

# Cheshire Smile

Quarterly Magazine of the Leonard Cheshire Foundation    AUTUMN 1982 25p



# Cheshire Smile

*The Quarterly Magazine of the Leonard Cheshire Foundation*

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Cheshire Smile is edited and managed by disabled residents at Le Court. Contributions to the magazine are invited from all readers. Opinions put forward in individual articles do not necessarily represent the official view of the Leonard Cheshire Foundation. It is the Editors' aim, however, to encourage free expression of ideas but they reserve the right to shorten, clarify or reject, at their discretion, material received for publication.

Publication dates are approximately early January, April, July and October. If you would like to ensure that you receive Cheshire Smile regularly, we should be glad to put your name on our mailing list. Last date for contributions for Winter issue 29th October.

*Front Cover:* Young Janet Misselbrook is a champ when it comes to racing in her wheelchair  
Picture by courtesy of Aldershot News

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# Editorial

After editing *Cheshire Smile* for more than one year, it is surprising to discover such a limited exchange of information and ideas between homes. Of more than 70 homes in the UK, only a dozen or so regularly send a contribution to *Cheshire Smile*, or bother to furnish us with a newsletter from which we may find an item of general interest from time to time. An item from one recent newsletter illustrates the lack of communication between homes. It posed the problem of whether it would be possible to provide meals for those visitors travelling long distances. (Why only for long distance visitors?). A minor problem, but one that must have been solved by some other home. It must be within someones capability to devise a means of catering for the casual visitor. As many of our homes are situated "out in the sticks", eating places are few and far between.

This edition includes a summary and comment on the CORAD report published earlier this year. The report puts forward a number of proposals, the chief one being that legislation should be made towards positive discrimination in favour of disabled people. The editors would welcome viewpoints from readers.

Inflation—friend of the disabled? Central government, local authorities and the voluntary services are each proclaiming the advent of comprehensive domiciliary care services for the disabled and elderly as the way forward in the foreseeable future. Recognising that it is far better and less costly to care for people in their own homes, rather than have to take people into residential care. The majority of disabled and elderly must surely welcome such a monumental change in the caring services. No longer will there be the fear of having to leave the place known as home or forced to go into residential care, away from familiar surroundings of close relatives and friends. How ironic it is that this change has been brought about as the result of economic stringencies due to worldwide inflation. Credit must also be given for the part played by the pioneers of the Crossroads Care Attendant Scheme in Derby. This pilot project demonstrated that such a programme was needed and that it was also economically good sense. Today there are many similar services in operation based on the principles first put forward by the Crossroads scheme. Many disabled people now have the opportunity to stay within the community than ever before; may the situation improve and more people have a chance to choose the way in which they want to live.

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## THE CHAIRMAN'S PAGE

Since my last note most homes have held their summer fete, open days etc. and having been to some of these I would like to take this opportunity of thanking all those who give so much of their time and effort to making a success of these occasions which are focal points for the local voluntary support on which we depend. It is, however, noticeable that local support groups are more in evidence at some homes' fetes than at others and we do strongly recommend any home who do not have support groups in neighbouring towns and villages to establish them since they form an important part of the Cheshire Homes organisation.

One of the memorable occasions since the last issue was the visit which my wife and I paid to the East Midland Regional Indoor Games Meeting held at St Peter's School, Huntingdon on 22 May. This event, which originated from residents' requests at a Regional Open Day, was paid for by the pupils and organised by the masters and pupils of this Comprehensive School and attended by residents and staff from Staunton Harold, Roecliffe, Seven Rivers, The Dukeries, Holme Lodge and Stonecroft. The games in which the residents participated consisted of scrabble, draughts, chess, dominoes, skittles, darts, whist and rummy and it was a thoroughly successful and enjoyable day and I hope that other Regions will follow this example. They will be able to obtain advice as to how to organise the day from Martin and Betty Roe who played a large part in organising this event.

*Peter Rawley*

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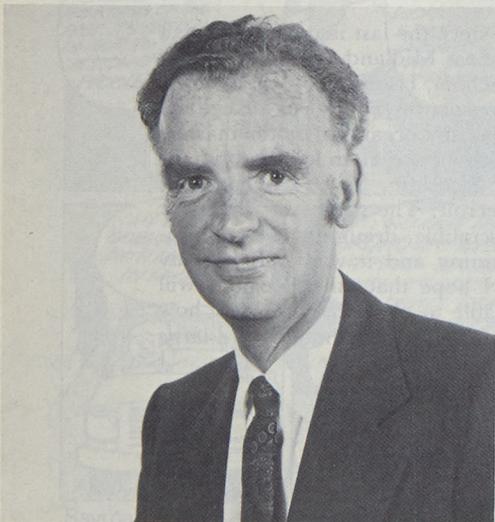
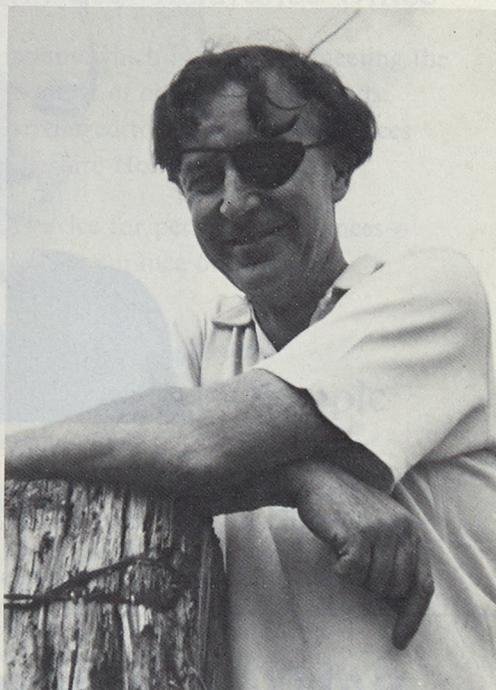
## Profiles

### Hampden Inskip

Hampden Inskip is 58. His father brought him up as an ardent supporter of Gloucestershire Cricket Club, Oliver Cromwell and the Reformation. (Now he retreats from Cromwell and finds peace in the lighted candle.) His mother had a radical and exciting mind which has been a great influence.

Education at Clifton College failed to remove a streak of the solitary (which now takes him away to a small farmhouse in Wales), but left reading and music as deep loves. War time service with the Scots Guards ended on a mountain top in Italy. While at King's College, Cambridge he married Ann, a companion from the earliest days of childhood memory. They have a daughter who lives with them in Hampshire and a married son, who is a land agent.

Hampden has practised as a barrister since 1949. He was Chairman of Le Court Management Committee from 1965-71, and apart from a two year gap has been a Trustee of the Foundation since 1965. At one time or another he has been Chairman of the Service Corps., Homes Planning, Mental Care and Family Support Service Committees, and is now Chairman of the Care Committee.



### Hamish Turner

Hamish Turner was born in Torquay in 1932 and educated at Allhallows School. After qualifying as a Solicitor he obtained a National Service Commission in the R.A.P.C. and was stationed in Cyprus and Jordan. He is involved in a number of local organisations in Torquay including being Director and Secretary of the local radio station, "Devonair". He first became involved in the work of the Cheshire Foundation when approached by Hampden Inskip in August, 1967 and founded the Steering Committee for Douglas House Cheshire Home at Brixham, being Chairman for the first ten years of the Steering Committee and then the Management Committee. He is the Deputy Coroner for Torbay and East Devon and amongst his recreational activities is involved in local operatic and dramatic societies.

# CORAD

## A summary of the report issued earlier this year

The Committee on Restrictions Against Disabled People (CORAD) was set up in January 1979 by the then Minister for the Disabled, the Rt. Hon. Alf Morris MP, with the following terms of reference:

“To consider the architectural and social barriers which may result in discrimination against disabled people and prevent them from making full use of facilities available to the general public; and to make recommendations.”

The Committee completed its work in December 1981 and the Chairman, Mr. Peter Large, who also chaired its predecessor body, the Silver Jubilee Committee on Improving Access for Disabled People, presented CORAD's report to Mr. Hugh Rossi MP, Minister of State for Social Security and the Disabled, early in the new year.

The Committee took as its initial working definition of discrimination against disabled people:

“the unjustifiable withholding, whether intentional or not, of some service, facility or opportunity from a disabled person because of that person's disability.”

Evidence was received from a host of individuals, from national organizations of and for disabled people and from their branches, from local groups of disabled people, and from other organizations and groups.

In addition to examples of all the well known problems that restrict the opportunities and choices of disabled people, the evidence brought to light instances of discrimination against disabled people in most aspects of life, including education, employment, entertainment, the transaction of domestic business and civic duties.

A review of statutory protection for disabled people in this country, arguments for and against anti-discrimination legislation and practice abroad, led the Committee to conclude that legislation is practicable and represents the best way of combatting discrimination. The Committee considered that it need not be expensive, that it would not antagonise public opinion if sensibly drafted, and that it would represent a major step forward in the progress to a truly humane society.

Direct, personal, and very hurtful and damaging experiences of discrimination were reported and the Committee concluded that the best way of combatting them was to make them illegal and allow individual disabled people access to the law to secure the right to equal treatment.

The Committee recommend legislation to make discrimination against disabled people illegal. Enforcement of the legislation should be through a regulatory body or Commission with powers to investigate, conciliate and if necessary take legal action on individual complaints, and with powers to recommend guidelines on the affirmative action that may be required to accommodate disabled people.

The Committee recognised that legislation would not obviate the need for other measures to combat discrimination: for example, ensuring that disabled people's interests are represented whenever possible by disabled people themselves. The Committee recognised that education and persuasion are essential concomitants of anti-discrimination legislation.

Some of the 38 measures recommended by the Committee to help combat discrimination were that the law should be restricted to discrimination against *disabled* people and should cover all areas where this occurs with particular reference to employment, education and transport. It was proposed that until legislation is enacted and until employers are genuinely taking the best candidates for a job, regardless of disability, any measure designed to improve employment opportunities for disabled people should include a quota or quotas element that is enforced.

The provisions of the Companies Act 1980 whereby firms employing more than 250 people are required to publish in their Directors' reports statements on their policy on the employment of disabled people should be extended to include all firms covered by the Disabled Persons (Employment) Act 1944.

The policy of managers of cinemas, theatres, dance halls and other places of entertainment should be changed to permit the admission of unaccompanied blind people and their guide-dogs and unaccompanied wheelchair-bound people.

In premises open to the public, no rules should be made restricting the admission of disabled people to certain times, days or seasons.

Places that are accessible to wheelchairs, or have special facilities for disabled people, should advertise the fact clearly, both externally and in all general publicity material. Legislation should be introduced to prohibit the establishment of a pedestrianised precinct or pedestrian shopping centre unless it includes

suitable arrangements to cater for disabled people.

Organizations purporting to represent the interests of disabled people, or providing services for them, should include a substantial proportion of disabled people on their own governing bodies and should be accountable as directly as possible to disabled people.

Copies of the full report can be obtained from DHSS Publications Unit, P.O. Box 21, Stanmore, Middlesex, HA7 1AY. Price £5.35.

## CORAD Press Conference

Report by William Simpson

Taking the Chair at the Press Conference called to mark the publication of the Report of the Committee on Restrictions Against Disabled People (CORAD), at the House of Commons on Monday 14th June 1982, The Right Honorable Jack Ashley, CH, MP, said that he regarded this Report as the most important this century for disabled people on a matter affecting all disabled people both in this country and abroad. It could well become known as the Large Report as it was so in every sense of the word and since also this would reflect the name of Mr. Peter Large, MBE who had chaired the Committee recommended by the Silver Jubilee Access Committee on improving access for disabled people.

Positive discrimination, said Mr. Ashley, was needed to help disabled people to arrive at the starting gate with an equal chance. Legislation to secure the right of equal treatment thereafter for disabled people was necessary and had been proved practical in the United States and Canada. There was plenty of evidence in the experience of disabled people of discrimination against them and he regretted the first expressed reactions of the Minister for the Disabled, Mr. Hugh Rossi, MP.

He told the Conference that he was asking for a ten minute rule debate in the House of Commons and expected that this would take place in about three weeks time and would be followed by a vote if the Bill was opposed. The debate would be useful among other things for showing where Members of Parliament stood in this matter. He himself was adamant that there are infringements of human rights taking place involving disabled people all the time

and this could best be dealt with by legislation.

Mr. John Hannam, MP, Chairman of the All Party Disablement Group, gave general support for the Report and The Right Honorable Alf Morris, MP, who had established the Committee when he was Minister for the Disabled, emphasised the international importance of the Report. He said that the terms of reference had been drafted to allow for a declaration that legislation was necessary. This was a controversial matter and a full debate in Parliament and throughout the country was necessary.

He also commented that 52 organisations had been sent copies of the Report, available to the public at £5.35 and printed by Her Majesty's Stationery Office, and hoped that there would be a further distribution not just to official, charity and other bodies concerned with disabled people but also to those such as the owners of cinemas who had it in their power to improve access and create a more enlightened attitude to disabled people.

There were well-known arguments against legislation, said Alf Morris, but these had been used against race relations and equal opportunity laws which were now in the Statute Book. "All we want is legislation to *get* equal opportunities for disabled people" he said.

Mr. Peter Large, MBE, dealt with a number of questions and also came out wholeheartedly in favour of legislation. In particular, answering a question relating to the fact that no less than three minority reports had been included, explained why he believed the dissenters were misguided in their expressed views.

## A Disabled Person's View of the CORAD Report

The CORAD report was published on the 26th May 1982, and is a report that should herald a warm and welcoming reception from people with disabilities, who care about the quality of life they lead and their future. The report's findings have far-reaching implications for the future and I am sure will be greeted with enthusiasm. It recommends both the enforcement of legal rights through the introduction of anti-discrimination legislation to protect disabled people against unnecessary and sometimes blatant discrimination, and also the improvement of public attitudes.

CORAD was set up with a two-fold task. Firstly it would continue the campaign to improve access for disabled people, which was initiated by its predecessor body, the Silver Jubilee Committee on Improving Access for Disabled People, whose findings were published in—"Can Disabled People Go Where You Go?"—in January 1979. And secondly, as its main objective, to investigate the more general question of the kind of "restrictions", and discriminations experienced by disabled people and attempt to explore and suggest some solutions.

It is fitting that this report should be submitted close on the tail of the International Year for Disabled People, which with all its glamour and publicity has now faded passively into the past and joined the archives of many other specially chosen causes. Perhaps, however, the substance of this report can rekindle some of the actions of that year as an essential step in improving the lives of disabled people. What better way can we head into the eighties with such appropriately pertinent intent.

Their terms of reference required them to consider the architectural and social barriers that may result in discrimination against disabled people. In order to meet these requirements they consciously sought out the views of disabled people, their companions, families and organisations. As a result of this they had over 700 submissions, not just from individuals who represented their members, which documented a wide variety of cases showing evidence of discrimination.

The CORAD Report is a thoroughly well-executed, scholarly and comprehensive document. More than that, unlike many reports of this kind, it is very readable and easily understandable to the lay-person. It is essential

reading to disabled people and their companions, who care about the lot of disabled people. It covers a wide variety of areas dealing with access to buildings and public transport, pedestrian precincts, employment, education, places of entertainment, fire and safety precautions, insurance as well as civic and social rights. It also looked at existing statutory provisions for the disabled and its effectiveness, and turned to the experience abroad where legislation has been in operation for some time.

