Narrator: No... No it's no good. There's plenty of fun around, but it's not for him. His legs are useless. It's good to see this little girl smile, but at least she can walk.

There’s no smile here ... she has never walked. And who’ll look after her when her devoted parents have gone?

This young man wants a job ... the chance to earn a living. Well, would you employ him? Would you gamble on a fellow who looks willing but, well, what job could you give him?

That lad is a spastic. So is the little boy floundering in the playground. And the little girl who could just walk and the woman who couldn't.

Spastic, maybe you've never heard of it? But there are 30,000 spastics in Great Britain and they're not getting much help. When that little boy and girl grow up, there won't be jobs for them. The world will be full of shut doors. Unless, well, unless a lot of things happen.

But let's start at the beginning ... let's have a look at the strange and sad business of why a spastic is a spastic. Let's have a doctor explain it.

Doctor: These two children are typical cases of spastic paralysis. The other name for it is cerebral palsy. It's got many forms and they are all of them difficult to help.

Jean, this little dark haired girl, is a true spastic. Her limbs are stiff and work very slowly. These children, like all spastics, have never known what normal movement is. Their limbs just don't obey their minds. Unless they get proper treatment, they get worse as they grow older. So it is tremendously important to begin as soon as possible.

Usually, the trouble can be diagnosed by the time the baby is a year old. The parents can help considerably by carrying on treatment at home. Let's be quite clear about it, the work is hard and long. There just isn't any magic wand you can wave over spastics. There isn't any quick, brilliant cure. Only years of patience and hard work and kindness can turn a helpless child into a capable human being.

Young Judith now is the athetoid type. She has very little control over her limbs. They jump about in spite of anything she can do. You see, the cause of the trouble is damage to the brain tissues in the part of the brain that controls movement. It's caused either at birth or very soon after it.

I want to make it quite plain it is not the fault of either of the parents.

The aim of treatment is to make the best of the undamaged parts. It has mostly to be done in special clinics, but there are so few of these, that only one spastic child in ten gets proper treatment. What happens to the other nine?
Well, they grow up. Obviously, they should be at school. Physically, they have to start from scratch. They can't pick up the tricks of living like everyone else. They have to be taught the simplest, most natural things. Taught to walk. And taught to dress. And taught to eat. Yes, lots of them even have to learn to eat, but not alone.

In one way, they're like all other children. They need the stimulus and companionship of school life. Some of them - a few - get it, plus the treatment they need.

**Narrator:** The happiest days of your life? Why, of course. Richard and Ian are at St Margaret's, the first special school for spastics set up in Britain. It started in 1946. The headmistress can tell us about it.

**Headmistress:** We don't think of St Margaret's as a school for sick children, we just have rather special problems. Our children are taught all the normal school subjects and also modelling, painting and designing - all the things that give them a chance to express their individuality and their talents. Because they are talented, many of them.

Some of those who can't write in the ordinary way use typewriters to make their work legible. With the little ones, the teaching is elementary but all the same, they are beginning to learn.

At intervals during the day, they're taken to their treatment. It has to be constant and regular because the important thing is the gradual and continuous process of building up the correct pattern of movements, as they have to learn so many of the simple activities of the body that normal people take for granted. Even the control of lips, tongue and palate, has to be learned so that the child can speak.

The exercises are many and varied. The mirror on the ceiling shows this little girl how she is getting on. Our children get every encouragement to use their limbs as early as they can because life is ahead of them. So we give them callipers, some special boots. Such a new, strange thing is walking. These skis give him confidence. He has a firm base and something to hold onto. More work for those young legs and even with callipers it's possible - and fun!

Those tricycles are one of the really great assets for the handicapped children. Play and treatment and hope all in one. Some can ride but others have to watch. For a time.

Here's Christine with her callipers on again, going to have another shot at the walking lesson. When she first came to the school, she couldn't even stand up. Now she can move her own legs. Now she can very nearly walk. A little step or two. It's not much but it's a triumph. Every week, a little step forward.

Yes, they start from the beginning. How do you eat when you can't hold a spoon? You learn. Stage by stage. And how do you dress? When a simple business like pushing a button through a button hole is full of heart-breaking, confusing effort? Well, you learn. And one day, you can do it.

For those who have even got to learn how to talk, there is speech therapy. When the child first arrives, she makes a record. She makes more of them at intervals, not just for the therapists to study, but to encourage the child and show her how she's getting on in this troublesome art of words.

When Rosaline came, three years ago, this was her recording.

**Rosaline (on recording):** [unintelligible speech]

**Headmistress:** Now she's having her latest disc played back to her... Listen to this.

**Nurse (on recording):** Now, will you say these after me? I am going out.

**Rosaline (on recording):** I am going out.
Nurse (on recording): Good. Go and get it for me.

Rosaline (on recording): Go and get it for me.

Nurse (on recording): Thank you Rosaline.

Headmistress: Confidence. That's needed more than almost anything. They're going to fall sometimes, so they learn how to do it without getting hurt and how to get up again. Confidence. The self-reliance that helps them to move around under their own power. However slowly, without any help. Moving for themselves.

And bound by progress, to play as other children do but at carefully chosen games, that will not interfere with their treatment or make their troubles worse.

Yes, this is their chance. But, at present, very few spastic children get it and even these lucky ones have to leave us when they are fourteen or fifteen. What happens then?

Narrator: Here is our country and here is the problem. England and Wales have about ten thousand spastic children and not nearly enough special schools. You can see them on the map here. Just a handful of schools. They cannot possibly take the thousands of children who should go to them.

Perhaps I can put it better this way. Here are the existing schools; this is what there ought to be if every spastic child is to get the best chance. And when those that get in have to leave. Well in all the country, there is only one special school where the treatment can be carried on. One school. Perhaps one child in a thousand can make it.

Here is that school; it takes people of up to twenty-one years old. It's only been going for eighteen months, but it’s had its successes already. The pupils are getting a real grip on life.

This school was opened by Miss McIndoe. She is a spastic herself. There is an understanding and a sympathy between Miss McIndoe and her pupils, which is a tremendous advantage. The whole emphasis is on normality, that's to say the education is ordinary education by qualified teachers of the kind the pupils would get in an ordinary school.

But of course, it is the body that is still the main trouble. Those insecure muscles have to continue their education, steadily, regularly, always and all the time.

Spastics often get on well with work that takes them out of doors. Useful, constructive work like horticulture or raising of poultry or pigs.

So here at Puckle Hill, there is the chance, the help and the encouragement to become useful citizens. But Puckle Hill is alone. Puckle Hill is small. For every thousand that want to come, and need to come, there is room for one.

Well, that's the situation. For some reason none of us understand, these children are being pitched into a world with only half a birthright. We've just seen what they can do if they can get into a place that will give them hope and opportunity for a decent future. But as things are, only the odd one or two ever get that chance. But what about all those others?

Something must be done. And done quickly. There are two ways of getting a special school or clinic going. Either you can set it up with private money or you can get the local authority to do it. Frankly, it doesn't matter who does the job, just so long as someone does it quickly. Which is it going to be for all these spastics? An existence in the twilight or the chance, and the only chance, of their lives?