

There is life after
THERE IS LIFE AFTER
disability



2017

REPORT ON ACTIVITIES

1 April 2016 – 31 March 2017



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ASSOCIATION FOR THE PHYSICALLY DISABLED

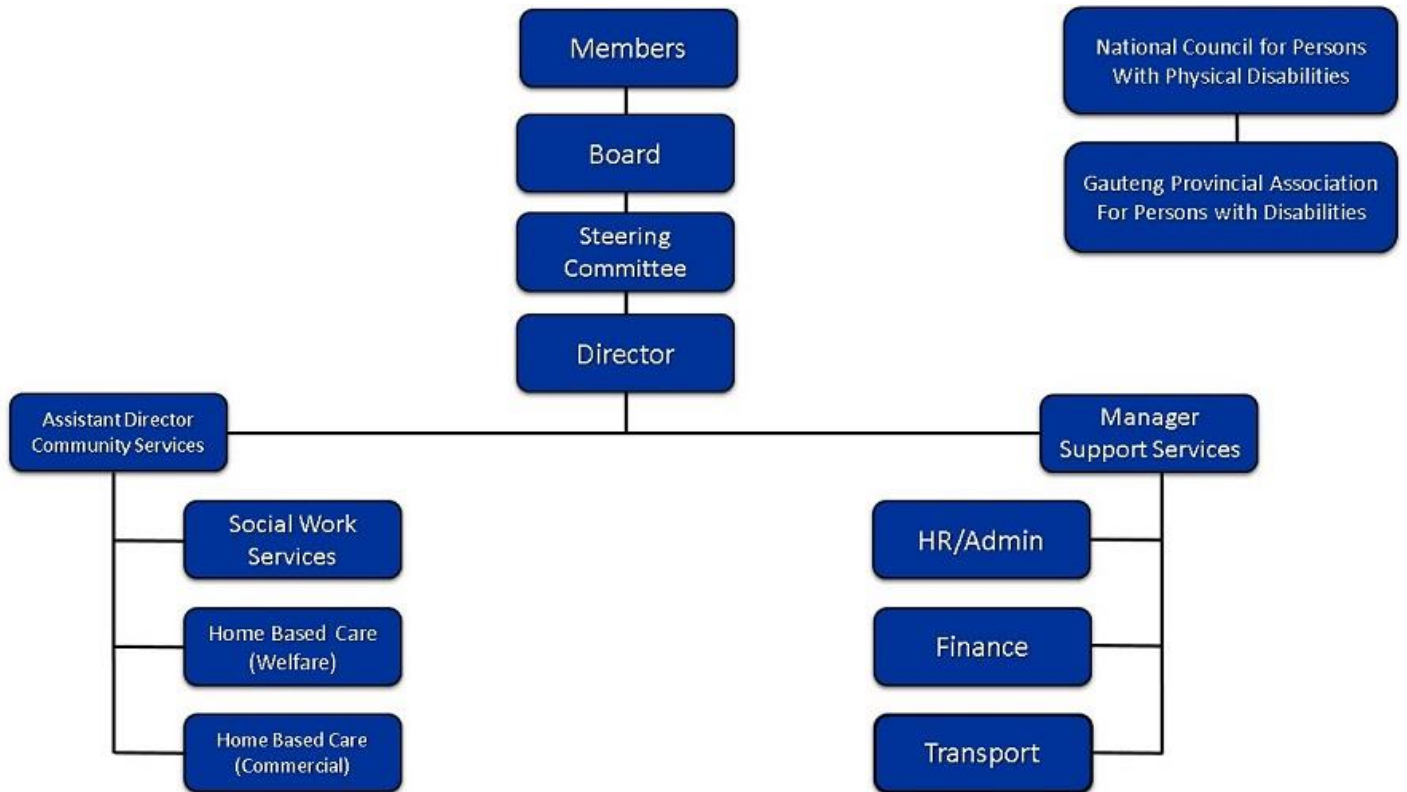
GREATER JOHANNESBURG

NPO NO 000-865

PBO NO 930006515

Governing Structure

Association for the Physically Disabled - Greater Johannesburg



National Council for Persons With Physical Disabilities

Gauteng Provincial Association For Persons with Disabilities

Members		Executive Board	Sub Committees
Member	Mr P Mabunda	Chairperson	Commercial Services Steering Committee, Finance Committee
Member	Mr J Cloete	Vice Chairperson	Commercial Services Steering Committee
Member	Ms L Kekana	Vice Chairperson	Commercial Services Steering Committee
Member	Mr G Julyan	Treasurer	Commercial Services Steering Committee, Finance Committee
Member	Mr D Fox		Commercial Services Steering Committee
Member	Mrs H Fox		
Member	Mrs N Gongxeka	Member	
Member	Miss S Heyman		
Member	Mr K Macleod		Commercial Services Steering Committee
Member	Mr M Mnyandu		
Member	Ms T Moodley	Member	
Member	Mrs A Pretorius	Member	
Member	Mr D Thompson		

MANAGEMENT	
Director	Mrs R Legasa
Assistant Director: Community Services	Ms M Retsuri
Office Manager	Mrs A Lewis

REPRESENTATIVES		
Gauteng Provincial Association	Member: Mancom	Mr P Mabunda
Hope School	Governing Body	Ms M Retsuri

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Tel: 011 646 7111 Fax: 011 647 8000

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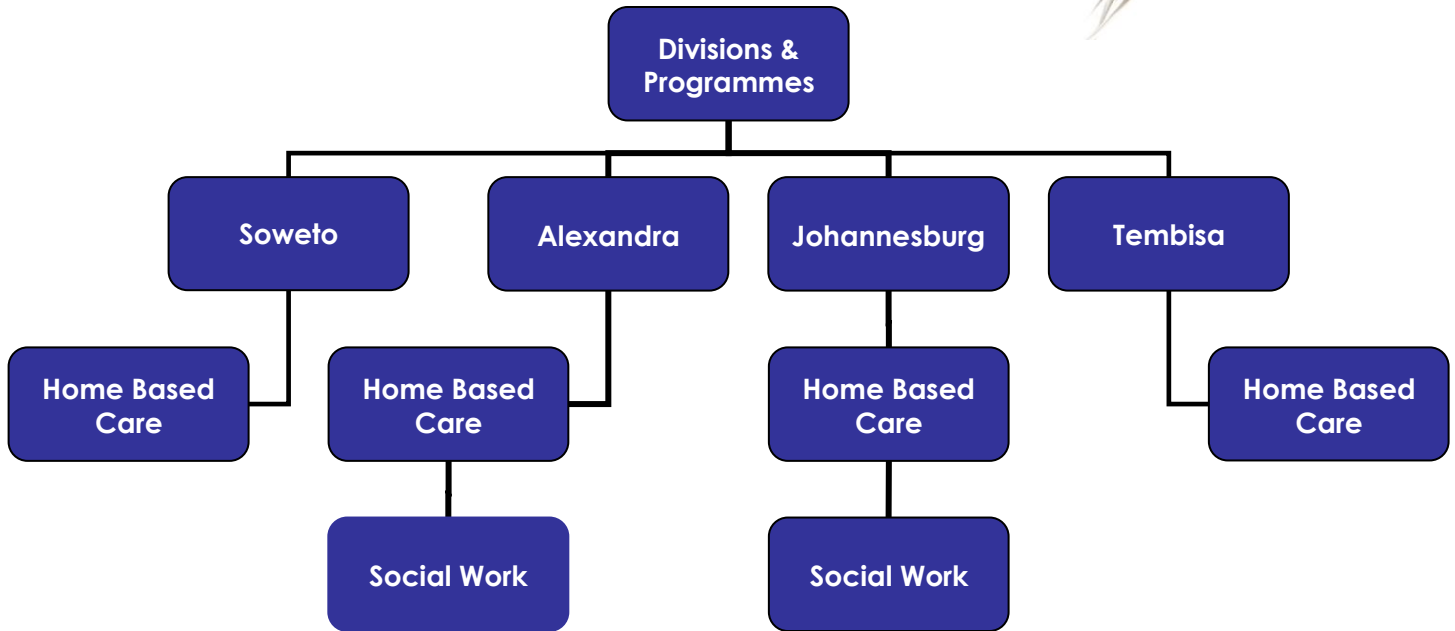
ASSOCIATION FOR THE PHYSICALLY DISABLED GREATER JOHANNESBURG

OUR ACTIONS SPEAK LOUDER THAN WORDS
81 years of service excellence

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Divisions and Programmes

Association for the Physically Disabled Greater Johannesburg



OUR VISION

We are totally committed to working in partnership with people who have physical disabilities, their families and the community as a whole, in order to promote their integration into society, and to enable them to achieve their full potential.

OUR MISSION

Our mission is to provide relevant and quality services to persons with primarily physical disabilities and to the community as a whole, including services that:

- Promote and protect the interests and well-being of persons with physical disabilities.
- Further the development and empowerment of persons with physical disabilities.
- Prevent the occurrence of disabling conditions.
- Remove physical, legal and psycho-social barriers and foster non-disabled/disabled relationships to make it possible for persons with physical disabilities to live independently and to participate fully in their communities.