CORAD quite clearly advocates and argues that anti-discrimination legislation should be introduced, and laws be enforced to hinder any prejudice, hostility or blatant discrimination occurring. It argues that the traditional methods of persuasion and changing attitudes through educational means has not been effective enough, and will not bring about the changes needed. It also shows that such methods are not cost-effective options. It favours that a commission similar to that of the Equal Opportunities and Racial Equality Commissions, looking into a feasible approach for disability legislation could be achieved at about the cost of £1 million, which compares favourably to £7.8 million, which is what the campaign to encourage people to wear seatbelts has cost. Surely such an economic saving at such financially stringent times, must be a forward-looking opportunity not to be missed. Other than this, of course, we must not forget the immense effect it would have on the social and humane side of life of disabled people. To deny the right of any individual on whatever basis, is to deny them of their humanity. With this kind of legislation it would restore dignity back into the lives of disabled people, and help them compete equally and naturally with their able-bodied peers in areas that they have not been able to take for granted. It should also help in developing the attitudes and awareness of the general public as well as protecting the rights of disabled people through positive discrimination. At the same time it is important to continue and extend any persuasion or educational pursuits in order to strengthen the growing, positive public awareness.

At the moment there is a legal framework existing to help disabled people obtain the services they need to help them in their own homes, with access to public buildings, in employment through the quota scheme, and so

on, but regrettably they are not enforced, hence the participation of disabled people in society suffers considerably. As strange as it may seem codes of practise supposedly there to help, can often curtail the freedom of action of people with disabilities. A classic example of this are the fire regulations that restrict the activities of disabled people in cinemas and theatres in particular, often to the point of being refused admission.

The report is full of startling accounts that depict many of the problems disabled people face everyday. Despite all this evidence, and even going along with much of its spirit, Mr. Hugh Rossi, the Minister for the Disabled, has placed government policy in the educational persuasion camps and rejected CORAD's recommendations for anti-discrimination legislation. He claims that legislation of this kind is costly and counter-productive in that it could lose public goodwill. He also states that it has not worked in the USA, which is quite absurd to anyone who knows anything about disability in that country. My own research there clearly revealed, both from disabled people themselves who highly proclaim

rights legislation, and rehabilitation professionals, that it does work. It is self-evident and publicly accepted that one of the main reasons which has contributed to the improvement of services and the quality of life and opportunity achieved for disabled people, has arisen as a direct result of the enforcement of Section 504 of the Rehabilitation Act, which has been suitably called the "Civil Rights Act for the Disabled". It has certainly not lost public support and goodwill.

Disabled people, their organisations and helpers have very definitely voiced strong support for legislation that works. Much of this has resulted from the benefits gained through the experience abroad, that it is most disheartening to see the Minister for the Disabled, refuting and ignoring these wishes. What we do now is up to us—we can either sit back and passively accept it, or get up and write to our MPs to help them realise the full importance and value of this report. In seeking their support we can actively express our concern for the future of all kinds of disabled people.

John Evans

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## RECORDBREAKER

### Cover Story

Young Janet Misselbrook is a champ when it comes to racing in her wheelchair. For at the mini games held in the summer at Stoke Mandeville Hospital, spina bifida sufferer Janet (11) not only came first in the 60-yard wheelchair dash for her age group, she also broke the national record.

Janet, a resident at Sandhurst's Harts Leap Cheshire Home for physically handicapped children, also took the record for throwing a heavy weight at a target.

Janet was shy about her success at the games but the head of Harts Leap, Mr. Vincent Cassidy, said the whole home was immensely proud of her achievements. "She really did extremely well. She's quite athletic and enjoys sport".

Janet, who attends The Avenue School in Reading, was accompanied at the games by another Harts Leap youngster who also participated in events. The games were for youngsters from all over the country aged 12 and



under and were run along the same lines as the national games the hospital holds for handicapped adults.

## Holidays On Board

Kingfisher II—the narrowboat for people in wheelchairs—was launched in May at Llangynidr, Powys. The first Kingfisher, designed and built so that a disabled person could enjoy an independent holiday with family and friends, has been such a success that the Spinal Injuries Association (SIA) commissioned and built Kingfisher II. Like her predecessor it (or is it she?) has lifts fore and aft, ramps from ship to shore and electronic steering, which enables a tetraplegic to don the Captain's hat and take charge of the boat. Kingfisher II is completely accessible from stem to stern, sleeps 5 comfortably and has extra wide doors which enable free access to the galley, toilet and shower. Kingfisher II is based at Gilwern in the Usk Valley, situated mid-way along the Monmouthshire and Brecon Canal.

Arrangements have been made with the SIA for residents of Cheshire Homes and their helpers to take family holidays on board the Kingfisher narrow boats. This is a result of a project which was started by members of the Cheshire Foundation Service Corps some years

ago. Amongst other things, they raised a substantial sum of money by holding a sponsored walk along the Pennine Way. This was used to open a "Barge Fund" with the object of providing holiday facilities for residents on board canal boats. However, it was eventually decided that ownership and management of their own boat would probably have been uneconomic, so the Trustees decided, with the agreement of those who had started the project, that the money in the fund should be used in order to co-operate with some other similar organisation providing holiday facilities for handicapped people on board narrow boats. Agreement was reached with the SIA, and the Trustees generously made up the sum which had been contributed to a total of £5,000.

Bookings from Cheshire Homes for all boats in the Kingfisher series will have the same priority as those from members of the SIA, including the SIA discount of 22½%. Applications and further information must be made to the Director of the Spinal Injuries Association, 5 Crowndale Road, London, NW1 1TU. Tel: 01-388-6840.



*Mr. Paul Bush, Treasurer of SIA, coming down ramp from Kingfisher II.  
To the left, Mr Dennis Clark, designer of the Kingfisher craft*

# Reflections on the Papal Visit

by Pam Bowden

The visit of the head of the Roman Catholic Church to Britain must have meant different things to different people.

His visit to the Queen, head of the Church of England, was of special significance to some. To others his pilgrimage to Canterbury, with the moving scene of both primates kneeling before the altar, demonstrated the move towards ecumenicism. Those who were baptised, confirmed or ordained must have experienced very deep emotions. To the young, "John Paul II—we love you" echoed wherever he went, indicated their feelings.

On May 28th came our long awaited visit to Southwark Cathedral. Eleven of us left at 9 o'clock in our ambulance—Eva. After a good

journey we arrived at our centre in Southwark. We were all in a festive mood which persisted throughout the morning. But there were other feelings too. What was the charisma of this man that seemed to reach through the ether and touch us? He was baptising, confirming and celebrating Mass. How was it that despite the vast congregation and the noise all around, one was conscious of quietness and a real feeling of worship?

At 2 o'clock we gathered together to walk in procession to the Cathedral. The sun was beating down and everyone was happy. Despite the carnival atmosphere one was again aware of an extra dimension. This time there was a feeling of genuine praise.



*Pope John Paul II reaches across to touch the hand of a member of the congregation during a service for the sick at St. George's Roman Catholic Cathedral, London*

*Photo by Press Association*

Inside the Cathedral all was peaceful and orderly. The wide jade green carpet running the length of the long aisle, contrasted with the white stone of the building. The sick and disabled had places on either side of the aisle and others were taken to a huge, specially prepared, precinct outside while the helpers stood a little further back. There was hymn singing in the background and, despite mounting excitement, the joint feelings of worship and praise persisted.

We were able to monitor the movements of the important visitor on television sets placed inconspicuously throughout the Cathedral. We saw his historic meeting with the Queen, following which we knew he would be on his way to us at last.

Loud cheers rang out from the crowds waiting outside the Cathedral. He was with us. His progress down the aisle was slow, with spontaneous applause as each group of people saw him. At last he came into view. A figure, smaller than I had expected, dressed simply in white, with the gentle smiling expression that was to become familiar to us. He made his way to his chair set in front of the high altar.

This must be a memory to keep for all time. The brilliant backdrop of stained glass—royal blue, crimson, gold and rose, and the Cardinals and Bishops in their peacock robes of red and purple. The altar, almost severe in its simplicity, flanked by two golden cherubim and standing there amidst it all, as yet, dressed only in white, the man we had all waited to see. The Pope, Head of the Vatican State, Head of the Roman Catholic Church and, to many, the direct descendent of the Apostle Peter, Christ's greatest representative on earth.

The service of the Blessing of the Sick began, and then for me the most poignant moment of all, the Pope made his way to the Lady Chapel and, oblivious of all the adulation around him, knelt bare headed in prayer. The moments ticked on and seemed an age, but he allowed nothing to interfere with his own personal

intercession. I began to understand where the power of this man lay.

The service continued and we saw our residents touched; blessed in the name of Jesus Christ. We watched their faces. We heard the strongly accented voice ring out telling us that it was not just our duty to care for the sick the old and the handicapped but it was our privilege. They are a vital part of the community. The sick were anointed and finally the service ended and we watched John Paul II until he finally disappeared from view.

Our journey back home was a happy one, each of us being anxious to share our feelings and experiences. TOTUS TUUS—All Yours—the motto of our Pope. What does it mean? All ours or All Gods? The answer seemed to come the next day at Wembley.

Saturday dawned bright and fair. This was the day when just two of us were going to Wembley Stadium and we were both secretly apprehensive. Wembley Stadium, one of the most secular of places. A place that had resounded with football cheers. How could it possibly become a place for worship? How could it not detract from our experiences of the day before?

We queued with the crowds. Ate lunch on the terraces, but as the 2000 priests filed into the arena the atmosphere began to change.

The Pope arrived and the crowd roared and clapped their approval. They broke into spontaneous singing—"He's got the whole world in his hands", but the man himself stood on that vast platform and pointed us, not to himself but to Jesus Christ. Behind him, stretching the full height of the stands, stood a stark, white, empty cross—the symbol of the Christian Church everywhere. This man believed not only in the death but in the resurrection of Christ and lived by the power of the Holy Spirit whom He had sent.

Our last glimpse was of the Pope leaving in the Papal conveyer through the players' entrance. The chant of the young people truly became ours

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“JOHN PAUL II—WE LOVE YOU”



## MOVE OVER MUM

The Editor,

I know that you have already received correspondence concerning the wisdom of publishing the above article. As a Senior Social Worker and as a "private individual" I am aware that reaction has ranged from mild disgust that the Editor should have published an article which might be regarded as "in bad taste" to angered frustration from relatives of people suffering from various "brain damage" injuries who feel that the description given of the patients visited is degrading or insulting. I shall therefore waste none of your time in either Condemning or Condoning, but I would like to make what I hope may be constructive comment:—

1. The article shows that "Carers" are under great stress in trying to "keep themselves afloat" while helping others. Obviously when the pressures mount too high, we (as in symptoms of bereavement) can either appear to be *too* maudlin in our approach or appear to be *too* facetious. Either attitude is likely to upset some of the numbers of relatives, friends and "supporters" . . . some will support the "humorous approach" some will prefer the "ever sentimental". ALL of us are likely, in stating our views, to overlook the pressure which has produced the attitude in the "carer".
2. The article cannot be "unprinted" (even if the Editor wished to make such a decision) so, as it has obviously provoked a great deal of feeling, let us use it as a useful exercise in seeing just how easy it is for us to let seemingly cheerful, well balanced, caring individuals become so tired that (as

is obvious from the article) far too much of their family life is sacrificed. In helping the relative not to become too much of a victim they (the Carers) expose themselves to the same danger of having, when desperately tired, to "compensate" for all the tragedy and emotional pressures which they strive to ease.

Let us ensure that no matter how badly needed they are, and how difficult it is to carry on without them, they are given frequent intervals for "Workshops" and "Supportive Tutorials" not only to help them re-charge their batteries and improve their skills, share their knowledge and impart new ideas, but also to "de-emotionalise" so that they can see both themselves and their clients and the relatives and friends of clients not over-emotionally but with detached, loving care and understanding.

3. If we, the members of the public, members of Voluntary Agencies, members of nursing and social work disciplines, editors of magazines, switchboard operators, doctors, community workers and others fail in our duty to "CARE FOR THE CARERS" then WE make casualties of our "front line" helpers.

Yours sincerely,  
Bambi Lewis, MIWO.

Dear Editors,

The article by Mrs. Jill Matthews, "Move Over Mum", the two letters of adverse comment and the editorial disclaimer that Mrs Matthews is not an employee of the Leonard Cheshire Foundation should give cause for reflection on the status and nature of Care Assistants, whether they are employed by the Foundation or not. The comments of Mrs. Matthews are truly shocking if made by a trained health worker. If they had been made by a relative or "friendly" neighbour then I, and probably others, would not have found them so surprising, even if still unwelcome.

In voluntary organisations both the providers and the recipients of care should have regard as to whether Care Assistants are "trained health workers" or substitute "relatives" or "friendly neighbours". The impli-

cations for standards, training and expectations of performance are important.

If Mrs. Matthews has drawn attention to this factor in caring then she will surely have been of service to more than the families she visits as a "Care Assistant".

Yours sincerely,  
Ralph Newton,

Dear Sir,  
May I have the opportunity to answer some of the criticisms incurred through my article "Move Over Mum".

As invited, I wrote an article which I hoped would illustrate the cross section of disabilities and situations I, as a care attendant, find myself in, and how it fits in with my daily life.

On reflection my choice of words could have been better, i.e. "aggravates the situation" instead of "deserves what she gets" perhaps?

The wife of the "mentally deranged" man, a situation I was in entirely at my own risk I may add, had precious little help until the care attendant scheme came on the scene. Her G.P. told her that the N.H.S. weren't baby-sitters and she "would have to live with it". The local psychiatric hospital, when approached for short term care so she could have a holiday stated that "there are no vacancies in the foreseeable future". The district nursing service have said that he's not their problem—and, even worse to my mind, it was suggested she didn't attend local relative support group meetings because she spoke her mind. What else are these meetings for if not to offload ones problems, may I ask?

I don't believe that the disabled or their caring relatives ask for sympathy, a pat on the back or a medal for fortitude—they do ask for constructive and practical help, something that is sadly lacking in many, many areas.

Not giving my full attention on the phone? Over the years our clients become part and parcel of our daily lives and we of theirs, and that particular client knows my husband well enough to share the joke. We are not a remote service which holds its clients at arms length, but friends; our family joys and problems are theirs and vice versa, so when I get a call at

home I reserve the right to be a wife and mother first and a care attendant second. How many other social/community workers give their home phone numbers and addresses as a matter of course, I wonder.

My critics wish to protect the disabled from such as me. Who are they to judge? Please let the clients choose who they have to help them. They are not forced to have any one particular attendant. Surprising as it may seem to some, in three and a half years, I've been involved in only one personality clash where my services were declined. I wasn't "common enough" for the lady!

In finishing I must add that the remarks about my superiors were most unfair—responsible for my training and work with a client they may be, but not for my feelings and thoughts. I shall continue as a care attendant as long as I enjoy the job and my services are welcomed *but* the day I have to become a "yes man" to a person solely because he/she is disabled is the day I finish.

