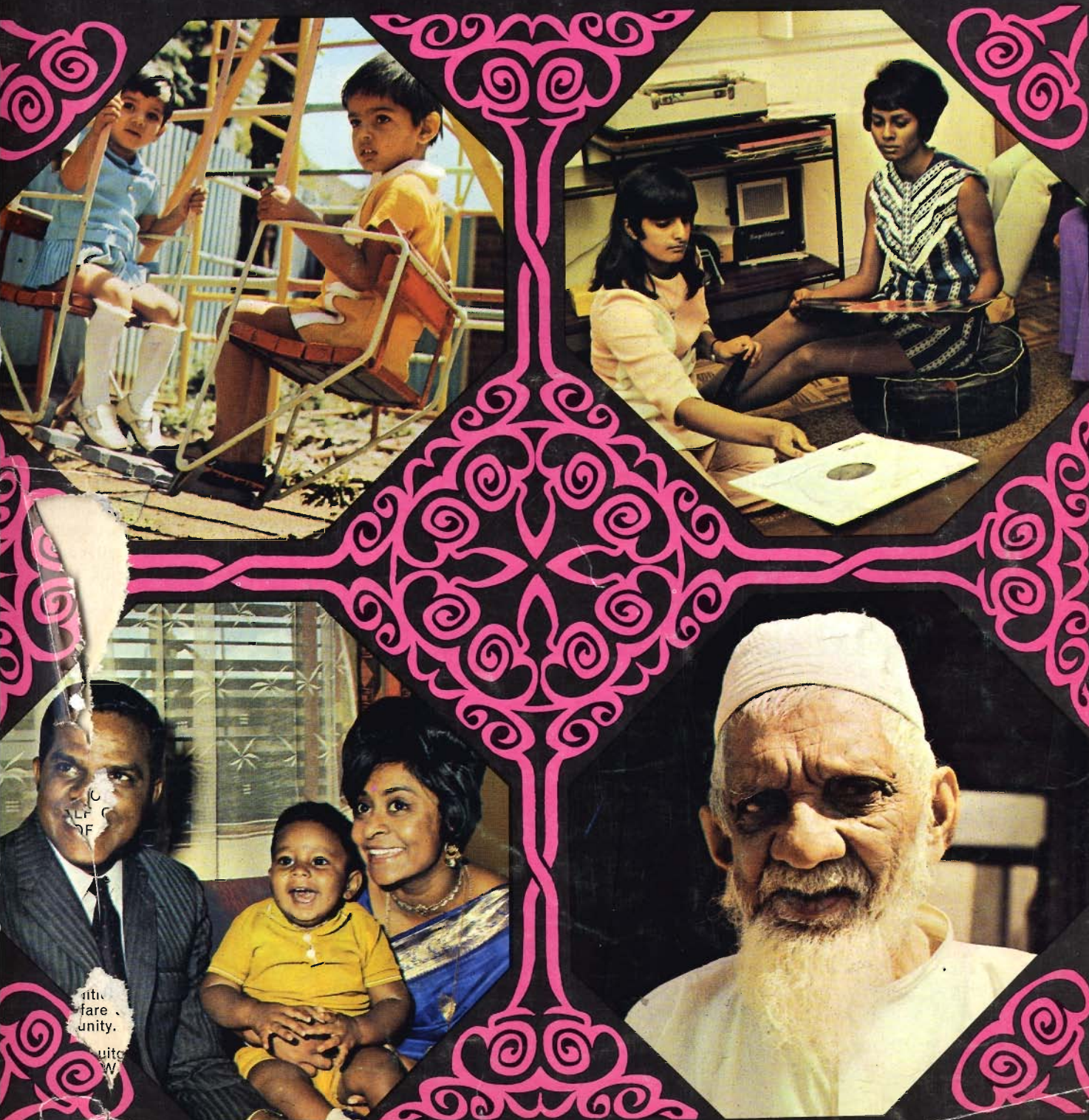


FIAT LUX

VOL. 6 No. 3 APRIL 1971



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MESSAGE BY THE SECRETARY FOR INDIAN AFFAIRS, MR. H. A. PRINSLOO

The broad aim of welfare work may be seen as the promotion of a healthy society by means of services aimed at the prevention as well as the control and cure of social ills that cause social damage. This indeed is the aim of the welfare work as rendered to the Indian community by the Department.

It is a known and accepted fact that welfare work in our country is the joint endeavour of the State and of the various private welfare organisations. In this, the first Welfare Edition of "Fiat Lux", I wish

to pay tribute to all concerned for the invaluable services they are rendering to the Indian community in the field of welfare.

To the profession of Social Work and to all qualified Indian social workers I offer my congratulations on achieving statutory registration of the profession. The provision for registration which was recently put into operation, in terms of the National Welfare Act, 1965, is a step that reflects the capacity for growth and progress shown by Social Work, and places South Africa ahead of many other countries.

FIAT LUX

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OF INDIAN AFFAIRS

'N MAANDBLAD NAMENS
DIE DEPARTEMENT VAN
INDIËRSAKE DEUR DIE
DEPARTEMENT VAN INLIGTING
UITGEGEE

This edition is devoted exclusively
to Welfare Services for the Indian
Community.

Hierdie uitgawe word uitsluitlik
gewy aan Welsynsdienste onder die
Indiërgemeenskap.

The views expressed in this journal do not necessarily reflect the policy of
the Department.

Die sienswyses wat in hierdie blad uitgespreek word, vertolk nie noodwendig
die beleid van die Departement nie.

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WELFARE SERVICES FOR SOUTH AFRICAN INDIANS

By MR L. L. MILLAR,
Chief of Social Development,
Department of Indian Affairs.



Welfare services originate from the knowledge that we are human beings linked together in an organised community, that we have common interests and therefore bear a responsibility toward one another.

It is a characteristic of welfare work in the Republic of South Africa that it is the joint task and responsibility of the State on the one hand and private initiative on the other. Our welfare services are designed in such a way that the virtue of human com-

passion is not stultified but rather stimulated in the individual, who is at all times encouraged to shoulder his responsibilities to his fellow men, not to shelve them or cast them off upon the State. The outcome of this is a highly developed social conscience in the community.

Based on the principle of partnership the State accepts direct responsibility for certain services such as statutory welfare services and the co-

ordination of these services as a whole. The State has also formulated a comprehensive policy governing professional social work and social security. At the same time it assists financially in the promotion and support of social services carried out by the community — prefers to offer a helping hand rather than to usurp the functions of South Africa's many dedicated public-spirited citizens. Self-respect through self-help in all communities is the aim and result.

HISTORICAL BACKGROUND

An important development in welfare work in South Africa took place at the beginning of the present century when the voluntary welfare organisations began to appear on the scene. By the 'thirties a considerable number of these welfare organisations were already in the field. In 1937 the Department of Social Welfare was established, primarily as an instrument for co-ordinating the activities of voluntary welfare organisations and State Departments charged with performing social services.

After the last war this policy of guiding and co-ordinating spontaneous philanthropy took a dynamic turn. As the need arose new national coun-

cils were established to co-ordinate voluntary efforts in various fields. Today, for example, there are national councils for child welfare, the care of the deaf, the blind, cripples, mental health, marriage guidance and family life, the welfare of the aged, the combating of alcoholism and drugs, and so forth. The Department of Social Welfare realising that certain social amenities were beyond the means of voluntary organisations now provides these itself, and has also built up a highly efficient professional field service throughout the country.

Always on the alert for new social developments, the Government has pursued a progressive programme of social legislation designed to meet the

welfare needs of all South Africa's peoples. In line with the Republic's policy of separate development for the different national groups, separate departments of State were established and these provide social amenities and services for each group. Thus, there are the Departments of Social Welfare and Pensions for the White population group, Bantu Administration and Development for the various Bantu population groups, Coloured Affairs for the Coloured population group and Indian Affairs for the Indian population group.

ESTABLISHMENT

The Department of Indian Affairs was established in 1961. Its function

is to promote the economic, educational, social and political development of the Indians in South Africa. Against this background the South African Indian Council — the first body of its kind in the history of the Indian people in South Africa — was formed and commenced functioning, primarily as an advisory body, later paving the way to a statutory body. The Department and the South African Indian Council have important inter-related and complementary roles to play in the future development of the affairs of Indian South Africans.

GRADUAL SHAPE

The gradual shaping of welfare services to fit the specific needs of South African Indians began in 1963 with the transfer of all Indian pensions, allowances and other social assistance schemes from the Department of Social Welfare and Pensions to the

then newly established Department of Indian Affairs.

SOCIAL ASSISTANCE

The various social assistance schemes of the Department provide for a wide range of contingencies, such as the needs of widows and orphans, aged persons and the physically and mentally disabled. It is interesting to note that in 1963 the total number of these pensions and allowances was in the region of 13 000 with an approximate annual expenditure of R1 800 000 as compared with the present 27 483 grantees and an approximate annual expenditure of R6 090 000.

All these schemes are non-contributory. They are financed from public funds voted by Parliament on the principle that the State will assist those who a means test shows cannot adequately provide for themselves. On

the principle that the community also has a responsibility to fulfil in these matters, it is not intended that these schemes should provide, in full, for the needs of recipients. It is traditional welfare policy to encourage independence at all times.

SOCIAL LEGISLATION

The Department of Indian Affairs administers the following social legislation in respect of Indians:

- The Aged Persons Act, 1967;
- The Blind Persons Act, 1968;
- The War Veterans' Pensions Act, 1968;
- The Disability Grants Act, 1968;
- The Retreats and Rehabilitation Centre's Act, 1963, and
- The Children's Act, 1960.

SUBSIDY SCHEMES

Subsidies are payable to, *inter alia*, children's homes, crèches, homes for the aged and national bodies in respect of salaries of Indian qualified social workers in approved posts.

Children's Homes. Under the Children's Act, 1960, and the Regulations published thereunder, the Department is empowered to pay special grants towards the cost of extensions to children's homes and the initial furnishing and equipping thereof, the payment of a per capita subsidy in respect of committed children as well as a subsidy in respect of approved qualified Indian personnel in such homes. For the erection costs of such homes loans are obtainable from the Department of Community Development.

Crèches. The establishment of crèches has a definite social significance. The Department is of the opinion that indigent mothers who are desirous of maintaining their independence by their own efforts to care for their children, should be encouraged to do so. The absence of a working mother from her home during the day creates the problem of effective supervision and care of the pre-school child, and the crèche is intended to meet this need. To promote the establishment of crèches the Department in approved cases assists welfare organisations financially by means of a subsidy in respect of erection costs and



Lakehaven Children's Home, one of the Children's Homes subsidised by the Department of Indian Affairs.

the payment of a per capita subsidy, subject to the conditions prescribed in the Regulations published under the Children's Act, 1960.

Homes for the Aged. The tight family group is still a notable feature of South African Indian life, despite the swift westernisation of these people which is taking place. Most of the elderly folk automatically become a charge on their grown-up children. Nevertheless, anticipating the need for some of the aged to retire to homes for the aged, the Department also subsidises institutions of this nature. The establishment of such homes is normally initiated by a voluntary welfare agency with the approval of the Department of Indian Affairs. Two such homes exist at present — one in Durban and the other in Pietermaritzburg. Sub-economic loans for building homes for the aged are available from the Department of Community Development. The Department of Indian Affairs assists with an initial subsidy for furniture and equipment and a per capita grant in respect of each approved inmate, and the refund to the Department of Community Development of the loss of interest on the sub-economic loan for building such homes.

Salaries of Qualified Social Workers in the Employ of Private Welfare Organisations. The object of this scheme is to assist national organisations financially on a sound and proportionate basis, enabling them to remunerate qualified staff in approved posts, and to plan their activities in advance. The rate of these subsidies is regularly reviewed with due regard to prevailing salary scales in the Public Service.

NON-STATUTORY SCHEMES

In addition the Department also administers certain non-statutory schemes such as the following:

Public Assistance. Assistance under this scheme which includes the provision of rations, clothing, blankets, etc., is purely a temporary measure. Every effort is made by the Department to help recipients of such relief to become financially independent again.



A probation officer visiting a case at home.

Financial Aid to Indigent Blind/Deaf Indian Students. No provision is made in the Blind Persons' Act, 1968, for the purpose of granting financial aid to blind students for post-matriculation study purposes. The Department therefore decided to introduce a scheme which empowers it to make non-statutory grants available to blind Indian students registered in terms of the Blind Persons' Act, 1968, for the purpose of furthering their studies, subject to certain conditions.

This scheme applies equally to deaf Indian students.

Medical Aids. The Department administers a scheme on behalf of the Department of Health, which provides medical aids, such as hearing aids, surgical boots and artificial limbs to indigent Indians. It has also taken under its wing dependents of South Africa's handful of Indian leprosy patients, paying grants to make up for the loss of the breadwinner's earnings, grants which continue even after the



patient has been conditionally discharged.

Maintenance of Screened Indigent Indians in Provincial Hospitals. The Department accepts responsibility for the maintenance of screened indigent Indians in provincial hospitals who are not in need of constant skilled nursing and medical attention, but who are there with the approval of the Department, and who cannot be suitably accommodated or cared for on their discharge from hospital.

PROFESSIONAL WELFARE SERVICES

Further major developments in the shaping of the Department's welfare services took place in April, 1967, when it accepted responsibility for professional welfare services for the approximately 473 000 Indians in the province of Natal, and in April, 1969, when it took over the same services for the 70 000 Indians in the province of Transvaal. What has been accomplished in Natal and Transvaal will in

The Professional Welfare Staff of the Department of Indian Affairs. Front row, left to right: Mr I. C. Dannhauser, Chief Professional Officer (Welfare); Mr L. L. Millar, Chief of Social Development (Department of Indian Affairs); Mr R. K. W. Thandroyen (Senior Social Worker). Back row, left to right: Probation Officers: Mr E. Suleman, Miss R. Seedat, Miss M. Moodley, Miss P. Mungul, Mr V. Chiba, Mrs P. Singh, Miss A. Reddy, Mr A. K. Singh. Insets: Miss C. Natha, Mr A. Veloo and Miss O. Harduth.



the foreseeable future become the prototype of a similar service for the 20 000 Indians in the Cape Province.

QUALIFIED INDIAN SOCIAL WORKERS

Conscious that effective welfare services are largely dependent on matching them with the culture, language and religious practices of the community they must serve, the Department of Indian Affairs employs Indian social workers who are university graduates in social science. The University College, Durban, catering exclusively for the Indian population group, is the main training centre for Indian undergraduates.

NATURE OF PROFESSIONAL WELFARE SERVICES

The professional welfare services at present being rendered in Natal and Transvaal comprise, *inter alia*, the following:

- (i) Investigations for the different courts, i.e., Juvenile Courts, Magistrates' Courts, Regional Courts, Supreme Courts, Main-

tenance Courts and Children's Courts. Based on the respective findings, social studies and reports are drawn up for the various courts. In their dealings with the courts the Department's social workers act as "probation officers" — their official designation in court. They are in fact individually appointed as probation officers in terms of the Children's Act, 1960. Invaluable work is being rendered in this regard. The first-hand knowledge of an expert born to Indian ways, is of the greatest help to the judicial authorities in making a wise decision, whether it be in the interest of an adult or child. For example, this inside knowledge can prove decisive when the Commissioner of Child Welfare of a Children's Court must determine whether to place a child in need of care, within the meaning of the Children's Act, 1960, with foster parents, or send him to a

Beneficiaries being paid at the Department's office in Durban.

children's home. Sometimes a child's future is best served by placing him in a school of industries, where he will receive special training. The Department for that matter, on 1st April, 1969, established its own school of industries catering exclusively for Indian youths. This institution is situated in Newcastle, Natal. It comprises a full complement of qualified personnel and training in trades of a varied nature is offered. A similar institution for Indian girls is under consideration;

- (ii) Preventive Treatment Services — those services where social work techniques are applied to rehabilitate a person or family within the normal family framework and environment and within the normal community. In practice this would be tantamount to every effort being



Above:

The Children's Court in session. The Commissioner of Child Welfare (Mr H. Evans) listening to a probation officer (Miss C. Natha) reading her report.

Below:

Mr R. K. W. Thandroyen, Senior Social Worker and Clinical Officer, interviewing a mother and her son.



made not to remove the particular person from his normal family or environment, but rather to treat him within his normal surroundings;

- (iii) Reconstruction Services — i.e., social rehabilitation services and edification in respect of a family from which a person has been removed by means of statutory measures, in order to make possible and to expedite the return of any person so removed to his family environment. When it becomes essential, for example, to remove a boy to an institution due partly to unsatisfactory home conditions, alcoholism on the part of the parents, etc., it stands to reason that constructive measures would have to be taken to improve the home conditions and to rehabilitate the parents so as to make that home a fit and proper place for the particular boy to be returned to, once he is ready for release;

- (iv) After-Care Services — those social services rendered to a person within or outside of his family environment, after he has, as a result of a court order, been cared for, treated and trained in one of the various types of institutions. Pupils on their release from institutions normally require some form of guidance with regard to their adjustment in society. The social worker has an important task to fulfil in this regard;

- (v) Supervision — i.e., a service in respect of those cases where preventive treatment acquires statutory authority by virtue of a statutory order or where the social worker must perform only a protective function in terms of such an order. In cases of this nature the person is normally not removed from his normal environment but is officially placed under supervision in an attempt to guide and rehabilitate him without removing him;

- (vi) Investigations in connection with consent to marriage of minors

under marriageable age, prison cases, etc. — as regards marriages two types of Indian marriages are recognised by Law :

- (a) Those solemnised in accordance with the provisions of the Marriage Act, No. 25 of 1961, the administration of which rests with the Minister of the Interior;
- (b) Those ritual marriages which have been entered into and registered in terms of Section 2 of the Indians' Relief Act, No. 22 of 1914, the administration of which is assigned to the Minister of Indian Affairs.

All applications for Ministerial consent are thoroughly investigated by the social workers of the Department, a detailed and well motivated report is compiled in each case, coupled with a definite recommendation as to the advisability of the marriage or not. Regarding visits to prisons, an arrangement exists between the Department of Prisons and the Department of Indian Affairs by which each Indian probation officer is issued with a Visiting Permit by the Commissioner of Prisons, thus enabling the said probation officer to gain entry to prisons within the particular area he is working, for the purpose of interviews with a prisoner, to obtain information for the court, etc. This arrangement works most satisfactorily ;

- (vii) Investigation of applications for subsidisation of posts of social workers under the control of national or provincial organisations. As was previously mentioned, welfare services are rendered on the basis of partnership between the State and private welfare organisations and the Department therefore subsidises the salaries of qualified Indian social workers employed in approved posts by voluntary welfare organisations. A suitable division of functions between the Department and these bodies exists and has

resulted in the efficient and orderly implementation of welfare work and ensured proper co-ordination of field services ;

- (viii) Investigation of applications for registration in terms of the National Welfare Act, 1965, in so far as it affects Indians. The said Act is a statutory measure, placing strong emphasis on co-ordination ;
- (ix) Inspection services in respect of the various children's institutions, homes for the aged, etc. These are also regularly carried out by the social workers attached to the Department.

PLACE OF SAFETY AND DETENTION

The Department of Indian Affairs also conducts its own place of safety and detention — the Valley View Place of Safety and Detention — in Durban. This is an institution for the reception of Indian children ranging from infancy to 18 years old, which provides temporary refuge until the child's future has been decided upon by the authorities.