OUR VALUES

Integrity

Mutual Respect

Professionalism

Initiative

Team Work

Accountability

Chairperson's Report

Patrick Mabunda will be remembered as one of The Greatly Caring



On 21 December 1934, shortly after the formation of the *Cripples' Care Association of the Transvaal* (original name of our organization), the Countess of Claredon described as "The Greatly Caring those who had conceived of the idea of a happier future for the disabled".

Today it is with great sadness that we mourn the passing of our Chairperson, **Mr. Patrick Mabunda**. But, at the same time, it is with great joy that we celebrate the life of this devoted servant of people with disabilities who can truly be counted as one of **The Greatly Caring**.

Mr. Mabunda, who was a paraplegic, passed away in February 2017 due to complications resulting from pressure sores. Then aged 65, he had devoted most of his adult life to the service of people with disabilities. A true humanitarian, he worked tirelessly to improve the lives of people with disabilities as a volunteer without payment for nearly four decades.

He served our organization for 31 years, 10 of these as Chairperson. He represented our organization at National level (Regional Member of the National Council for Persons with Physical Disabilities of SA - NCPPDSA) and more recently at Provincial level (Member of the Management Committee of the Gauteng Provincial Association for Persons with Disabilities - GPAPD). He was also a Member of our Commercial Services Steering Committee, the Chairperson of the Barrier Breakers Support Trust and a Director of a Pty Ltd company in which the APD held the majority shares.

In addition, **Mr Mabunda** was involved with disability issues in several other disability organizations, Government departments and Municipalities. In his hometown of Daveyton **Mr. Mabunda** will be remembered as a founder member of the Daveyton Cheshire Home. Often overcoming health issues, **Mr Mabunda** showed great tenacity and was always willing to serve wherever he was needed, not just in the governance of the organization, but also as our spokesperson at numerous fundraising events and media interviews.

He was a great proponent of good governance and showed a remarkable ability to adapt when a changing NPO environment necessitated the APD to pursue more commercialized income streams which included two dramatic restructuring processes.

As our leader **Mr Mabunda** led by example. We could proudly say that he embodied the Values of the APD: Integrity, Initiative, Mutual Respect, Team Work, Accountability and Professionalism. As a person he was both a gentleman and a gentle man. He will be remembered for his friendly disposition and warm smile. He always had words of encouragement for the staff and made a point of attending all staff functions where he always expressed appreciation for the work done by the staff.

A man of great faith, we know he is now at peace. As for the here and now: he will be missed.



**Patrick Mabunda,
Chairperson**

Vice Chairperson's Report

Hope is the only thing stronger than fear



Many thanks to the Executive board, the **Commercial Services Steering Committee (CSSC)** and ordinary members of the Association for their wonderful work, without whom we would not be here today. Many of them have served this organization for many years and I would like to encourage them to continue their good support. We need them more than ever before during these difficult times of uncertainty about the future of NPO's in South Africa.

I would like to thank the management team of the APD, our beneficiaries and their families who cooperated with our staff members to enable people with disabilities to reach their full potential. Without the cooperation of these families we would not be able to achieve our mission which is to partnership with people who have physical disabilities and their families, in order to promote their integration into society and to enable them to achieve their full potential. It has been very difficult due to financial constraints but here we are today continuing to render services in the disadvantaged communities of Johannesburg, Alexandra, Tembisa and Soweto.

I would like to thank all our individual supporters and donors for the wonderful support they gave to this organization during 2017. We continue to help as many people as we can with limited resources and hope that 2018 will be a better year for our organization. Over the past couple of years, I have had the pleasure of serving in the board of The Association for the Physically Disabled Greater Johannesburg and I have seen some of our beneficiaries progressing and becoming Independent, leaving their families to live on their own, some starting businesses, some went back to study and some found work in the labour market. These changes gave me great joy and courage to continue to remain in the Executive board of the APD.

GOVERNANCE: The APD governance comprises of the following:

Ordinary Members: Ordinary Members of the APD are people who have a specific interest in disability issues and a desire to ensure that the organization is capacitated to fulfil its Vision. Members meet once a year during the Annual General Meeting where they appoint an Executive Board to ensure the good governance of the organization.

The Executive Board: Members of the Executive Board carry fiduciary responsibilities and ensure that the appointed Director manages the day-to-day activities of the organization as per the Board's instructions. The Board meets every second month, usually for less than two hours.



**Vice Chairperson
Mr Jacques Cloete**

Vice Chairperson's Report (2)



A Sub- Committee, the Commercial Services Steering Committee (CSSC):

This committee is comprised of 4 members elected by the Executive board. IT focuses on the support of the APD's management team in the development and implementation of commercial initiatives to make sure that the organization become sustainable. This committee meets every 2 months with the management team or when required.

We would like to extend our invitation to the public for those who would like to serve in our committees. We would appreciate if you can tell friends and families who are interested to contact our office from 08:00am – 16:15pm at (011) 646 8331 or email rachell@apdjhb.co.za.

My role as the vice-chairperson and that of the Executive Board is to make sure that APD maintains all the services it provides to people with disabilities. Nothing will be impossible for us if we live by the values of this Organization, which are Integrity, Initiative, Mutual Respect, Team Work, Accountability, and professionalism.

Board Members



Mr Patrick Mabunda



Mr Gavin Julyan



Mr Lacques Cloete



Ms Luthando Kekana



Dr Alia Pretorius



Ms Ncebazimi Gongxeka



Ms Thurishaa Moodley

Financials

Summary of sources of operating income and expenditure



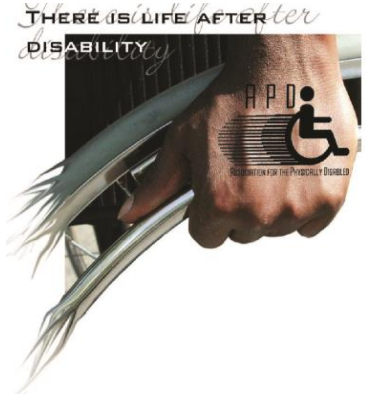
OPERATING INCOME	
National Lottery Distribution Fund	Nil
Subsidies	675 610
Appeals, Donations & Corporate Grants	242 192
Events, Sales & Street Collections	131 333
SED Funding	525 000
Legacies	425 040
Projects	1 168 040
Subsidies & Grants for Home Based Care	1 474 179
Fees for Services	253 869
Sundry Revenue	11 754
TOTAL INCOME	4 907 016
OPERATING EXPENSES PER COST CENTRE	
Support Services	
Governance	144 379
Home Based Care	1 886 670
Projects	1 417 784
Social Work Services	1 174 711
Workshops	(138 441)
TOTAL EXPENDITURE	4 485 103
NET OPERATING SURPLUS/(DEFICIT)	
Income from investments	6 394
NET SURPLUS/(DEFICIT) FOR THE YEAR	428 307

PERFORMANCE OVER LAST 6 YEARS

YEAR	SURPLUS/(DEFICIT)
2012	(1 503 109)
2013	(585 575)
2014	(571 786)
2015	(1 230 688)
2016	(287 979)
2017	428 307

Treasurer's Report

Association for the Physically Disabled – Greater Johannesburg



It has been a difficult journey for the management and staff of the Association for the Physically Disabled – Greater Johannesburg (APD) to get to where we are today, without us having to reduce the services we provide to our beneficiaries.

Generating sufficient income has been our greatest concern since 2012, as the last year we received any financial support from National Lotteries Commission was in 2011.

The bulk of our income for the past financial year came in the way of subsidies from the Department of Social Development, a grant from the Department of Health, Socio- Economic Development funding from Bandag and a large unexpected legacy. The balance of our income was generated through APD's income generating projects, which included events such as Casual Day and the Annual APD Golf Day, as well as the selling of APD products. With the restructuring, the Commercial Services division was transferred into the business entity (BB Commercial Services (Pty) Ltd) whilst the Enterprise Division was phased out, along with the concerted effort made by both management and staff to reduce costs, we were able to greatly reduce the expenditure of the organization.

Even though we did not receive financial support from National Lottery again this year, we were able to finish the year with a surplus of R428 307. This substantial surplus was only made possible by us receiving funding on par with what we received in the previous financial year, and by the savings from the restructuring and reduction of overheads of a whopping R800 000.

The question remains – “What is the nature of help that APD requires to move forward?” APD has not had a fundraiser for a number of years, which has meant that the Director has had to take on the fundraising in addition to her normal workload. Looking to the future it is a definite need for the APD to be able to have a fundraiser to administer and manage our various income generating projects. If you feel that you may personally be able to help, or if you know of an organization or individual that would be willing to help, please contact Rachel Legasa with the details.