Jill R. Matthews

Dear Editors,  
On the subject of contentious articles, as mentioned in letters in the summer issue of the Smile; it can be understood that some people were offended by the article from Mrs. Matthews, and that feeling offended, should write and complain, and even aim their response against the conveyor of the offending article. It may also be understandable if that conveyor subsequently refrains from publishing likely contentious articles. I suggest however, that if one wants the Smile to be aptly reflective of issues of especial importance and relevance to disabled people, the above course of action is *not* one the editorial board of the Smile should take. For the Smile is in the fortunate position of being able to present material for discussion and debate without necessarily having to side with any particular argument. Its interest lies primarily in providing a platform for an exchange of ideas, however irritating or offensive some might take these to be.

The interest of readers is not to condemn it for this, but rather to present more lucid counter-arguments to the views one has found disagreeable.

I therefore take this opportunity of applauding the Smile for publishing articles of contention—not out of a desire to generate animosity for its own sake, but from a conviction that if there are ideas or situations one wishes to praise or to criticise it can be through the medium of such a magazine as the Smile. While it may not yet be able to be ranked together with the very best of investigative journalism, to restrict its content to what does not “offend” may prove an impossibility.

Yours,  
M.F., Stafford

*It is regretted that distress was caused to the person referred to as “Alex” in the controversial article “Move Over Mum” in the spring issue of Cheshire Smile and for this the editors wish to apologize.*

The Editors,

I have just been reading the summer issue of Cheshire Smile. I have been receiving copies for a year or so now and firstly I would like to say what an interesting and high quality magazine I think it is. This issue is of particular interest to me, because at the moment I am working for a short while at Hydon Hill.

I do not want to run one of your articles down but I do want to comment on it. I have just read the article on “Rehabilitation at the Community Level”. Read it I have. Understand it, I did not. What a shame such a large and important part of the magazine should be written in such a way as to be above my comprehension and I am sure also above the comprehension of many residents. What a shame somebody didn’t break it down into day to day language. This would have not only made it more readable but would have shown more clearly the points it was trying to make.

Maybe we could have more of the articles like the one by Meshack Ayenza and fewer of the long worded, confusing and muddled articles.

To end on a brighter note, thank you for all the interesting news we receive from homes overseas. Hopefully this will lead to more homes in Britain twinning and open up a new world to some of our more “house-bound” residents.

Many thanks,  
Geoff Avlance

Dear Editor,

In our present world there are millions of disabled people, almost all of them leading a miserable life either by begging or in the hands of others which is, in my opinion, something unjust for they are capable of being productive and self-reliant provided that favourable conditions of getting education and training are created.

First of all, attention has to be given to the eradication of causes of disability. This is a matter of health care. Since most people are handicapped by the lack of timely medical treatment, endeavours must be made to put this right.

What is to be done for those already handicapped? Providing them with food, shelter and clothing is really essential, but not adequate. They must have the opportunity of getting education, and all educational establishments have to be accessible by the disabled as education is one of the decisive factors in one’s fate. For those who are unable to attend educational setups for various reasons training programmes in certain fields and employment must be provided. These are the only measures to ensure the fulfillment of their desire to live on the fruits of their labour and be self-reliant.

The attainment of the above mentioned goals undoubtedly demands arduous struggle. *Who is to wage the struggle?* Governments? Charity organizations? Or the disabled themselves? The activities of some governments and charity organizations to alleviate the problems are truly praiseworthy and lessons have to be drawn from their experience. However, no one can boldly assert the adequacy of their efforts. The problem is to be settled only when every inhabitant of the planet wholeheartedly realizes his responsibility and holds out a helping hand.

Produce artificial limbs and wheelchairs, build hospitals and schools; set up beneficial institutions instead of adding to the sufferings of mankind by producing unwanted destructive weapons. Say “yes” to our call.

Finally, I would like to emphasize the importance of agitation in this respect. This can easily be seen from the role played by the International Year of the Disabled. Agitation will be part of the struggle. Cheshire Smile also deserves gratitude for its contribution.

Sincerely yours,  
Tibebu Derbie.

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*If anyone in the homes has anything that they wish to sell or exchange the editors will be delighted to accept their small advertisement free of charge.*

## Small Advertisements

Taylor House Cheshire Hostel for Disabled Students invites applications for the academic year commencing September/October 1982 from young disabled wishing to undertake a course in Further or Higher Education at one of the Oxford educational establishments. Also from young disabled from abroad wishing to follow an English Language course. Holiday bookings available for July. Charge £103 per week. For further information contact: Taylor House, Headington, Oxford OX3 9BJ. Tel: (0865) 66322.

Le Court Cheshire Home now has a small offset printing press and can print your letterheadings, forms, A4 posters, etc. For further information apply to: Printing, Le Court, Greatham, Liss, Hants, GU33 6HL. Tel: (04207) 278 or 263.

Pencils, superb ball-pens, combs, diaries, bran tub toys, etc., gold stamped with Church name. Raise funds quickly—easily. Repeat orders assured. Details: NORTHERN NOVELTIES, Spencer House, Spring Gardens, Bradford, BD1 3HE.

Music from the soundtrack of two of the late Brian Line's films "I've got Wheels" and "It Could Happen to You" are available on record and can be obtained from Mrs. M. Symonds, Le Court, Greatham, Liss, Hants, GU33 6HL. Price £1.27 each. Proceeds to British Rheumatism and Arthritis Association.

FOR SALE — 1978 Dodge Ambulance. Petrol—2266 cc. Tail Lift. 6 Chairs or More+Attendants. Offers over £4,000 to Administrator, Mote House Cheshire Home, Maidstone. Telephone: 0622-37911/36366.

# IYDP 1981—Before and After

By Jean Blades, M.B.E., F.C.O.T.

“The thought of I.Y.D.P. made me sick and now it’s over I feel still sicker”, stated a well-known disabled lady.

“I.Y.D.P. has glossed over many cut-backs in services”, said another. “It has labelled disabled people as one homogeneous group. It has taught the general public to regard all disabled people as being a deprived section of the community”.

Fortunately not all disabled people have reacted in this way although it is understandable that an active, intelligent and involved person, who happens to have a disability, would dislike certain aspects of I.Y.D.P.—the attention given to disablement and being categorised with those who are in varying degrees incapable, mentally, physically, or both. One writer, who became a paraplegic in 1932, described the total lack of facilities at that time—a prognosis of some five years, no financial help, no special vehicles, no home helps, no access to public buildings or help with employment, and no special housing or aids. What a transformation!

There has been considerable discussion about the value of special efforts like “Disabled Week”, “Mental Handicap Week”, and now I.Y.D.P. There is no doubt whatsoever that the publicity obtained through I.Y.D.P. has made enormous impact. Even if there is some relapse of interest, a very large section of the public has an awareness and recognition of the problems, and better still, the achievements of disabled people hitherto unknown. Television has changed the world especially for deaf people. The microchip has produced life-saving hospital equipment and aids to communication and other activities enriching the quality of life of many severely disabled people.

In 1932 there were in Edinburgh some 53 voluntary organisations of which five were concerned with disabled people. Now the figures stand at over 1,000 voluntary organisations of which 44 are directly concerned with disability and many others share this concern in their general social interests. The growth of voluntary organisations has matched a similar development in rehabilitation services.

Even after the first World War, when rehabilitation was beginning to be recognised, our forefathers appreciated the need for voluntary help to augment the statutory services,

and the need of many people to give voluntary service. At the end of the second World War the politicians became convinced of some of the needs and the National Health Service Act, Employment Acts, and National Assistance Act began to open up opportunities for disabled people.

Thankfully it did not take another war to establish the Chronically Sick and Disabled Persons’ Act and the Social Work Acts. Local Authorities became involved and occupational therapists were faced with the dilemma—were we Health Service employees or Social Service employees? —and succeeded in keeping a foot in both camps.

There is no doubt that legislation resulted from pressure groups within the voluntary sector. A sad effect is that many disabled people who proved leaders in fighting for their fellows have become embittered and disillusioned in the process. Is this our fault? Are we, the public, hypocritical and complacent? Is it easier to give money than service? I.Y.D.P., while dramatically awakening the general public to the large numbers and varying needs of disabled people, has tended to highlight the “able” disabled and the “deprived” young disabled. The large majority of middle-aged or elderly disabled people require considerable encouragement to go out into public places and to take advantage of the goodwill engendered by I.Y.D.P. Their relatives and friends, yes and hospital and professional staff *must* expect and allow disabled people to take their own decisions; to be able to go wherever they want to go; and to participate in “normal” activities. At the same time “able” disabled people must recognise that there are quite a large number who require considerable support and special provisions will probably always be needed. Independence can be overdone and willingness to accept help takes courage.

The aims of I.Y.D.P., cannot be re-stated too often.

Increasing awareness of the needs, abilities and aspirations of disabled people;  
The participation, equality and integration of disabled people;  
The prevention of disability;  
More positive attitudes towards disabled people.

A considerable amount can be done to prevent disability. The obvious measures of social and medical improvements are already achieving results. Stopping smoking, accident prevention both on the roads and in the home are activities we can all encourage. The Occupational Therapist can suggest many aids which are themselves aids to safety. Wrong sizes of walking aids and wheelchairs can aggravate disability. Some therapists are guilty of saying "These are not our responsibility".

Improving attitudes towards disabled people means information and understanding. One of the excellent activities of I.Y.D.P. has been the involvement of school-children throughout the country, not simply fund raising but in projects of all kinds from access surveys, designing gardens for disabled people and writing essays, to making aids and sophisticated vehicles.

Despite all the publicity, psychiatric illness is still confused with mental handicap. The public cannot be expected to recognise after one year's campaign the difference between the staggering of the drunk man and the man who has multiple sclerosis, epilepsy, or the lesser known Huntington's chorea. I.Y.D.P. has highlighted the massive amount of publicity needed to make any impact.

Long-term hospitals still have patients who could live in the community but, would they be happier—would they be lonelier? Many disabled people do boring jobs, but would they welcome responsibility? Disabled people are expected to join in competitive sport. Do many of the general public wish to compete in sport? Do we wish to change things because of

our ideals? Have we fallen into the trap of disregarding the wishes of the disabled person?

Legislation has been strengthened but there is a need for a drastic revision of the jungle of welfare benefits. One of the major disabilities—stress—is caused by the very legislation created to remove anxiety. Many are actually deterred from seeking employment because of the financial implications.

Problems of access and transport have been severe deterrents to the integration of disabled people into the community. Voluntary organisations share vehicles. Some areas have "dial-a-cab" schemes. What are statutory services offering? There is a vital need for co-ordination of transport services between the Health Service and the local authority departments of Transport, Social Work and Education.

Lack of finance and fear of trade union reaction are the apparent answers to every development. I.Y.D.P. has shown that incredible sums of money can be raised for worthy causes. The trade unions have also given both financial and practical help during I.Y.D.P.

Occupational Therapists, like many of their kindred professions, have a great opportunity to ensure that resources are fully used and that the aims of I.Y.D.P. are met. Continuous effort and involvement is needed. Special "Days" and "Weeks" must continue to provide focal concentrated efforts. I.Y.D.P. has served as a stimulus to the whole nation and many countries round the world. It is up to each of us to keep up the momentum and exploit it to the full.

*(With acknowledgements to The British Journal of Occupational Therapy, May 1982)*

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# Around the Homes

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## CHILTERN

### Visit by Mrs. Mugabe

Mrs. Mugabe, wife of the Prime Minister of Zimbabwe, visited The Chiltern Cheshire Home, Gerrards Cross, on Tuesday, June 1st, and spent a delightful, informal time with the residents.

She was met by Group Captain Leonard Cheshire, the Founder, Mr. Michael Palmer, International Director, Mr. Peter Hughes, Head of Home, and Mrs. Shirley Hughes, Head of Care.

Mrs. Mugabe was given a tour of the home, which has nineteen residents, by Jenny Connell, who has been at the home for a year, and before that, was a resident at Cann House.

At the end of her visit, Cynthia Taplin, a resident for ten years, showed Mrs. Mugabe the beautiful musical roundabouts with different figures she makes from a combination of needlework and paper. Mrs. Mugabe was so interested in them that Cynthia decided to present her with a model. Mrs. Mugabe was completely delighted.

Mrs. Mugabe has a great interest in Cheshire Homes because she opened the first Cheshire Home to be established in Harare, Zimbabwe, on May 14th this year. A further Cheshire Home for handicapped children

between the ages of 5 and 12 years will be opened at Westwood, Harare, Zimbabwe later this month.

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## MARSKÉ HALL

### One Final Build-up

Busy days lie a little way ahead for our Cheshire Home. The time is approaching for a major extension to the old hall, with the prime object of providing single rooms for those who want them. This step is in accord with the aims of the Leonard Cheshire Foundation, not to mention the wishes of some (though not all) of our own residents.

Already a sub-committee is wrestling with the best ways and means of achieving this end, and to incorporate in its plans several other improvements. For this is most likely to be the scheme to end all schemes, bringing Marske Hall to its final size and shape. Further alterations would most probably not be acceptable to the authorities, even if they made sense to us.

Although it is far too early to go into any detail, it can be said that the present intention is to reduce the sleeping accommodation on the first floor to six double rooms, and to increase the existing single rooms at ground level from 4 to 17. This would give a total complement of 29.

Financially, it is good to report that the home is in a strong position to meet much of the cost of these ambitious ideas. That is partly due to the generous response to the International Year of Disabled People. All the same it is greatly to be hoped that there will be no let-up in the usual volume of help which the home enjoys. Our IYDP goes on!



*Mrs. Mugabe, wife of the Prime Minister of Zimbabwe, talking to the Founder and Mr. Peter Hughes, Head of Home, during her visit to Chiltern Cheshire Home*

## ARNOLD HOUSE

When I first became a resident at Arnold House in December 1976 the home had only been open 12 months. We were a family of 10 in those days. In 1977 it was decided to extend the home increasing our number by 10. The extension is now finished, and we have 14 single rooms and 3 double, a physio room, hobbies room and 2 new bathrooms. Our beautiful garden is back to its original state and is a great credit to our gardener, John.

Four times a year the residents organise coffee mornings. These are usually successful, the proceeds of which go into the residents' Welfare Fund, or we buy something specific that the home or the residents need. We hold an annual fete at the beginning of September, which is an all day affair. The last 2 years we have also had a barbecue, but this year we are planning a Cockney evening. The proceeds from these go to our new extension fund. We arrange several outings during the summer months as well as going to the Festival Hall and to Wembley Ice Show. Two years ago we had the honour of having the Group Captain to lunch. We all have very pleasant memories of this great occasion.

Pat Baker

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## HEATHERLEY

### Our 21st Birthday

by *Maureen Stanhope*

I certainly cannot remember the earliest days of this edifice having only been here close on 10 years but it has provided me with a home and friends. As a multiple sclerosis sufferer it would have been impossible for me to have a wide range of friends and interests confined by my chair at home. Heatherley Cheshire Home has given me the opportunity to get out and about, meet people outside and welcome new friends to visit.