OBSERVATION CENTRE

The afore-mentioned institution is also an approved Observation Centre in terms of the Children's Act, 1960, used to provide those concerned with the care and treatment of needy children, especially behaviour deviates, with scientific knowledge and assistance. A clear diagnostic picture of the children's particular needs and problems is obtained which, in turn, indicates the type of treatment necessary. The Observation Centre has an Observation Committee composed of representatives of various disciplines, such as social work, psychology, medicine and psychiatry.

GROUP WORK

In addition to the usual facilities, Group Work as one of the recognised methods in Social Work is applied at the Place of Safety in Durban, with great success. Groups of Indian children work together on a definite programme, thus learning reciprocity as each receives due praise and recognition for what he contributes to the group. Apart from its remedial value,

Group Work also yields valuable scientific data.

INTAKE SECTIONS

Interviewing has been described as "the tool par excellence of the social worker". Of all the social work techniques it is the most constantly used. The Indian social workers of the Department prove to be no exception. They are constantly practising some form of case work interviewing, exploring the attitudes, experiences and opinions of a wide variety of personalities in the various Intake Sections (Social-clinic and Screening Sections) of the Department. Parents can bring their children to these Intake Sections so that the social worker, using a variety of interviewing techniques may pinpoint problems and help to overcome them. Cases requiring more intensive investigation and attention are referred to the field staff of the Department or to other appropriate agencies for investigation.

These Intake Sections, or to call them by their more descriptive names, the Social-clinic and Screening Sections, aim at providing a full family service. Not only children but grown-ups as well may bring along their problems. At an adult level much time is spent on sorting out marital problems which come high on the list of priorities because it is the Department's policy to solve social problems in terms of the well-knit family group.

ADOPTIONS

The adoption of a child is effected by an order of a Children's Court, granted on the application of the adoptive parent(s). The report relating to such an application for adoption in so far as it affects Indians is a matter which is dealt with by this Department. All such adoptions are registered by the Department for which purpose a Registrar of Adoptions, exclusively for Indians, has been appointed.

METHODS IN SOCIAL WORK

In the sphere of social work the Department of Indian Affairs utilises all three recognised methods, namely the **Case Work Method**, the **Group Work Method** and the **Method of Community Organisation** •

THE WORK OF THE NATIONAL COUNCIL FOR CHILD WELFARE

WITH PARTICULAR REFERENCE TO THE INDIAN CHILD

THE VOLUNTARY child welfare movement should be a matter of pride to all South Africans whatever race group they belong to. Not because the movement is, or even remotely claims to be, a paragon of organisational or operational virtue but because, by its very existence, it refutes, in some measure at least, the indictment against the community in the statement attributed to the philosopher Socrates, when he said :

"What mean ye, fellow citizens, that ye turn every stone to scrape wealth together and take so little care of your children to whom ye must one day relinquish all?"

South Africa has been, and is still, busy turning every stone towards greater economic and industrial progress and in this process social ills have been and will continue to be, unfortunately, multiplied. Whilst it is human to marvel at technological and industrial achievements, it is intelligent to recognise and accept that the need for greater social care of both a corrective and preventive nature, for everyone, but especially for our children, goes side by side with such attainments. It is the other side of our bright newly-minted coin.

South Africa is greatly indebted to those far-seeing citizens who in 1908 laid the foundation for the child welfare movement in our country by establishing the first Child Welfare Society — quite applicably in the mother city, Cape Town.



The Director, Mrs Eska Dowling, author of this article.

These persons had the intelligence and were sufficiently public-spirited to recognise the plight of the child in the developing economy and they decided to do something about this. This is still the way child welfare enthusiasts operate — child welfare earnestly endeavours not to "pass the buck".

From Cape Town the movement spread to Johannesburg and from there across our country. By 1924 there were 38 Child Welfare Societies and it was in this year that it was realised that if progress of the movement was to be maintained and expanded, and if it was to make the required impact on governmental authority and so effect the changes and improvements necessary for the better care of children, it needed a central co-ordinating and standard-setting body who would be equipped and authorised to speak on behalf of

all. So it was that the National Council for Child Welfare came into being, this time in Bloemfontein.

Right from the start, the individual societies and so also its National Council, accepted responsibility for all children — irrespective of race, culture or creed. It resolved that it would not align itself with party politics, religious dogma or cultural ideology, because, in adopting this approach, it would be free to act independently with only one purpose in mind, the best interests of all children.

This is still the stated philosophy of child welfare and although the movement consciously promotes rapport with the authorities at the various levels, it has never hesitated to point out to the legislature when its decisions are harmful to family life and also to the child.

Today, 47 years later, the National Council for Child Welfare is one of the largest registered welfare organisations in our country. It holds, through its affiliated Societies and its own staff contingent, by far the greatest number of State-subsidised social worker posts: 113 White, 49 Coloured, 31 Bantu and 22 Indian. **Affiliated membership** is held by 149 registered child welfare societies, of which 17 are Indian Societies. **Representative membership** has been awarded to 27 national or provincial welfare organisations working in other fields and to 14 non-welfare organisations, 17 local authorities, three Municipal Associations and all four Provincial Administrations. Twelve State Departments and all the Universities or University Colleges enjoy consultative status.

The Council operates on the following basis :

- (a) **It creates the opportunity**, through its four national forums, one for each race group, for member organisations to regularly and systematically present for national deliberation, the problems experienced in securing the best interests of children.
- (b) Because the Council **recognises the need for the application of relevant professional knowledge together with experience** in finding informed and practicable solutions

to problems encountered, it submits such matters, when applicable, to specialist forums. These are the Standing Committees for Professional Social Work, Voluntary Work, Adoption, Institutional Care of Children, and Health, Nursing and Mothercraft.

(c) **Final consideration and implementation** of resolutions taken by the non-White forums and the Specialist Committees is the function of the Council's Executive Committee.

(d) **The Council maintains a head office and two sub-offices** in Johannesburg, Stellenbosch and Durban and employs 13 professional social work staff (including an Indian Regional Social Worker), one nurse and 20 administrative staff in order:

- (i) to maintain a growth producing dialogue with the societies and other members of Council, the various authorities at central, provincial and local level and other welfare organisations in and out of South Africa;
- (ii) to advise and assist Societies in accordance with their needs and knowledge available to this Council by means of visits and correspondence.
- (iii) to collect and research information which is likely to improve the existing services for consideration by the Council's various forums and committees.

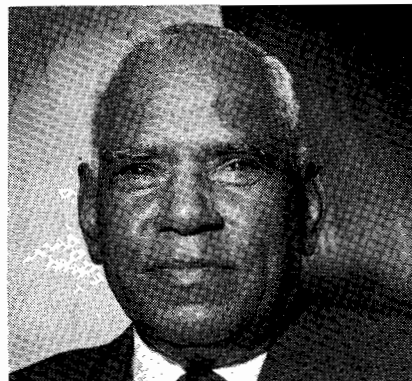
Non-White Child Welfare Work With Particular Reference to the Indian Group.

As mentioned earlier, the need for better care of children was recognised in respect of all race groups. Historically, action was taken on behalf of all children by the White group and the Societies who thus came into existence dealt with all children in their area of operation. As the need for services expanded, as it became obvious that the problems presented by the various race groups differed and as leaders from the non-White groups emerged, Societies gradually came into being purposely for service to a particular non-White group. In

the majority of cases the membership and management of Societies established for service to a specific non-White group still consisted mainly of members of the White group.

In terms of Government welfare policy as outlined in 1966, it is now required that each race group will accept responsibility for welfare services to that group. Because it is recognised that the non-White groups may require the assistance, experience and expertise of the White welfare pioneers, their participation is welcomed and encouraged in an advisory capacity. Encouraging, assisting and in some ways educating, the non-White groups to take over the responsibility for their own children is still a major activity of many White managements of comprehensive Child Welfare Societies. Committees, under auspices of a White Society are being established for a particular non-White group and every effort is made to assist them to that stage when they will be able to become an independent Society.

However, as far as the Indian child welfare movement is concerned, they were able to initiate and develop facilities without much if any assistance at local level, from persons of the White group.



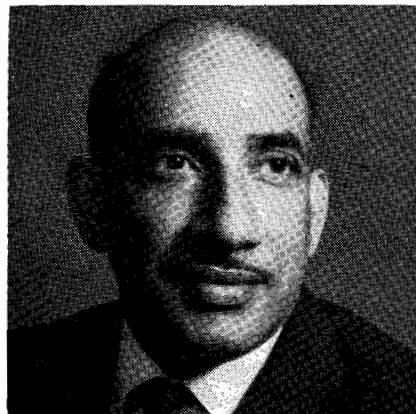
The late Mr P. R. Pather.

The Council's Involvement with Indian Child Welfare Work is presently as follows:

Co-ordination and Communication.

1. The Council created in 1967, in contrast to its earlier non-White forum, a special national forum for Indian Child Welfare Work

(the same was done for the Coloured and Bantu group). This forum meets annually for two days under Chairmanship of an Indian representative. Mr P. R. Pather was the first Chairman of this Committee and after his death in 1970, Mr M. E. Sultan was elected.



Mr M. E. Sultan.

2. Each affiliated Indian Child Welfare Society is entitled to a specified number of delegates determined in accordance with the scope of their work.
3. The Council, from its own funds, assists Societies to attend the meeting, which is held in Johannesburg, by allocating one first-class rail fare and 50% of the rail fare in respect of the other delegates.
4. Liaison between the Indian and the White group is established by the attendance at the national Indian forum of Council's Chairman, the Executive Committee Chairman and the Chairmen of the Council's several Specialist Committees. The secretarial work is undertaken by the Council's head office staff.
5. The Chairman of the Indian Committee presents a report on the meeting, including all the resolutions taken, to the Council's Executive Committee when it meets later in the year, for this Committee's consideration, and if approved, implementation by Council's staff.
6. To assist the members of Council's national Indian forum in their discussions and also to acquaint them on a more personal level

with the various State Departments involved in Indian affairs, the Council arranges for representatives from the Department of Indian Affairs, as well as other relevant Departments, to attend the meeting.

7. The Council also acknowledges, as it does in respect of its White national forum and the Bantu and Coloured group, that it is to the advantage of the work to grant representation to other organisations and institutions. As such the Natal Indian Council for Child Welfare is represented on Council's national forum for Indian Child Welfare Work, as are those local authorities who have responsibility for Indian communities and who are represented on Council, and the Indian University College.

Enabling Services.

The Council, from its own funds, undertakes the following:

- (a) **Financial Assistance to Societies to employ social workers or welfare personnel.**

Welfare organisations who wish to provide their communities with professional social work services or who wish to expand their existing social work services, must give proof to the State of the need for such a first or additional post before a State subsidy is considered. In practice an organisation needs the services of a properly qualified and preferably experienced social worker to prove their case and, furthermore, the number and type of cases registered at the applying Society, must conform to a specified norm before a subsidy is granted.

Applications for subsidy are investigated by the State's officials and this means that even in the event of an application succeeding there is an inevitable time lag of at least one year between lodging an application and the granting of a State subsidy. In practice, usually because of the norm requirement, most Societies have to carry a post without any subsidy for a number of years, three years being the average.

It is to meet this problem that the Council, from its own funds,

inaugurated a system some five years ago, whereby it assists deservicing Societies to employ professional staff during the period they are waiting for a State subsidy.

From 1967 to 1970 the Council spent R59 465 on this policy of providing assistance to Societies (all race groups) as an interim measure while the Societies were developing to the stage that they could qualify for a State subsidy. Of this amount R18 355 (thus nearly one-third) went to Indian Societies. Included in this amount is also the assistance given to certain Indian Child Welfare Societies, who, because of the dire shortage of qualified Indian social workers, are forced to employ persons who are still studying extramurally for their degree or diploma in social work.

It is considered that assisting Societies who do not have sufficient funds of their own to inaugurate or develop social work services is a most essential function of the Council, and that, funds permitting, this enabling service should receive priority.

- (b) **Guidance to Social Workers, Welfare Personnel and Boards of Management.**

The Council inaugurated a travelling social worker system (as it was then called) in 1938. This to assist all local Child Welfare Societies in maintaining or raising their standard of work and to initiate newly-appointed social workers. In 1962 the scheme was revised to provide for the appointment of several White Regional Social Workers and an Indian, Coloured and Bantu Regional Social Worker. The field of activity was enlarged to include all aspects of community organisation relating to children.

In 1963 Mr B. A. Naidoo was appointed as the Indian Regional Social Worker and although stationed in Durban he has responsibility for the other relevant provinces as well.

So successful has this service from the Council been that most

Indian Societies, probably all, look upon Council's Indian Regional Social Worker as their own personal counsellor. Expansion of the service is long overdue but to date, finding the right incumbent for a second post remains an unsolved problem.

- (c) **Policy Matters and Negotiations in This Respect With Authority.**

In accordance with the Council's requirements for affiliation in respect of all race groups, individual Societies cannot directly approach relevant authorities on national child welfare policy matters. Societies are required to make such issues known to the Council's Executive through the established channels described elsewhere in this article.

It is in this respect that the Council often by means of deputations or correspondence, endeavours to effect indicated changes in State policy as it affects child welfare and sometimes with success, due to the validity of the underlying reasons as submitted to Council by the service units, the Societies, and also due to the very co-operative relationship which exists between this Council and the Department of Indian Affairs.

THE FUTURE

From the level of discussion at the Council's national Indian forum and in terms of the work performed by the Indian Societies, it is clear that Indian child welfare work has come a long way since the formation of the first Indian Child Welfare Society, in 1927, in Durban.

However: It is a sobering thought that while this excellent development was taking place the forces which cause social disruption have not bypassed the Indian group in South Africa. The extended family with its preserving quality is disappearing.

Consequently, Indian Child Welfare is faced with many challenges. But if the future may be assessed in terms of past achievement and because this in turn was due to the fortitude and inventiveness which characterises the South African Indian, the future of the Indian child is in competent hands.

THE WELFARE OF THE INDIAN BLIND AND DEAF



By MR C. M. BASSA,
Chairman: South African National
Council for the Blind, Division for
Indian Blind and President of Natal
Indian Blind and Deaf Society.



Workshop: Natal Indian Blind Society,
Durban.

IN COMMON with most Social Welfare Services in South Africa, work for the Welfare of Blind and visually handicapped persons owes its beginnings to public-spirited citizens who recognised the need for ameliorating human suffering. These pioneering efforts were given official State recognition in 1936 when the Blind Persons' Act was first promulgated, and the State and voluntary organisations have since worked jointly to rehabilitate visually handicapped persons.

The first major organisation catering for the welfare of handicapped

persons in the Indian community, the Natal Indian Blind Society was established during that same year as part of the Natal Bantu Blind Society by a group of devoted European voluntary social workers, led by Mrs Constance Cawston, to whom South Africa owes a deep debt of gratitude for her selfless efforts to restore faith to those who believed they were doomed to live on charity.

The Natal Indian Blind Society became fully independent in 1939 and the funds of the Societies were subdivided in the ratio of 136:1714. Thus the initial capital of the Indian

Society was £6 14s. 6d. From this date separate minutes and records have been kept and these give some idea of the devoted work that was being done. Grants were made whenever funds permitted to the most needy of the blind people; spectacles were provided; hospitals were visited and food and clothing distributed. New cases were followed up and helped.

In those early days there were few workers and very little money. The enthusiasm of the courageous band of workers was boosted by the fine gesture of the late Mr M. A. Motala

in donating half an acre of land for the erection of a home and workshop. An architect was commissioned to prepare the plans for the building but the apparent lack of support from the Indian community forced Mrs Cawston to consider dissolving the Society in 1948. Fortunately, Mr (now Reverend) Paul Sykes, who was already actually engaged in welfare work for Indian tuberculosis sufferers, heard of this and gathered around him a band of Indian voluntary social workers who formed a new and vigorous committee. Mr Sykes was elected President, but he made it clear that he took on the job in a caretaker capacity. In 1949 the late Mr Kunnabiran M. Pillay was elected President, a post he held until his untimely death in 1966. He led the Society with such unflagging zeal and enthusiasm that by the time of his death, it had grown into one of

the best organised and active welfare agencies in the Republic.

From the date of its re-organisation, the Society has adopted a three-point programme: to prevent blindness; to rehabilitate blind adults and to educate blind children.

In 1954 the Society established the Arthur Blaxall School for the Blind, the first school in South Africa for the education of visually handicapped Indian children. Starting with a roll of 10 pupils in a cottage at 29 Lorne Street, Durban, the school soon began to make an impact on parents of children with visual defects and by 1963 the Board of Management of the School was forced to consider plans for the expansion of the school. In the meantime the secondary section of the school had started.

In 1968 the school was transferred to a property in Pietermaritzburg which had been used as a boarding school for White children until the area had been proclaimed for Indian occupation in terms of the Group Areas Act. The buildings which provide classroom and hostel accommodation for about 60 pupils are situated on a site of 9½ acres. Plans for extensions to the buildings are at present under consideration. The school has been subsidised by the State since 1955. The total running expense for the year ending 31st March, 1970, amounted to R38 499 and of this the Department of Indian Affairs contributed R32 585.

The aim of the school is to educate the pupils through the medium of braille so that they receive an academic education the same as they



A Social Worker of the Society, Mr I. Gayaparsad, testing a child for deafness with an Audiometer.

would have had had they suffered no visual handicaps. In 1966 the school turned out its first batch of matriculants, some of whom are pursuing Post Matric courses at the University College, Durban. Others who are not academically inclined are placed in the open labour market. A diversified curriculum to cater for all vocations is to be introduced shortly.