APD is becoming a multi-faceted organization that will, along with your suggestions and assistance, ensure its ongoing ability to service our clients. Without the dedication of the APD management team, APD would have closed its doors in 2015. I wish to sincerely thank the management and staff of APD for their dedication.



Mr Gavin Julyan

Director's Report

Difficult roads leads to beautiful Destinations



The year ended on a sad note with the passing of **Mr Patrick Mabunda** who was not just our Chairperson, but also a friend. We are very grateful for his unselfish and loyal support of our organization over the past almost four decades. He will be missed. We are very fortunate in having the people we do have in charge of the governance of our organization. A word of sincere gratitude to all the volunteers serving on the Executive Board and the Commercial Services Steering Committee for their commitment to the upliftment of people with disabilities in the communities. A big thank you to the management team who sat in meetings and made tough decisions to ensure that the day to day work runs smoothly. Thanks also to our Support Services staff members (Admin, Finance, IT, HR and Transport) who ensure that everything is in place behind the scenes to support the activities of our Community Services Division - Social Work and Home Based Care.

As a service delivery welfare organization the core function of the APD is obviously to provide hands-on assistance to people with disabilities in the various communities through our Community Services Division. We are proud of the quality of the services our Community Service staff members render. Please spare a thought for them. Caring for someone who is totally dependent on you is the most difficult work to do. Caregivers and Social Workers need support from all of us in order to continue with the wonderful work they do in the communities.

COMMUNITY SERVICES

Home Based Care: At present we render home based care services to the disadvantaged communities of Soweto, Thembisa, Alexandra and Johannesburg. We have 6 caregivers in Thembisa, 7 in Soweto and 8 for Alexandra/Johannesburg. The Home Based Care programme reached 295 beneficiaries in this financial year compared to 355 in 2016. The 16,9% drop in the number of beneficiaries is the result of a directive from the Department of Social Development that we must focus on beneficiaries aged 18 to 59.

The reason for this is that the care of people aged 18-59 is not legislated, whereas the care provided to people 60 years and older, is legislated. When our beneficiaries reach 60 years we refer them to other organizations that cater for older persons. **(Please refer to Community Services report)**. Due to the need for home based care services for people with severe disabilities attending universities and colleges, we started rendering our services through our *Lean on Us Home Care Services* to three students at the University of Johannesburg (UJ) three years ago. Caregivers assist students by attending to their daily needs, such as getting up in the morning, getting dressed, bathing, transfers, cooking, washing of clothes and ironing, etc.

Social Work: The social work programme reached 232 clients in this financial year compared to 219 in 2016, an increase of 5,9%. This can mainly be attributed to staff stability in the social work department which resulted in each social worker having sufficient time at the APD to be able to grow his/her case load. **(Please refer to the Social Work report.)**

TRAINING

In early 2016, our Social Work and Home Based Care staff members identified a major problem around the way in which most of our beneficiaries manage their government grants, so we undertook to look into this problem.

Director's Report (2)



Our research revealed that a large number of our beneficiaries are struggling many being forced by their financial circumstances to turn to loan sharks (mashonisas) who keep their identity documents and bank cards as security until their debts have been settled. The interest rate charged by loan sharks is very high and it is extremely difficult for most of the beneficiaries to get out of debt.

It is our understanding that the National Credit Regulator is trying to crack down on this illegal practice nationwide but, in the meantime, our people are struggling.

The majority are broke on the day they receive their government grant because they are caught in a vicious cycle where the grant goes to repay loans from previous months and they then have to borrow money again to survive for the next month!

Our research showed that they are getting themselves into trouble by borrowing from loan sharks because they do not know how to manage their money. They don't know how to do financial planning – not even how to compile a basic budget.

In light of this, our organization decided to do something to help our beneficiaries, but realized that we would need financial support to develop the appropriate training material. We were extremely fortunate when soon afterwards we had an opportunity to approach Experian for a donation to provide our beneficiaries with basic financial training.

In August 2016, Experian gave a generous donation which we are using to develop appropriate training material based on the needs identified during our research among our own beneficiaries. We feel confident that this training will have a positive impact on the lives of our beneficiaries and their families. On behalf of our beneficiaries and everyone at the APD, I would like to thank Experian for their wonderful support to help address this critical issue.

FINANCIALS AND FUNDRAISING

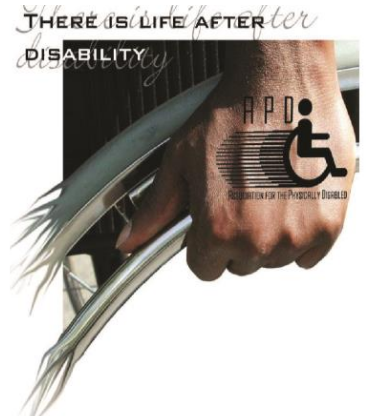
For the first time since 2010/11 our Financials show a surplus!

Comparing 2015/16 to this year I am pleased to report that, despite a 2,3% reduction in Income and the National Lotteries Board (NLB) again not coming to the party for the fourth consecutive year, we managed to reduce our Expenditure by 15,6% to record a surplus of R428 307. And, very importantly, for the first time in five years, we did not have to draw down from our investment portfolio which has been greatly reduced and is currently valued at only R88 000.

The tough decisions taken by Management three years ago to cut down on general overhead expenses, including not paying annual increases or bonuses to staff, in order to save our organization has finally paid off.

The only exception to the salary rule was the Social Work department where staff members were given increases based on the percentage of the increase in the subsidies allocated to them by the Department of Social Development. The income for 2016/17 was R4 887 051 (R117 483 less than in 2015/16) with the expenditure for this year being R4 465 830 (R826 683 less than last year). **(Please refer to the Financials in this Report.)**

Director's Report (3)



FUNDRAISING

As mentioned, we have not received any financial support from the NLB for several years. We recently received a letter from the NLB informing us that our application for **2015/16** is still under consideration and will be adjudicated in the **2017/18** financial year! The reason they offer is that their Budget for 2016 has been depleted. This letter was sent to several NPOs and took everyone by surprise as we were all looking forward to receiving funds in this financial year. This year most of our income came from grants from the Department of Health, subsidies from the Department of Social Development, donations and legacies. We also received some income from our traditional fundraising projects. **(Please refer to the Financials.)**

INTERESTING CORPORATE FUNDING TRENDS

The APD has a range of income generating projects that were developed through the years, but we have not been able to raise sufficient income through these projects due to a lack of capacity. We are planning to review some of these projects in the coming year to enable us to reduce our dependency on welfare funding.

INCREASE IN VOLUNTEERING

We will be applying to companies' volunteer programmes to assist our organization by bringing in new graduates to do internship programmes in the different departments of our organization and feel very confident that we will be successful in this based on the results of research done into funding trends over the past 10 years (in which 82 companies and 219 non-profit organizations participated) by Trialogue in 2016. Trialogue Director Cathy Duff revealed that less than half (46% of companies) had formal volunteering policies in 2007. In 2016, however, 70% of companies had a formal employee volunteering programme. Company-organised volunteering initiatives were the most common type of initiative, with 84% of corporates running these in 2016, up from 52% in 2011. An average of 18% of employees participated in company-organised volunteering initiatives.

CSI SPEND

She said that despite uncertainty and tougher trading conditions in almost every sector of the economy, corporate South Africa continues to demonstrate its commitment to corporate social investment (CSI). CSI expenditure in South Africa was estimated to be worth R8.6 billion in 2016, significantly up from R2.9 billion in 2006. Until 2013, Trialogue consistently found that total CSI expenditure was growing in real terms. In 2014 and 2015, however, CSI expenditure experienced negative growth in real terms, and growth was flat in 2016.

Here are some of the other interesting findings made public by Ms Duff:

MORE STRATEGIC CSI

Over the 10 year period companies have become more strategic in their social investment, which has become more closely aligned to the business and more focused. An increasing number of companies are aiming to achieve both social and business impact from their CSI expenditure.

Director's Report (4)



LESS FUNDING TO NPOs

Although NPOs remained the favorite channel through which corporates directed their CSI expenditure, the proportion of respondents giving to NPOs declined from a high of 100% in 2014 to 82% in 2016. For the first time, the proportion of CSI funding going to NPOs is below half of total spending (45%), significantly lower than in 2011 (57%). Provincially, CSI expenditure in Gauteng dropped from 29% in 2009 to only 20% in 2016. Corporate support for government institutions (including schools, universities, hospitals and clinics) increased in 2016 with 80% of corporates giving to these organizations, which received over a third of total CSI spend (34%). This was significantly up from 27% in 2011. Such support includes scholarships and bursaries.

EDUCATION KEY FOCUS

Education continues to receive the most support, with over 90% of companies supporting the sector in 2016, and its share of CSI spend increasing from 33% in 2006 to 48% in 2016. It is followed by support for community development (17% of CSI spend in 2006; 15% in 2016) and health (which has received a declining share of spend – from 16% in 2006 to 9% in 2016). Within education, most funding continues to go to school-level education (51% in 2016, 53% in 2007). Support for early childhood development has increased from 11% of education spend in 2007 to 17% in 2016.