May 1st was our 21st Birthday and coincided with the southern region Family Day. We celebrated it within our own environment with friends and well wishers. We began in the usual British way with sherry followed by an

excellent cold buffet. The afternoon consisted of various games from crib to dominoes to a wheelchair slalom. An exhibition of handicraft from all the homes was displayed in the Craft Room. Afternoon tea was brightened with a cake decorated with a red feather.

The weather was reasonably kind to us for it remained fine, but there was a cool breeze. We also held a fancy dress competition which showed some originality, as did the entertainment.

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## HOVENDEN HOUSE

### 25th Anniversary Celebrations

Sir Henry Marking, Vice Chairman of the Foundation, gave an address at the 25th anniversary celebrations held at the home in June. He referred to the success of the home which had only come about by the hard work and dedication of others. He was presented with a paperweight engraved with a picture of the home by Mr. Stephen Smith, a resident since 1957. Mr. Leslie Clarke, chairman of the management committee, thanked the support groups who had enabled the home to carry on, and paid tribute to Leonard Cheshire. He said how pleasing it was to have present two of the original members of the initial management committee, Mrs. Marjorie Clark and Mr. Willis White. Also present were Mr. G. A. "Dick" Worth who presented Hovenden House to the Cheshire Foundation on behalf of the Worth family in 1957. He and his wife had travelled from Melton Mowbray for the celebration.

A short service was conducted jointly by Father Patrick Mulligan of Holbeach and the Rev. Ronald Amis before Sir Henry planted a tree to mark the Silver Jubilee. The home's honorary fund-raiser, Major Colin Mole, said the Silver Jubilee appeal, launched to pay off an amount outstanding for the single-room extension scheme, now stood at £3,000 and he gave special thanks to all support groups and individual supporters. Mrs. Marjorie Clark was presented with a bouquet by resident Miss Pat Hensby, and the evening ended with a sherry party.



Photo: Lincs Free Press

### Group Captain Drops In

The Group Captain paid an unexpected visit to Hovenden House and chatted to residents and staff. Mr. Peter Barre, Head of Home, showed him around and the Group Captain joined in the birthday celebrations of one of the residents, Miss Brenda Steward. He also met Mr. Joseph Eyre, a rear gunner in a Lancashire Bomber at the time Leonard Cheshire rose to fame as leader of the famous Dambuster squadron. Before he left he autographed a copy of "The Story of Mitchell—Designer of the Spitfire", belonging to Mr. Tony Dennis.

### COTSWOLD HOME

The wife of an R.A.F. officer at Quedgeley has for some time been doing voluntary nursing for us on Thursday mornings, as well as running a ballet school. £200 has been raised through her efforts at several concerts given by the pupils of the school. Two footstools, two bath seats and a dressing trolley have been purchased with this. Thank you Jane.

How sad we were to learn of the fatal accident to the husband of Kay Tarr. She has been associated with the home for a number of years and recently made a generous contribution towards the cost of installing a much

needed shower unit as a memorial to her husband. The home has also recently benefited in the will of a local lady and this money will be used to install electrically operated doors to our lounge, a feature which will be appreciated by our residents.

Our new wheelchair bus has just come into service, in time for the summer outings. It will also be used to take residents on their exchange holidays to other homes. In May, we were guests of the Royal Air Force, Innsworth, at their air show at Staverton Airport. It is always thrilling to see various types of aircraft, including a Lancaster, the aeroplane with which "G.C." was associated in World War II. A new feature of the show was spot landings by parachutists who descended through thick black smoke to land exactly on target. The pièce de résistance was the usual daring flights by the Red Arrows formation team.

Bob Hughes

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### ALNE HALL

His Holiness the Pope coming to York caused great excitement, and a party of our residents paid a visit to the Knavesmire the evening before and saw the Podium, Corrals and the area for V.I.P.'s. The rest of us watched avidly on the television. Anyone wishing to go into York during this time had to have a special pass.

At the moment we are operating a Community Enterprise Programme under the auspices of the Manpower Services Commission, whereby we are getting work done which otherwise we could not afford at the present. They have rebuilt the boundary wall which has been leaning dangerously for some years. The outside of the building has been repainted and we are having work done in the grounds to make for easier maintenance in the future.

I would like to support the Spofforth Home's idea of a house flag on the principle that the Red Cross Flag is usually flown over Red Cross premises.

David and Jean Dunn

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## MAYFIELD HOUSE

No one at Mayfield House seems to have written anything in the Cheshire Smile for years. We have at last wakened up with a start and decided that we should at least try to pull our weight with the only other Cheshire Home in Scotland and endeavour to contribute something.

During the past we have been far from inactive, but at present are undergoing a change. A new extension is to be built, starting late July, which will give us 14 single and one double room.

These past few months have brought many changes here, and sadly the death of two Residents, Herbert Mitchell and Betty Horner. Both suffered uncomplainingly and we were grateful that both died here and not in hospital.

We have appointed a new Committee who have been busy organising entertainments—Musical Evenings, Bingo, Domino Competitions etc. and we have had several outings, including our annual visit to the Royal Highland Show. Quite the most outstanding event has been our bus run to the Lake District in May; a round journey of over 400 miles, quite the longest we have ever attempted. We took the opportunity to pay a visit to the Home at Lake Windermere, who gave us a great reception and, of course, a very welcome cup of tea. It was a tired but happy party who arrived home well after midnight after a day which one and all agreed would be long remembered. In June, we held a Jumble Sale and despite inclement weather which affected the attendance we raised a useful sum for our Fabric Fund.

Our Annual Barbecue was not only affected by a wild windy night but most unfortunately clashed with the Scotland v Brazil match in the World Cup Series! The sittingroom was crowded with enthusiastic Scotland supporters! In spite of such adverse circumstances everybody enjoyed the evening and we even made a profit.

by Jack Taylor, Betty Cockburn et al

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## HOLME LODGE

Holme Lodge recently celebrated its 21st Birthday and a party was held to mark the occasion. The photograph shows Miss Nora Clifton, one of the first residents of the home, cutting the cake with VIP guests looking on.

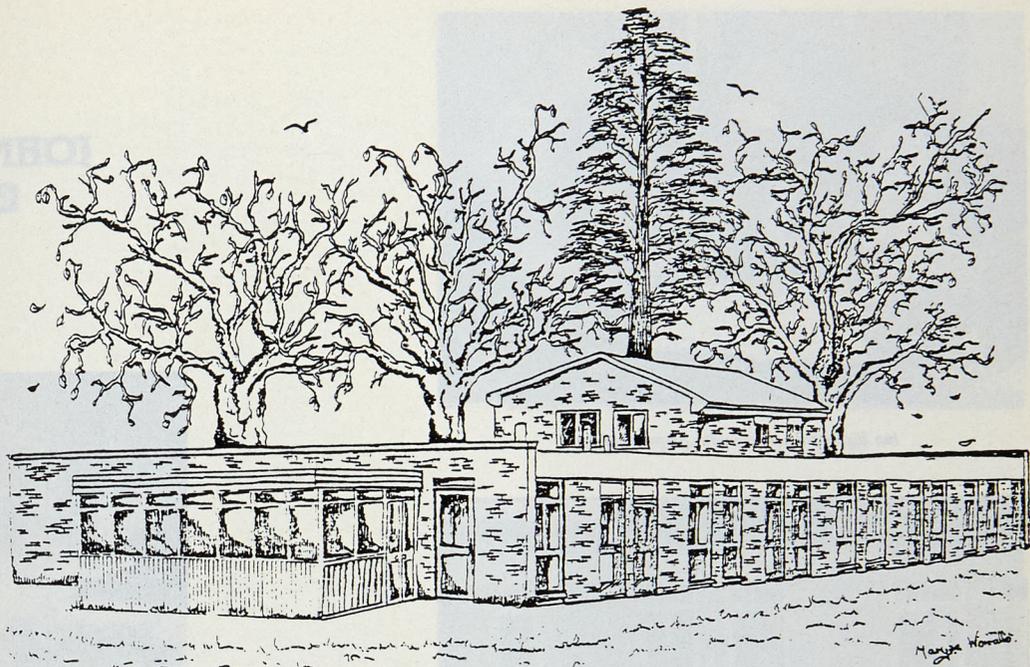


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## EITHINOG

Although IYDP officially ended on December 31st 1981 you wouldn't have thought so in this home. On January 1st we took delivery of our new £14,000 ambulance with room for seven or eight wheelchairs plus stereo radio and cassettes and microphone. In February we started a lodge of the R.A.O.B.s in the home itself (is this a "first") named after a former resident, i.e. "The Ken Rowlands Lodge", with five active members being residents, five more staff and about a dozen others. During its short life we have already been able to help many other charities. Later in the year we started our own "dark room" to develop and enlarge photographs. This work being carried out by resident George Shephard and Frank Watkinson, staff. Recently a C.B. radio has been installed after being given to the home by the local Muscular Dystrophy Group. The Local Spastics Society also gave us a video recorder, and a video camera which we share with two other disabled organizations. So it's been quite an eventful year so far.

Tony Brown



## Focus . . . John Masefield Cheshire Home

By Harold Morel

This story really begins way back at the end of February 1969 when a small group of men and women from Abingdon—a bank manager, an architect, a solicitor, an accountant, an interior designer, a minutes secretary, and an artist—decided to call a public meeting to discuss the introduction of a Cheshire Home into (what then was) their North Berkshire area. From this winter's night meeting a small steering committee of enthusiasts was formed, and as a direct result of an introductory article in a local newspaper, they were invited to hold a fund-raising garden party in the grounds of "Grey Walls", formerly the home of the Cheshire family. Following the financial success of this venture (plus the many other fund-raising functions which had been taking place all the time), the committee decided that the last home of the Poet Laureate John

Edward Masefield—a house which had been standing empty and neglected for a number of years—would be eminently suitable for conversion into a Cheshire Home.

By June 1971 the builders had moved in and had made a start on the conversion. In fact the opening was planned for the early spring of 1972. But, disaster struck! After only a matter of days, a huge fire was accidentally started and the old house was virtually gutted—it was so badly damaged that eventually it had to be completely demolished.

The disappointment of all those men and women who had been concerned must have been very great . . . but, everyone rallied to help—the supporters carried on with their fund-raising efforts with renewed determination, and by Christmas 1972 today's little purpose-built home started to appear on the



*Ian discussing menu with member of staff*



*Harold Morel, taking time off from writing*



*Lew Gorman plays Country style*

## JOHN MAS CHESH HOM

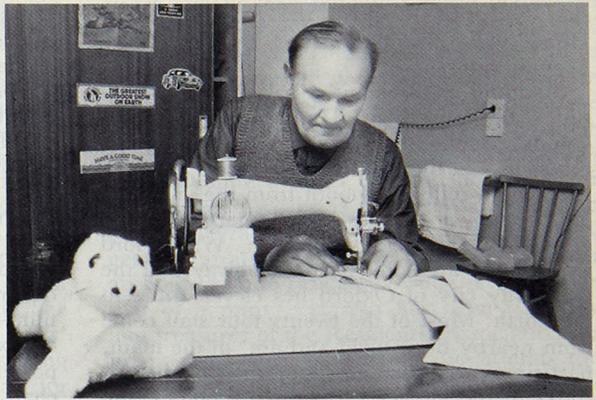


*Sarah Moss*

MASEFIELD  
ESHIRE  
HOME



rah Mosely



"King of the soft toy" Owen Stanley



Monty going for a drive



Beryl Walden in the office with Mary Copsey

site. Four months later the John Masefield Home was officially opened by the Group Captain himself.

Standing in three-and-a-half acres of beautiful but overgrown Thames-side grounds, Cheshire Home number sixty-one manages to retain its "in the country" character although it is only a mile or so both from the village of Dorchester-on-Thames and the large housing estate of Berinsfield. Abingdon, Wallingford and Didcot are some six miles away and the university city of Oxford lies eleven miles to the north. Most of the twenty-four staff come from nearby Berinsfield and are, in the main, part-time care assistants (not forgetting the two cooks in the kitchen!) Like many homes, the care staff is augmented at somewhat irregular intervals by CSV's and Police Force cadets.

The staffing policy of employing the minimum of full-timers is quite a deliberate one: first of all, explains the Head of Home, it provides for a greater variety of people working in the home every day and, not least important by any means, it is advantageous to me in that it offers greater "coverage" during staff shortages and sickness, etc.

The building itself is a modern, single-storey one (at least, as far as residents are concerned it is—all their accommodation is on the ground floor; however the Head of Home, Mary Copey, and her husband, live in a self-contained flat on an upper floor). This means that all the residents' bed/sitting rooms open out directly into the grounds via french windows . . . an arrangement which has the full approval of the Fire Prevention Officer.

It is hoped that work on building a small extension will be started in the not too distant future; it is primarily intended that this extra building will provide the privacy of a single room for one of the two men now having to share, but in addition, will also include a common room. This will be connected directly to the dining room in order that jumble sales and similar functions will be able to "spill over" from one room to the other. It is also planned to incorporate a small "kitchen corner"—complete with cooker—to enable residents to cook an occasional meal for their friends. But the new wing will *not* provide accommodation for additional residents; there was a great deal of discussion—both at management and resident level—before this plan was finally decided upon . . . everyone felt that the present six women—eight men ratio

was just about right, and any increase would destroy the intimate family atmosphere of the home.

Former Bank Manager, Leslie T. Montgomerie (it was quite inevitable that he should acquire the affectionate nickname of "Monty") has been a resident at the home since the end of 1974, and has served as chairman of the Residents' Association for over five years. As can be seen from the photograph, his wife enjoys the chance of driving her husband around in the homes' mini-van to show him a few of the beauty spots of Oxfordshire. A number of Cheshire Homes possess one of these very useful "one wheel-chair only" vehicles as (possibly) a second string to their minibus fleet. They are extremely economical to run and light to handle. "Monty" enthuses that the John Masefield mini-van has widened his horizons tremendously . . . "I can sit back in the comfort of my own chair, high enough to have a perfect grandstand view of the countryside".

Sarah Moseley, shown on her powered trike, suffered a major stroke three years ago. This "new toy" (since May of this year) has given her a completely new outlook on life and has brought a sparkle to her eyes when she thinks of that little extra bit of independence. As well as her weekly trips to the hairdresser, regular outings to Dorchester Abbey and down the road for a pub lunch once or twice a week, she also attends lip-reading classes in Witney. So we think we can understand Sarah when she says she has begun to live again!

Just before the last war Beryl Walden had started her commercial career in the County Fire Office at Northampton . . . a fully trained typist, eager to do well in her new job. But, after only a few months, Beryl was dismayed at having to depend more and more on aids to help her balance. Finally, after twelve difficult months both at the office and at home, she had to resort to a wheelchair. After a long period of virtual inactivity at her home, she finally moved into an old folks' home in Northampton, then in 1979 she was "absolutely delighted and thrilled" to be offered Room Five at Burcot. She bought her typewriter at the end of 1981 and is seen in the photograph with Mary Copey, the Head of Home, who knows she can depend on Beryl to type all the "thank you" letters and the weekly menu, prepared by one of the residents.