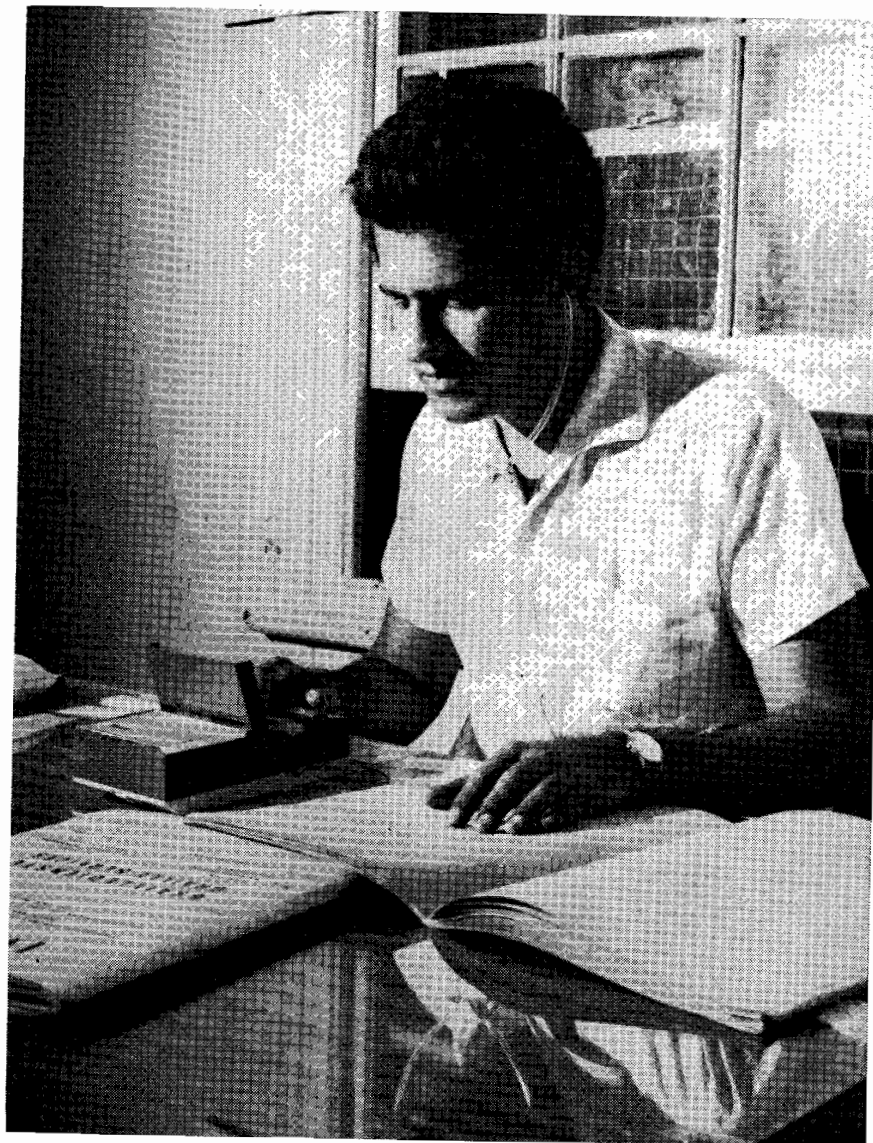
For the rehabilitation of the adult blind the Society conducts a workshop in Durban, where they are trained in the making of baskets and cane furniture. There are at present 50 blind workers at the workshop, which is subsidised by the Department of Labour. A newly blinded person introduced in the workshop has first of all to be made to adjust himself to his disability, regain his self-confidence and reassured so that he does not fear the future. Over the years the public has been trained to accept a handicapped person as normal and to a large extent a disabled person is no longer regarded as a burden or social evil.

During the time that a visually handicapped worker is at the workshop, his or her aptitudes are carefully assessed and with the aid of the employment officer of the South African National Council for the Blind, every effort is made to place the worker in the Open Labour Market. At present 13 clients have been placed in the following occupations:

- 4 drug packing;
- 2 box folding;
- 1 machine wrapping cotton wool;
- 3 pressers (clothing);
- 1 brush maker;
- 2 switchboard operators.

From reports received, the employers are very satisfied with the progress of these workers and it is hoped that more industries would co-operate in employing blind workers.

To supervise the welfare of these workers and all other blind persons who come under its care, the Society has on its staff two Social Workers who work in close collaboration with medical personnel, Government Agencies and members of the Society with the aim of rehabilitating them to the fullest physical, mental, social, vocational and economic usefulness.



Studying in Braille: Mr Mahomed Zakeria Yacoob, an ex pupil of the School for the Blind, who has completed the requirements for the B.A. Degree, is presently studying for the B.Luris Degree.

It is, of course, not possible to restore all blind persons to gainful employment. The aged and frail are advised to obtain State pensions and assisted in every other way to enjoy the fruits of life. The Social Workers of the Society visit them periodically at their home; winter comforts are provided and socials are arranged where they meet others similarly handicapped. A Social Club, the Southern Lights Social Club, has been formed in Durban. Membership of the Club is open to any registered blind Indian person. The aim of the Club is to organise recreation and to provide a forum for the discussion of mutual problems.

A blind cripple at his work bench at the Natal Indian Blind and Deaf Society's workshop in Durban.

Clients are encouraged to avail themselves of the excellent service provided by Tape Aids for the Blind, which makes available tape recorded literature of all kinds free of charge to any registered blind persons. Tape recorders on loan are also provided to persons who cannot afford to purchase them. Educational recordings for use in Schools for the Blind and individual blind students, as well as recreational recordings for adult blind, are made available.

The primary aim is to prevent blindness and here the Society works in close collaboration with the South African National Council for the Blind, which through its Bureau for the Prevention of Blindness maintains an incessant campaign for eye health. From time to time the Mobile Unit of the Bureau, staffed by an Ophthalmologist and trained nurses, conducts clinics in areas where eye clinic facilities are not available.

A recent example is the clinic conducted in Northern Natal during September last year when over a period of ten days a total of 2 116 persons were examined, made up of 824 school children and 1 292 adults and infants. Seventy-one cases were recommended for operative treatment, and arrangements have been made for these to be done at King Edward VIII Hospital, in Durban.

Every effort is made to encourage and assist any person having an eye complaint to have it attended to immediately, either at the eye clinic at a hospital or by a private ophthalmologist. The Social Workers of the Society follow up the client to ensure that the treatment recommended is carried out and persons who cannot afford to purchase spectacles are assisted by a grant from the Society. The scheme to supply free spectacles to indigent school children introduced

by the Department of Indian Affairs has been a great boon.

In the Transvaal the work for the welfare of visually handicapped persons in the Indian community is undertaken by the Coloured and Indian Blind Welfare Association and in those parts of the Cape Province where there are concentrations of Indians, such services are provided by the local societies.

The work of the Society in the field of educating the blind child inevitably drew parents of children suffering from other handicaps to seek its assistance and so began the Society's interest in the welfare of the deaf. In the early days, the Society worked in co-operation with the Durban and District Institute for the Deaf to encourage parents of Deaf Indian children to send their children to schools for the Coloured Deaf in the Cape Province but it was soon realised





A Social Worker communicating with a blind and deaf client at the Society's office.

that a school had to be provided in Natal, and so in 1969 the Society established the Durban School for Indian Deaf as a Day School in temporary premises at 122 May Street, Durban. The school is registered as a Private School with the Department of Indian Education and since April last year the school is being subsidised by the Department on the same basis as the New Horizon School for the Blind. The buildings provide class-

room accommodation for 50 pupils who are transported daily to the school. The accommodation at the school is far from sufficient and already the waiting list has grown to 60. It is planned to erect a school and hostel for 200 pupils on a 25-acre site in the Newlands/Phoenix Housing Development, which is to be undertaken by the Durban City Council. It is likely that there will be considerable delay before the permanent buildings are erected and consideration is at present being given to finding additional premises so as to absorb the children on the waiting list.

It is clear that the incidence of aural defects is much greater than blindness but the Society, encouraged by the increasing interest shown by the Department of Indian Affairs in the well-being of the handicapped Indian, is determined to provide the services necessary for the rehabilitation of deaf children and adults. A small number of deaf persons have been placed in suitable employment and it is planned to hold discussions with the relevant Government Departments with a view to providing employment opportunities for the deaf and hard-of-hearing Indian men and women. The constitution of the Society was amended in 1969 to include the welfare of the deaf in its objects.

A new development in the field of Social Organisation is the establishment of Divisions of the National Welfare Organisations which are to lead ultimately to independent National Organisations for each race group. The Indian Division of the South African National Council for the Blind is among the first of these Divisions. The Division functions as the consultative and Advisory Body to the Council on all matters concerning blind and partially sighted Indian persons. Local Societies concerned with the welfare of blind Indians are represented on the Division. An office for the Division has been set up in Durban and the Secretary, Mr K. R. Sitaram, works in close co-operation with the Head Office of the Council. The work of the Division is supervised by an Executive Committee elected from among the representatives of the Societies attached to the Divisions. Two members of the Executive Committee of the National Council act as advisers, consultants and liaison officers to the Division. Meetings of the Executive Committee of the Division are held at six-monthly intervals.

A great deal of work has been done but much remains to be done. Since the take-over of welfare services for the Indian community by the Department of Indian Affairs in 1963, the joint efforts of the State and the voluntary organisations have undoubtedly led to an intensification of the Welfare Services available for the Indian community and further developments can be expected in the future •

The Training of Indian Social workers in South Africa

Although the training of welfare workers in America and the Netherlands commenced towards the end of the last century, it was not necessary in South Africa until approximately the first quarter of the present century. Previously, in an essentially rural environment, welfare services were limited to economic assistance, the relief of material needs and institutional care. These services could be performed by untrained voluntary workers. During this century, however, radical changes in community life evolved, due in a large measure, to the process of industrialisation and concomitant urbanisation and extensive technological changes. Simultaneously, the nature of social needs have also undergone extensive changes. The inability of people to adapt to the new requirements of community life with its complex human relations, created new social problems. As a result of the complexity of social needs and problems the proper training and occupation of social work received its necessary impetus and subsequent development.



**By PROFESSOR W. ANDERSON,
Department of Social Work,
The University of Durban-Westville.**

THE ESTABLISHMENT OF A UNIVERSITY FOR INDIANS IN DURBAN

Until recent years, Indians, who wished to qualify themselves as social workers, were permitted to attend certain universities for Whites. This situation changed, however, with the establishment of a University College for Indians in Durban at the beginning

of 1961, and the introduction of a Social Work Department in 1962. As a matter of interest, the University College for Indians started in 1961 with 114 students in basic Arts and Science courses and has since grown to a student enrolment of 1 700, following courses such as Accountancy, Commerce, Modern Languages, Oriental Languages, Oriental Studies,

Anthropology, all the Law Courses, Administration, and other Arts courses, such as Geography, History; all the basic Science courses from Zoology to Physiology and Biochemistry, Chemistry, etc., a complete course in Fine Arts, in Librarianship, in Theology and in Pharmacy. In 1962 only one student enrolled for the Social Work course in comparison with over forty students in 1970, with a lecturing staff comprising of a professor, a senior lecturer and two lecturers.

The ratio of lecturing staff to students is thus at present approximately one to ten, which can be compared most favourably with the rest of the universities in the Republic.

DEGREES AND CONTENTS OF COURSES IN SOCIAL WORK

Although a diploma course in Social Work was offered at the university up to the end of 1970, it has been decided to only accept students enrolling for degree courses in future. A Bachelor's, Honours, Master's and Doctor's Degree can be taken which is in accordance with the regulations of the National Welfare Act of 1965 and also in keeping with similar degrees offered by the majority of universities in the Republic. At present the duration of the B.A. Degree is three years, but this period will be extended to four years with effect from the beginning of 1972. Motivations for the extension of the training period to four years are, *inter alia*, to facilitate a better professional basis by concentrating more thoroughly on the Case Work Method, Group Work, Com-



◀ Social Science Students of the University Durban – Westville at a lecture by Mrs J. Mason.

Members of the Social Workers' Society of the University Durban – Westville in a relaxed mood.



munity Organisation, Social Work Research and Administration, as well as the offering of more appropriate practical training facilities. For this reason the university authorities have already created their own ideal or model welfare services in the form of a child guidance centre and are contemplating extending similar facilities in other welfare fields which will also be under the strictest supervision of the lecturing staff and full-time qualified social workers. It is also necessary to mention at this point that all possible welfare organisations in the Republic assist in the practical training of the students.

In order to give a clear picture of what the basic three-year training entails, details of the present syllabus are as follows. During the first year's theoretical training, attention is mainly given to the following:

The historical development of Social Work with special reference to Social

Work in India as well as the Indian community in South Africa; the structure of Welfare Services in South Africa; health care and an introduction to Social Work Methods. In the second year the Case Work method, the Group Work method and Social Work Administration, is thoroughly studied in order to qualify the students sufficiently for their practical work in the aforementioned fields. In addition to this, Family, Child and Juvenile Care enjoys intensive attention. The final year comprises the following:

Intensive Case Work and Group Work, Community Organisation, Social Work Research, Welfare Planning and Social Policy, the Philosophy of Social Work, including the Western and Hindu approach, as well as Islam and Social Work, Family Therapy and the study of Specialised fields of Social Work. Apart from the theoretical tuition, opportunities for extensive

training in the practical side of Social Work, with special reference to the various methods of treatment, are provided throughout the course.

CULTURAL FACTORS REGARDING THE TRAINING OF INDIAN SOCIAL WORKERS

Great importance to the training of Indian Social Workers are the cultural factors which have to be taken into account. In this connection there are two major considerations to which the university adheres to, namely:

- (a) The lecturers are expected to be conversant with both the western and the oriental approach or interpretation of social work;
- (b) The student has to be assisted in gaining knowledge of both the western and oriental approach of social work, and has to be assisted in integrating the

two approaches in a country which is western in its outlook and which has an important minority group of Indians. The consideration is of importance, particularly from the point of view that apart from the two major groups of Indians, viz., the Hindus and the Muslims, the student has to be assisted in integrating his/her knowledge and insight with the needs of the numerous sub-cultural groups characteristic of the Indian population. In other words, the cultural values of the many different cultural sub-groups as well as the various degrees of westernisation has to be understood. In addition, the values of Christian and agnostic Indians have to be understood also.

The considerations mentioned above become of greater importance when one takes into account that an

authority on Indian social work, viz., Dr Banerjee, of the Tata Institute in Bombay, feels that western social work in India is "without a soul".

EMANCIPATION OF THE INDIAN WOMAN AND ITS EFFECTS ON THE SOCIAL WORK STUDENTS

Mention should also be made of the emancipation of the Indian woman and its effects on the student enrolment in Social Work and the possible attitudes of the students concerned. Often parents are unwilling to encourage their daughters to study, or if they do, may object to their daughters being exposed to certain situations such as visiting families with problems and travelling on public transport. It must be borne in mind that male Indians or other non-White male passengers often embarrass female Indian students. In addition to this, the student is also affected in the sense that often she has to be taught to be

less reserved. Her reserve stems from her position in the family.

Despite the resistance to the emancipation of women, the stability of Indian female social workers is remarkable. Very little mobility occurs. Since the University began training social work students, only two of those who qualified are no longer working. After marriage, young female social workers usually return to work. They may be away on maternity leave, just to resume duty against as soon as it is possible to do so.

CONCLUSION

In conclusion, it is of importance to note that the university has acquired a 400-acre site in the Indian area, where the building of a huge campus, with all the features of a modern university, will be completed by 1972. Provision is at present being made for a total of about 2 000 students during this year •



IN-SERVICE TRAINING OF INDIAN SOCIAL WORKERS AND PRACTICAL WORK TRAINING OF INDIAN SOCIAL WORK STUDENTS—DEPARTMENT OF INDIAN AFFAIRS

By MR L. C. DANNHAUSER,
Chief Professional Officer (Welfare), Department of Indian Affairs

INTRODUCTION

The functions of the Department of Indian Affairs being of a multifarious nature, embracing both professional as well as administrative spheres of service, adequate provision has had to be made for In-Service Training. Consequently, a full-time Training Officer has, for instance, been appointed for administrative and clerical personnel. A specific In-Service Training Scheme, however, also exists for the qualified Indian social workers (probation officers) of the Department, and it is the latter scheme which is dealt with in this article.

NATURE OF SCHEME

The functions of the Department, especially those relating to the treatment of the socially deviate, for which the Departmental social workers are actually responsible, are so complex and many-sided that it is essential that the more theoretical concepts be implemented properly in the practical work performed by the Department. For this reason it is accepted that persons, although well equipped academically, ought nevertheless to receive further induction and grounding in practice by means of an In-Service Training Course.

In-service training embraces all the

processes through which an officer becomes conversant with practical work and which lead to an increase in and improvement of his existing production potential and efficiency in his work as a social worker. In this he is aided, guided and assisted to develop to maximum efficiency within a fixed period, the appropriate and necessary attitudes, disposition, knowledge, techniques, skills and habits of thought and work.

In the first place, it is evident from the preceding paragraph that the officer undergoing in-service training is already a working unit although, owing to lack of experience, he will not render or may not be able to render the same high production as an officer with 3 or 5 years' experience. Likewise, the qualified medical practitioner

must first serve in a hospital for a year before he is able to commence his practice as a full-fledged physician. In the course of such a year, however, he is actually a productive unit.

In the second place, in-service training is not regarded as something quite unconnected with the officer's daily duties or as a matter which may be postponed to a later suitable date; on the contrary it is an uninterrupted and continuous process of development within the work situation.

It follows that every social worker must constantly keep himself/herself informed of the latest developments and trends in Social Work, and guard against being entrapped in the meshes of the everyday problems of their cases, thus preventing their vision in this way becoming clouded. The Social Development Division, in this

regard, at regular intervals arranges group discussions, talks, symposia, subscribes to various Social Work journals, both locally and overseas, also writes on particular aspects of Social Work in the Departmental journal *Fiat Lux*. A number of the probation officers are at present busy with post-graduate studies which further ensure keeping up with modern trends and developments in the sphere of welfare work.

The Department has also compiled an In-Service Training Manual specifically for the use of the Departmental social workers. This manual contains full details of the various types of tasks to be performed, denoting procedures to be applied, quoting the relevant Acts and Regulations and stating Departmental policy. It has proved an invaluable asset to the social workers.



Officers who have successfully completed the first year of their In-Service Training being awarded their certificates.

The In-Service Training Officer explaining a point to the Social Workers.



AIMS OF SCHEME

The chief aims of the scheme may be summarised briefly as follows:

- (i) To supplement university courses which are to a large extent of a theoretical nature, and to adapt these to practice;
- (ii) To enhance the quality of the work;
- (iii) To help social workers to make maximum use of their ability;
- (iv) To guide senior social workers in imparting effectively their knowledge and experience to less experienced officers;
- (v) To acquaint the beginner systematically with the specific nature and policy of the Department's work;
- (vi) To enable the social worker to obtain the necessary knowledge of his duties and functions at as early a stage and as quickly as possible, i.e., through this scheme social workers are trained to become units of maximum productivity in a minimum period of time.

The scheme has been devised to enable the social worker to become *au fait* with all schemes administered by the Department, including work of a non-professional nature, such as the various financial schemes administered by the Department. For the rest, the syllabus has been so arranged that the social worker, under the direction of a Chief Professional Officer who systematically conducts training by means of individual and group instruction and proper programming, is able to progress self-confidently and by degrees from the relatively simple to the more complex tasks.

IMPLEMENTATION OF SCHEME

All recruits from outside the Public Service appointed to posts of social workers are subject to the In-Service Training Course, covering a period of two years. Cases which call for special treatment are considered on their merits. In this way, for example, an officer with extensive appropriate experience in social work or a closely related profession in the course of previous service with a welfare organisation or some other Government department, may be required to complete only a special one-year



Mr V. S. Chetty, Senior Clerk of the Financial Assistance Section, explaining the intricacies of the Department's filing system to two social science students.

course. In the vast majority of cases persons receiving in-service training will be those who embark on their careers in the Public Service immediately on completion of their studies at university. As such officers have already devoted some fifteen years or more to their studies at school and university, they are now inspired with idealism and are enthusiastic to set to work. To them work is now the chief consideration. In-service training in the Department is, therefore, not regarded as further study, but rather as the means by which these social workers are introduced, through experience, to practical work. The correct attitude and disposition of the person who is subject to in-service training is aptly described as follows by Edward W. Garret in an article "Improvement of Officer Performance Through Supervision" which appeared in the September, 1963, edition of "Federal Probation":

"The majority of younger professional officers are aware that, given the assistance they desire and need, they can improve substantially

the quality of help given to persons whose well-being tomorrow may depend on how effectively they are handled by a professional officer today."

In practice, the execution of the In-Service Training Scheme for social workers rests with the regional offices of the Department from where professional welfare services (probation services) are rendered. An In-Service Training Officer, usually the Control Officer, who is a qualified social worker, is appointed in each regional office. This officer, then, is responsible for the in-service training of all the social workers under his control.