INCREASE IN NON-CASH GIVING

Non-cash giving as a portion of total CSI spend increased over the 10 year period – from 6% in 2006 to 13% in 2016. Product and service donations accounted for the vast majority of this. In 2016, 29 companies reported figures for these donations equal to 19% of their total giving. By comparison, 11 companies quantified the value of their employees' volunteering time, which accounted for less than 1% of total giving.

OUR WONDERFUL SUPPORTERS

One of the APD's very loyal supporters - Anglo American retained its position as the company perceived to be having the most developmental impact – and was rated first in 2007 and in 2016 during the Triologue research. Anglo American's support of our Home Based Care Programme is highly appreciated. Their contributions have made a huge difference in the lives of people with severe disabilities in the communities for many years.



Rachel Legasa
Director

We thank Bandag for allocating their socio economic development spend to the APD. We really appreciate their wonderful support of our organization during these difficult times. We are very grateful to Mr Louie Cranko of Demisize (Pty) Ltd who, through his close working relationship with Bandag, secured these funds for the APD. We really appreciate his continued support of our organization. Last, but not least, a very big thank you to all the other companies and individual donors who supported us during the year; your support is greatly appreciated and we appeal to you to please continue supporting the APD.

Community Services

Start by doing what is necessary; then do what's possible; and suddenly you are doing the impossible



On the 9th of December 2015, the South African Cabinet approved the White Paper on the Rights of Persons with Disabilities. In that policy blue print, community based rehabilitation is identified as the central strategy for the provision of services to people with disabilities in South Africa by both state and non-state actors. In that policy document community based rehabilitation is aptly defined as "a strategy to enhance the quality of life of persons with disabilities through rehabilitation, habilitation, equalization of opportunities, poverty reduction and social inclusion". For its part, and in fulfilment of those policy aspirations, APD-Greater Johannesburg through its Community Services Department continues to render holistic social work and home based care services to persons with disabilities resident in our areas of operation. Below is the overview of what was achieved in rendering the social work and home based care services to PWDs and their support systems in 2016/17.

SOCIAL WORK SERVICES

ENHANCING PSYCHOSOCIAL FUNCTIONING FOR PERSON WITH DISABILITIES AND THEIR FAMILIES

According to Weaver (2006) the commitment to assisting disenfranchised people has always distinguished social work from other helping professions. Social work has always reached out to those with limited power in society, including the poor, homeless, children, the elderly and people with disabilities. DuBois and Miley (2005) also argue that in line with its mission as a human and helping profession, social work's interventions are generally initiated to strengthen human functioning and to enhance the effectiveness of societal structures that provide resources and opportunities for clients and beneficiaries of services, including people with disabilities. All the professional activities of APD social workers during the period under review and even before have been solely designed to enhance the quality of life of people with disabilities in the operational areas. In total, the Social work division reached 232 direct and 1 340 indirect beneficiaries between 1 April 2016 and 30 March 2017. The following is a breakdown of the services rendered.

OBJECTIVE 1: CASE WORK - CARE AND SUPPORT

- 147 intakes were attended to by social work staff.
- 54 assessments conducted
- 9 placements to residential care facilities and schools were done.
- 2 clients were assisted to secure employment and 1 enrolled in an internship programme.
- 64 cases were referred to other service providers for further assistance.
- 9 wheelchairs were handed over and 21 applications/motivations for wheelchairs made
- 451 face to face interviews were conducted.
- Over 3500 telephonic interviews were conducted.
- 311 home visits were conducted.
- 124 counselling sessions conducted, totaling 93 hours.
- 25 social work reports were compiled for Hope School bursary application.
- 11 case conferences conducted

Community Services (2)



SOME OF THE ACHIEVEMENTS IN RENDERING CARE AND SUPPORT SERVICES

Ms. PETA VAN TIEN HOVEN

Ms. Van Tien Hoven was born on the 8th of June in 1969. She reportedly had a stroke in 2007 while still living in the United States of America. She then decided to relocate back home to South Africa. When she arrived in South Africa in March 2016, without a job and a home to call her own, she found herself very deeply depressed and realized that she desperately needed both financial and psychosocial help. In her own words, she was on the brink of becoming suicidal. Luckily, one day she googled for organizations that assist people with physical disabilities in Johannesburg and then she self-referred herself to the APD in August 2016. An in-depth social work needs assessment was conducted and it revealed that Peta needed extensive psychosocial support, which was then provided mainly through counselling; she needed statutory welfare support and this was sorted by successfully assisting her to obtain a disability grant and also that her elderly parents were not receiving the state old age pension despite their age and clearly evident need. They were all assisted with the applications. Ms Van Tien Hoven's parents' old age grants were approved by SASSA in October 2016 and she received hers in November 2016.

Ms Van Tien Hoven continues to receive psychosocial support but the family's financial circumstances vastly improved the moment they all began to receive welfare grants. She can now use her grant for her personal needs including her medication that her parents could not afford before she got her grant. Her parents are also using their grants to buy the groceries. To put the icing on the cake, the social worker also assisted the family to apply and receive a designated disability parking disc from the Johannesburg Metropolitan Police Unit. Though it is something that most people would ordinarily take for granted, the parking disc has brought so much convenience to the family, especially when they visit busy shopping centres.

CATHLIN JACOBS

Cathlin was born on 17 April 2006 and immediately thereafter, she was diagnosed with paraplegia. She was referred to the APD in 2009, aged 3. At that time, the family's main concerns were day care placement and care dependency grant application. Through the social worker's intervention, Caitlin's mother was assisted to successfully apply for a care dependency grant. Unfortunately, as the financial situation of the family appeared to stabilize with the new income stream, family conflicts erupted and Cathlin could not go to the day care Centre. The social worker again intervened, with a view to ironing out the family issues so that she could live in a stable and child-friendly environment. Sadly, the result of all that turmoil was that Cathlin stayed at home until she turned 10, without having ever shown her face in a classroom as none of her parents was committed to taking the initiative or to cooperate with the social workers for her to go school. The APD social worker worked collaboratively with other social workers from child welfare to organize a foster care arrangement. As that process was going on, a breakthrough regarding her education was eventually made. The APD social worker sought the intervention of the Department of Education and working together, APD and DOBE managed to place her at Hope school in March 2017. Finally, at the age of 11, Cathlin began her academic journey. Although the process had been painstakingly long, oftentimes looking hopeless, Cathlin appeared very extremely elated that at last she had the opportunity to study. Probably it was a case of better late than never, as the saying goes. Cathlin is doing very well at school according to her teachers and the matron from the hostel also say she is a marvelous, well behaved child.

Community Services (3)



TINYIKO MANGAYE

When Miss Tinyiko Mangaye was affected by a stroke in 2011, she was completely shattered by the experience. Before the stroke, Miss Mangaye worked as a domestic worker and she was able to look after herself even though the pay was low. The stroke left her bedridden and she had to depend on her sister for assistance with all the activities of daily living. Unfortunately, there was a downside to that arrangement.

A family member took possession of the SASSA card, leaving Tinyiko with neither control nor knowledge of what was happening to her disability grant. A neighbor came to report the abuse to APD at the end of July 2016. In early August, the social workers carried out investigations and assessments. The needs assessments indicated that indeed Miss Mangaye needed to be assisted to regain control of her grant, and it also came to the fore that she needed a home based care service and also some assistive device.

The social worker contacted SASSA and facilitated that she be issued a new card, APD donated a wheelchair and the APD home based care service was also arranged. She began to be assisted 3 times a week and within two months of exercises, she became able to do minor things for herself. At the end of March 2017, Miss Mangaye was no longer bedridden and no longer needed to use a wheelchair when in the house.

A walking frame was organized by the social workers and as shown in the picture below, she is already learning to stand upright with the aid of a frame and hopefully she will maintain the recovery. The most gratifying thing for her and the APD staff assisting her is that her journey to regaining independence has already begun. Ms. Tinyiko Mangaye, learning to stand on her feet again.



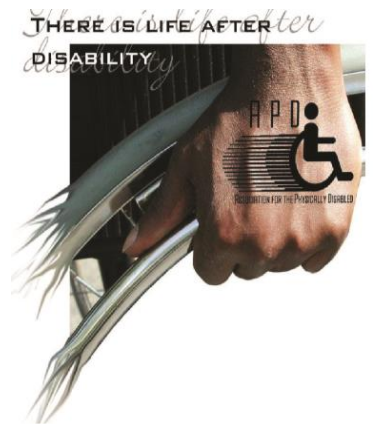
TINYIKO MANGAYE

OBJECTIVE 2: GROUP WORK - LIFE SKILLS AND REHABILITATION

The major rationale for the provision of group services to PWD is that the group setting provides opportunities for mutual aid. Through group work activities, PWD become involved with one another, develop helping relationships and become invested in each other. The mutual aid processes that unfold help PWD and their families to experience their concerns and life issues as universal, to reduce isolation and stigma, to offer and receive help from each other and to learn from each other's views, suggestions and challenges.