In spite of many physical handicaps, Ian

(shown in the photograph discussing the weekly menu with Marjorie, a senior member of the care staff) would be the first to agree that he is "game for just above everything and anything". A spastic of forty-seven, who was one of the first residents to come to Burcot, Ian's recent activities have included helicopter trips; donkey and cart driving; weekly dips in an Oxford swimming pool, and a twenty hour journey to Lourdes by Jumbulance. What would he like to do next? A little difficult to arrange—we would doubt whether even Jimmy Savile could "fix it"—Ian would like to ride on the footplate of a high speed train!

The acquisition of an electric sewing machine certainly was a red letter day for Owen Stanley, Burcot's undisputed "King of the Soft Toy". He invested in it a few months ago simply so that he could increase his supply to the gift shop in Wallingford who handle the retailing for him . . . and they are delighted to report that original "Stanley's" continue to sell like hot cakes! But soft toy making still takes second place in his leisure-time life to his annual trip to Canada to visit his sister and her family (reported in the winter 1981 issue). Owen's first venture on to Canadian soil coincided with the start of the Foundation's International Week celebrations last June, and he was so thrilled with the chance of meeting up with a sister he hadn't seen for over thirty years, that he's been saving hard ever since he got back, quite determined to return for a longer break this year.

Harold Morel (the author of this article) arrived at The John Masefield Home in January 1975. After holidaying at Burcot on three separate occasions he obtained a permanent transfer from the home in the West Country where he had lived for five years. He insists that he's been very lucky; although his condition of MS was diagnosed over thirty

years ago he has remained fairly active—so much so, that he was able to run a DHSS mini for over eight years. His mini enabled him to visit no fewer than fourteen other Cheshire Homes . . . "which I consider has given me a very interesting and useful insight into some of the different approaches to residential living". Despite the fact that he "lost" his car over a year ago, he is absolutely delighted to own a Meyra powered chair . . . "it certainly gets me around, but a top speed of 4.6 miles an hour is quite ridiculous when set alongside that of a mini". Harold has been secretary and treasurer of the Residents' Association for many years and, ex officio, also attends the monthly meetings of the Management Committee. Another pretty important Easter to September job has fallen his way—mowing the three-and-a-half acres of grass round the home. ("My most profound thanks to the man who invented the tractor-mower!")

If Johnny Cash and George Hamilton IV turn you on you won't go far wrong if you mosey down to li'l ole Burcot on any day of the week and ask for Lew Gorman. Before the onset of MS seven years ago, Lew was becoming quite well known playing regular gigs in the pubs and clubs around Aldershot and Guildford as the lead guitar with "The Kansas City Sound". When did he first take an interest in the Country and Western style of music?—"Way back in 1963 when I bought my ten-gallon Stetson from Dunn's in Aldershot". At that time he'd already been playing drums for about eight years, so he was able to take another instrument in his stride. Lew adds that he can hardly wait for the new common room to be built—"Somewhere I can go to turn on my speakers at full blast . . . really enjoy myself without annoying anyone else".

## ABILITY, NOT DISABILITY

### The key to the success of Remploy's Medical Products Division

Remploy was launched after the second world war to provide employment for disabled people and to compete with its products on an open market. These two objectives were seen by many industrialists as conflicting. How, they reasoned could labour intensiveness be the goal when the company needed to keep its overheads down to compete on price against competitors employing able bodied people, and frequently only a minimum of those.

Despite the headshaking of the pundits, Remploy flourished not only in the UK but on a world-wide basis. Its Medical Products Division was to be one of the brightest feathers in the Remploy cap. Since those early days when the range of its products was limited to crutches from its single factory, the Medical Products Division has expanded to the point where it has seven factories throughout the UK. Its range of products is considered one of the most comprehensive available and the Division now exports worldwide.

The Division's factories are placed in areas where there is a large number of disabled people requiring employment. Any registered Section Two disabled person may apply for an advertised position at a local factory via the local Disabled Resettlement Officer and, if considered suitable for the post available, will undergo a three month trial period during which time training is given on the various machines in the allocated section. Disabled workers must be able to produce at, after training, not less than one third of the rate of a fit person. This, however, is a minimum requirement and many are capable of producing at a far higher rate.

Disabilities among employees range from paraplegics to chest and lung diseases and therefore the age bracket spans school leavers to retirement. In keeping with Company policy, the Division provides real work and not diversionary occupation. The disabled know—in common with all Remploy personnel—that their products are competing on the world's open markets. They are also aware that what they are producing are medical aids designed to help other, temporarily or permanently, disabled people.

Although treated as able bodied workers where output is concerned, facilities in the factories always take the employees into consideration. A doctor visits the factories weekly and all rest rooms are well equipped. Most of the Division's factories have canteens on the premises and social functions with outings and events are encouraged and well supported.

As with other commercial companies there are plenty of opportunities for real advancement for the ambitious. It is possible for employees to be trained in different sections of the factory and the way is open for promotion through section supervisor and factory management to area management and the Company board. The Division recognises and rewards ability and effort and all employees are encouraged to aim for higher positions within the Division.

The range of medical products from the Division is almost endless. In 1979, it was recognised that advances in medical science were making ever increasing demands on companies in the medical products field, and that if Remploy was to play a part in keeping the UK to the forefront of worldwide competition, it would be necessary to set up a unit wholly dedicated to researching and designing new products. As a result the Division opened a Research and Design Centre which is funded and staffed autonomously by the Division. Originally housed in the old Bristol factory, the unit expanded into larger premises when the factory recently moved to its new complex. The expansion gives the unit the facilities to cope with the constant need to review existing ranges and contribute to the innovatory thinking that has led to the Medical Products Division being recognised as a world leader.

To assist with this aim, and to keep in touch with changing needs, the Centre's staff hold regular meetings with leading medical specialists, varied according to the products under review, and with the Division's senior orthotists. At these meetings, held at the headquarters of the R & D unit in Bristol, prototypes are evaluated, hospital test reports analysed and new ideas propagated from the drawing boards. Each and every prototype is

tested in hospitals across the country, which are invited to participate in the programme and report to the unit their findings and recommendations. In addition to this, anyone in any aspect of work linked to the medical product field is invited to contact the unit with ideas for new products or to seek assistance or advice.

The Division employs 42 orthotists in all, and is responsible for training them. Each is allocated to an area and acts as a contact between the local factory and the patients. The orthotists hold regular clinics at the local hospitals where they measure, fit and advise the patients on their appliances. This places them in an ideal position to inform the R & D Centre of the needs of the handicapped and rehabilitation patient. Considered a very important part of the team, all orthotists attend regular meetings with each other and with the senior management of the Division.

Some of the latest improvements to emerge from the R & D Centre in the past few months are a standing frame, still undergoing tests, which aims to be lighter in weight and lower in price than existing frames; a thigh abductor for scissor gait children; a comprehensive range of hand splints and a lightweight protective helmet with removable foam padding. All these products were developed by the Centre in conjunction with medical staff whose demands could not be fulfilled by existing products. It was through close co-operation with physiotherapists, that the thigh abductor was evolved. A simple but effective design comprising elastic thigh retaining straps with touch and close fastenings and a plastic leg separation joint, for example, it was tested by

physiotherapists in various hospitals throughout the country before being added to the Division's product ranges.

Similar co-operation resulted in the protective helmet being produced, especially for use by epileptics. There was a need for a padding to be found that could line a helmet and absorb maximum shock without bounding. The Centre researched existing padding and eventually did tests on a low hysteresis, low resilience, open cell padding first used by the NASA space scientists in astronauts' headgear. The advantages of the padding were that it was lightweight, became firmer when subjected to impact, and absorbed up to 90 per cent of impact shock and vibrations. Hospitals across the country have recently been invited by the Centre to expand the testing programme for the helmet.

The principle of teamwork extends into the Division's seven factories, each of which has a high degree of autonomy and local pride while working together to interchange ideas that might contribute to the cost-effectiveness of the Division as a whole.

The introduction of commercial expertise is further benefiting the Division's product development programme. Last autumn, specialist knowledge from the field of fashion shoes was added to the Medical Products Division's team. As a result it was recognised that, in pursuit of improved function, the importance of visual appeal in orthopaedic footwear and its effect on the patient had been overlooked. A new approach to the whole subject of orthopaedic footwear has now been adopted, with the emphasis on style backed up with comfort and support. The first style to emerge from



this briefing was the Eagle boot. Suitable for both adults and children, it succeeds in being barely discernible from boots found every day in shoe shops, comes in a choice of tan or deep red, can still be adapted to take surgical requirements, and allows open-toe access.

Following the Eagle boot came the Soft Shoes. Again design and practicality were the aims but this time it was decided to make a shoe suitable for, among others, elderly house-bound and geriatric people. The resulting shoes are attractive, supportive, slip-proof and available in either a lace-up or touch and close fastening. Made of water resistant material they are repairable and roomy enough to accommodate dressings.

Wherever one turns in the medical product field there is evidence of constant probing into the future by this Remploy Division. Late in 1981, the Division opened its first purpose-built factory in Medway, Kent. Having done extensive research into the uses and advantages of the material silicone in the field of medical products, the Division designed and built Europe's first silicone unit within the factory. Until that point, all silicone products were imported from the United States which had proved a time consuming and costly business for specialists. The unit, incorporated a contaminant-free room and some of the most modern machinery available, much of which was designed by the Division's technical engineer and made to his specification.

The plant's first project was an external breast prosthesis to be used following a mastectomy operation. Made of pure silicone throughout, the "Carefree" has been accepted to the point where it is now the only silicone prosthesis to be made available through the DHSS. Just as important, the "Carefree" can be worn in any make of brassiere thereby allowing the patient the freedom to wear her own pretty underwear to enhance her feminin-

ity—especially important following a mastectomy operation.

Remploy goes to great lengths to study and meet the requirements of individual patients. Many patients do not realise however that they can do much themselves. They can, by way of reading and asking, find out far more about the range of aids, equipment and prostheses available for their particular condition. They can ask their consultant about the availability of a particular item. It may not always be possible for the patients' requirements to be met. Items may be out of stock or the clinic may not be aware of the availability of certain products. All too often, patients take what is prescribed or fitted without question, even though in some cases it may not be entirely comfortable or suitable. However, unless the patient informs the consultant of this and requests an alternative, the situation can persist for months and even years. It is also worth remembering that it is never too late to try another appliance or product. It helps the consultant in addition to the patient if the patients express opinions on the equipment and aids they have been using. Even if the patient is basically happy with the appliance there is always a possibility that an improved model has been made which could add to the comfort.

The Medical Products Division of Remploy has come a long way since its launch in 1946. It continues to offer employment to increasing numbers of disabled people, with the security of working within a Division that has competed so successfully on price and quality that it has carved for itself a place among the world leaders in the medical products field. The Division also continues to offer its employees the satisfaction of knowing that they are supplying up-to-date products which will enable other disabled people to improve the quality of their lives.

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In a concerted attack on pointless institutionalised living at a certain home, the routine "always fish on Fridays" was abolished . . . . Now, they always have fish on Thursdays!  
(Douglas House)

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# PLAN CHEST

Keith Cook

When I closed the last "Plan Chest", I promised more news of the planned replacement homes and to expand on the human element involved. I can hear voices raised in protest that the home is the human element and I agree, of course. The local architect and "Homes Planning" however do have the task of moulding inanimate materials; bricks, timber and sites, to obtain buildings which give the best use by disabled people and we may appear therefore to have our values reversed but this is not the case.

We talk so often about the need to create accommodation which provides for more individuality amongst residents and which can extend their ability to take part in every day necessities of a home. The concept of family group living may provide the conditions required by some residents to cook the occasional and personal meal. A small galley within a group of six or seven rooms supports the bed-sitting-room style accommodation and allows a freedom of choice not just in the culinary arts but also in the assuaging of hunger pangs between meals. Initial costs will be higher, more space may be needed and the

work of the staff could be increased but if this choice of design is open to residents and staff, discussion may bring out a sharing of responsibilities in which all can benefit.

St. Bridget's, at their recent Open Day, were able to show the sketches prepared by their architect, Mr C. Wycliffe Noble, of the way family group living could be used on their new site at Rustington. The suggestions showed five groups of four to six bedrooms, with toilets, bathroom and sluice facilities around small lounge and kitchen areas opening on to patios. A series of wings would be formed each taking advantage of the best light and of the surrounding garden areas. The existing house would then provide lounges, kitchen and staff facilities, with a dining-room added for the main meals.

This we hope will be an exercise in widening the choice for residents, and we look forward to hearing how their discussions with the staff and committee finally arrive at the best solution for their needs. Variations of the family group principle are to be found at a number of our homes and the new Glenrothes building is expected to show a similar concept.

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## Retirement of Donald Powell

The retirement has been announced of Donald Powell who has been the General Secretary of the British Polio Fellowship for the past 22 years.

His guidance will be greatly missed, not only by the British Polio Fellowship, but by many other organisations who have been involved with him in his pursuit for the improvement of living standards for disabled people.

The Leonard Cheshire Foundation, who have benefitted greatly from his loyalty and support over the years, send their best wishes to Donald Powell for a long and happy retirement.





## SUPPORTING THE CARERS

In the last decade there has been a swing away from residentially-based services towards care in the community, a move which has been largely welcomed by the disabled. However, for some time it has been felt that this move is only possible and can only be done without great deprivation to the disabled and their families if resources are made available to enable them to live decent and interesting lives in their own homes.

Several people felt so strongly that this was not the case—that care in the community is just another way of saying “care by one person”—that the idea of an Association to support those who are caring for a disabled or elderly frail person at home was born.

A grant of £10,000 from the Equal Opportunities Commission made this possible and the Association of Carers came into being in September last year.

The Association aims to assist these carers by offering advice and information, both general and on respite care and holidays, producing a monthly newsletter which is a forum for carers' views and by helping small self-help groups to set up, to offer carers an opportunity to talk about their problems and to meet without their dependants, which gives them a much-needed break.

Amongst our members we have many who have never had a break in thirty years or more, some who are still caring into their eighties, and a very large number who are caring for more than one person (four in one case). We have the wife of a tetraplegic who has three ill, elderly parents to look after, a woman with two handicapped children (one congenital and one by accident), four non-handicapped children and a completely demented mother,

another of only eighteen who is caring for her grandmother who has had a stroke, in a caravan with no plumbing or hot water. Most of these people have no support from statutory services—it is assumed that they will “cope”.

And cope I suppose they will, but at what cost? We hear of carers who have had to give up work and are living in poverty in order to give their dependants the warmth and food that they need. According to a recent survey, 68% of carers are in poor health themselves and many are unable to receive the medical treatment they require because there is no-one else who will take over their role while they go and have an operation and convalesce. In almost every case, the social life and wider family contacts disappear completely.

We don't believe that we can answer all these problems in one fell swoop, but do feel that there has certainly been a heightened awareness of these difficulties since the inception of the Association. One of its current campaigns is to extend payment of the Invalid Care Allowance to married women, who form the bulk of carers, and yet are not eligible for *any* benefits at all when they give up work to care.

We cannot believe that it is in anyone's interests that this situation continues. Disabled people cannot be cared for properly by people who are tired, ill and martyred, and carers cannot really make a good job of it when they are resentful and bitter about a system which leaves them to cope alone and unacknowledged.