The control over the In-Service Training Scheme as such, rests with the Social Development Division of the Department at its Head Office in Pretoria. This Division is responsible for all instructions, guidance and manuals concerning the execution of the scheme and for all related correspondence.

Prior to a task being allocated to the social worker, the latter is required

to undergo an oral test on the basic principles (relevant acts, regulations, procedures, etc.) relating to the particular task. This test is performed by the Chief of Social Development from Head Office in conjunction with the In-Service Training Officer concerned. After satisfying the respective officers mentioned above, the social worker may proceed with the investigation of the task, the compilation of the subsequent report, etc. On receipt of the assignments in Head Office the Chief of Social Development analyses and marks them, advising the In-Service Training Officer as to whether or not the assignments have been accepted for in-service training purposes. Where appropriate, these assignments are constructively commented upon or criticised. If it is found that the execution of the task is of out-standing quality, appreciation of this fact is expressed and the social worker is congratulated and encouraged to maintain the high standard. Marks are awarded as follows:

- A - 75% and higher
- B - 60% - 74%
- C - 50% - 59%
- D - 49% and less.

To be acceptable to the Department an assignment must fall at least within the "C" category. At Head Office the Division concerned keeps a record of all marks and symbols awarded to each social worker.

This particular In-Service Training Scheme was introduced when the Department initially took over Professional Welfare Services in respect of Indians on 1st April, 1967, and has proved invaluable. The social workers of the Department are the first to acknowledge this.

PRACTICAL WORK TRAINING IN SOCIAL WORK

Whereas mention has been made in this article that the In-Service Training Scheme for social workers aims at supplementing university courses which are to a large extent of a theoretical nature and adapting these to practice, it is necessary at the same time to point out that university training of social workers is not confined solely to theoretical knowledge, but that provision is also made for practical work training. The universities at

which social work students enrol — in the case of Indians, particularly The University of Durban-Westville, and The University of South Africa — ensure that they are placed out for practical work training in regional offices of the Department or with private welfare organisations. Students thus placed, work under a supervisor. The supervisor, being a professionally qualified person, is expected, amongst other things, to offer them the necessary guidance and assistance in relation to their practical work which evolves around the primary and secondary methods of Social Work.

NATURE AND SCOPE OF PRACTICAL WORK TRAINING

The nature and scope in this regard can be summarised as follows:

- (a) **First Year:** At the universities students are introduced to the historical development of social work, social legislation and agency administration, and to concepts and methods of social work. Concurrent placement during the first year of study is, therefore, for the purpose of orientation. Students are given opportunities during such placement to obtain insight into the Department's Professional Welfare structure, i.e., the aims, objects, functions, organisation, administration, etc. At the Departmental offices, in addition to the Professional Welfare Services, students are also given an exposition of the functioning of the General Welfare Section where applications are taken for the various social grants and public assistance. Students also learn about the various community resources and social legislation. The first year practical training placement is a forerunner to the second and third year Case Work and Group Work placements.
- (b) **Second Year:** Second year students, having acquired the basic skills and knowledge of social work, have to receive training in Social Case Work and Social Group Work as methods of Social Work. Each student is allocated two cases, which are carefully selected. They are not expected to handle cases of a multi-prob-

lemmed nature. In accepting such cases they must use their theoretical knowledge in order to evaluate and diagnose the problem situation in the process of case work, assist the client to help himself. From this it becomes clear that there must always be close contact between the supervisor and the students. They cannot be allowed to experiment with cases. Hence, there is regular supervisory sessions with the students either individually or in groups and this forms part of the training programme. Whereas Group Work as a method in Social Work is performed at the Departmental Place of Safety and Detention in Durban (the Valley View Place of Safety), students are also placed at the said institution for Group Work training.

- (c) **Third Year:** During the third year of practical training the cases allocated are problem centred. Students are expected to use their theoretical knowledge as meaningfully as possible in practice. Very close supervision is maintained.

At the end of each year's practical training the supervisor submits a detailed report on the student's performance. The evaluation guide on the aspects to be covered in this regard is provided by the university.

Since the establishment of the Department's Professional Welfare Sections in Natal and the Transvaal increasing use is made by The University of Durban-Westville and The University of South Africa in placing Indian social work students with the Department, for purposes of practical work training. In Durban the supervisor from the Department and those from the private welfare organisations have regular meetings with the Social Work lecturing staff of The University of Durban-Westville. These meetings are held in order to ensure that students received the maximum benefit of such placements. The importance of practical work training of Indian social workers is not one to be underestimated and every effort is made by all parties concerned to devote rightful attention to this important aspect in the training of the social workers •

FOR MANY YEARS social welfare organisations have been rendering services to the Indian community. The service provided was centred around the family as a unit and invariably involved the care and well-being of children. The guiding legislation concerning children in this country is the Children's Act 1960, which has been acclaimed the world over as the finest piece of legislation involving the welfare of children. It is in terms of this Act that institutions accommodating children are established.

INSTITUTIONAL CARE

SUNLIT GARDENS CHILDREN'S HOME

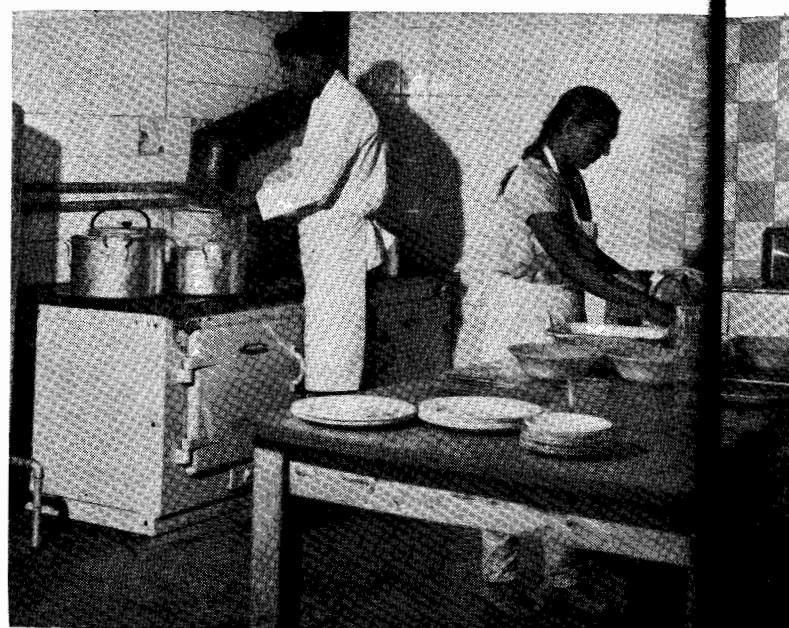
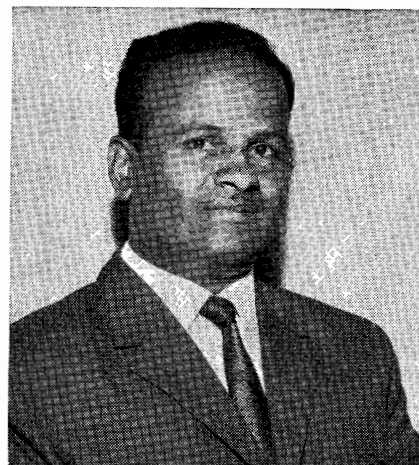
The term "Children's institutions" includes all types of institutions where the child receives full-time care and education away from its parental home, together with children from other families. These children are committed to such institutions in terms of the Children's Act 1960.

If a child's own home functions normally it cannot be improved by any other form of care because every form of substitute care has its deficiencies. It follows that nothing is gained by removing a child from an undesirable home to other forms of care if his new environment is no improvement on the previous one. It is therefore not easy to make an institution serve its purpose and those responsible for the administration of institutions should be alive to the disadvantages and should always strive to minimise those disadvantages and utilise positive elements to the maximum. In the majority of cases children's institutions are regarded as a last resort, depending on the type of child.

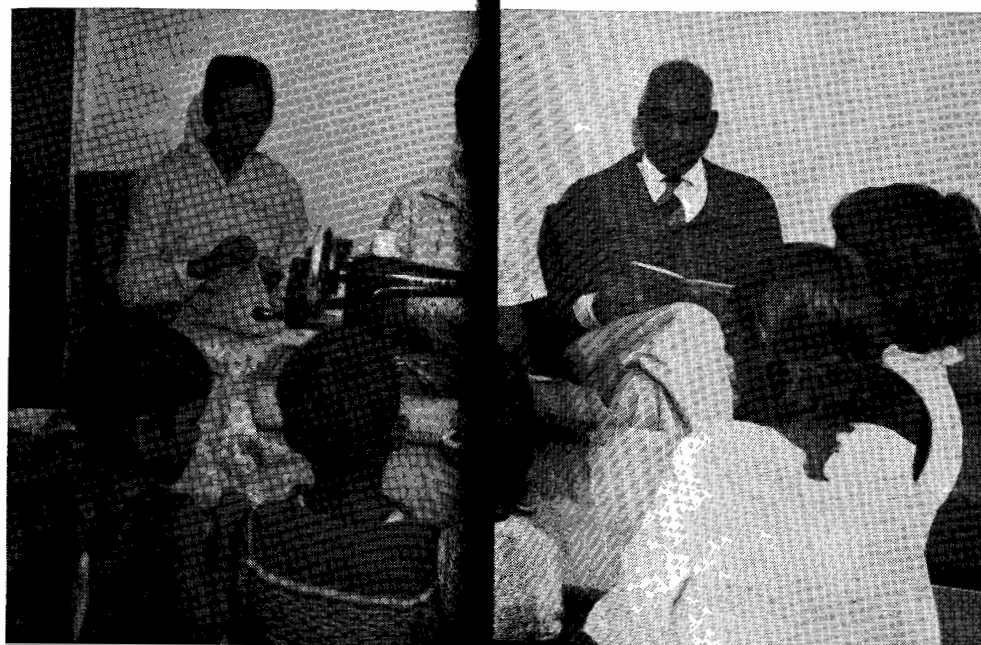
As more and more children were being removed from their parental care due to extreme neglect and cruelty the need for additional institutional care became very apparent.

The Aryan Benevolent Home in Pietermaritzburg, which has been rendering yeoman services to the poor and needy for many years, realised the pressing need and some twenty-five years ago mooted the idea of establishing a home for destitute, orphaned and neglected children. The establishment of Sunlit Gardens in the City of

By MR R.
MOODLEY,
Principal.



A daily scene in the fully-equipped and modern kitchen.



Children preparing themselves before bedtime.



Pietermaritzburg heralds a new era in our community. The idealistic dreams of the Society have now become a reality.

The Aryan Benevolent Society and the people of Pietermaritzburg are greatly indebted to the City Council for the donation of approximately five and three-quarters acres of ground in the Northdale Indian Township, on which the Sunlit Gardens Children's Home was built.

There is an administrative block, comprising a principal's office, board room, sick bay, kitchen, etc. Each of the four cottages provide comfortable accommodation for fifteen children, from infancy to eighteen years of age of both sexes. Each cottage has three bedrooms, which is a deviation from the dormitory system and in addition every cottage has its own lounge, dining-room, kitchen and separate accommodation for the house parents.

The first children were admitted during September, 1970. The children of school-going age are enrolled at neighbouring schools.

Before any child is admitted to the Home, his background and home circumstances must be fully reported on by the probation officer or social worker to the Commissioner of Child Welfare, who, if satisfied that the child is in need of care, will issue the necessary order of committal to the Home.

As the Board of Management of Sunlit Gardens is aware of the fact that it is essential to have the right personnel, every applicant is carefully screened to ensure that they have the necessary background to adequately care for the children. As a result the Home is fortunate to have the services of loyal and dedicated staff.

The principal personally ensures that all meals are properly and hygienically prepared in the main kitchen before being sent to the cottages.

Clothing is purchased by the Board of Management, and the house parents ensure that the children are always well dressed.

In order to create self-reliance, the children are encouraged to make their own beds and keep their rooms tidy, although domestic staff is available.

As far as health services are concerned, the Home is fortunate in having the assistance of the Northdale and East Street Clinics, and the services of private medical practitioners, dentists, psychiatrists, etc., who render their services on a voluntary basis and free of charge.

Great emphasis is placed on the importance of active participation in all forms of sport and recreation, such as swimming, athletics and so on. Elaborate preparations are in progress to stage a concert by the children and it is expected that this would be a regular feature.

Children admitted to this Home are not forgotten. Not only are they well cared for, but reconstruction services are continually rendered by social workers and probation officers to the respective parental homes working towards the ultimate return of the children to their original environment •



The Valley View Place of Safety and Detention

By MR J. G. ABRAHAM, Superintendent, Valley View Place of Safety and Detention, Durban.

INTRODUCTION

THE Department of Indian Affairs conducts its own place of safety and detention — the Valley View Place of Safety and Detention — in Durban. This is an institution for the reception of Indian children ranging from infancy to 18 years old, which provides temporary refuge until the child's future has been decided upon by the authorities.

Before cases involving children are disposed of by the courts, whether they are cases of children in need of care within the meaning of the Children's Act, 1960, or young offenders in the Juvenile Courts, it is customary to have the personal histories and home circumstances of such

children investigated and reported upon. Children's Courts are non-criminal courts dealing with children under the age of 18 years, whilst Juvenile Courts are criminal courts dealing with the under 18 age-group, but are also empowered to deal with persons over 18, provided they are under the age of 21 years.

The purpose of these investigations and reports is to assist the judicial authorities dealing with such cases to decide upon the most appropriate measures of care, training, etc., for these young people. As far as Children's Courts in Natal and the Transvaal are concerned, these social studies and reports in respect of the Indian population group are compiled by either Indian probation officers of the Department or by Indian social

workers in the employ of private welfare organisations, in accordance with a division of work existing between the said parties. To ensure efficient and uniform statutory services to the Children's Courts, all reports from welfare organisations to these courts are canalised through the respective departmental offices.

With regard to Indian juvenile offenders in the provinces of Natal and Transvaal, the investigations are exclusively carried out by the probation officers of the Department. It is interesting to note that social workers of the Department in their dealings with the various courts are known by the designation "probation officers". They are specially appointed by the Minister as such in terms of Section 58 of the Children's Act, 1960.



(Extreme Left): A view of the main building.

(Left): The Superintendent receiving a child brought by a probation officer.

It stands to reason that time is required for the aforementioned investigations to be completed. If the child can remain with his parents or relatives or friends in the meantime, the Act permits him to do so; but in many cases it is found necessary to remove the child from his surroundings pending the completion of investigations and the final decision of the court as to his disposal. *Such children are then removed to a place of safety and detention.* The removal of children to places of safety and detention is entrusted to policemen, probation officers and officers authorised thereto in terms of Section 26 of the Children's Act, 1960.

HISTORICAL DEVELOPMENT

Places of safety and detention are products of the 20th century. In South Africa the history of these institutions has been similar to the development of the majority of other social welfare undertakings in that it was left to private initiative, or private initiative supported by State assistance, to take the lead in such important social measures. A stage is, however, reached where financial obligations become so heavy and services so specialised that

private agencies cannot cope with the task, and the State with its better facilities for accommodation and stronger financial resources steps in to take over these services and proceeds to build on the foundation laid by private organisations.

The philosophical background of the Children's Act of 1937 was based on the axiom that the difference between delinquency and dependency is very slight. They merge into each other by insensible steps. There is only a difference of degree, implying that a child in need of care and wandering about without control may readily fall into delinquency. This basic principle led to the establishment of a single type of institution for both types of children.

Such an institution catering exclusively for Indian children was established by the Department of Indian Affairs on 1st October, 1967. The Valley View Place of Safety and Detention — as it is called — is situated in Sydenham, Durban. Prior to this date this institution served as a place of safety and detention for the three non-White population groups under the auspices of the Department

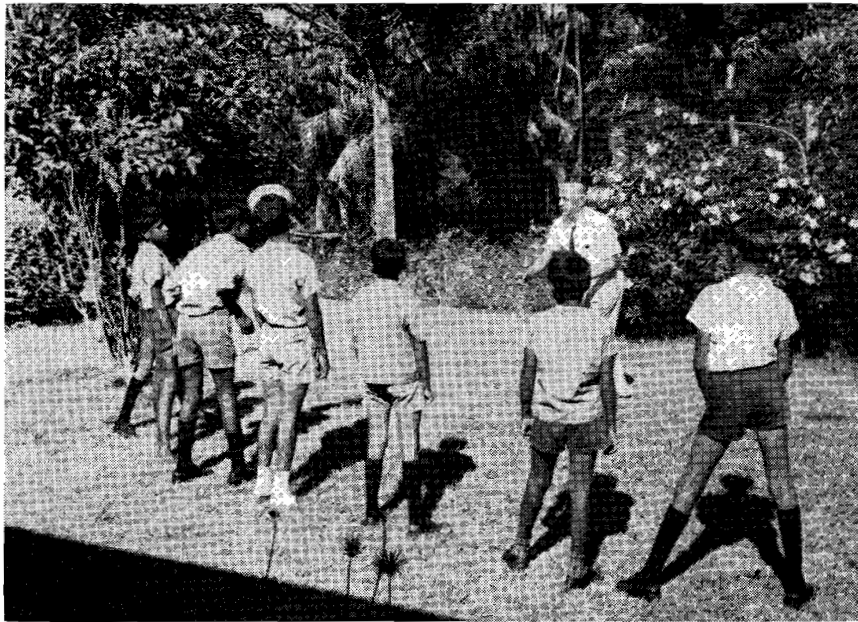
of Bantu Administration and Development.

THE PRESENT PREMISES

The present premises cover an area of more than twenty acres. The building is a beautiful colonial-style house that has an air of graciousness about it, commanding beautiful views of the Umgeni and Springfield flats area. Added beauty is lent to the institution by the variety of trees on the premises, thus giving it a park-like atmosphere. The large open spaces are ideal for the children's play activities.

ADMISSION OF CHILDREN

As mentioned earlier, the removal of children to a place of safety and detention is entrusted to policemen, probation officers or authorised officers. Children thus removed may be orphans, abandoned children, children neglected by their parents or children with behaviour problems. The institution also provides for the detention of juvenile offenders (under eighteen years) awaiting trial at court. Every child, prior to his admission, is examined by the District Surgeon in order to ensure that the child is not



(Left): Boys enjoying a ball game in the spacious gardens with their supervisor.

(Below): Mr B. Ramsumar, Assistant Superintendent at Valley View, rendering first-aid to a child in the medical room at the institution.



ensured a balanced and healthy diet for the children. It may be mentioned here that according to our present menu for the children, at least one meal per day is a meat dish.

Clothes. Each child is given a complete set of clothes, including underwear, shoes and pyjamas, and adequate provision is made for them to change regularly — at least three or more times a week for the bigger children, and for the smaller ones more frequently as and when necessary.

The Department allows each child a complete set of clothes to be taken away at the time of his release.

Bedding. Every child is provided with a bed with complete bedding. This includes a divan with mattress, two sheets, two or more blankets, pillows, etc. Bedding is changed twice a week. No child is allowed to sleep on the floor.