To this end, 36 sessions were conducted during the period under review. That number could have been considerably higher if we had not handed over one of our groups to GPAPD in January 2017. The sessions were mainly facilitated by the APD's social auxiliary workers. The group which was running at Alexandra Disability Centre between February and June 2017 was facilitated by the Community Service Supervisor, with financial support from the City of Johannesburg. However, seven of the sessions were facilitated by external experts who dealt with issues in which in-depth knowledge on specific topics was required.

Community Services (4)



The groups mainly targeted PWDs and their families. The Alexandra group was made up of 15 people with disabilities between the ages of 18 and 59. The Westbury group consisted of 11 family members and guardians of children with disabilities. At Fordsburg, the group was also made up of 15 adult people with disabilities. Another group was also initiated at Coronation Centre towards the end of 2016. To date it has 12 young people with disabilities all below the age of 21. The topics discussed included, but were not limited to: building a positive self-esteem, time management, financial management (budgeting), healthy living, HIV/AIDS, children's rights, rights of persons with disabilities, self-awareness and disability and relationships/sexuality.



Group work at Westbury with family members of children with disabilities.

OBJECTIVE 3: COMMUNITY WORK POVERTY ALLEVIATION

Anecdotal evidence from research by APD social workers has consistently revealed that adults with disabilities have historically been excluded from community, work and social opportunities. This has resulted in a greater dependency on the social care system. This is despite the fact that the Constitution and a variety of other legislation unequivocally emphasise that all people, regardless of disability, deserve the opportunity for a full life in their community where they can live, learn, work and play alongside each other through all stages of life. As part of community work with people with disabilities, APD social work staff facilitated the following poverty alleviation and empowerment initiatives:

Tswelopele Centre toy making project: 15 PWD residing at Tswelopele Centre were identified and trained in making toys for children using plastic bottles and other waste material. 4 females and 11 males between the ages of 18 and 59 are participating in the project. Although initially training the members was quite difficult due the severity of some members' disabilities and low concentration levels, they eventually grasped the concepts.



Toy making in progress at Tswelopele Centre

Community Services (5)



The toys they make are being sold at Pay Points, where especially the grandmothers and grandfathers buy the toys for their grandchildren. The major challenge has been the availability and collection of plastic bottles, principally because the project members have serious mobility impairment and also because of stiff competition for the plastics from other non-disabled community members who also make a living through recycling.

Alexandra Disability Centre: Another community work project which continued to be extensively assisted during the period under review is Alexandra Disability Centre (ADC). From April to August 2016, a total of 20 basic literacy lessons were conducted with beneficiaries at ADC. The lessons were facilitated by University of Witwatersrand social work students who were doing fieldwork practice with APD. The goal of the literacy project was to empower the PWD at ADC with basic literacy skills to enable them to count and write their names. Most of them were being manipulated and financially abused by family members, spaza shop owners and other community members as they could not transact on their own. In October 2016, ADC was assisted to apply for funding to many prospective funders and fortunately, the application to the City of Johannesburg was successful and ADC received funding to the tune of R90 000.00. That grant has enabled ADC to implement a psychosocial support programme for the beneficiaries, again with the generous facilitation of sessions by an APD social worker. At the time of compiling this report, management of ADC is in the process of obtaining quotations to purchase the equipment they require to start implementing income generating projects. All waste paper from APD head office is also being donated to ADC for them to sell to raise a little income for the beneficiaries. Although APD has invested considerable time and resources in assisting ADC to become independent, there are still challenges with recruiting volunteers to serve on the Board and initiating projects which will sustain the organization financially. ADC'S main challenges are as follows:

1. **Premises:** Financial resources are urgently required so that a building can be purchased/made available for exclusive use by ADC beneficiaries. This will go a long way to making operations smooth and sustainable.
2. **Equipment:** ADC beneficiaries need equipment to start more viable income generating projects. The equipment the members have prioritized is sewing machines; peanut butter making machines and candle making equipment. These projects will enable the beneficiaries to derive more substantial financial rewards and this will translate into improved standards of living for them and their families.
3. **Transportation:** Most of ADC's beneficiaries live a long distance away from the ADC and hence they struggle to come to the centre. Their various disabilities also compound this problem, especially those who use wheelchairs because even if they have to use public transport, they will need to pay for themselves as well as their wheelchairs. A modified van or minibus will greatly assist in this regard.

In order to deal with the above challenges, APD is currently assisting the manager of ADC to compile project and funding proposals to international donor agencies, corporate bodies and government departments. However, as that work continues to be ongoing, assistance of any kind will be greatly appreciated.

Community Services (6)



OBJECTIVE 4: EDUCATION AND AWARENESS

Disability awareness is very important when it comes to breaking stereotypes and overcoming preconceptions regarding disabilities. Education and awareness programmes have also been an entry strategy into the communities that APD is operating in. The broader objective of the education and awareness programmes is to disseminate information about disability, with emphasis on prevention, early intervention and community based rehabilitation. Our awareness programmes also endeavour to let communities, especially the families of PWDs, aware of the services available from the APD and other stakeholders. The campaigns also created a platform for the public to learn and ask questions about disability and where to access services. At every platform where the education and awareness were conducted, clarity was provided on how the entire discourse on disability neatly fits into the broader human rights discourse, as envisaged and mandated by the Constitution.



**Education and awareness in progress at Crown Gardens Clinic.
From left to right: Mr Vusumuzi Nxumalo; Mrs Hendrietta Kaunda; Ms Nokuthula Mahlangu and Mr Luckmore Takachicha.**



Mrs Stella Madi conducting an education and awareness session at Ethafeni community Hall in Tembisa

Community Services (7)



During the 2016/17 reporting period, 36 education and awareness sessions were conducted in different areas where the APD operates in. Awareness sessions were conducted in Alexandra township, at Eastbank Clinic, Eastbank Hall, 3-Square, Gerald Joseph Old Age home, Ithokomeleng Old age home, Fire Station Hall, Any Becker Hall, Crown Gardens, South Hills, Riverlea Clinic, Bethany Shelter, Yeoville, Malvern Clinic, Mayfair Clinic, Joubert Park, Parkhurst Clinic,, Westbury Clinic, Bella Vista Clinic, Glenanda Clinic, Tembisa and many others. A total of 1 234 people were reached with different disability messages.



Catching them young: Mrs Stella Madi raising disability awareness among school children at Emfyaneni Primary school in Tembisa.

OVERALL SOCIAL WORK CHALLENGES

Housing in general and accessible housing in particular remains one of the greatest challenge faced by people with disabilities. The dire housing situation for PWD is exacerbated by the fact that the majority of PWD are not formally employed, hence they are excluded from home loans available and even those that are lucky to be working are earning extremely low salaries which again make them unable to acquire the loans. Those that are staying in family houses still struggle to move around in the house because the houses are not accessible. From the social work department's caseload of 149 active cases, 71 (47%) require assistance to secure proper housing.

Community Services (8)



There has been a 2% increase in the number of PWD requiring houses compared to the same period in the last financial year. There was still no priority allocation of RDP houses to PWDs in our case load for 2016/17 and most of them have been on waiting lists for years.

Shortage and distance to protective Workshops: Youths and adults with disabilities who are unable to secure formal employment due to disability and low skill levels are still struggling to join protective workshops because the workshops are located far from where they stay and in some instances the workshops are just not there. Long waiting lists for specialist services: Those PWD requiring integrated interventions involving other specialists such as psychologists, physiotherapists, occupational therapists etc. are often put on long waiting lists, thus compromising service effectiveness.

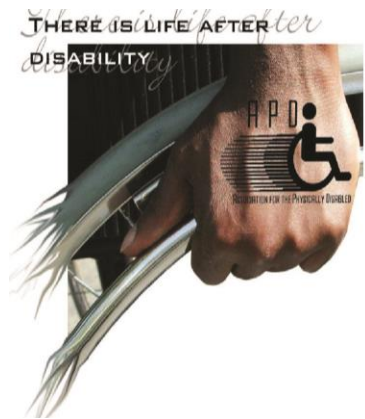
Special assistive devices especially wheelchairs for CP clients are difficult to source. When they are found at private companies, they are prohibitively expensive. Psychosocial support activities such as outings with PWD are not funded, neither by DSD nor corporates. Acquiring residential placements is still a huge challenge. Most facilities are full, waiting lists are painstakingly long and the independently run facilities are costly and beyond the reach of most clients. Delays in renewing Disability Grants at SASSA. Also SASSA not recognising some types of disabilities prejudices other clients since without the grant it is difficult to secure residential placement.

Limited resources to run more income generating projects. Though income generating projects have been started it is sometimes not easy to sustain them because of a lack of material resources and marketing skills. High unemployment rate amongst PWDs which is caused by lack of proper qualifications such as matric certificates and skills to make them employable. Again, age restriction also minimizes their chances of being employed and even getting learnership. Accessibility and worker safety have been issues that affected service delivery particularly in informal settlements.