If anyone would like to know more about us, please drop us a line at: 58 New Road, Chatham, Kent ME4 4QR (Tel: Medway (0634) 813981).

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# International News

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## Newsbits from the Philippines

by Fe Isaac-Sano, Philcochesh Newsletter Editor

Hello everyone! Here's good news from our residents of Pangarap Home. (Please know that we have changed our name from Philcosh to Philcochesh—meaning Philippine Council of Cheshire Homes for the Disabled).

The wheelchair bound athletic team of Pangarap won three gold medals, eight silver medals and seven bronze medals in the recently concluded PHILYMPICS '82 (Philippine Olympics for Disabled) held at the University of Life, Philippines. This was sponsored by the National Commission Concerning Disabled Persons.

At the recent town fiesta of Gabaldon, Nueva Ecija, 200 km from Metro Manila our disabled athletes were invited to perform a basket-ball exhibition game. The government officials as well as the town-folks of Gabaldon were well entertained and had only admiration for the skills and fine spirit shown by the paraplegics.

Time and again Rogelio Estigoy from the Pangarap Home, whose joints are stiff due to rheumatoid arthritis, has proven that he can excel in table games like chess and "dama" (local table game).

Miguelito Laguartilla, supplies eggs to some families of Metro Manila. From the earnings of the poultry farm he was able to buy additional stock of 100 chicks. Once a week our boys include fried eggs in their menu. The home has three foreign bred turkeys which they hope they will multiply. They also have 32 ducklings. Miguelito's practical knowledge in farming makes the farm entirely self sufficient. He must have inherited his talents from his parents who work their farm in Quezon Province.

Besides sports and farming, the residents are continually developing their management skills. Isagani Camo of Kasipagan Cheshire Home, Frank Mariano of Kakayahan Cheshire Home and Susano Tansiongco of Panagarap Cheshire Home are taking the lead in these

sheltered workshops. They have substantially contributed to the success of the sheltered workshops through their leadership and dedication thus providing several paraplegics gainful employment. Work contracts to keep the workshops going were acquired from several sources, mainly department stores, government institutions and private agencies. Bazaars held in private homes of several civic spirited ladies also help in the marketing of the products.

New president for Sinag-Tala Cheshire Home, Mrs. Lloyd Marcos, wife of Dr. Pacifo Marcos, brother of Philippine President Ferdinand Marcos, has taken over the helm of Sinag-Tala. Mrs. Concepcion Magsaysay Labrador, formerly president, is now honorary president. She has been an able, inspiring and dedicated worker indeed.

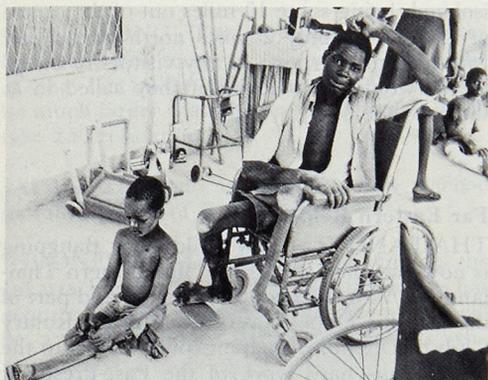
**RIP: Sinag-Tala Cheshire Home.** Two of our residents, namely Domingo Ramos and Salvador Galila have returned to their Creator. Domingo Ramos died 3rd April and Salvador Galila died 5th May at the age of 51. After the Eucharistic Celebration their bodies were laid to rest at the La Loma Cemetery. May they rest in Peace.

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## The Juba Home, Sudan

The Juba Home was started by Denise Tabernacle in 1980. Initially it served as a day clinic for children suffering from the effects of polio who were given physiotherapy treatment, wheelchairs and fitted with calipers. By the end of 1981 over 100 children, and some older people, had been helped. The home has been greatly helped with funding from the Christoffel Blindenmission. The building extensions were completed by the end of last year and the official opening of the home took place on the 17th December, 1981. At the moment there are 9 children living in the home for short-term treatment. A Ugandan refugee, himself a polio victim, helps to make the appliances.

Now that Denise has left a VSO physiotherapist, Patricia Baker, looks after the home.



*Photo by Sophie Baker, Christian Aid*

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## News Report from Michael Palmer

### Western Region

**CANADA:** The home in Saskatoon will be opening a third unit shortly and their numbers will rise to 28. The committee has also rented a suite in one of the homes to two disabled people to enable them to lead a more independent lifestyle. In Montreal the home is also expanding and the first home has been opened in Quebec State Province, hopefully the first of many.

**U.S.A.:** In Arlington the home continues to thrive and two new six-room units are to be built as well as the Polly Morrison home which has taken in residents. In Madison, the purpose-built home is progressing well. There is a possibility of a meeting of the Western Region homes in September 1983. In Reno the committee have rented a house for four disabled people while they raise sufficient funds for a larger home. The homes in Watsonville and Santa Cruz, California, are active and the residents have created a happy and independent atmosphere.

**LATIN AMERICA:** The situation has deteriorated so much in Sao Paulo that there has been no alternative but to close down the present home. It is hoped a new committee will be formed and that we shall be able to start again.

### Northern Region

**IRELAND:** There are now seven homes with every prospect of two new homes opening shortly. Clearance work on the Monkstown site outside Dublin will begin soon. The Central Committee has now appointed a full time executive officer, Mark Blake-Knox, to undertake the growing task of making the voice of the Cheshire Homes heard in Ireland.

**FRANCE:** The Group Captain visited the Dijon home in May, finding a happy, if slightly isolated community. The committee there are planning a fifteen bed extension.

**CHANNEL ISLANDS:** The building of the Jersey home is proceeding, while the Guernsey committee are selecting possible sites for the home before seeking the advice of the Foundation's Home Planning Officer.

**MOROCCO:** Plans are underway for the establishment of mobile workshops based initially in Tangier and Marrakech where two homes are situated. The Foundation will be working in partnership with Caritas and the Peace Corps amongst others.

### Central Region

**ZAMBIA:** The proposed Central Region conference is to be held in Lusaka next April.

**SWAZILAND, BOTSWANA and LESOTHO:** Fr. Kevin Doheny, Regional Liaison Officer, has just returned from a whirlwind tour of Southern Africa and as a result, committee and homes may possibly be started soon.

**SOUTH AFRICA:** There is a strong possibility of the establishment of the first Cheshire Home for black South Africans at Eesterhoek. The Indian home in Durban has found a property in which to establish a home for children.

**ZIMBABWE:** The Baines Avenue home was opened by Sally Mugabe, wife of the Prime Minister. The Westwood home, also in Harare, is now open, and a third home at Umvukwes in the rural area is planned. This will also serve as a base for a mobile team to identify the needs of the disabled in the villages and to provide services to them. This is a new venture for us and may also provide a prototype for other rural areas in Africa and elsewhere.

**KENYA:** The Trout and Salmon Flies factory won an African award for small businesses, and they have just completed a successful show at the first European Fishing Tackle Trade Exhibition in England.

**UGANDA:** Seven homes are now established, three of which had managed to keep going during the difficult times of the Amin regime.

**NIGERIA:** Most of the homes are thriving and planning to double their numbers in the next few years.

**ETHIOPIA:** Despite the problems of war in Eritrea, the Asmara home has managed to keep the clinic open.

### **Eastern Region**

**INDIA:** The Delhi home has opened a day centre and, when the special workshop has been built, they will be able to take a maximum of ten visitors at any one time. The present home at Nagercoil only has two residents, but plans are underway to build a new home nearby.

**SRI LANKA:** Both Mount Lavinia and Negombo have sheltered workshops in need of financial support. The Jaffna home, which has eight residents, is sponsored by the local Lions Club and the residents are doing well with their poultry and tea packing enterprises.

**BANGLADESH:** On her recent visit to the Eastern and Far Eastern Regions, Scilla Arnold was able to visit the new home which was opened in Bangladesh in January of this year. Most of the building money was put up by the Kuwait Government and American Express, and to mark these contributions two wings have been named after them. The residents were obviously delighted with their new

surroundings, and the committee must be congratulated on all they have achieved under difficult circumstances. The home is rather isolated, being some 10 miles out of the centre of Dacca, but only 2 miles north of the new International Airport, so any visitors to Bangladesh would be welcome if they called in at the new home.

### **Far Eastern Region**

**THAILAND:** The new building at Bangping is now occupied. The home in Northern Thailand has 14 residents, and the land and part of the building money was donated by the Rotary Club of Dhonburi in Bangkok. Thanks to the tremendous hard work of the Past-President Khunying Sumon Suchiva there are now three Cheshire Homes in Thailand.

**MALAYSIA:** In Penang the building of the new extension for 30 residents will commence this year. The Selangor home goes from strength to strength from the support of its active management committee and the motivation of the residents themselves. Plans are underway to build a sheltered workshop on land near the home. The committee of the Johore Bahru home are planning to hold an "Open House" on Founders Day at which they will sell a souvenir brochure on the home and Foundation to raise funds for building extensions. The home in Kuching, Sarawak has raised all the funds to enable them to build two extensions, one to accommodate a further 20 residents, which will bring the total to 70, and the other for staff and storage. The building work on the new home in Sabah is progressing well and it is hoped that this will be completed by the end of the year when they hope to take in 20 severely mentally/physically handicapped young adults. A mini-bus has recently been presented to the Sabah home which advertises their existence very effectively.

**PHILIPPINES:** 12 homes were visited by Scilla Arnold including the one in Baguio, Mt. Province, two sheltered workshops and the National Orthopaedic Hospital. The Council has renamed itself the Philippine Council of Cheshire Homes for the Disabled. It is hoped each home will elect a representative. All the residents are actively involved in earning their

livings in many ways, such as woodcraft, carabao horn carvings, watch and electrical repairs.

**HONG KONG:** The Hong Kong committee has decided to go ahead and build a new home at Sha Tin in the New Territories. This will be much larger than the present home and will take 250 residents.

**JAPAN:** The home in Kobe has now reached its full capacity of 50 residents.

**INDONESIA:** Most of the residents in the Jakarta home are working and the home has acquired a four bedroomed house, which will be a halfway home for those residents who want to live a more independent lifestyle away from the home itself.

**PAPUA NEW GUINEA:** The generous support of the Boroko Rotary Club has enabled the home to extend its building. The committee is hoping that this will be finished in time for Her Majesty, Queen Elizabeth II's visit to the country in October.

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## **New Home in Zimbabwe**

**from Godwin Chitate - the first resident**

The first Cheshire Home in Harare was opened on 14th May by Mrs. Sally Mugabe, the wife of the Prime Minister, who is also the patroness of the home.

The home is situated in Harare (Salisbury) the capital city of Zimbabwe, on one of the tree-lined avenues. It is an enchanting place, set in a beautiful garden. One's first and foremost impression, is that of a true home.

Friday the 14th was a clear cloudless afternoon. The residents, staff, friends of the home and other volunteers were busy preparing for the hour of the official opening of the first Cheshire Home in the country.

At five o'clock the place was filling up with distinguished guests — people who had been invited to come and share the great occasion with us. This included government officials, embassy people, businessmen, church ministers, cameramen, journalists and other interested people.

When Mrs. Sally Mugabe arrived the local chairman, Mr. E. Chamba, welcomed her, made a few formal greetings and introductions. After this it was the national chairman, Mr. Uppill Brown's turn, to say a few words. Father Mongham thanked the people for their kind generosity, co-operation and the way they had responded to the formation of a Cheshire Home. Next followed the reading, by the director of Social Services, from a speech written by the Minister who was unable to attend.

Then came the patroness herself, Mrs. Sally Mugabe, who made a speech, strongly encouraging the promotion of such lovely places as this Cheshire Home. She went on to say that she hoped Cheshire Homes in Zimbabwe would flourish and become a shining example of what voluntary organizations could do in Africa.

After her speech Mrs. Mugabe cut the ribbon across the entrance as a sign to mark the official opening of the home, then went on a tour of the house where she had a cup of tea. On her way out she was presented with a gift of flowers by one of the residents.

The home was then open to anybody who wanted to have a look around the place. Cool drinks, tea and cakes were on sale, which was enjoyed by everybody.

To sum up, the whole event was a pleasant and successful occasion, and I trust that the home will be one of understanding, love, kindness and consideration for all who are involved.

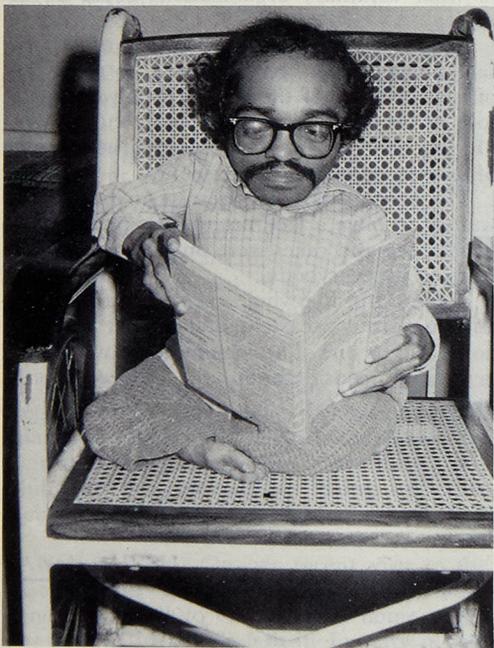
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## VISIT TO INDIA

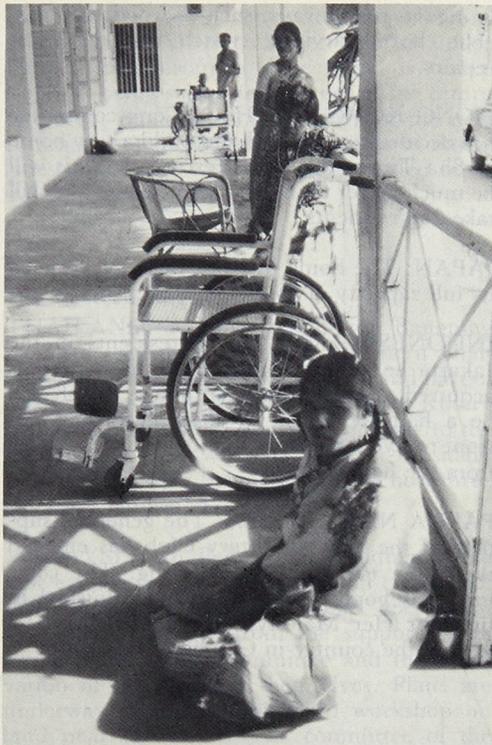
On her recent trip to India, Ann Sparkes met many of the residents living in Cheshire Homes there. We are pleased to print some of the photographs she brought back with her.