Medical Care. In addition to the child being examined by the District Surgeon prior to his admission, the institution has the services of a visiting doctor who calls at least once a week for regular medical examination of the children. Should it be necessary to hospitalise any child, both the King Edward VIII and King George V Hospitals are made available to the institution.

Schooling. Children of school-going age attend neighbouring schools. It stands to reason, however, that discretion has to be used in this regard as there are some children who, for example, are truants and it is not advisable to send them to school.

The possibility of establishing schooling facilities as such on the premises is a matter that the Department has not overlooked. It is as yet, however, still on the Department's planning board.

Those children that do not attend school from the institution are not left

suffering from any infectious or contagious diseases. If the child is suffering from any such diseases he is nevertheless admitted, but is isolated from the other children until such time as he has recovered.

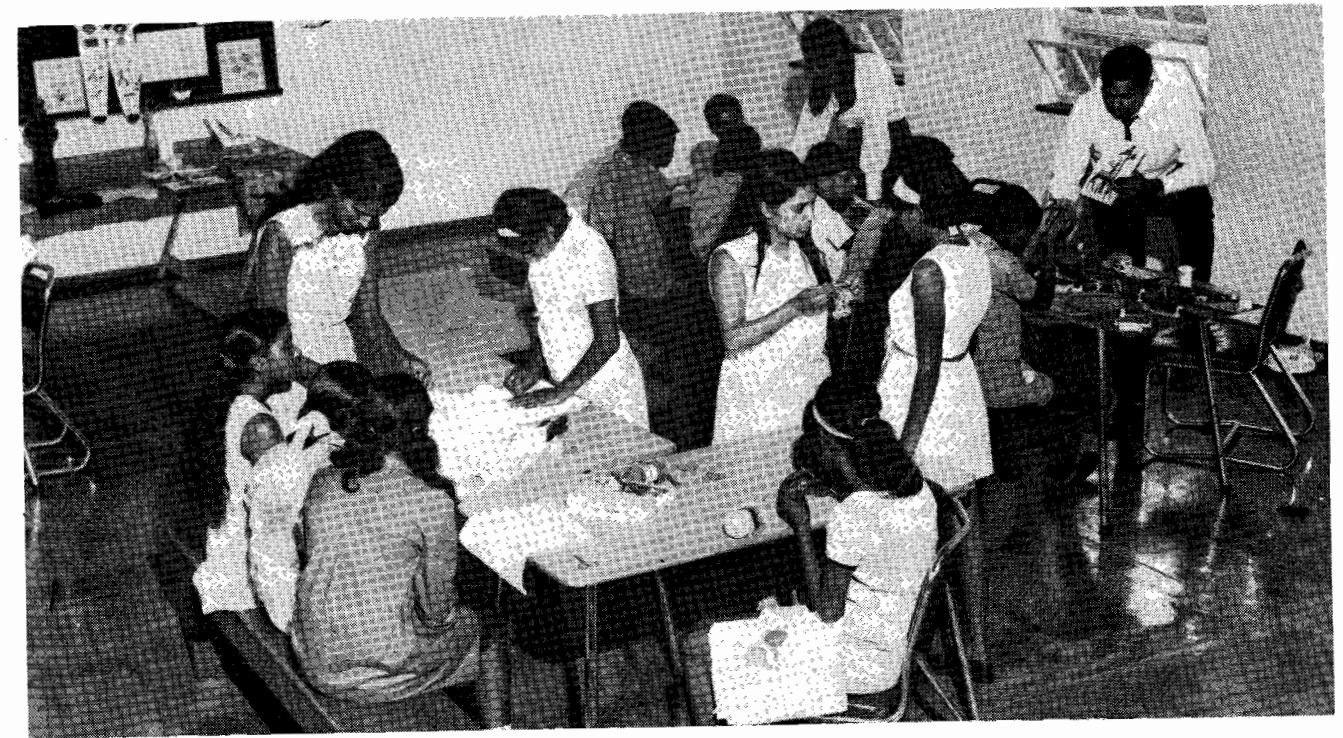
RECEPTION AND CARE OF CHILDREN

Upon admission the child is interviewed by the Superintendent (or Assistant Superintendent) in order to make the child feel welcome and comfortable. The child is also informed

of the general rules and regulations of the institution.

The children are under constant supervision of three male assistants for the boys, and two female assistants for the girls. These staff members see to the daily care, safety and hygiene of the children.

Meals. The meals provided for the children are typically Indian in character. They are, however, prepared in accordance with specifications laid down by State dieticians who have



Children happily engaged in group work under the supervision of the probation officers.

idle the whole day. A daily programme has been devised for them in order to prevent boredom. This normally takes the form of work activities in the morning and play activities in the afternoon. The bigger girls, for example, help with certain household duties, while the boys see to the general cleanliness of the grounds.

Sport and Recreation. The Department provides the institution with various games and sporting equipment. These include : table tennis, badminton, cricket, soccer, netball, volley ball, swing ball, carrom board, darts, chess, etc.

Film Show. The institution has a film show at least once a month, and this is sponsored by the Durban North Rotary Club.

GROUP WORK

A very important activity at the Valley View Place of Safety and Detention is the undertaking of group work by probation officers from the Department twice a week.

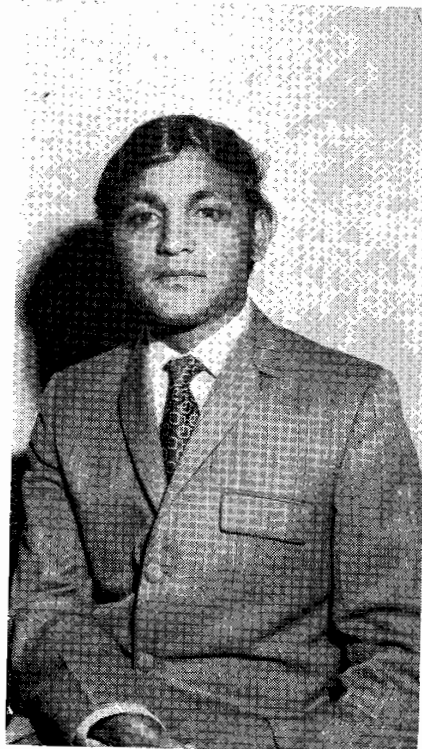
Social Group Work has been described as a process and method of social work through which individuals in groups are helped by a social worker to relate themselves to other people and to experience growth opportunities in accordance with their needs and capacities. Group Work always focuses on the individual and group growth. Its purpose is primarily therapeutic.

As practised at the Valley View Place of Safety and Detention, group work takes the form of probation officers undertaking organised group activity with the children. It must be emphasised that probation officers deliberately plan their programmes so that the nature of the programme lends itself to certain therapeutic objectives. These include :

1. **Individualisation.** Group Work is not "group thinking" in the derogatory sense. It does not aim at conformity, but on the contrary, it helps individuals to free themselves while being helped to interact with their fellow men, and to instil a feeling of self-worth.
2. **Development of a Sense of Belonging.** Loneliness, one of the deepest despairs of mankind, is

not something that can be helped by just meeting people. It is a deeper inner need that can be helped only by developing an emotional maturity in the individual himself and giving him the kind of association that has real meaning.

3. **A Basic Development of the Capacity to Participate.** Participation is not something that always comes by itself. It is often presented exclusively as something pleasurable, something that everybody wants and feels hurt by its being withdrawn. But that is really only the one side of the feelings we have of participation. "The laziness of the heart" is what Schiller, German philosopher and poet, calls this other side of our feelings about participation. We want it. But we like it if we do not have to make the efforts and if some decisions are made for us. The skilled group worker will accept this ambivalence and work towards overcoming it through positive experience. This again leads to greater freedom of the individual and to a form of self-discipline by overcoming his dependency tendencies.



Mr J. G. Abraham,
writer of this article.

panel representing various disciplines: psychiatry, psychology, medicine, social work, etc. Discussion by the panel is intended to lead to a proper diagnosis of the child's problem, which in turn helps the social worker to make the correct decision regarding the child's future care and custody.

CONCLUSION

The increasing use of the Valley View Place of Safety and Detention by the various social agencies and courts is indicated by the fact that whereas by the end of 1968 the institution had provided care for 665 children this number had soared to 2 507 children by the end of 1970, and represents children from 303 families. At times the institution has catered for up to 99 children during a month. By establishing a place of safety and detention for Indian children, the Department has decidedly provided a most valuable and essential service to the Indian community •

4. Increased Respect for Differences Among People.

Groups have difficulty in achieving unity and a feeling of belonging and they will try to achieve this easily by demanding complete conformity from the individuals in their group or by choosing their members so that only people with the same inclinations can belong. We find these people often in our own society. Yet if we want humanity to live together peacefully and constructively, we will have to help them to accept these differences among people, not as a liability, but as something that makes life richer and more interesting. In institutional work we often see the formation of anti-social cliques because of the fear of the already insecure individual to associate with anybody different.

5. Development of a Warm and Accepting Social Climate.

This is the most intangible and yet the basis for any constructive work where several people work together. Eva Burmeister has described this beautifully when she says in her article "Social Climate in the Institution" — "that one can feel the tone of a children's home as soon as one enters the front door. There is something in the air, the noises, the smells, sounds, space, colour, the light, the movement and expressions on the faces of the children and staff, that tells the whole story". Constructive group climate frees its members to give to others and to accept from them in a free interplay of human personalities.

Every child arrives with his own background and experiences. Consequently he projects into these group work sessions his previous relations in real or phantasy groups. Tension and resistance are natural features in any group. Usually the group starts in a cold, self-conscious, reserved and silent atmosphere with an undercurrent of hostility. But with the social workers' demonstration of skill and goodwill to the group, these relationships are channelled into more constructive forms of expression, to socialise themselves in the group setting, say by toy making — by working together and helping one another.

Observations of the child's behaviour in such surroundings while he is creatively engaged enables the probation officers in gaining a better insight into the child's problem. Such insight, which is reflected in the probation officer's report to the court, enables him to make the most appropriate recommendation regarding the child's future care and custody. Group work as a method in Social Work has been practised at the institution since its inception and has proved to be a dynamic force in the short-term treatment of children at the institution.

OBSERVATION CENTRE

The Valley View Place of Safety and Detention has also been declared an Observation Centre in terms of the Children's Act. This provides for the referral of children with deep-seated emotional problems to the institution for observation. Observations of the child are then presented to an Observation Committee, comprising of a

The National Institute for Crime Prevention and Rehabilitation of Offenders

By MR R. GRASER,
Director of N.I.C.R.O.

HISTORICAL BACKGROUND

It was in 1910 that the first country-wide organisation for the aid and after-care of prisoners was formed. Recognising the need for such an organisation, the Secretary of Justice, Mr J. de Villiers Roos, founded the South African Prisoners' Aid Association, the main objects of which were to visit prisoners, to supervise offenders released on parole and to bring about general social reform with a bearing on rehabilitation and crime prevention. Among the co-founders and supporters were Mrs Louis Botha (wife of the Prime Minister), the Hon. J. T. Molteno (Speaker, House of Assembly), Mr F. C. Gardiner (Attorney-General), the Hon. General J. C. Smuts, Mr N. P. Mardall (Assistant Commissioner and Inspector of Prisons), and the Bishops of Cape Town, Kimberley and Kuruman.

By 1917 there were nine branches in the following centres: Bloemfontein, Cape Town, Durban, East London, Johannesburg, Kimberley, Pietermaritzburg, Port Elizabeth and Pretoria. In the early stages prison visiting and prisoners' aid work was done by volunteers, and untrained persons.

In 1933 a new society, the Probation League of South Africa, was established. As it was also concerned with crime prevention and rehabilitation, there was duplication and an amalgamation with the Prisoners' Aid Association was effected in 1935. This Society was given the new name of Social Services Association of South Africa, under which it operated for the next thirty-five years. In September, 1970, the name of the Society was

changed once again — to the National Institute for Crime Prevention and Rehabilitation of Offenders (NICRO). It was felt that this designation described the functions and aims of the organisation more adequately. While NICRO continues to strive for the welfare of adult offenders and their families (of all races and creeds), it will strive increasingly for the prevention of crime by undertaking and stimulating research in the field of criminology and by disseminating information on crime, its causes and consequences.

Following is a brief outline of the field covered by NICRO:

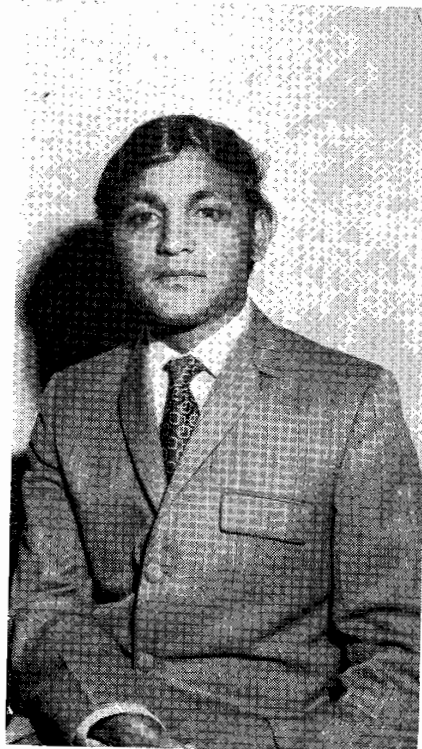
WORKING WITH THE PRISONER AND HIS FAMILY

(a) Prison Visiting.

The person who lands in prison generally does so because of an inability to lead a normal socially constructive life in the open community. Most offenders have some character disorder, emotional or psychological problems and need professional guidance and assistance to overcome their problems. The majority of prisoners also have family problems and other difficulties in the community which need attention. In order to meet these needs the social workers of NICRO conduct regular prison visits at the major centres throughout the country. Married offenders are usually anxious about the welfare of their families and our social workers also conduct a large number of home visits in order to bridge the gap between isolation in prison and life in the open community.

Offenders are often helped even before they have been sentenced. While awaiting trial the accused can be seen at the "grille" and assisted with immediate problems arising out





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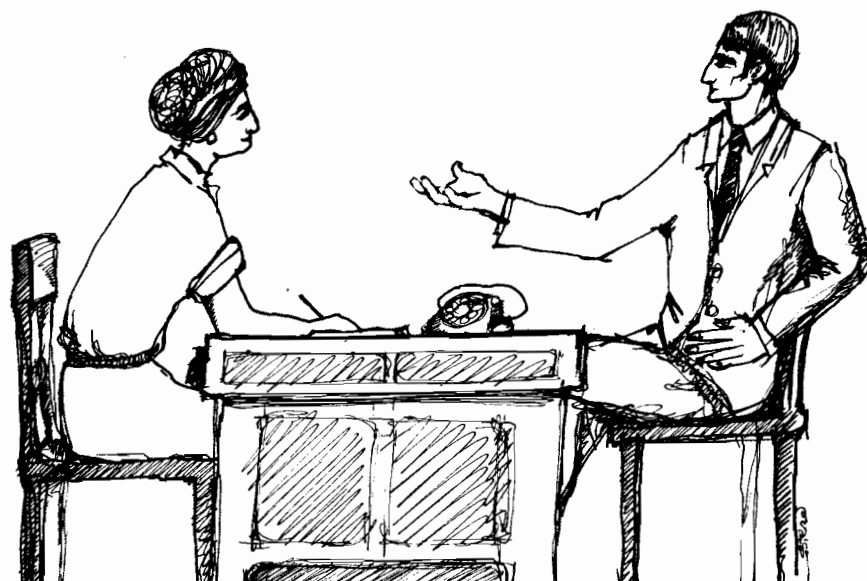
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Offenders are often helped even before they have been sentenced. While awaiting trial the accused can be seen at the "grille" and assisted with immediate problems arising out





of his arrest and confinement. Members of his family, friends or employers may have to be informed of the person's appearance in court, a lawyer may be contacted, payment of bail or fines arranged and a variety of requests are met. Occasionally the social worker is requested to present a report to the court on the offender's background and his personal problems, in order to assist the judicial officer in determining a sentence which would benefit both the accused and society. In some cases an offender may be given a suspended sentence and placed under our supervision.

(b) The Prisoner's Family.

When a husband and father has clashed with the law and is imprisoned, his family is immediately confronted with some serious problems. The removal of the bread-winner usually brings anxiety, uncertainty and hardship for the wife and children. It is under such circumstances that NICRO provides help. When a married offender has been seen in prison, his family is also visited in order to assist them with their material and emotional problems. Needy families of prisoners may apply for rations and maintenance grants, but until such time when these are issued, NICRO frequently provides emergency assistance with food, clothing and rent. Most families need advice in utilising existing community resources, and guidance in making a new adjustment in the absence of the husband and father.

(c) Post-release Adjustment.

Before leaving prison a person has to be prepared for life in the open community.

If he has served a long sentence of several years, release from prison is a major event in his life. In many cases the offender is alone and does not know where to turn. During his imprisonment the world "outside" has usually changed. Relatives and friends may have disappeared, elderly parents may have passed away, or his wife may have left him for someone else. Very often the released long-term prisoner is lost and confused, and needs help and guidance to make a new start in the open community.

Wherever possible NICRO's social workers see prisoners before their release in order to help preparing them for their return to the community. There is the question of finding employment and accommodation, providing tools and clothing, and obtaining the necessary papers and documents. But material assistance is not sufficient, most released prisoners need advice and guidance to achieve a satisfactory adjustment. Furthermore, the family of a prisoner also has to be prepared for his release. If they have managed without him for many months or even years, his return means a period of re-adjustment in which they may require the guidance of a trained social worker.



(d) Community Involvement in the Rehabilitation of the Ex-Prisoner.

The large majority of prisoners return to the open community sooner or later. It is, therefore, essential that members of the community be informed on the needs and problems of ex-prisoner and their family. If the community shuns the released



prisoner he is likely to return to crime. Rehabilitation involves helping the offender to gain a stake in the community. This means finding satisfactory employment and accommodation, as well as establishing satisfying social relationships. A feeling of achievement and belonging is the best deterrent to crime.

In order to involve the Indian community, NICRO has established Indian Prisoners' Aid Committees in Durban and Pietermaritzburg. These Committees consist of citizens who have a genuine interest in the welfare of prisoners and their families; who will give of their time and energy to help ex-prisoners and their dependents. Prisoners' Aid Committees meet at least once a month when the practical work with offenders and their families as well as general needs and problems are discussed. Furthermore, the Committees organise fund-raising functions, such as, for example, cake sales, bazaars and film shows, and arrange for publicity, such as newspaper articles on NICRO's work and public meetings. At one such meeting, for example, the prominent Indian educationalist, Dr A. D. Lazarus, spoke on "Crime — Its Challenge to Education".

Apart from holding annual general meetings in each centre, the Prisoners' Aid Committees meet on a national level once a year. At this meeting National Council Members and the Director of NICRO are present.

Professional papers are presented



Mr R. Graser.

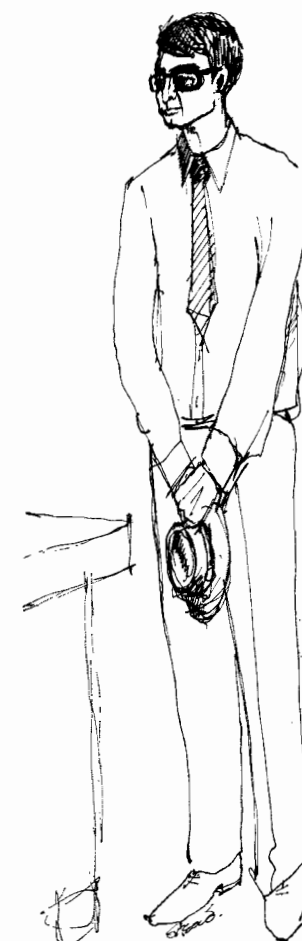
and problems which are experienced at the various centres are discussed. The resolutions arising from the National Meeting of Indian Prisoners' Aid Committees are submitted to NICRO Executive, which takes appropriate action on a national level.

