takes place throughout the year whereby radio talk shows are scheduled as well as other fundraising events such as Street Collection, Sponsored Knit, Chair challenge, Valentines Lunch, etc.

During Epilepsy week emphasis on the awareness program takes place mainly in clinics, libraries and schools so that people do not only receive information on the condition but also on the services that the epilepsy foundation offers.
The SIYB is just one of the programs that are currently in place to help those that are able to work in mainstream society. This program was initiated by Epilepsy South Africa, and it focuses on skills development training required by potential and existing entrepreneurs whereby potential entrepreneurs gain skills to identify feasible business ideas and develop business plans, whilst existing entrepreneurs receive skills training on how to improve and expand your business.

"Dr Potgieter started visiting our support group regularly to evaluate our treatment and we had a workshop about Entrepreneurship, which motivated me to use my skills. I started cutting my friends and family's hair and later got a temporary job with a funeral business. My self-esteem was built by getting to know myself and realizing that I could be just like 'normal' people" (Schultz. R.2006:2)

FEBRUARY

National SIVB TOT (5 - 17)
South Cape Karoo New integrated group initiative in the Cape (7)
Valentine Lunch (10)
Friends of EPILEPSY SOUTH AFRICA (15)
Assist us maintain: Outenique Chair Challenge (18)
Initiate Youth Programme(22)
Street Collection (24)
Western Cape Open Day (14)
Free State Radio Overvaal Stereo (13)
Radio Talk Show Radio IFM at 14h00 (21)
Durban & Coastal awareness campaign (from February to end June)
Mpumalanga Please be our Valentine! Mail drive (14)

MARCH

Free State Radio Overvaal Stereo (13)
Radio Talk Show Radio IFM at 14h00 (28)

APRIL

Mpumalanga Golf Day Ballot (1)
Free State Radio Overvaal Stereo at 10h00 (10)
Radio Talk Show Radio IFM at 14h00 (25)
Western Cape Coin Collection (13)
South Cape Karoo Friends of EPILEPSY SOUTH AFRICA (24)

MAY

National Directors' meeting (8 – 10)
Epilepsy Conference (11, 12)

Mpumalanga/Limpopo Branch

April Fool's Golf in Ballot will take place on 1 April 2006 in aid of people with epilepsy and related disabilities. The following events will be available: Shotgun start at R100.00 per person, entering a foorball, IFS scoring. For more information, contact Rieta on 082 823 8289 in Delloreen.

Free State National Board meeting (13)
Radio Overvaal Stereo at 10h00 (E)
Radio Talk Show Radio IFM at 14h00 (23)
Mpumalanga Chef's Cook-out (16)

JUNE

National National Epilepsy Week (19 - 25)
National Epilepsy Day (21)
South Cape Karoo Car raffle Launch (1)
Judging: High School Art (19)
Residents distribute flyers (19)
Mayoral Tea (20)
Volunteer Tea (20)
Directors' Challenge (21)
Candle lighting Ceremony(21)
Sponsored Knit: 1st session(22)
Sponsored Knit: final (22)
Street Collection: Knysna (23)
Money-in-the-box (24)
Jail 'n Bail (24)
Church notice and drama group (25)
Free State Radio Overvaal Stereo at 10h00 (12)
Radio Talk Show Radio at IFM at 14h00 (20)
Western Cape Pre-Youth Day (15)
Coin Collection (17)
Solstice dinner and candle lighting (21)
Directors' Challenge
Planning conference with doctors (24)

More news from our Western Cape branch
The Western Cape branch has celebrated the opening of their new offices in Landsdowne on 14 February 2006 by hosting an Open Day. According to Wendy Nefdt, regional director of the branch, "this year, 14 February marks the official opening of the new offices and a positive move toward the centralisation of our services. The regional office relocated to the workshop premises at the end of August 2005.

The above document is an example of the yearly calender of events held by the Epilepsy Foundation South African. According to Vince Singh - Events manager - some of the events don't take place due to the lack of venue or problems with transportation from venue to venue.