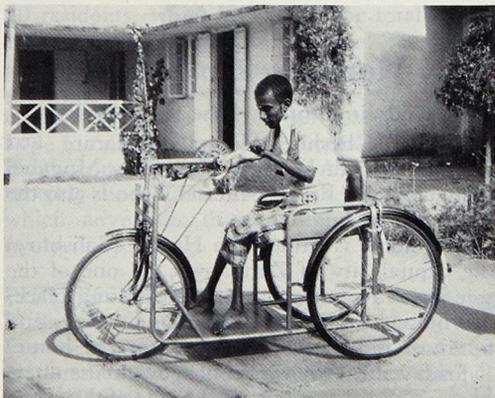
*The Madurai Cheshire Home has provided calipers free of cost for 17 polio affected children. The project was started in 1981 as a special IYDP gesture and cost Rs. 5,000 (approx. £300)*



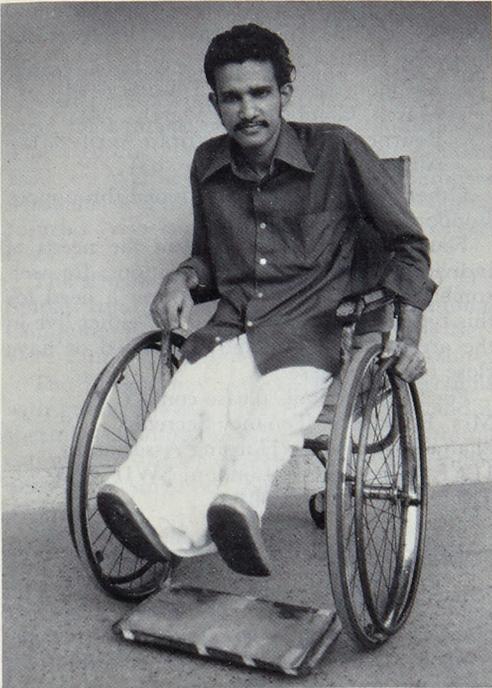
*Britto Antony, 35, also of Trivandrum, was born with brittle bones and grew hard of hearing when he was 13. He speaks and writes 3 languages, types with one finger and has written a few articles for an English paper and worked as Chief Editor of the house magazine*



*At Madurai there are 30 residents, mostly young, suffering from various disabilities. Sitting on the floor seems more popular than sitting in wheelchairs!*



*Mobility is increased by the use of a hand propelled tricycle, and two lads collect the post and do other errands in this manner*



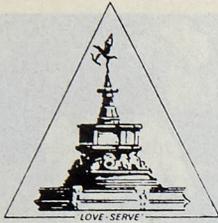
*At the Delhi Home the physically handicapped and mentally retarded residents live in harmony contributing to each others needs. Brij Mohan, seated on the trike, and his friend Davender are able to do most of the shopping and supervisory work of the sheltered workshops*

*At Trivandrum the language is Malayalam and the residents all contribute to a handwritten magazine. George Thomas, one of the residents, speaks excellent English. He is an avid reader of Cheshire Smile and is very interested in the U.K. Cheshire Homes*

Mrs. Lilian Clift, who recently returned from a sojourn at the Limuru Cheshire Home, says that she left the home in good hands. Srs. Mary Ignatius and Eugene are positive balls of fire and working together have been able to build up a workshop which will enable the residents to earn money for themselves and for the upkeep of the home.

Sr. Eugene moved on to Zambia in July, but her place has been taken by another Sister of Charity from Dublin. She and Sr. Mary Ignatius will be there until February 1983 and then the Kenyan Assumption Sisters will be taking over.

Mrs. Clift wishes to thank her friends in the U.K. homes, including the Le Court Residents' Association and Limuru's twin, Dolywern (Wales), for their great generosity and response to her letters from Kenya. Apart from urgently needed medical supplies that were sent, the home now has new curtains, chairs, pillows, bed spreads and dining room tables purchased from gifts received.



## Disabled and need a home?

The Shaftesbury Society Housing Association provides specialised housing for elderly and disabled people. All flats are newly built for rent and are self contained, with central heating, fitted kitchen and your own bathroom/wc. There are resident wardens at each housing scheme with an emergency call alarm system.

The Association has a number of schemes now being built for completion next year.

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## *Cry from a Resident's Heart*

Dear Lord help me to be the paragon of virtue the Chairman of the Management Committee would like me to be. Give me that mysterious something which will enable me to explain the Inskip Report to Matron, the lady who keeps my room tidy and Fred, even though it has never been explained to me.

Help me to guide and encourage all those who enjoy being miserable and sick all over the place.

Let this lament be of such merit and reward, that I may buy book-matches to save the senior male nurse from borrowing my lighter and literature.

Help me to interest the disinterested, enlighten the stupid and dimwitted without ever losing my patience or my temper.

Oh Lord let me love my fellow men—the women a wee bit more. Let me guide their sluggish and obdurate footsteps into the twin paths of Truth and Righteousness before I am tempted to bust both of them on the nose.

Teach me to smile, even if it kills me.

Instil into my inner being peace and tranquility, that no longer do I wake from my restless sleep, pulling on my "bleep" cord and crying "What has he got that I haven't and how did he get it?"

Bedsitters, one and two bedroomed specialised flats for disabled people are available at the following locations:

Basildon, Essex (from February '83)  
March, Cambs (from March '83)  
Bournemouth, Dorset (from April '83)  
Alton, Hants (from May '83)

Other sites are being developed throughout London and the South East.

Flats can be adapted to suit the needs of individual tenants and applications are welcome now from people who have a need for this type of accommodation, and either live in the area where a scheme is situated or have close relatives there.

For further details please contact:  
Mrs. P. Garner, Tenancy Secretary  
Shaftesbury Society Housing Association  
112 Regency Street, London, SW1P 4AX  
Telephone: 01-834 7581

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Make me a better man by helping me to develop greater understanding, tolerance, wisdom, sympathy, mind-reading, second sight and a gift to cheat at strip-poker.

And when, Dear Lord you have helped me to reach this high pinnacle, to achieve these statesmen-like qualities in this mortal world, to become that paragon ascribed to me by the Chairman of the Management Committee, then, Dear Lord, and only then—MOVE OVER!

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## GLAD

Over the last three years this Association has produced a number of information sheets on topics of particular interest to disabled people. They have now prepared an amendment sheet for these, since many of the figures on the original sheets are now out of date.

Any disabled person who wants one sheet should send an SAE to The Information Department, GLAD, 1 Thorpe Close, London, W10 5XL. Statutory and voluntary workers a charge will be made.

## Data Processing Job Opportunity

A new proposal which offers the chance of full or part-time computer programming employment for handicapped people was launched at The Grocers Hall, Prince's Street, London EC2, on Wednesday, July 14th, by Baroness Masham of Ilton, Chairman of The Spinal Injuries Association, and herself in a wheelchair.

The scheme is a unique tie-up between The Spinal Injuries Association, and a national Computer Bureau, Multiple Accounting Services Limited, based in Wetherby, Yorkshire.

The Bureau has wide business connections with public schools all over the country and is speedily building up clients in the farming community, the travel industry and other businesses too small to possess their own computers.

Mr. Paul Sellars, Co-Director of M.A.S., said that he believed data processing with a new type of all-British terminal called the Travicon Apollo would be well within the capacities of even quite severely handicapped people and he believed it offered exciting possibilities for the future. The work did not have to be completed fast, and he thought that once given an opportunity to compete on equal terms, disabled people would be able to provide a very reliable service.

The work could be on a commercial basis and would be remunerated at the normal market rate for the job. It might be performed in offices or in the home, depending on circumstances.

M.A.S. would propose training those people that they hired, but this was not a long process. In most cases it did not take more than a day. They would be applying for training grants from the Manpower Services Commission. Selection for the job would be based upon the training programme which would reveal if the applicants were suited to the work and if they enjoyed it.



*Left to right: Baroness Masham of Ilton, Mr. Hugh Rossi MP and Baroness Lane Fox of Branham*

Mr. Sellars stressed, however, that there would not necessarily be jobs for all those who applied for them immediately. M.A.S. expected the work to start soundly and to expand steadily. The number of jobs available were at the present time difficult to assess as much would depend on generating new clients. There were particularly good opportunities for expansion in farming communities.

Disabled people wishing to apply for further information or for inclusion in the scheme should write either to Mr. Stephen Bradshaw, Director, The Spinal Injuries Association, 5 Crowndale Road, London, N.W.1. ITU or direct to Mr. Paul Sellars, Co-Director, Multiple Accounting Services Limited, Stockeld Park, Wetherby, Yorkshire LS22 4AH.

Mr. Stephen Bradshaw, Chairman of The Spinal Injuries Association said that it was not intended to give priority to members of the Association. All enquiries would be passed on to M.A.S. for consideration.

## The Education and Training Bureau

The Education and Training Bureau aims to help disabled people who are unable to take advantage of the normal further education facilities because of problems related to their disability.

The Bureau receives a grant from the Inner London Education Authority and from this we are able to provide home tuition and correspondence courses for people living in the ILEA area (which covers most of London). Outside London funding is rather more difficult and we can normally support only correspondence courses. The Midlands Council for the Preparatory Training of the Disabled and the Scottish Centre for the Tuition of the Disabled act within their own areas and enquiries from these parts of Britain are referred to them.

There are no strict criteria for help from the Bureau; the only two conditions which must be fulfilled are that people are disabled and over the age of 16.

We have a central core of tutors who have a wide variety of expertise and will visit people in hospital or at home on a regular basis, usually for one hour per week, but this is not rigidly enforced. A tutor can also visit someone who is thinking about a course to talk to them, advise them and help direct their ideas. The correspondence courses we use are not specifically designed for disabled people, they are the

normal courses which are run by reputable colleges such as the National Extension College and the International Correspondence School. In some instances people have followed a course with the support of a tutor so that they can discuss any difficulties which might arise.

The courses range from basic literacy and numeracy to Open University level. Some people who have become disabled through accident or illness need 'O' level qualifications to help them gain employment in a new field of work. Others have been disabled all their lives and may want to learn a new skill, such as typing, or develop an interest like painting or jewellery-making. Each person is considered as an individual and we try to keep the service as flexible as possible in order to meet individual needs. We recognise the value of education in itself and there is no requirement of guaranteed employment at the end of the course.

Education should always aim to equip people to realise their full potential in life; handicapped people share this right and the Education and Training Bureau is a service which aims to give handicapped people with special needs this opportunity.

If you would like further information about the Education and Training Bureau, please write to: Judith Cotterill, Education and Training Bureau, RADAR, 25 Mortimer Street, London, W1N 8AB.



Creative Young People Together (CRYPT) is a brand new charitable trust which sets out to help and develop disabled people with creative talents. Everybody has a talent. Most people have more than one. Disabled people—the partially sighted, the physically handicapped, the hard of hearing—are part of everybody—and have talents too.

The Trustees of Crypt plan to buy and equip bungalows for creative young disabled people and to provide one or more workshop areas where other disabled people with talent could share in the creative work on a daily basis. They will appoint helpers (for the special needs arising from the disabilities) and provide publishing facilities and act as a "clearing house" through which the talents can find a wider audience (from exhibiting to public musical and dramatic performances). The plan is to show that disablement is no barrier to creative achievement.

For further information please send S.A.E. to: The CRYPT Foundation, 21 Plover Close, East Wittering, Chichester, West Sussex, PO20 8PW.

## 'Are You Sitting Comfortably?'

### from the Heatherley Cheshire Home's Newsletter

The odd thing about committees is that you never meet anybody who doesn't sit on them and you rarely meet anybody who approves of them either. From the Cabinet to the West Whittering Oyster Catchers Water Pollution Sub-Committee, we run our affairs by getting together in huddles; and wherever two or three are gathered together, the same sort of charades go on.

Some committees are a write-off from the start. Any committee that meets no more than twice a year is hopeless: the deadline is so far off that everyone promptly forgets what they promised to do, until the night of the next meeting when there is nothing else to do except the construction of a really good excuse. Large committees are also useless. Like large worm pills, they contain too much filler. Filler are the specialist members who are there to represent something-like womans-lib and professions like the law or other deprived groups. Apart from the professionals, these adopted members are probably on the committee because they form part of the driftwood who enjoy sitting about in large hats, sipping cups of tea and chatting. As Parkinson says, in large committees everything is dealt with by the two or three ablest members over a lunch-and when this happens the relevant question is whether the committee need meet at all!

There are only two periods during which anything useful is determined-the first half hour and the last. The shrewd Chairman gets rid of half a dozen minor but necessary items to start with, then gives everyone a chance to show off before they become anxious to make the early train (strikes permitting). The wasted time is usually in the middle of the afternoon when people drone round any given subject like sleepy wasps, never quite making for the open window.

A good secretary I once had advised me that the quickest way to stop members habitually chatting to each other, was to put them opposite the Chairman. Another tip I was given was never let a committee do any drafting, get the Chairman to dictate his version of any decision then have it beautifully typed-if it all looks neat and virginal no one will feel like ravishing it.

A committee may have no hearts to appeal to or no backsides to kick, but if it gells as it should, it does assume a sort of corporate personality, and this is really what it's all about. A way of using more talents than any one person has. A camel is, after all, a horse designed by a committee, when a workable, indestructable, water carrying animal with sandproof feet was actually what was needed.

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## D.I.A.L.

Have you ever felt completely at a loss when trying to acquire information or help to meet your specific need as a disabled person? D.I.A.L. is a free, impartial and confidential service of information, advice and, in some cases, practical help provided by people with direct personal experience of disability. It can be used by anyone with a query or problem connected with any aspect of disability and is available by telephone, by letter or by personal visit.

The kind of questions which commonly arise usually fall into categories, e.g. income and benefits; access and mobility; housing, accommodation and care; voluntary organizations and their work, and local welfare services. Wherever possible, D.I.A.L. deals with all enquiries direct.

For further information please contact: James Woodward, Development Officer, National Association of Disablement Information and Advice Services (DIAL UK), Victoria Buildings, 117 High Street, Clay Cross, Derbyshire. Tel: Chesterfield (0246) 864498.

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# Publications

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## **The Handicapped Person —A New Perspective for Social Workers**

This small book is a compilation of papers presented to a conference of social workers. The conference was held during IYDP and five principal contributors set forth their personal perspectives which highlight a variety of experiences common to all with disabilities. One paper stresses the need to seek out those 'like-thinking' able-bodied individuals and encourage them to work with, not for, us. The hidden costs of disability, well argued for years by DIG but still needing to be explained, is discussed. The majority of the authors add fuel to the growing feeling that disabled people will no longer tolerate the way many professionals and society generally respond to handicap. They show the areas, some of which are blatant, others subtle, where discrimination and downright oppression exists. While considering the wider issues, emphasis is placed on treating people as individuals and LISTENING to what they want and how they wish to lead their lives. Finally, Mike Oliver, reviews the impact that these ideas will have on social work and offers a model for professionals to consider.

Price £1.00 inc. p & p. Obtainable from RADAR, 25 Mortimer Street, London, W1N 8AB.

G. Thomas

## **REMAP Year-book 1982**

REMAP (Rehabilitation Engineering Movement Advisory Panels), part of RADAR, provides a unique and individual service across the U.K. for disabled people whose particular

need is not met by equipment from statutory sources nor by the normal commercial market.

Profusely illustrated with examples of the unusual aids, modifications and adaptations which have been designed, made and supplied to individual clients, the Year Book provides names, addresses and telephone numbers through which local and immediate contact can be made. The spectrum of tailor-made aids which have been supplied in the past year is striking. The total professional membership of REMAP's ninety panels approaches 2,000 and this provides the widest range of technological and engineering skills and experience.