(e) The Prevention of Crime.

While rehabilitation in itself is crime prevention — an ex-prisoner who has achieved a satisfactory adjustment in the community is not likely to return to crime — it is not sufficient. NICRO realises that broader preventive measures must be taken in order to combat the rapidly rising crime rate. It is for this reason that the Institute has decided to place more emphasis on crime prevention. During the past year this organisation has conducted a research project on drug abuse and one on the subject of psychopathy. An increased emphasis has also been placed on informing the public regarding crime, its causes and consequences. NICRO is planning to extend its activities in this field, with particular stress on research.

CONCLUSION

In conclusion, I would like to present some statistics on NICRO's work with Indian prisoners, ex-prisoners and their families in the major Indian population centres, namely Durban and Pietermaritzburg. During the statistical year ending 31st March, 1970, 454 prison interviews were conducted, 408 home visits were made, 58 persons were interviewed in



court and 2 133 interviews were held in our offices. Considerable material assistance was given to families of prisoners and many released prisoners were helped with employment and accommodation. An analysis of the problems that were dealt with indicates that 16 were physically unfit, 7 were mentally unfit, 140 manifested problems of alcohol — or drug abuse, 55 had family problems and 61 had a variety of other problems. It is significant, however, that of the persons dealt with in the above two centres, only 18 had been re-convicted or were awaiting trial on further offences at the end of the statistical year •

IN APPROVING the use of the Valley View Place of Safety and Detention, Durban, as an Observation Centre in terms of the Children's Act, 1960, the Department of Indian Affairs further enhanced the professional welfare services rendered to the Indian community of South Africa.

AIMS

An Observation Centre aims at providing a scientific aid for those persons concerned with needy children, especially those with deep-seated psycho-social problems. Its purpose is actually of a dual nature.

In the first place it is aimed at the analysis of the child alleged to be or actually in need of care within the meaning of the Children's Act, 1960, who displays behaviour problems or deviations. Such analysis is made by a team of specialists with a view to the correct decision in respect of the child's future care.

In the second place it enables those concerned with the future care and treatment of the child to obtain a clear picture of that child's particular deprivations, needs and problems, which in turn indicates the type of treatment necessary.

OBSERVATION CENTRES IN OTHER COUNTRIES

An Observation Centre as envisaged in the Children's Act, 1960, is a fairly recent development in South Africa. In various countries overseas, however, it is a service which has been in operation for some time and one which has proved very successful indeed.

England. In Britain the so-called "Reception Centres" fulfil the same role as the Places of Safety and Detention in South Africa. Children are detained in these institutions or centres as a temporary measure pending permanent placement. These centres, however, have a further function, namely that of observation. Children are studied with a view to obtaining intimate knowledge of their problems, resulting in a clear and concise picture regarding their social and psychological characteristics being conveyed to the courts. This, in turn, affects their respective plan of treatment.

Sweden. Here a similar scheme is in operation in so far as institutions for uncontrollable children are classified and a central detention and observation centre exists where children are sent and observation takes place. Only after psychological tests have been applied and such children have been medically examined are decisions made regarding further treatment. Constructive use is made of a panel of specialists comprising psychologists, medical doctors, etc.

Italy. In Italy, too, prior to any steps being taken in the Juvenile Court, a thorough investigation is carried out by trained social workers with regard to the respective juveniles' personality and needs. In this process extensive use is made of Observation Centres.

France. The French also have Observation Centres where children are studied for a maximum period of three months. Here, too, use is made of the previously mentioned panel of specialists. The qualified social worker fulfils an important role in the rendering of this service.

STATUTORY PROVISION IN THE CHILDREN'S ACT, 1960

Children can be referred to an Observation Centre in terms of Section 31(7), 33 and 48 bis of the Children's Act, 1960. The latter provision is an extension brought about by the Children's Amendment Act, 1965 (Act No. 50 of 1965) so that children in institutions or other forms of care in which they have been lawfully placed,

AN OBSERVATION CENTRE FOR INDIAN CHILDREN

By MR R. K. W. THANDROYEN,
Senior Social Worker, Department of Indian Affairs.



The Observation Committee in session at Valley View.



Dr P. Joubert, Head of the Psychological Services, Division of Indian Education, who serves as Psychologist on the Observation Committee at Valley View, administering a psychological test to a child.

may also now be sent to an Observation Centre.

In terms of Section 31(7) the child is first declared in need of care and then referred to an Observation Centre. This section is applied when there is no doubt whatsoever about the child being in need of care, within the meaning of the Act, and referral to an Observation Centre is done mainly with a view to determining the final disposal of the case in the best interests of the child concerned.

Section 33, in turn, makes provision for the child to be referred to an Observation Centre prior to that child being declared in need of care. Observation in this case is carried out with a view to establishing more about the personality structure and deviate behaviour of the child, before further consideration is given to having that child declared in need of care and finally disposing of the case in the best interests of the child.

THE OBSERVATION COMMITTEE

The Observation Centre at Valley View Place of Safety and Detention has an Observation Committee composed of representatives of various disciplines. The following disciplines are represented: Social work, psychology and medicine, as well as psychiatry when necessary. Various officials serve on the Observation Committee, namely:

- (i) The Chief Professional Officer (Welfare) attached to the Durban Regional Office of the Department or his representative;
- (ii) The local District Surgeon, his representative, or another State Medical Officer;
- (iii) A psychologist from the Education Division of the Department or a psychologist attached to The University of Durban-Westville.
- (iv) The social worker from a private welfare organisation or the probation officer from the Department who handled the particular case;
- (v) The Superintendent of the Valley View Place of Safety or his representative; and
- (vi) In applicable cases the social worker of the Department of Indian Affairs who canalised the report submitted by the private welfare organisation.

The activities at the Observation Centre are mainly based on **short term observation**, coupled with a degree of treatment. The whole organisation is, therefore, adapted to such a system.

A psychiatrist is also co-opted on the Observation Committee, when necessary. The Commissioners of Child Welfare are important links in the organisation of the Observation Centre as they in the first place are

concerned with the screening of each case for observation, on the motivations as furnished by the particular social worker dealing with the case. The final decision, too, after observation has been carried out, rests with the Commissioner of Child Welfare concerned or in certain cases with the Minister of Indian Affairs.

TYPES OF CASES FOR OBSERVATION

Observation is applied in practice as a source of consultation for social workers in the treatment of children who experience psycho-social problems, the causes of which are so deep-rooted and involved, that it is difficult or not possible to determine the type of therapy to be applied.

Social workers are at all times very selective of the cases they recommend for referral to the Observation Centre. Only cases necessitating this specialised form of attention are dealt with in this manner.

MODUS OPERANDI

Observation of cases by the responsible officials of the Department is effected primarily by means of regular visits to the Observation Centre, interviews with the Superintendent of the Place of Safety, interviews and questioning of the observation cases, interviews with parents and other interested parties, observation of the reactions of such children during Group Work sessions carried out at Valley View Place of Safety, and mutual consultation between the Chief Professional Officer (Welfare) of the Department and the responsible social workers.

Observation Committee meetings are regularly held in respect of each observation case. Minutes of the findings and recommendations made are kept on the relevant files. The decisions and recommendations of the Observation Committee are incorporated in the final report of the social worker to the Commissioner of Child Welfare.

CONCLUSION

The Observation Centre at Valley View Place of Safety has over the past few years of its existence fulfilled a most urgent need, and has become an indispensable resource in the field of professional welfare work.



Voluntary Mental Health Service for the Indian Community

by Miss G. Reddy, Social Worker, Durban Mental Health Society.

THE Durban Mental Health Society (W.O. 1001) renders services to all population groups, a large percentage of these being the Indian population group. The aims and objects of the Society are detailed in its constitution and annual reports which are readily available to the public.

Incorporated within the Society is the Durban Neuro Clinic, which administers outpatient treatment to all people irrespective of race. At present there are three part-time psychiatrists and one trained nursing sister providing a professional service for the clinic. Two university trained Indian social workers employed by the Society assist in organising clinic appointments, work as part of the psychiatric team, whereby each patient is discussed fully regarding his diagnosis, treatment and

after-care. Follow-up work is done through home visits, office interviews and generally by counselling and assisting patients and their families with regard to reconstruction and after-care work. Five psychiatric clinics are held weekly and an average of 318 patients are dealt with monthly. From November, 1970, due to the large number of patients from the Shallcross-Chatworth complex, one three-hour outpatient clinic is conducted by the psychiatrists of the Town Hill State Hospital.



Miss G. Reddy.

Patients seen at these clinics are ex-hospital patients and those who seek treatment directly from the community. Referrals are therefore made through private individuals and doctors, local hospitals, Government departments, schools, district surgeons (local and from outlying areas) and State controlled and registered private welfare organisations. The areas covered by the Society include Durban and district, the North and South coasts of Natal, including Zululand, and as far inland as Drummond.

Outpatient clinics are being run in outlying areas in order to ease the heavy attendances at the clinic in Durban and enable patients easy access to the clinics. In this respect district surgeons in outlying areas also assist in supplying medication to those who are well and maintaining improvement.

MENTAL ILLNESS

The types of mental illness most commonly dealt with are the various psychoses especially schizophrenia, manic depressive psychosis, psychopathy and other behaviour disorders, mental deficiency, epilepsy and psychoneurosis. Psychiatric and social problems relating to alcoholism, drug abuse are on the increase.

Although every endeavour is made to ensure the best services to the community, the family, and the individual, a growing need is felt for more educational and rehabilitative public programmes, especially to those of below average adjustment, insight and persons of a

limited educational level. These endeavours are among others achieved through social group work and community organisation. Public interest in mental health and the use of the voluntary worker is essential.

Patients and relatives come to realise the benefits of the Society's services and an encouraging modern trend is that people generally seek advice at an early stage of adjustment which also serves as an indication that the traditional stigma associated to the problems of man's mental life is fast disappearing.

South African mental hospitals have a daily average of over 30 000 patients. A most encouraging sign is that people nowadays attend our psychiatric clinics at the onset of mental disequilibrium and do not wait until probable chronicity has set in before seeking specialist treatment. This largely does away with the necessity for the processes of certification which necessitates mental hospital in-patient treatment.

FINANCE

The Society is a member of the Durban and District Community Chest and relies heavily on the latter for its existence. Subsidies as far as Indian social workers' salaries are concerned are obtained from the Department of Indian Affairs through the National Council for Mental Health to which this Society is affiliated.



A view of Clarehaven.

REVIEW OF THE WORK OF THE INDIAN AUXILIARY COMMITTEE FROM ITS INCEPTION TO 31st DECEMBER, 1970

The Durban Mental Health Society established the Indian Auxiliary Committee in April, 1968. Its first Chairmen were Dr N. R. Maharaj and Professor C. Ramfol. This Committee has interested itself in a wide variety of mental health problems, such as the following:

- The training of psychiatric social workers.
- Alcoholism and Drug dependence.
- The need for a home for unmarried Indian mothers.
- The promotion of gifted individuals amongst the Indian community.

TRAINING CENTRE

The most tangible achievement of the Committee has been the establishment of Clarehaven, a day junior centre in Durban for mentally handicapped Indian children. The training centre opened on 1st January, 1970. Although nearly 150 applications were received and more are still coming in, only 35 children have enrolled as funds are limited. Other monies have been collected from the Indian public for capital expenses. Clarehaven enjoys the full support of the Indian community. At present the Principal, two teachers-aides and a caretaker cum driver constitute the staff of the institution. Within one year of its establishment, Clarehaven has fully justified its existence. The children have made

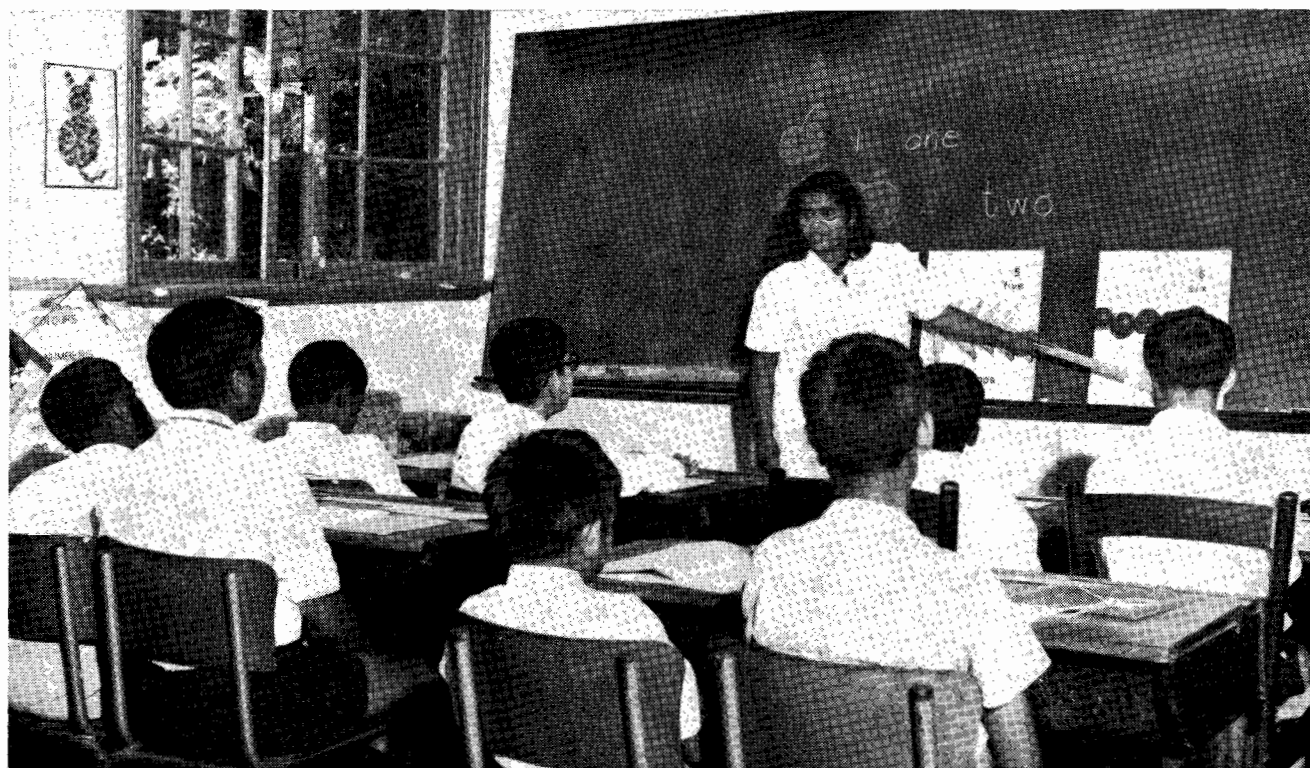
remarkable progress in the fields of communication, occupation, self-help and socialisation. It is estimated that there are four to five hundred severely mentally handicapped Indian children and adolescents in Durban alone, so that many more such training centres will be needed to meet this problem.

PIETERMARITZBURG AREA

The foregoing concise exposition of developing services in Durban and environs also typifies positive thinking and developments in the Pietermaritzburg area. As in Durban, an active public-spirited and professionally trained mental health committee was established in Pietermaritzburg during April, 1968. Vast developments have already taken place and funds on a realistic scale are presently collected for the establishment of a full community mental health service for the Indian population of Pietermaritzburg and district.

One is pleased to note the positive and mutually satisfying co-operation and collaboration between the mental health societies for the Whites and Indians in Natal. There has been constant communication at committee levels throughout the difficult development periods in both Pietermaritzburg and Durban, and the professional standard and administrative and organising know-how of the Indian committees prompts me to believe that they are well on the road to become the first fully autonomous registered Mental Health Societies in South Africa •

Mrs C. Hurbuns, Principal, teaching a Senior Class at Clarehaven.



INDIAN CHILD WELFARE SOCIETIES

A REVIEW OF THEIR SERVICES AND ACTIVITIES

By Mr B. A. NAIDOO
Indian Regional Social
Worker, S.A. National
Council for Child
Welfare

IN TERMS of provincial distribution there are fifteen independent, autonomous Indian Child Welfare Societies in Natal operating at Durban, Pietermaritzburg, Stanger, Tongaat, Verulam, Umzinto, Port Shepstone, Newcastle, Dundee, Dannhauser, Glencoe, Greytown, Estcourt, Ladysmith and Richmond. The three Transvaal Societies are based at Johannesburg (including Lenasia), Pretoria and Benoni. All these eighteen Societies are affiliated to the S.A. National Council for Child Welfare. The latest addition to this number is the Society established at Mooi River in Natal which is presently in the process of seeking registration under the National Welfare Act. Both in Natal and in the Transvaal as well as in the Cape Province there are several Child Welfare Societies which provide services to the local Indian population in addition to catering for other racial groups of their respective centres.

Viewed in historical perspective, there is an interesting parallel between the factors that prompted the establishment of the first independent welfare organisation in this country at Cape Town and the formation approximately 20 years later of the first Indian Child Welfare Society in Durban. Attention drawn to the abnormally high incidence of infant mortality among the Whites and

Coloureds in Cape Town resulted in the formation of the Child Life Protection Society in 1908; similarly, the first Indian Child Welfare Society to be established in Durban was prompted by the stress that was laid on the existing overcrowding and insanitary living conditions prevalent among the Indians concentrated in Durban as part of the evidence before the Select Committee on the Areas Reservation Bill of 1926 and the Committee appointed to investigate the sanitary and housing conditions of Indians in Durban.

HISTORICAL REVIEW OF 1967

In the August, 1967 edition of *Fiat Lux* an historical review of child welfare work among Indians in South Africa traced the origin, growth and development of this movement and the various factors that influenced and prompted the present trends in the

activities and services of the independent Indian Child Welfare Societies in the Republic. This brief account on the other hand identifies the more important types of services and activities of existing Societies with a view to indicating broad patterns rather than to provide a descriptive account. This approach has been adopted for two important and obvious reasons: the first relates to the population sizes served by these Societies which range from under 2 000 in such centres as at Glencoe, Dannhauser, and Richmond to over 30 000 at Pietermaritzburg, Johannesburg and Verulam with the Durban Society catering for some 365 000 Indians. The second reason for this approach is that the development of Indian child welfare services at different centres is still somewhat uneven both in terms of the volume

One of the cottages at Lake Haven.