**Nokuthula Mahlangu, Vusumuzi Nxumalo,
Luckmore Takachicha, Meriam Maunatlala, and
Johannah Mkhari**

Community Services (9)



HOME BASED CARE SERVICES

The South African disability policy is unequivocal that people with physical disabilities must be provided with a range of personal care and support options that enhances individual empowerment and enables integration and participation in the community. One of the most important ways to achieve that goal is through the provision of home based care/attendant/personal care services, meaning the assistance received by people with physical disabilities for undertaking the full range of everyday tasks that able-bodied people normally do for themselves. The APD Home Based Care Services is an essential service which assists with the care and rehabilitation of people with physical disabilities. This service is required by people who have temporal and permanent physical disabilities. Continued rehabilitation in the community assist in eliminating compounded marginalization for people with physical disabilities and also ensures that other family members are capacitated with the skills and knowledge to assist their disabled relatives.

Services Provided:

- Basic care: bathing, dressing, transfers, massage, light meal preparation, feeding, treatment and prevention of pressure sores, light house cleaning, basic exercises and assistance with training other family members to provide effective care and support.

Areas where the service is provided:

- Greater Johannesburg, including Alexandra, Soweto and Tembisa.

Service qualifying criteria for beneficiaries:

- The services are for persons with temporal and/or permanent physical disabilities.
- Beneficiaries have to be between 18 and 59 years.
- This service is mainly for persons receiving disability grants.

Achievement for 2016/17

From 2015/16 we carried over 355 beneficiaries to 2016/17 financial year. 119 beneficiaries were assessed during the period under review. 295 direct (PWDs) and 429 indirect (other family members/ support system) beneficiaries were assisted in 2016/17. From the direct beneficiaries who were assisted the following was achieved:

- 20 beneficiaries became independent and they cancelled the service. Some went back to school, others were employed, placed in a learnerships or placed in protective workshops.
- 320 family members were trained to assist their family member with a disability when caregivers are not on duty. Families are also given information about the disability of their family members.
- 53 beneficiaries cancelled the service and are assisted by their families. When family members take over the care of their relatives, we feel satisfied as family takeover is in fact one of the objectives of the programme.
- Education and awareness on issues related to disability assist with preserving family structures as a result of the support other family members receive through our community services. 103 beneficiaries improved, but are still in the services and 4 beneficiaries were placed in a residential home.

Community Services (10)



Challenges

- Beneficiaries who stay alone and depend on the caregivers. They struggle a lot during the weekends.
- The transport cost for caregivers continues to steadily rise and this puts pressure on the operational budgets, given that DSD does not fund transport for caregivers.
- Some beneficiaries do not understand the limits to what caregivers can do and try to treat caregivers like housemaids.
- The age limits imposed by DSD make it difficult to reach the targets agreed in the Service Level Agreements.
- The lack of State-provided disposable nappies and sometimes even medication, results in PWDs using their disability grants to buy these items. This greatly impacts on their ability to cater for their other needs such as housing and basic nutrition.
- Some beneficiaries do not have toiletries and food. We receive donations, but there is no consistency.
- Some beneficiaries are neglected by their families. These cases are referred to social work practitioners.
- PWDs not getting adequate information about their disabilities from medical practitioners.
- Some clients do not disclose all the information about their disability and general health condition and that also exposes the caregiver to risk, especially when communicable diseases are involved.
- Transportation for beneficiaries to go for check-ups is a huge challenge. Some end up defaulting on medication and that causes sudden deterioration in their health condition.

Testimonial letters

Beneficiaries who have improved and what they have to say about the service they received from APD

To whom it may concern

My name is **Cynthia Lindiwe Tshanga**. I was born in 1973. Until 2013 when I was hit by a car that almost killed me, I lived my life as normally as can be. I was working at Game then. The accident left me with a C shaped spine. Doctors rushed me into theater for operations, but after the operation, I could not feel my legs, could neither walk nor stand on my own. After being admitted in hospital for over a year, I was eventually discharged in July 2016. Before I had been discharged, the hospital social worker had already contacted APD requesting for home based care service on my behalf. Within days after my discharge, the APD home based care supervisor visited our family home for assessment and she recommended that I be attended three days per week. When I was told of that decision, I breathed a huge sigh of relief, but of course I was still nervous as I wasn't sure if the caregiver who was to be assigned to me would treat me gently and with respect. I had no other option and so I took my chances.

The caregiver assisted me with bathing, massages and exercises. Before my accident and eventual disability, I never had any respect for caregivers as I had heard stories of how nasty some of them are. I must admit that the APD caregiver who attends to me, now for two days in a week, is the complete opposite. She is mature, extremely caring and very diligent with her work.

Community Services (11)



The exercises have tremendously helped me. I even bought myself a pair of caliper shoes to give a bit of balance as I am already leaning to stand on my feet again. Although it looks it will be some time before I can regain the ability to walk, the walking frame I received from the clinic enables me to stand for a while and every day I eagerly look forward for the coming of the caregiver to do exercises with me and with God and APD on my side, I know I will make it.

Thank you so much APD, your work restores not only our physical abilities, but our hope too.
Forever grateful,

Lindiwe

Dear APD-Greater Johannesburg,

I am writing this letter to express my heartfelt appreciation for the work that you are doing in assisting me with home based care services. When I started receiving the service from APD on the 20th February 2015 only my left leg was amputated but later both legs were amputated. If it was not for the wonderful work you are doing, I really don't know where I would be today. My children are too young to assist with most household activities. Keep up the good work APD because people like me would be hopeless and miserable without your help.

Yours faithfully

J Mashigo.

OTHER HOME BASED CARE ACHIEVEMENTS

Thandi Msatywa

Thandi was born at Tembisa Hospital in 1994, as the third born of **Zandile Msatywa**. She was doing her high school studies at Tembisa High in 2014 when her life changed dramatically. She fell victim to physical abuse which by people she knew and as a direct consequence of the abuse, she sustained spine injuries. A case was opened but sadly, the investing officers misinformed her of the trial date. Consequently, she did not appear at court on the trial date and the case was eventually dismissed. Unbeknown to her and the family, her spine had been severely damaged during the attack. Gradually, **Thandi** began to be unable to stand or even walk. By May 2015, she had to use a wheelchair for mobility. Her case came to the attention of APD in February 2017. Assessments were done for both social work and home based care purposes. While she was getting psychosocial support and referrals to relevant institutions and organisations to make sure that the case could be revived, she also began to receive three home based care visits per week. The caregiver who was assigned to assist her (**Ms Mashudu Nemahotole**) is one the most experienced at the Tembisa office and she diligently provided bathing, exercise and massage services to her. Within a month, her progress was beginning to show. Although **Thandi** is still having health complications, her spirit has been revived and she believes that her story will inspire everyone that has gone through traumatising experiences. The home based care services will continue as long as she needs help. She has expressed her desire to study computers and APD will continue to work with her to make sure that her dream is realised.

Community Services (12)



Sfiso Mbethe

Mr Sfiso Mbethe was born at Tembisa Hospital in 1986. He completed his high school studies at Tembisa High in 2004. In 2005, he enrolled at Rose bank College to study accounting and financial computing. After finishing his studies, he got a job at SAB Miller in 2007. In 2010,

Mr Mbethe started to get sick and had a stroke. He was hospitalized at Tembisa hospital from October 2010 to January 2011. He was in a coma for six months and after that he became bedridden. As if his health woes were not enough already, in 2012 **Mr Mbethe** was diagnosed with brain tumor but the doctors could not do an operation because of his other existing condition. He was then referred to APD by one of the neighbours who was a client of APD.

When the HBC service commenced, his condition was really bad. **Mr Mbethe** could hardly do anything for himself and it appeared both he and his family had become hopeless. **Mr Mbethe** is seen here with the caregiver (Shelly Sono) who assists him. He is on his way to the Multi-Skills Centre for training.



Sfiso Mbethe with Shelly Sono

After a year of service, he again went back to hospital, this time for an eye operation. He was hospitalized for a month and when he was discharged from hospital, the care giver continued to assist him with bathing, exercises, feeding, turning him side to side in bed and also giving moral support to the family. His mother, who was the primary family care giver also had a stroke also and was admitted at Casternhoff hospital for three months.

When she was discharged, she could not walk, her speech was impaired and so the care giver ended up assisting both mother and son. It was a heart-breaking family situation indeed. Six months after both mother and son were being attended, **Mr Mbethe** began to learn how to wake up and sit on the bed and almost miraculously, he recovered his speech. Three months later, the care giver began to assist him to stand-up, though he still felt dizzy.

As he gained more and more strength, he began to use a wheel chair and later a walker. By the end of 2016 he was no longer using a walker, though he would walk slowly and for short distances. The social worker organized a learner ship for 6 months and now he is training at Multi-skills Centre. He still uses a walker for long distances.