Most parts of the country are now within reasonable distance of a REMAP panel. And most panels have a frame-work of professional engineers in reserve so that more referrals would be welcomed and could be speedily handled by these volunteer engineers, occupational- and physio-therapists and others concerned with caring.

Price: £1.30 inc. p & p. from RADAR, 25 Mortimer Street, London, W1N 8AB.

## **Clouds Got In My Way**

by **Christine Smith**

Christine Smith's book is more than just her own story and how she coped with progressive muscular dystrophy. It is history book, travel guide and auto-biography all in one. The book contains her complete family history, detailed descriptions of her numerous trips across Great Britain and, not least, an amusing account of her day to day life. This might sound a strange mixture of topics, but combined in her own humorous style, it's certainly worth reading.

Price £7.50, published by Eyre Methuen.

Margit Fassbender

## Deaths

**John Thomas Meakin** aged 70 years died on March 5th 1982. He was a resident at Kenmore for seventeen years and will be sadly missed by residents and staff.

**Kathleen Lockwood** aged 69 years died on May 17th 1982. She served many years at Kenmore on the Residents Committee as Chairwoman, and was always ready to help whenever possible; this included teaching a resident to read and write, which involved many hours of dedication. Kathleen will be remembered by residents and staff for her courage.

**Mr. Leonard Bateman** of "Underley", Bonchurch, Isle of Wight, died suddenly on May 10th. Mr. Bateman formed the Isle of Wight Cheshire Home Steering Committee in 1970 and Appley Cliff was open to its first residents in 1972. He was a management committee member at the time of his death and is sadly missed. At his funeral service it was said of him: "He was one of those rare understanding people who combined good business sense with compassion for others. If you want to see his monument you need go no further than the Cheshire Home at Shanklin".

## Obituary

### **Dr. B. Kiernander**

We sadly have to report the death of our former Trustee and Honorary Consultant Medical Adviser, Dr. Basil Kiernander, aged 69. Dr. Kiernander became a Trustee in 1957 until his retirement in 1963 when he accepted the post of Honorary Consultant Medical Adviser to the Foundation.

For many years Dr. Kiernander was one of the leading authorities on physical medicine and rehabilitation, especially in children. After a brilliant undergraduate career at St. Thomas's Hospital, where he qualified in 1936, he was appointed a physician on the staff of the Hospital for Sick Children, Great Ormond Street. In those days physical medicine and rehabilitation had not the professional prestige they have today, but his colleagues at Great Ormond Street soon came to recognise how much Dr. Kiernander could do for the

many rheumatic and crippled children who passed through their hands. In this way the outstanding children's hospital in the United Kingdom soon became a pioneer centre for the care of crippled children.

It was not only children who benefited from his knowledge. As well as his work for the Foundation, he was also appointed honorary civilian consultant in physical medicine to the Royal Air Force. His reputation was international and he was an honorary member of the American Academy of Physical Medicine and Rehabilitation.

An address was given at the Thanksgiving Service for Dr. Kiernander by Mr. Ronald Raven, OBE TD FRCS who spoke of Dr. Kiernander as being a kind, gentle man whose friendliness and constant smile will be sadly missed by all who knew him.

## THE LEONARD CHESHIRE FOUNDATION

Registered as a Charity Number 218186

Leonard Cheshire House, 26-29 Maunsel Street, London SW1P 2QN. Tel. 01-828-1822

Patron: Her Majesty The Queen

Founder: Group Capt. Leonard Cheshire, VC, OM, DSO, DFC

Past Chairmen: The Rt. Hon. Lord Denning, PC

Professor Geoffrey Cheshire

The Rt. Hon. Lord Edmund-Davies, PC

Chairman Emeritus: Air Chief Marshal Sir Christopher Foxley-Norris, GCB, DSO, OBE, MA

Chairman: Mr. Peter Rowley, MC, MA

Trustees: Peter Allot, Esq.; Dr. F. Beswick; Group Capt. G. L. Cheshire, VC, OM, DSO, DFC; Lady Sue Ryder Cheshire, CMG, OBE; Mrs. P. K. Farrell, JP; D. Greig, Esq.; Dr. Wendy Greengross; G. Reid Herrick, Esq.; J. H. Inskip, Esq., QC; B. R. Marsh, Esq.; Sir Henry Marking, KCVO, CBE, MC; Lady June Onslow; Mrs. G. Pattie; The Hon. Sir Peter Ramsbotham, GCMG, GCVO; D. M. Roe, Esq.; Mrs. P. Rowntree; J. Threadingham, Esq., OBE; N. R. Trahair, Esq.; J. V. Tindall, Esq.; Mrs. E. Topliss; H. Turner, Esq.; P. Wade, Esq.; R. B. Weatherstone, Esq.;

Director: Arthur L. Bennett, Esq.

Hon. Treasurer: Dennis Greig, Esq.

Asst. Treasurer: Mrs. M. Burkmar

Head of Mental Care: Michael Libby, Esq.

Public Relations Officer: Mrs. Kay Christiansen

Public Relations Consultant: Bill Simpson, Esq.

Information Officer: Wally Sullivan, Esq.

Personnel & Industrial Relations Adviser: A. J. Keefe, Esq., FIPM

Homes Planning Officer: Keith Cook, Esq.

Leonard Cheshire Homes care for the severely and permanently handicapped. They are run as homes, and offer the affection and freedom of ordinary family life, the residents being encouraged to take whatever part they can in the day-to-day running of the house and to develop their talents. Disabled people are admitted according to need, irrespective of race, creed or social status. The management of each home is vested in a Committee as representative as possible of the local community. The Leonard Cheshire Foundation (a registered charity) is the Central Trust, and has ultimate responsibility for all the homes. It owns all the property, and acts as guarantor to the public that the individual homes are properly managed in conformity with the general aims of the Foundation. Similar charitable trusts have been established to control the homes overseas.

## CARE ADVICE SERVICE

Office: Leonard Cheshire House, 26-29 Maunsel Street, London SW1P 2QN.

Care Advisers: Hugh Bryant, Esq. (SW); Robert Hopkinson, Esq. (N); Harry Lowden, Esq. (Midlands); Mrs. Alma Wise (SE); John Timms, Esq. (NE)

## FAMILY SUPPORT SERVICES

The Family Support Services aim to provide personal care and help for physically and mentally handicapped people living in their own homes. It thereby helps to prevent or alleviate stress in families with handicapped member(s) and enables disabled people, whether living alone or with their families, to continue living at home for as long as possible. It is probable that family

support services for disabled people (including services under the umbrellas of other organisations) will be greatly expanded as they meet the needs and wishes of so many people.

## Chiltern

Chairman: Mrs. Shirley Hughes SRN, c/o The Chiltern Home, 29 North Park, Gerrards Cross, Bucks. Tel: Gerrards Cross 86170

Organiser: Mrs. Gay Reid, Croft Cottage, 2 Rickmansworth Lane, Chalfont St. Peter, Bucks. Tel: Chalfont St. Giles 71158

## Bournemouth & Poole

Chairman: Mrs. P. Seaward, 3 Cranwell Close, Bransgore, Hants.

Organiser: Mrs. E. Viney, c/o The Grange Cheshire Home, 2 Mount Road, Parkstone, Poole, Dorset. Tel: (0202) 740188

## Dacorum

Chairman: Miss Delia Dudgeon, 30 The Front, Potten End, Berkhamsted, Herts.

Organiser: Mrs. Eileen Chester SRN, Larkrise, Hollybush Close, Potten End, Berkhamsted, Herts. Tel: Berkhamsted 6967.

## Oswestry

Chairman: Dr. Dudley Wallis, Old Quinta Manse, Bronygarth, Oswestry, Salop.

Organiser: Miss Mary Marr, 24 Cambrian Avenue, Wittington, Oswestry, Salop. Tel: Oswestry 62065

## Shorborne & District

Chairman: Lt. Commander Mark Ross, MBE, RN (Retd), c/o Miss Carol Ringwald

Organiser: Miss Carol Ringwald, Hawthorn Lodge Cheshire Home, Hawthorn Road, Dorchester, Dorset. Tel: (0305) 63271

## South West Wilts.

Chairman: Peter Bancroft Esq., Little Leigh Cottage, East Knoyle, Salisbury, Wilts. Tel: East Knoyle (074 783) 510

Organiser: Mrs. Vicky Randall SRN, North Hayes Farm, Matcombe, Shaftesbury, Dorset. Tel: Shaftesbury (0747) 204

## Stour Valley

Chairman: Miss Christine Hall, Phoenix, Hewletts Drive, Rivers Corner, Sturminster Newton, DT10 2AE. Tel: Sturminster Newton 72876

Organiser: Mrs. Clare Hadow, Dale Cottage, Fifehead Neville, Sturminster Newton

## West Dorset

Chairman: Mrs. Judy Wilson, Manor Farm, Wraxall, Dorchester, Evershot. Tel: (093 583) 294

Organiser: Miss Carol Ringwald, Hawthorn Lodge, Hawthorne Road, Dorchester. Tel: (0305) 63271

## SPECIAL SERVICES

Flats for couples, one of whom is disabled:

Robin House, St. John's Road, Hitchin, Herts.

Disabled Students accommodation:

Taylor House, 16 Osler Road, Headington, Oxford. Oxford 68620.

## HOUSING ASSOCIATION

*General Manager:* Ann Parkes, Leonard Cheshire House, 26-29 Maunsel Street, London, SW1P 2QN. Tel: 01-828-9535

The Leonard Cheshire Foundation Housing Association deals with requests from groups and individuals, or committees acting on behalf of physically and/or mentally handicapped people. To acquire property or land, apply for funding through the Housing Corporation or Local Authority, and arrange for the conversion or building of suitably adapted accommodation. The accommodation may range from hostels, group homes, sheltered housing or independent houses in the community.

## THE RYDER-CHESHIRE MISSION (for the Relief of Suffering)

*Registered as a Charity Number 235988*

*Founders:* Lady Ryder of Warsaw, CMG, OBE, and Group Captain Leonard Cheshire, VC, OM, DSO, DFC, in association with Mother Teresa of Calcutta.

*President:* Mrs. Lakshmi Pandit.

*Chairman:* The Hon. Sir Peter Ramsbotham, GCMG, GCVO.

*Administrator:* Michael Humfrey, Esq.

The Mission was founded by Lady Sue Ryder and Leonard Cheshire for the principal purpose of pioneering new projects which, although fulfilling a clear need and in keeping with their general aims and objects, would not quite fall within the scope of their respective Foundations. Five such projects are:—

**Raphael, the Ryder-Cheshire International Centre, P.O. Box 157 Dehra Dun, U.P., India** which cares for some 300 people of all age groups who are in need.

Raphael comprises a colony for burnt out leprosy cases, a home for severely mentally retarded children, the "Little White House" for destitute orphaned children and a small hospital with two separate wings, one for general nursing and the other for the treatment of TB.

In addition, Raphael operates a mobile TB and leprosy clinic in the Tehri, Garhwal area of the Himalayan foothills. There is a Cheshire Home in Dehra Dun itself, so Raphael is not able to appeal locally for funds. With effect from June 1976, responsibility for its financial upkeep has been assumed by the several separate and autonomous Ryder-Cheshire Foundations which exist in Australia and New Zealand.

The administration is in the hands of a General Council and the Director is Major-General Ranbir Bakhshi MC (Retd.).

**Gabriel, Mount Poonamallee Road, Manapakkam, Madras 600-089, India**

Gabriel is a training unit for leprosy and other patients who are living on their own in Madras but who are incapable of obtaining work because they lack a trade.

The Unit is financed mainly from Indian sources, but some help is given by the Ryder-Cheshire Mission.

The Chairman of the General Council is Mr. N. E. S. Raghavachari, ICS, (Retd.).

**The Ryder-Cheshire Home, Jorpati, Kathmandu, Nepal**

This new home for 30 disabled young people will accept its first residents early in 1982. It is intended to complement the work of the existing Nepal Disabled and Blind Association which donated the land to the Mission. The home will concentrate on

the rehabilitation of its residents and will share its training facilities with the N.D.B.A.

The home will be administered by a Governing Committee and a Local Administrator has already been appointed.

Because it is not possible to raise locally any of the funds needed to run the home, all the money required has to be found by the Mission within the United Kingdom.

**Ryder-Cheshire Films Unit, Cavendish, Suffolk**

This Unit produces films and video-tape programmes about the work of the Founders and their respective Foundations. Details of these productions are available on request.

**Raphael Pilgrimages**

A pilgrimage to Lourdes is arranged annually for chronically ill and permanently handicapped people who might not be accepted on other pilgrimages. Willing helpers are welcomed on these pilgrimages.

The Leader of Pilgrimages is Gilbert Thompson, 23 Whitley Wood Road, Reading, Berks.

## THE LEONARD CHESHIRE FOUNDATION INTERNATIONAL

*Chairman International Committee:* Sir Henry Marking, KCVO, CBE, MC

*International Director:* Mr. Michael Palmer

*International Secretary:* Miss Priscilla Arnold, Leonard Cheshire House, 26-29 Maunsel Street, London, SW1P 2QN. Tel: 01-828-1822

The Leonard Cheshire Foundation International comprises some 116 homes in 36 countries throughout the world.

## SUE RYDER FOUNDATION

*Registered as a Charity Number 222291*

Sue Ryder Home, Cavendish, Suffolk, CO10 8AY.

*Founder:* Lady Sue Ryder, CMG, OBE

*Chairman:* H. N. Sporborg, Esq., CMG

*Honorary Councillors:* Group Captain Leonard Cheshire, VC, OM, DSO, DFC; Miss E. B. Clarke, CVO, MA BLitt (Oxford), JP; A. J. A. Green, Esq.; W. L. Morris, Esq.; J. Priest, Esq.; A. Powditch, Esq., MC; Lady Ryder of Warsaw CMG, OBE; Mrs. M. Smith, JP, John L. Stevenson, Esq., FCS, ACIS, FTIL.

The Sue Ryder Foundation was established by Lady Ryder during the Post War Years, after she had been doing relief work on the Continent. Its purpose was—and still is—the relief of suffering on a wide scale by means of personal service, helping the needy, sick and disabled everywhere, irrespective of age, race or religion and thus serving as a Living Memorial to all who underwent persecution or died in defence of human values, especially during the two World Wars. Sue Ryder Homes care for the sick and needy of all ages, including children, and principally for the incurably sick and disabled, the homeless and those others for whom the general hospitals can do no more and who have no suitable place to go.

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“Help the Disabled Week” will be the fourth such week sponsored by the Central Council for the Care of Cripples. The national Week is intended as an occasion for making more friends for the disabled and increasing the public’s understanding of their problems. The encouragement of personal acts of kindness towards the disabled is the primary aim. It is therefore essentially non fund-raising.

This year attention will be specially centred on the improvement of the home surroundings of the disabled. A number of simple household improvements could be carried out by volunteers and it is suggested that in co-operation with hospital staff the provision of items such as extra hand-rails on staircases, adaptation of high, unwieldy beds, and the supplying of guards on fires and cookers, which are within the capabilities of the handyman, could be undertaken.



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