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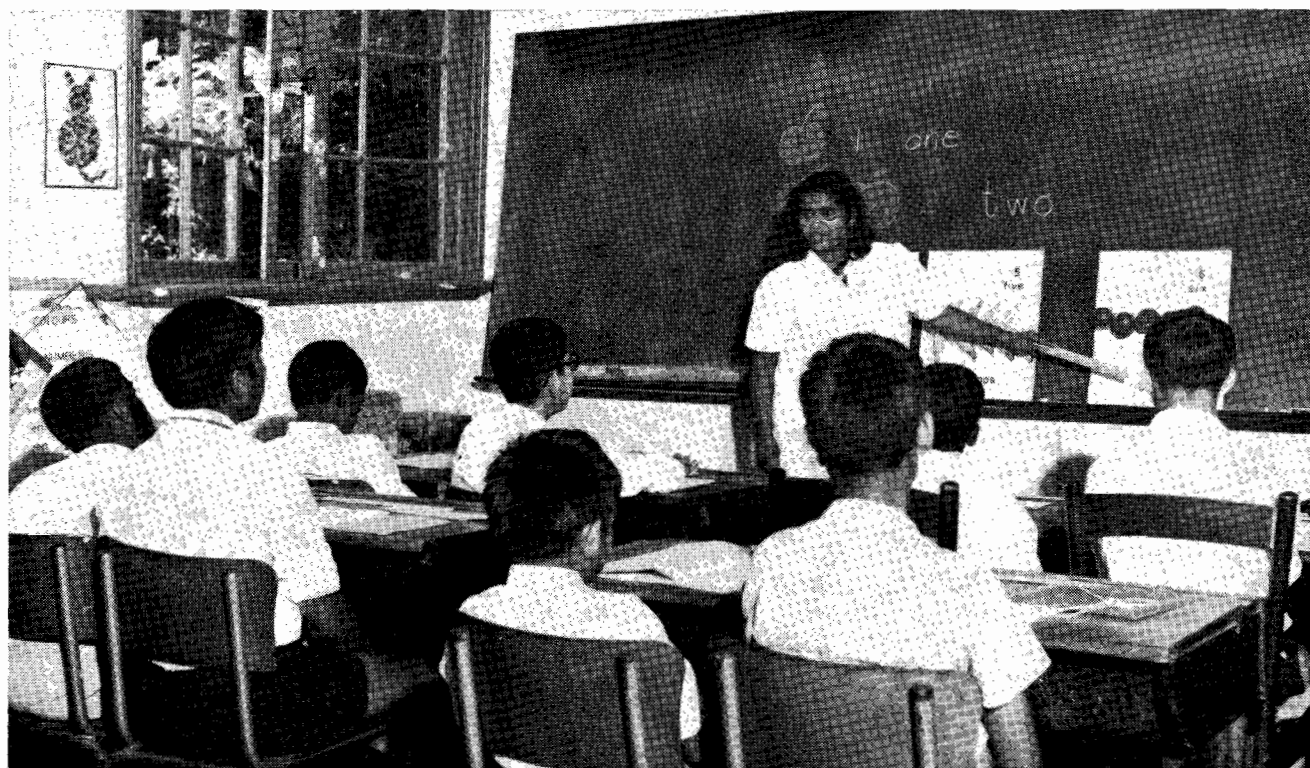
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One of the cottages at Lake Haven.





Clients awaiting attention in the reception room of the Durban Indian Child Welfare Society.

and nature of work undertaken and the effectiveness with which volunteer participation has been enlisted and community outlooks and consciousness have been cultivated in the value and importance of this work.

As there is an agreed basis within the broad framework of the structure and policy of welfare services in South Africa of the division of responsibilities and lines of co-operation as between the State Departments and voluntary child and family welfare organisations, the major part of the service as provided by Indian Child Welfare Societies may be classified as fulfilling the functions of SUPPLEMENTATION, COMPLEMENTATION, and CO-OPERATION. These services emanate essentially from the implementation of the provisions of the Children's Act and to a lesser extent from the administration of social assistance measures in terms of the Aged Person's Act, the Disability Grants Act and the Blind Person's Act.

CO-OPERATION

One important aspect of service under this category of CO-OPERATION is the part played by almost all the Indian Child Welfare Societies in

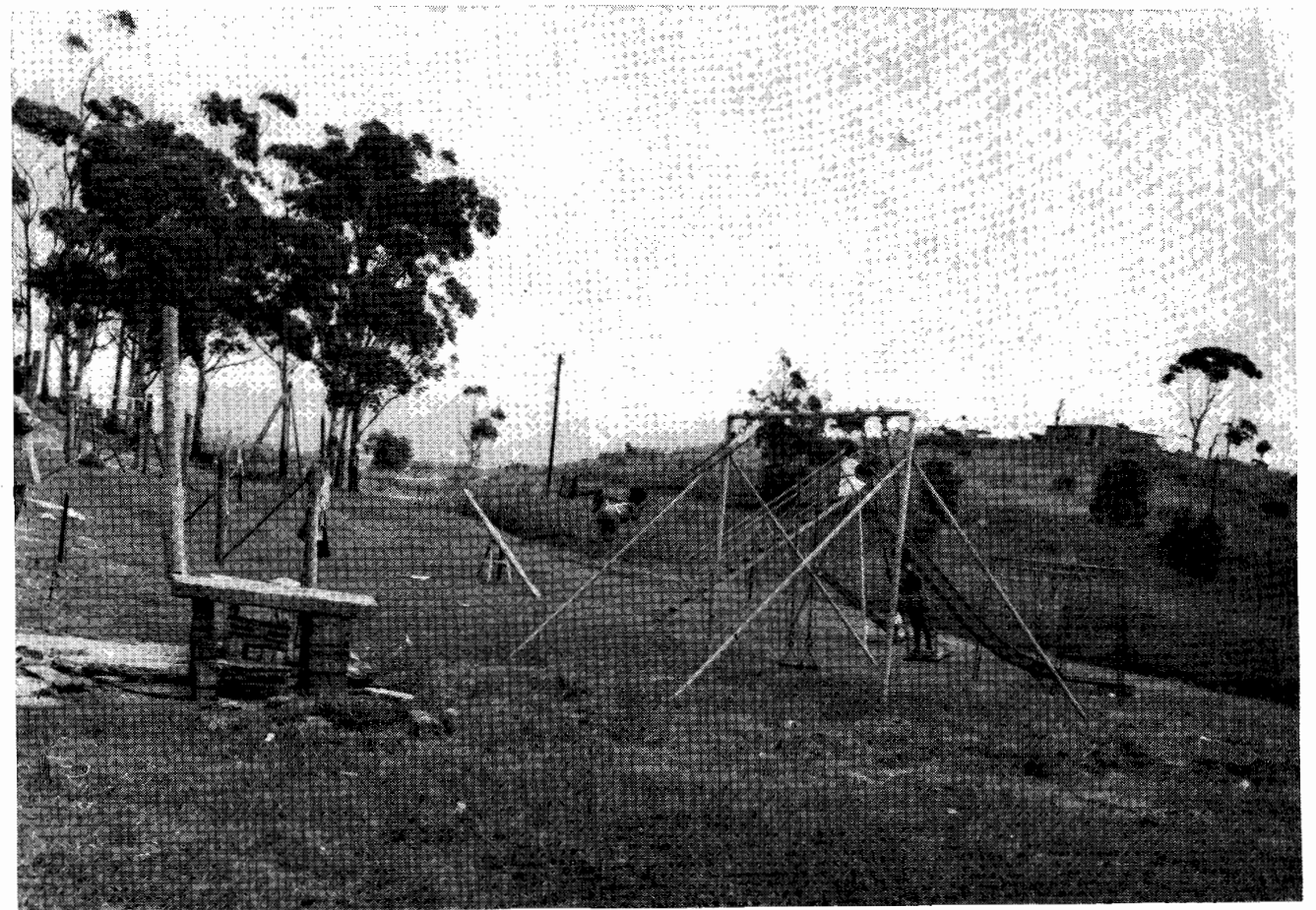
assisting individuals and families to apply for such forms of State financial assistance for which they may be eligible. The preliminary work by which prospective applicants are helped in obtaining the necessary official documents, clarifying eligibility requirements, ensuring by prior investigation the circumstances of applicants, etc. is a far more important service rendered by these Societies than is often realized. In many centres the magistrates acting on behalf of the Department of Indian Affairs request local Indian Child Welfare Societies to undertake preliminary investigations before completing applications. In this way, these Societies are playing a vital role in ensuring that the services designed by the State to serve specific needs are available to all those who are deserving and who qualify, and when the assistance is awarded, by joint and mutual endeavour to ensure that maximum positive benefit is derived and the purpose of the service as designed is not abused or exploited. To a very large measure, the activities and services of Indian Child Welfare Societies have influ-

enced the extent to which Indians have taken advantage of, and have benefited from, social assistance measures provided by the State.

SUPPLEMENTARY SERVICES

The best example of SUPPLEMENTARY services provided by these Societies is in relation to the maintenance grant scheme for which certain categories of children in families are eligible in terms of the regulations under the Children's Act. When these grants are awarded, in terms of an agreement entered into with the Department of Indian Affairs, more firmly in the case of the Societies operating in Natal than in the Transvaal, the local Child Welfare Societies are provided with a duplicate copy of the application, the Department's investigation report, and the official letter of award. The Societies then provide services to these families with two broad purposes in mind: firstly, to ensure that the grant is utilized to the benefit of the children and that the terms and conditions of award are complied with and, to report to the Department on family changes and circumstances which have a bearing on the award of the grant; and secondly, by friendly visiting to give advice and guidance with a view to developing self-reliance, independence, the maximum utilisation of limited resources, and where necessary and possible to give additional assistance or provide help in matters and in times of special need.

In fulfilling these responsibilities, the Societies have succeeded in varying degrees to enlist a wide circle of volunteers to act as supervisors and this in turn has not only given Indian child welfare work generally a unique feature in the extent of volunteer participation in direct service provision, but in certain cases as in Durban, Pietermaritzburg, Verulam, Umzinto and Stanger to the formation of local welfare committees. These neighbourhood service groups operate on an organised basis within the structure of the Society primarily to undertake the provision of supervisory services to families in their localities who are dependent on these State grants. In this way also the services of these Societies are taken into all



A section of the playgrounds at Lake Haven.

levels and reaches of local communities, but there is much that still needs to be done to bring into full and positive effect the adoption of this concept of operation.

COMPLEMENTARY SERVICES

Equally important are the COMPLEMENTARY services undertaken and provided by Indian Child Welfare Societies. In respect of children who are neglected, abused, abandoned, orphaned, or for other reasons protective services have to be rendered, these Societies carry out the necessary investigations and by the submission of reports to Children's Courts or by referral to the Professional Welfare Division of the Department of Indian Affairs, enable the courts in deciding and in determining the nature of care and protection most desirable in each case. Societies with professionally qualified staff as in the case of Durban, Pietermaritzburg and Johan-

nesburg undertake these forms of Children's Court work by canalising their reports through the Professional Welfare Division of the Department of Indian Affairs, while the other Societies refer such cases to the Department for attention. With the employment of qualified workers, the Ladysmith and Verulam Societies would also be able to undertake Children's Court work in the near future.

When children are placed in foster-family care they are placed in terms of the Act under official supervision. Invariably it is these Societies that arrange or help in finding foster homes. Societies with qualified social workers are designated by court orders to provide this official supervision service, but in other cases although the probation officer is entrusted with this legal function, he enlists the co-operation of the local Child Welfare Societies serving the area.

Of casework services provided inde-

pendent of State and statutory services, the major volume undertaken by the Indian Child Welfare Societies is in the field of family and marital problems. This is becoming a rapidly growing aspect of service and the demands made on some Societies have reached proportions which are beyond their resources and in this respect are cause for alarm.

In the more highly urbanised centres such as Durban, Pietermaritzburg, Johannesburg, these cases predominate in number over other types and absorb the major attention of paid workers and volunteers alike. This feature is becoming evident at the smaller centres also. With difficulties experienced by volunteers to cope with this volume, the need for paid workers and more paid workers is becoming increasingly evident and it



has been the major factor in influencing a number of smaller Indian Child Welfare Societies to employ paid workers in recent years as the only means of meeting the demands arising from this branch of service.

In varying range and volume, therefore, Indian Child Welfare Societies provide direct casework and referral services in situations which arise from :—

- Family problems and marital discord;
- Disturbed parent-child relationships;
- Fatherless families whose mothers seek financial assistance;
- Cases of desertion and non-support;
- Supervision of families in receipt of maintenance grants;
- Administration of State grants and pensions and other trust funds;
- Foster-care placements;

A social worker interviewing a couple eager to adopt a child.

- Supervision in respect of children placed in official foster family care;
- Rehabilitation and reconstruction services;
- Services to unmarried mothers;
- Adoption placements;
- Assistance with problems related to ill-health, unemployment, old age, housing, and educational needs.

Incidental to the provision of these casework services, Indian Child Welfare Societies help in the registration of births, obtaining identity cards, applications for benefits under the Unemployment Insurance Act, assisting parents in having their children admitted to school especially where the births have not been registered, etc. Their work is therefore related to several municipal and State departments and also with schools, hospitals, clinics, and services provided by other welfare agencies. At the majority of

the smaller centres the Indian Child Welfare Societies are the only local registered welfare organisations and therefore their work extends beyond the field of child and family welfare and in fact includes all possible forms of welfare services for which there is a local need. On this account also it can be safely said that Indian Child Welfare Societies are the best known and the most influential welfare organisations at almost all centres where they operate.

The work of Indian Child Welfare Societies is not confined only to case-work services. The Umzinto and Dannhauser Societies undertake the management of district nursing and clinic services and at both these centres these form an important and integral part of the responsibilities undertaken. At both centres these services are also available to the Coloured and Bantu communities in terms of approval granted by the State Health Department which subsidises the salaries of the nurses. At Johannesburg, however, the health services provided by the Indian Social Welfare Association both at Fordsburg and at Lenasia



embrace a wider range including dental services for school children, pre-natal and post-natal services and family planning and constitute a major branch of the work undertaken by the Association.

Lakehaven, which is a children's home registered in terms of the Children's Act is the only institution for orphaned, deserted, abandoned, neglected and other children in need of care, operated by an Indian Child Welfare Society. This project was started by the Durban Indian Child Welfare Society in the mid fifties and is based on the cottage system where the children of all ages up to 18, both boys and girls, are accommodated in self-contained cottages with house-parents in charge of each cottage. The scheme envisaged the establishment of a small children's village on the SOS pattern where in appropriate cases both parents and children could be housed together for purposes of rehabilitation and reconstruction work rather than the children being removed and separated from parents as in conventional institutional care. Progress on this project as originally conceived has not materialised due primarily to the absence of suitably trained personnel and to a lesser extent for financial reasons. At present there are 47 children at Lakehaven accommodated in three cottages; a fourth cottage is near completion and there are plans for the addition of two further cottages as part of the immediate expansion programme.

Of child welfare services now being pioneered by Indian Child Welfare Societies, special reference needs to be made to the day-care centre for mentally handicapped children started by the Johannesburg Indian Social Welfare Association and the crèche for pre-school children of working mothers being established by the Pre-

torian Indian Child Welfare Society. The day-care centre for mentally handicapped children is a highly specialised service and it is commendable that the Association has been able, even during its short experimental stage, confronted with serious problems of finance and suitable accommodation, to have enlisted the services of specialists and to have cultivated a pattern of service and treatment for a small group of especially selected children with a view to extending this service to more children as resources permit.

The crèche to be established by the Pretoria Society will be the first to cater for Indian children and in some respects this will also be an experiment which would be watched with interest by other Societies which have intentions of providing crèche services for children of working mothers. The only form of service provided at present to pre-school children by any of the Indian Child Welfare Societies are the milk clubs and a play group operated at Tongaat. With the increasing concentration of the Indian people in high density housing schemes and close urban residential development, services to pre-school children in the form of crèches, play-centres and nursery schools are important forms of child-care services for which there is much scope and need for Indian Child Welfare Societies to establish side by side with cultivating their expanding volume and range of casework services.

In relation to the range of direct services and forms of assistance rendered by Indian Child Welfare Societies, there are a variety of activities which form an essential part of the total functioning of these Societies. Fund-raising is both a means of obtaining necessary financial resources as well as serving a public-relations and educational value. To a lesser extent lectures, talks, film shows and symposia held from time to time assist child welfare workers, both paid and volunteer, and members of the public in expanding their knowledge and understanding on important matters concerning child welfare and community affairs. In annual reports, apart from accounting for the work performed, attention is drawn to community problems and features which

require social action. In various ways, to greater and lesser degrees, and at various levels these Societies are making representations for better health, educational and welfare services; for more and better recreational amenities; for other community services which would help to promote happy and healthy child and family life; for adequate and better planned housing; for improved economic standards both for the dependent and for the lower working class. In the process they are engaging in valuable community organisation activities and are endeavouring to promote community consciousness and awareness of local needs and services in addition to enlisting support for the cause they espouse.

In terms of past and present trends in Indian child welfare work, future development in existing Societies is largely dependent upon the availability of competent professionally qualified social workers and liberal State salary subsidies. At many centres, in terms of community support and demand for service, very little further progress or expansion can be anticipated unless voluntary effort is supplemented and reinforced by professional service and guidance. This is only natural and logical as the evolution of social work services in our country has followed the same universal trend with shift from charity and benevolence to service; from treatment of results to an offensive against causative factors; from independent local action to co-ordinated effort; from voluntary workers exclusively to professionally qualified and paid workers. In this respect also Indian Child Welfare Societies are making their contribution by undertaking student training in social work.



A NEW SERVICE BY THE SOUTH AFRICAN NATIONAL COUNCIL ON ALCOHOLISM AND DRUG DEPENDENCE

By MRS W. SWIFT

ALCOHOLISM is no respecter of persons, and the Indian community in Durban has not been immune from the problem of compulsive drinking occurring among all sections of the people of our city.

Awareness of the problem prompted concern among Indian leaders and in August, 1968, members of the community, interested in the establishment of an Indian Auxiliary Committee, met and were addressed by S.A.N.C.A.'s Chairman of the Non-White Committee and S.A.N.C.A. (Durban's) Organising Secretary.

During October and November, 1968, a course of three lectures on alcoholism was given to volunteers, and, at the conclusion of the course, the nucleus of an auxiliary committee was formed.

As a result of the foundation of this committee, S.A.N.C.A. (Durban) was able to open an Indian Information Office in the city on 1st July, 1969.

The purposes and aims of the Indian Information Centre were seen as follows:

1. To provide a free information service to the Indian community on the nature of alcoholism and facilities available for help and treatment.

It was anticipated that this service would be of value to problem drinkers, their relatives and friends, employers and professional people requiring scientific information. Approved literature was made available.

2. To provide health education on alcoholism to community groups in order to create a healthy, well-informed climate of public opinion. The best preventive measure was recognised as being early recognition of signs and symptoms of abnormal drinking. Techniques were to include organisation of symposia, study groups, lectures and film showings.

3. To provide a referral service to existing community facilities for those cases needing treatment and/or professional guidance.

The services of concerned General Practitioners, and, for acutely sick patients, facilities in local hospitals needed to be assured, and the service offered by Alcoholics Anonymous utilised.

On 1st February, 1970, a full-time Social Worker was employed at the Indian Information Centre. With this appointment, several re-adjustments had to be made within the context of the Indian agency in relation to

allocation of duties between Information Officer and Social Worker.

A new policy of intake extended recording procedures and amplified collection of statistical information were initiated, in order to expand the scope of service.

In view of the fact that therapeutic group discussions in the office setting were poorly attended, it was decided to begin group activities and discussions within the residential areas of the wives and relatives of patients. Groups have been geared towards activity and discussion with particular concern for educational standards of the spouses of patients, and the problems of language. One such group, in existence since May, 1970, has been held at the David Landau Centre and meets once a week.