Community Services (13)



Boitumelo Mogotsi

Boitumelo Mogotsi is a 32 year old lady who lives in Meadowlands with her grandmother. She was involved in motor vehicle accident in June 2015. The accident was so serious that she sustained severe head injuries and she ended up being bed ridden. She stayed in hospital for two months and when she was discharged, her elderly grandmother approached APD seeking assistance for **Ms Mogotsi**. After assessments were concluded in August 2015, it was decided that she be assisted for five days per week. The main services that she was receiving were bathing, massages and light exercises. By the end of December 2015, **Ms Mogotsi** had shown very encouraging signs of improvement as she was now able to sit in her bed, stand up with assistance and also to use a walker to make few steps in the house.

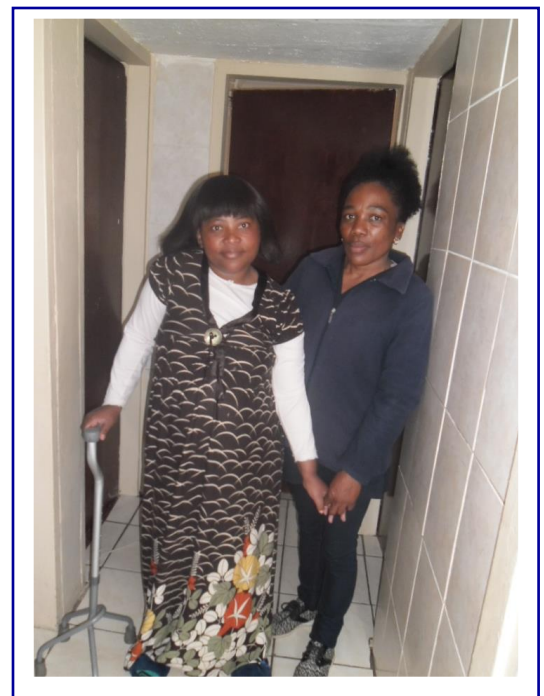
Just as her condition was gradually improving due to APD intervention, **Boitumelo** had a stroke in February 2016. The stroke caused her to regress on all that improvement. However, that drawback did not demotivate the caregiver and her grandmother.

Together they continued to assist her with all the activities of daily living. Their efforts were bolstered by **Ms Mogotsi's** feisty, never die spirit. Once again by July 2016, the combination of medication and the caregiving assistance enabled **Ms Mogotsi** to start to sit, stand and walk with the aid of a walker.

As a result of her cooperation with the caregiver, Ms Mogotsi's grandmother also quickly learnt to do most of the work that the caregiver was doing and so towards the end of 2016, a decision was made to reduce the number of days she was attended to by the caregiver to three. At the time of compiling this report, the days were again reduced to two because **Ms Mogotsi** has tremendously regained strength.

Caroline Mohapi

Ms Mohapi was born in 1976. In 1995, at the age of 19, she was diagnosed with a cardiac problem that led to her hospitalisation at Baragwanath hospital for a year. She had to undergo a series of operations before she could be discharged. In 2000, she fell pregnant and had a baby girl. Unfortunately, in 2008 she had a stroke. At that time she was staying with her mother and hence her mother had to take care of both her and her child. Neighbours who knew of APD services referred her to our organisation in 2014. Although she was still recuperating from the stroke, there were still many activities of daily living that she could not do for herself, such bathing, cooking and even cleaning the house. By the end of 2015 she had learnt to walk with the aid of a walker. However her limping was still very severe.

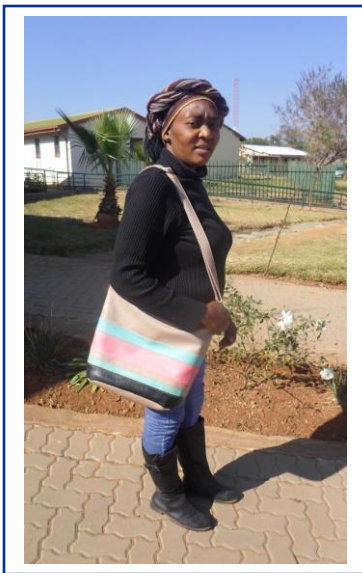


Ms Mogotsi up on her feet again with the help of a caregiver (Xolile Msibi) and a walker

Community Services (14)



Apart from assisting her with the activities of daily living, the caregiver also assisted her with exercises. The exercises enabled her to regain sufficient strength and in mid-2016 **Ms Mohapi** could now walk independently. As she had become more energetic and independently mobile, **Ms Mohapi** enrolled in a learnership for six months. The learnership was vitally important in equipping her with work skills and at the beginning of 2017 she also started to attend skills training at Multiskills Centre. She also now attends ABET classes at Tembisa high. All these endeavours became possible after the intervention of APD. Previously she was too weak because of her disability to the extent that she had become virtually hopeless. Over the period under review, **Ms Mohapi** has become a very ambitious lady who hopes one day she will enrol at university to study law once she completes her abet studies. The caregiver continues to assist **Ms Mohapi** with exercises twice per week in order to improve her general health condition.



Left: Ms Mohapi on her way to attend class at Tembisa High. Right: Ms Mohapi after receiving a donation of Movite porridge from APD. With her are caregivers Shelly Sono (to her right) and Zanele Nxeto (to her left)

Suzan Kubyana

Ms Kubyana was born in 1959. She began to experience severe pains in her left leg at the age of 18. Doctors had to insert some metal pins into her leg but a few years later, the pain returned and the metal pins had to be removed. Some weeks later after the removal, the pain intensified, prompting the medical personnel to re-insert the metal pins. In the year 2000, she had to undergo an operation on the other leg as it had also been affected by her lack of balance. Doctors said there was hardly anything else that they could do to ameliorate her situation hence she had to live with the limping and excruciating pain in both her legs. On the 3rd of March 2016, she heard about APD home based care services from her neighbours. She then decided to call the APD Tembisa office for assistance.

Community Services (15)



The assessment which was conducted showed that although **Ms Kubyana** was fairly independent, as she was capable of carrying out most activities of daily living all by herself, she could benefit from massages and light exercises.

The massages would soothe her pain while exercises improved blood circulation and also increased energy levels. Within two months, **Ms Kubyana** said she began to feel a very positive change in her general health condition.

To keep her busy and also improve her nutrition, the caregiver who was assigned even taught **Ms Kubyana** how to prepare and maintain a small garden in her yard. Even though she is still continuing to be assisted with massages and exercises at least twice per week, **Ms Kubyana** has become more and more independent and is extremely grateful to APD for teaching her how to grow vegetables as the vegetables have improved her diet and ultimately her health as well.



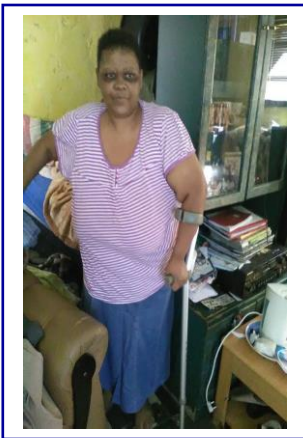
Ms Kubyana being taught to grow vegetables by the caregiver (Elizabeth Maisela)

Community Services (16)



Ellen Mathebula

Mrs Ellen Mathebula was born in 1966. She lives in Alexandra. **Mrs Mathebula** was attacked by stroke twice, the first time was in 2013 and the second time was 2015. She recalls that with the second stroke, she went to bed just like every other day but the following morning she could not move her body, it was numb.



Mrs Mathebula back on her feet again, with the aid of a crutch.

Her husband called for an ambulance and she was rushed to the hospital but doctors failed to reverse the condition. APD caregivers picked up her case on the second of February 2017 while carrying out a door to door campaign. They met her husband in the streets and he immediately requested that they come to his house and assess his wife. The assessment revealed that **Mrs Mathebula** could not walk, she could not bath herself and she could not do any household chores expected of a married woman. **Mrs Mathebula** even raised her concern that if she could not get help with activities of daily living or if her condition did not improve, even her marriage itself could eventually be under threat. A caregiver was then assigned to assist her with massages, retraining her to walk and exercises. Her response to the intervention was immediate. At the end of March 2017, which was almost two months from the inception of service, **Mrs Mathebula** was able to stand up while balancing on her crutch. She could even make a few steps, though unsteadily. She can also do the dishes and other smaller chores. Although the services still continue in order to sustain the progress, **Mrs Mathebula** and her family are very happy for the work that APD has done thus far.