CONCLUSION

With respect to the interviews and the information gathered the following points can be noted:

There is a prominent gap that exists between the intellectually challenged individuals and the able society which directly affects the manner in which these two societies interact. This gap is due to some of the following factors- feelings of intimidation and **fear** of being **misunderstood** by the mentally challenged individuals, -able society **stigmatizing** the intellectually impaired by deeming them **incapable** without understanding them and their abilities -able society afraid to interact with the mentally challenged individuals in fear that they may not be understood or that they may be faced with unpredictable behaviour or mannerisms which they would not know how to handle.

- There is a need for interaction between the able society and the mentally challenged individuals. This would result in a better understanding of the mentally challenged needs and capabilities.
- There is a need for more skills development programs, integration programs, support programs and social clubs.
- Currently there is a lack of facilities to accommodate these programs and support structures
- There is scope for high skilled mentally challenged individuals to work in the open labour market whereby they can substantially benefit mainstream organizations.
- There is a need for more awareness campaigns to educate, inform the able society and de-stigmatize the mentally challenged society.


www.yorku.ca.wellness.com


www.blogs.guardian.co.uk

3.2. The Living Link

3.2.1. Interview with Julia and Ingrid – Founders of The Living Link organization

This organization specializes in integrating the mentally impaired into able society by having an Adult Integration program in place which involves the following sub-programs

- skills development program
- job sampling
- independence camp
- relationship coaching
- parent workshops
- work assessments

'The Adult Integration program is aimed at achieving independence at home and at work' (Annexure 3)

Support structures are also in place in order to offer support to the MC and mainstream organizations when the MC is successfully placed in the open labour market. Independent Living is another program that is offered at The Living Link which 'facilitates the transition of the Adult Integration Program graduates who are employed from family living to independent living in the community' Social clubs are also in existence in The Living Link. The social club allows intellectually challenged individuals to experience social events and exposes them to a variety of venues, which in turn helps them achieve integration in the community and helps the adults to maintain social contact. (Annexure 3)



Kgonotso at work



Bronwyn at work



Lynette at work

www.thelivinglink.co.za



www.thelivinglink.co.za

3.3. Epilepsy Foundation South Africa

This foundation was established to assist those individuals that have been diagnosed with epilepsy. Epicare, the Epilepsy Foundation's support group, aims to provide support and information about the condition of Epilepsy as well as other related issues. (Annexure 1)

"People with epilepsy, like other people, face the normal challenges in life but in addition they are faced with discrimination, the negative attitude of society and rejection" (Annexure 2)
The organization aims to do the following:

- Have programs in place to help people with epilepsy to lead a normal life as possible
- Have programs and campaigns to create positive awareness in communities to de-stigmatize the condition as well as to educate communities about the condition
- Media publications and radio talks
- Displays at libraries and distribution of literature
  (Annexure 2)

Awareness campaigns generally takes place throughout the year whereby radio talk shows are scheduled as well as other fundraising events such as Street Collection, Sponsored Knit, Chair challenge, Valentines Lunch, etc.

During Epilepsy week emphasis on the awareness program takes place mainly in clinics, libraries and schools so that people do not only receive information on the condition but also on the services that the epilepsy foundation offers.
The SIYB is just one of the programs that are currently in place to help those that are able to work in mainstream society. This program was initiated by Epilepsy South Africa, and it focuses on skills development training required by potential and existing entrepreneurs whereby potential entrepreneurs gain skills to identify feasible business ideas and develop business plans, whilst existing entrepreneurs receive skills training on how to improve and expand your business.

"Dr Potgieter started visiting our support group regularly to evaluate our treatment and we had a workshop about Entrepreneurship, which motivated me to use my skills. I started cutting my friends and family's hair and later got a temporary job with a funeral business. My self-esteem was built by getting to know myself and realizing that I could be just like 'normal' people" (Schultz, R,2006:2)