A medical panel consisting of fourteen Indian doctors was established in May, 1970, in order to treat the problem of alcoholism in the Indian Community. The doctors agreed to provide their services on a voluntary basis to indigent people and on a sliding scale to those who could afford to pay for their treatment. Negotiations with St. Aidan's Hospital and the R.K. Khan Hospital resulted in alcoholic patients being admitted, and the hospitals have also agreed to give free medical attention to indigent persons. We welcome this co-operation and have made use of these services.

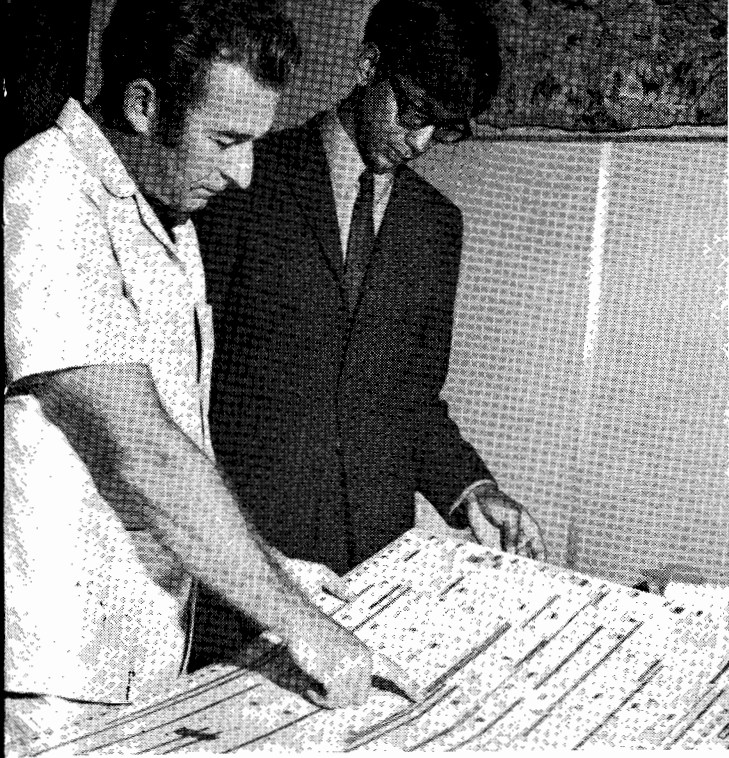
Home visiting has been limited in view of the lack of transport. Attention is being given to this matter by the Indian Committee.

A survey is being conducted with all ex-patients in order to assess their response to treatment and their period of sobriety. In time a short report will be submitted by the Social Worker on the results obtained, which could form a basis for future planning.

The first year of operation of this new service has shown signs of progress and development, and this culminated favourably when a subsidy from the Department of Indian Affairs was granted for the Social Worker's salary.



Mrs W. Swift, Organising Secretary, S.A.N.C.A.D.D., Durban.



Mr J. J. van der Merwe, European Information Officer of S.A.N.C.A.D.D., explaining organisational methods to Mr R. Rambarath, who was recently appointed an Indian Information Officer.

Some figures, relevant to the period of 1/10/69 - 30/9/70, are of interest:

Casework and Counselling:		
(a) People interviewed by Information Officer		347
(b) People interviewed by Social Worker		428
	Total	775
(c) Number of visits by Social Worker		41
(d) Therapeutic groups		15
(e) Number of new contacts by Social Worker and Information Officer	Male	117
	Female	6
		123
(f) Sources of new contacts:		
General:		
Relatives		18
Medical Practitioners		3
Self		6
Friends		12
Employers		2
Alcoholics Anonymous		2
S.A.N.C.A.		1
Lawyer		1
Natal University		1
University College		1
McCord Hospital		1
R.K. Khan Hospital		2
City Health Dept.		1
Divine Guidance and Health Centre		1

Welfare Organisations:

Child Welfare (Durban and Chatsworth)	52
Social Services	1
Durban Mental Health	4
Dept. of Indian Affairs	5
Marriage Guidance Clinic	1
Local Health Commission	3
Dept. of Social Welfare & Pensions	1
David Landau Community Centre	1
F.O.S.A.	2
Durban Indian Benevolent Society	1
	123

(g) Contacts referred to:

Alcoholics Anonymous	8
McCord Hospital	1
R.K. Khan Hospital	2
Medical Practitioners	68
Held for further counselling	44
	123

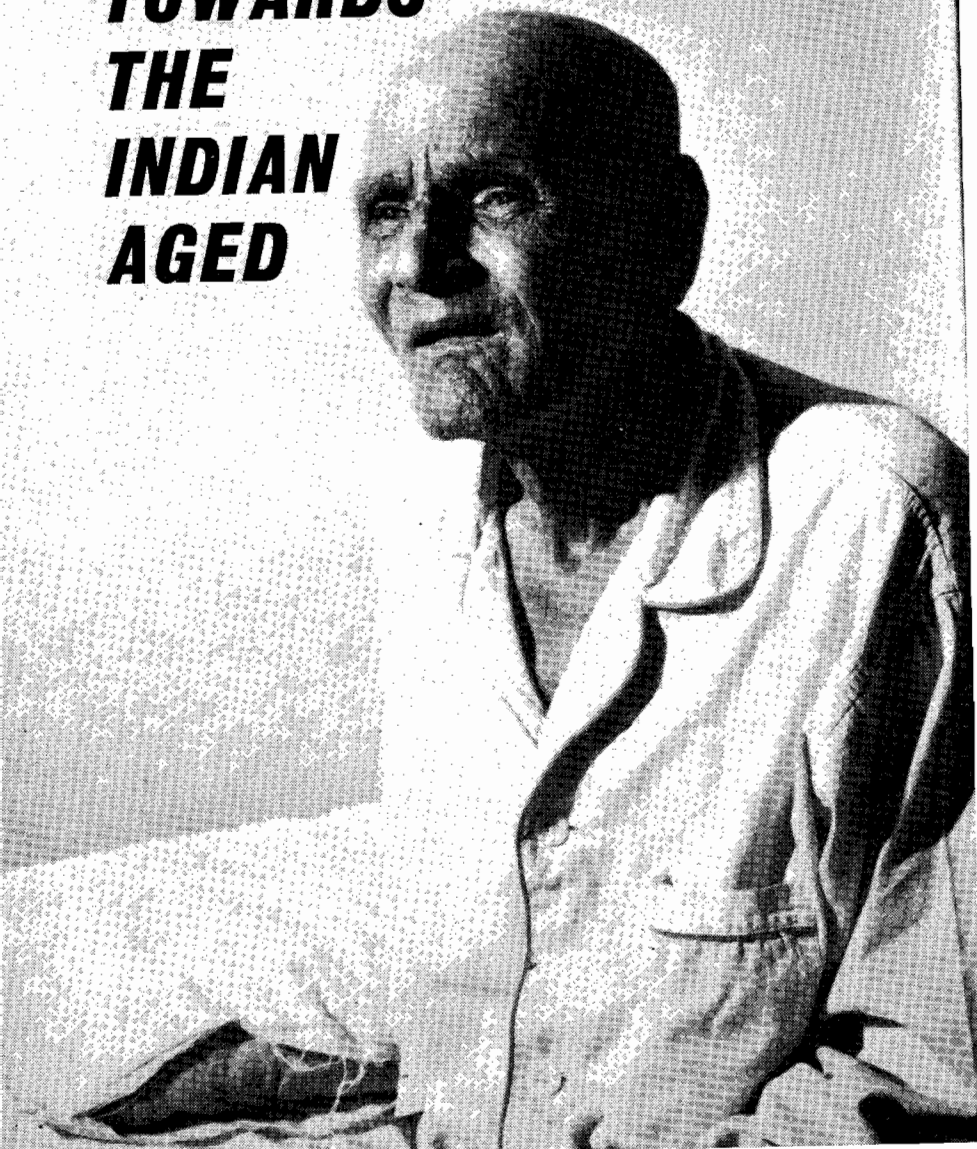
It is anticipated that 1971 will be a year of development and expansion. It is planned to provide transport for the Social Worker, and a full-time male Information Officer to undertake community education on alcoholism and drug abuse was recently appointed.

The next challenge will be the establishment of a specialised treatment unit. This is a formidable task, but the unit is urgently needed, and it is hoped that such a project will enjoy the support of the authorities and the Indian community as a whole.



Mr R. Rambarath, the Information Officer, and Miss K. Redhi, the Social Worker of S.A.N.C.A.D.D.

OUR RESPONSIBILITY TOWARDS THE INDIAN AGED



Owing to improved medical services and to the higher standard of living there is a general tendency throughout the world today for the percentage of people in the higher age groups to rise in proportion to the rest of the population. The Republic of South Africa is no exception. Like most older citizens today those of the Republic are not only living longer but are more youthful, despite their years.

DEFINITION

Old age is defined, *inter alia*, as "a biological, psychological and social process which changes the individual and the situation in which he lives. To these changes, which include retirement from work, reduced income, loss of spouse, decline of biological and psychological functions, onset of chronic illness and reduced activity, the older person is forced to make adjustment. The type of adjustment

he makes is conditioned by his own personality and experience, by the roles assigned by society to older people, and by the opportunities available".⁽¹⁾

(1) National Conference on Ageing, Man and His Years, Health Publications Institute Inc. Raleigh, North Carolina, 1951, p.5.

According to this definition, it is quite clear that the aged person is obliged to adjust himself to the changes which are coupled with age, yet the nature of the adjustment he makes depends on "the roles assigned by society to older people, and by the opportunities available". Society as such, therefore, has a positive responsibility in respect of the aged person. This responsibility applies to all races. It is equally applicable to our Indian aged. The Government, the community — all of us — have a responsibility towards those persons on the last leg of life's journey. We all have a part to play, not merely to *add to the years of life*, but, what is more important, to *add life to the years*. We must learn to accept old age, treat it with understanding and generosity in others and meet it with courage and maturity when our turn comes.

BASIC NEEDS

The basic needs of man — the need to feel wanted and loved and secure, the need for self esteem, the feeling of creating and contributing, and the desire to belong to a group — are also the basic needs of the aged. Not only are the aged in need of sufficient means of livelihood and accommodation, but they want to *feel* accepted and that they still have a place in society and particularly in their family circle. They do not wish to feel a burden to the nearest of kin and neither do they wish to feel that they are no longer useful to society and to their relatives and friends.

PREPARATION

Preparation for old age, even from early childhood, should take the form of developing sound convictions and interests that can enrich one's life. Many of the problems of the aged originated in social changes in the community and in prejudice in the process of ageing, especially on the part of the youth.



PARENT / CHILD RELATIONSHIP

The parent / child relationship is of the utmost importance, for many of the characteristics of such a relationship are carried over to the adult child / aged parent relationship. Where the relationship was hampered in the early childhood it will be difficult for both the adult child and the aged parent to assume different roles of emotional support. The ideal situation is that adult children and their aged parents should be emotionally, socially and economically independent of each other. However, the existence of emotional needs between adult children and their aged parents cannot be overlooked. It is most natural that children should concern themselves about the physical, social and emotional welfare of their aged parents.

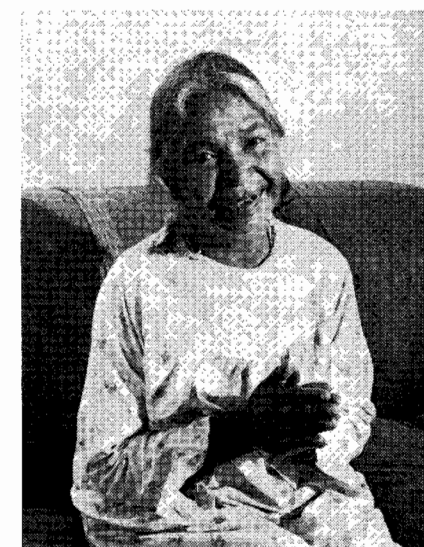
INDIAN RELIGION

For the Indian (Hindu as well as Moslem) it is considered a religious obligation to be fulfilled. In various parts of the Koran, for instance, mention is made of the child's obligations towards his parents. The following quotation from Chapter XVII (verse 23) serves as an example of this:

"Thy Lord hath decreed
That you worship none but Him,
And that you be kind to your
parents,

Whether one or both of them
attain old age in thy life,

*An aged couple happily engaged in
their garden.*



Happiness comes from within.

Say not to them a word of contempt, or repel them,

But address them in terms of honour."

In Chapter IV (verse 36) these obligations are extended further than in respect of parents alone, as is evident from the following quotation: ". . . . Do good to your parents, kinsfolk, orphans, those in need, neighbours who are near, neighbours who are strangers, the companion by your side, the wayfarer ye meet"

EXTENDED FAMILY SYSTEM

In western society with its emphasis on individualisation and its tendency of economic stress it is often more complicated to handle the problem of the aged. The lack of being financially productive creates a greater problem for the westerner than for the Indian whose financial achievements and possessions are not his as an individual but that of his family. The Indian who is economically unproductive is in effect a single cell of the joint family who is to be cared for by the family. The extended family system of the Indian population provides an excellent opportunity for the whole family, i.e., sons and brothers and their families to accept responsibility for aged parents and relatives.

In the traditional extended family system most of the needs of the aged are cared for and the aged feel that they have a place in society throughout their lives — an authoritative place — in which they experience the acceptance as the wise aged group and feel that they are wanted and have a respectful and useful role to fulfil as aged people. *However, with the tendency of the disintegration of the extended family and the westernisation which is taking place, it can be expected that the aged among South African Indians will progressively experience similar feelings of being superfluous, not wanted, not loved as aged people and will possibly feel insecure financially, socially and emotionally.*

GOVERNMENT POLICY

The Government has always admitted a measure of responsibility in respect of those who were unable to make provision for their old age during the years in which they were money-earners. At the same time it has never been the policy of the State to take initiative out of the hands of the citizens of the country. Each citizen is in the first place expected to make provision for his own old age, by means of private pension schemes, insurances, investments, savings, etc. The policy has always been the most efficient utilisation of its citizens and the establishment of stable economic conditions with stable avenues of employment. This principle is applicable to all population

groups, including South African Indians who are recognised and accepted as a permanent part of the population of this country.

LEGISLATION

Legislation providing pensions for the aged, which has been in existence for the past forty years, has recently been expanded into the Aged Persons Act, 1967, covering a wide range of services affecting the aged. Underlying this legislation is the traditional South African policy that, where possible, senior citizens should remain within the family circle as an integral part of the community. As long as it is physically possible such a person must be afforded the opportunity of being active economically and making his contribution to the economic, educational and cultural development of the community and the country. An important feature of the legislation is that it provides for the protection of old people against exploitation and physical and mental neglect.

THE AGED PERSONS ACT, 1967

The administration of the provisions of this Act was by proclamation No. R283, 1968, dated 18th September, 1968, assigned to the Minister of Indian Affairs in so far as it relates to Indians. The Act provides for the protection and welfare of certain aged and debilitated persons, for the care of their interests, for the establishment and registration of certain institutions, for the accommodation and care of such persons in such institutions, for the payment of old age pensions and certain allowances to or in respect of certain aged persons, and for matters incidental thereto.

OLD AGE PENSIONS

In order to assist aged Indians financially to be self-supporting, the Department of Indian Affairs pays old age pensions to certain aged Indians. Such pensions are payable to indigent Indian males who are 65 years of age or older, and indigent Indian females who are 60 years of age or older. The award of these pensions is subject to certain residential qualifications as well as a means test. In order to encourage aged Indians to support themselves as long as possible, the means test as

regards earnings lapses when such a person attains the age of 70.

HOMES FOR THE AGED

Historically, the erection of homes for the aged in South Africa is the task of voluntary welfare agencies. The role of the State is to lay down standards, to subsidise such homes, to provide building loans at special rates, and to register and inspect such homes.

Sub-economic loans are available from the Department of Community Development for building old age homes. The Department of Indian Affairs assists with an initial subsidy for furniture and equipment and a per capita grant in respect of each approved inmate, and the refunding to the Department of Community Development of the loss of interest on the sub-economic loan for building the homes. The Department is also responsible for the cost incurred by

provincial hospitals in maintaining certain indigent, infirm Indians who, though not in need of constant skilled nursing and medical attention, cannot be suitably accommodated or cared for if discharged from hospital.

At present there are two registered old age homes for Indians, one in Durban and the other in Pietermaritzburg. Both were initiated by Indian voluntary welfare organisations and are being subsidised by the Department of Indian Affairs, at present to the extent of R3 000 per year.

THE ROLE OF THE SOCIAL WORKER

The primary object of a social worker is to help the aged person to achieve the highest degree of social well-being of which he is capable, having regard to his individual needs, values, qualities and the resources and requirements of the community in which he lives.



Article by MR L. L. MILLAR,
Chief of Social Development,
Department of Indian Affairs.

*Inmates at Clayton Gardens enjoying
a game of Carrom Board.*



Case work service as rendered by the social worker is not only of great value to the ageing client, but the community as well. No one can deny the value to the community of having clients helped through adequate evaluation and treatment, to avoid mental or physical deterioration and need for placement in an institution; of having persons helped through the appointment of guardians to conserve their economic resources and avoid becoming dependent on community agencies for support; of having married children with families of their own helped with plans for ageing parents without sacrificing the needs of their children and creating conflict between all three generations. Not least among the community values is the added hope given to all people that during the period of ageing which is often accompanied by problems, resources for help are available.

Social work with the ageing in the community covers a wide field. The social worker also has a role to fulfil in guiding and influencing the community's attitude towards the aged, by informing them about their needs and capacities. The worker must have a genuine liking for older persons, endless patience and complete and detailed information on community

resources for the ageing. Special skills in interviewing are necessary, especially when obstacles to communication are present, e.g., when dealing with a client whose thinking capacity is damaged. Counselling and guidance play an important part in this field. Group therapy also has its role to play.

INSTITUTIONALISATION OF THE AGED

Although the majority of older persons remain in the community, and it is desirable that they do so, there are always some who require institutional care, either because of physical or mental illness or because they cannot adequately look after themselves in the community or have no family or friends.

The type of institution an older person enters will depend upon his reasons for seeking this type of care as well as upon available facilities. Institutions for the aged should be planned as refuges of happiness and security for the aged, not merely as places for custodial care where the inmates vegetate and wait for death. The location of the home, the buildings and facilities within the buildings, the food, the recreational therapy

should be planned with a view to the physical, intellectual, emotional and social needs of the individual.

Work with the aged in institutions should aim towards developing and maintaining the best possible physical and intellectual status and helping the old person to achieve emotional security, peace and happiness. It should encourage active participation in life, the development of the individual older person's interests in other persons and things outside of himself.

CONCLUSION

The aged form a permanent group in our national life. Just as the poor, we shall always have the aged with us. It is a natural law and it is a good thing that it is so. Youth have a rejuvenating influence; the aged have a stabilising and preserving influence. The young ones are the *whip*, but the old ones are the *brake* of the wagon, and both are necessary if we are to traverse the road ahead safely and without mishaps. We are obliged to accept the fact that the aged must form a useful and necessary group in the composition of our population. It goes without saying that this applies to all the population groups in our country and is certainly true, too, of our Indian aged •