ANALYSIS OF HOME BASED CARE BENEFICIARIES WHO WERE ASSISTED:

CONDITION	NUMBER
Stroke	121
Arthritis	45
Paraplegic	47
Amputated Limbs	11
Cerebral Palsy	15
Obesity	5
Cardiac Failure	2
Spine Injury	4
Parkinson's Disease	3
Epilepsy	3
Quadriplegic	12
Hip Replacement	6
Multiple Disabilities	2
Old Age	5
Fractures	3
Other	11

Community Services (17)



Social Work and Home Based Care beneficiaries who received assistive devices and other donations

- 12 clients received wheelchairs and 17 applications still pending
- 15 families received clothes
- 9 clients received walking frames
- 1 client received an iron
- 43 clients received movite porridge

Training for Social Work Staff

Social Work staff received training in:

- Facilitation of employment and learnership for youths with disabilities
- White paper on the rights of persons with disabilities
- Ethics in community development model
- Sexual Health and protection in mental and intellectual disabilities
- Incontinence management for persons with disabilities

Training for Home Based Care Staff

Home Based Care staff received training in:

- Exercises,
- Stroke,
- Diabetes,
- Cancer,
- HIV/AIDS, and
- Incontinence training for persons with disabilities
- Transfers and sexual abuse of persons with disabilities; HIV/AIDS and STIs

Networking for Community Services

Networking and advocacy continues to be carried out at local, regional and provincial forums. Forums assist with providing effective services to PWDs as different stakeholders from government and civil society participate in these forums.

- Department of Social Development Provincial and Regional Disability Forums
- Johannesburg Welfare, Social Services and Development Forum
- Gauteng Welfare, Social Services and Development Forum
- Ekurhuleni Welfare, Social Service and Development Forum
- Tembisa Disability Forum
- Westbury LDAC

Donors and Supporters for Community Services

The APD would like to express its gratitude to the following service providers for showing unwavering support to its staff members and clients:

- | | |
|------------------------------------|------------------------------|
| • Department of Social Development | • Experian |
| • Department of Health | • Mrs Lorna Arnott & Friends |
| • Anglo American Chairman's Fund | • Ms Miemie Retsuri |
| • Investec Cradle Project | • Mr le Roux |

Community Services (18)



Home based care Services 2016/17 Staff Members



JHB/ALEXANDRA HBC TEAM
Selina Mongalo, Zandile Nxumalo,
Florah Sithole,
Hendrietta Kaunda(Supervisor),
Zandile Nkolongwane,
Cindy Mkhonza,
Ntombifikile Gumede.
Sindisiwe Mpongose
was absent on the day.



SOWETO HBC TEAM
Lungile Mahaye,Zandile
Buthelezi,Andiswa Magatsa,Busi
Mkatshwa, Tebogo Itumeleng
(Supervisor), Xolile Msibi
And
Kedibone Mlangeni



TEMBISA HBC TEAM
Zanele Nxeto, Stellah Madi
(Coordinator),Gloria Moela,
Shelly Sono. Elizabeth Maisela
and Mashudu Nemahotole

Lastly, I want to express my heartfelt appreciation for the honour of leading the hard working and dedicated community services team. More often than not, ours is work that demands us to go beyond the call of duty but inspired by the spirit of Ubuntu, we always endeavour to treat our clients as if we are treating ourselves.

Thank you!



Luckmore Takachicha
Community Services
manager

Service Awards

We salute our devoted Staff members



LONG SERVICE

The Association recognizes those individuals who have devoted a considerable amount of their working life to the organization. As it is important that these individuals are formally acknowledged for their contribution, the following Long Service Awards policy applies:

Long Service Awards to members of staff are as follows:

5 Years:	A certificate and a cheque for R250
10 Years:	A certificate and a cheque for R500
15 Years:	A certificate and a cheque for R1000
20 Years:	A certificate and a cheque for R1500
25 Years:	A certificate, a cheque for R2 000 and a watch to the value of R500
30 Years:	A certificate and a cheque for R2 500
35 Years:	A certificate and a cheque for R3 000
40 Years:	A certificate and a cheque for R3 500

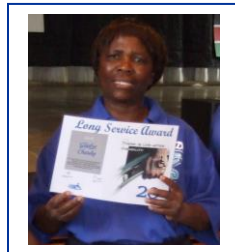
Presentation:

The award and certificate are presented at the AGM held during the year in which the required period of service is completed.

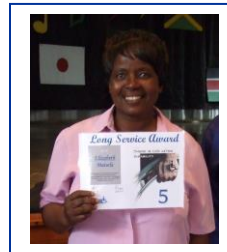
This year the recipients of our **Long Service Awards** are:



Stellah Madi
-20 Years -



Gladys Chauke
-20 Years-



Elizabeth Masilela
-5 Years-



Shirley Sono
-5 Years-

IN RECOGNITION OF SERVICE EXCELLENCE

Nokuthula & Lungile shines

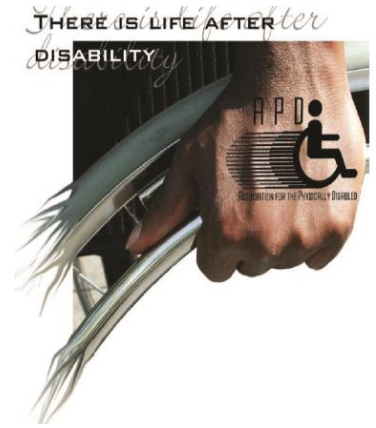
Should there be suitable candidates, the Association for the Physically Disabled Greater Johannesburg awards annual *Service Excellence Awards* in two categories. The first is for *Carers*, which is specifically aimed at the Home-based Caregivers and Social Workers who deal directly with our beneficiaries, and the second for *Support Staff*, without whom our Carers and the organisation would not be able to function effectively.

This year the Association proudly awards the *Service Excellence Award for Social Workers* to **Nokuthula Mahlangu** (pictured at the top) & Carer **Lungile Mahaye** (pictured at the bottom) in recognition of the level of excellence that they achieved and maintained in performing their duties as a Caregiver in Soweto.



Achiever of the Year

Achiever proves that anything is possible with just a little bit of help.



MZWANDILE MGDODO

After **Mzwandile Mgododo** finished his matric, he found a cleaning job in a hair salon and worked until 2007. While he was working he trained as a hair dresser and worked full time until 2012. His right hand was amputated in February 2013, as a result of injuries he sustained when he was robbed. **Mzwandile** was then referred to APD by Charlotte Maxeke hospital in February 2015.



Mzwandile Mgododo
Before his arm was
amputated

Towards the end of 2015, he had regained his sense of self-worth and his immediate family also began to understand his condition better. In November 2015, he was confident enough not to hide his amputated arm anymore, indicating that he had finally accepted his disability. In January 2016, he returned home to Kwa Thema and took up his previous job as a hair dresser. His future plan is to open up his own hair salon and even employ people without disabilities.

Mzwandile's case is a clear demonstration that with the right and timeous support, in deed there is life after disability. APD-Greater Johannesburg congratulates **Mzwandile** for his resilience and determination to make the best of his life in the face challenges. He is an inspiration to other people with disabilities.



Mzwandile Mgododo
after his arm was
amputated

WORDING ON THE CERTIFICATE

The Association for the Physically Disabled – Greater Johannesburg (APD) proudly recognises Mzwandile Mgododo as the Achiever of the Year.

APD social work services were provided to Mzwandile after his right arm was amputated. Because of his determination and from APD receiving psychosocial services at the right time Mzwandile learned not to let his disability to be an obstacle in living his life to his potential. Mzwandile showed his family and his community that having disability does not mean he must stop work. With the support of his family and community he went back to his previous work as a hair dresser.

APD – Greater Johannesburg congratulates Mzwandile for his perseverance and taking control of his life to achieve his dreams without letting his disability define him. His participation in community activities for persons with disabilities is also commended.

APD Support Team

Together Everyone Achieves More



The success of any organization, is only made possible with the involvement of a team of dedicated staff members working tirelessly behind the scenes. We may be a pretty small team but we have years of experience and service to offer our colleagues in the other divisions of the APD. In the current year we were reduced by one, when our transport manager Joseph retired after almost 28 years with the APD.

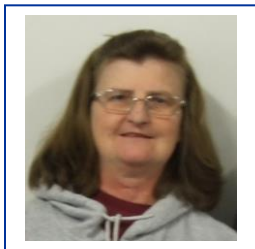
Sonja Botha, our Switchboard/Receptionist, will be celebrating 30 years with APD at our 2018 AGM. Things may have changed over the many years, but her commitment to assist where ever possible has not changed, nor has her ability to see the funny side of any situation and share a hearty laugh with others.

Gladys Chauke our Domestic, is far more to us than a person just providing a clean environment, and tea and coffee. This wonderful lady who has been with the APD some 21 years, is always willing to use her initiative to assist where ever she sees a need, and does not fall back even when she faces new challenges or is required to learn new skills.

Jan Madisha our Admin Supervisor, has taken in his stride the responsibility of taking care of our small fleet of vehicles in the absence of a Transport Manager. Jan's ability to see a problem, and then change it into an opportunity to learn something new, will continue to assist him in his development path within the APD.



The Office Manager **Angie Lewis**, commends her team for giving of their best throughout a year of many changes and challenges within the organization. **Well done Support**, well done!!



Angie Lewis
Office Manager

