



# isoempilo

KwaDabeka CHC Staff Official Newsletter

Issue 8/08

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## A World United Against Smoking



National Health Director General, Mr Thami Mseleku addressing KwaDabeka community about smoking.

**S**moking, a silent killer disease, as the Health Director General (Mr. Thami Mseleku) calls it, has been put on a spotlight in a plight to sensitize the communities and engage them on the smoking policy review during the World Health Organisation's Framework Convention in Durban. KwaDabeka community was more than fortunate when on the 15th of November, international delegates from the conference visited KwaDabeka CHC to engage them on this issue.

According to the delegates, smoking causes many diseases which may include various kinds of cancers, heart attacks and strokes. Community members from Clermont, Sub 5, Mvuzane and other nearby areas had a chance to interact and ask questions straight to the National Health Director General

issues pertaining to smoking and particularly on how to exit the habit. Local leaders including Health Committee applauded the Department for its stride to combat or regulate smoking activities. The Conference was attended by more than 40 African countries and 160 international countries. When he delivered his speech, Mr Yusuf from Framework Convention Alliance, he explained to the people that every part of the body is affected by smoking, it starts from the brain, leaving a person unable to talk and disabled sometimes. He further suggested that health facilities like KwaDabeka CHC should have trained nurses who will deal with tobacco affected patients. Community members agreed with Yusuf.

Members of the community were very much concerned about the

small business people who sell cigarettes to young children. Community told Mr Mseleku that they would like to get assistance from the Department for their children and husbands so that they stop smoking.

Many thanks to our international visitors from Benin, Germany, Uganda, Senegal, eThekweni Municipality, South African Medical Research Council, National Department of Health, Provincial Department of Health, eThekweni District of Health, Consultants and Local Clinics, Health Committee as well as members of the public Clermont/KwaDabeka. A big thank you to our eThekweni District Manager, Ms S. Shezi for support and directing all the proceedings.

### Inside this issue

1. International visit
2. Editorial
3. Molweni Disaster
4. Young boy with Cancer
5. Photo album
6. Miscellaneous
7. Statistics
8. Cover page

### Don't Look Away



### Happy Festive Season





## Editorial

We are now approaching the end of the year, according to the calendar. This year has been noted with many surprising changes in the economic and political segments of life. Even so, life still goes on. The festive season is also on our door steps. Usually, many people take long leaves to spend some time with friends, relatives and families. Indeed, it is a nice time. We however need to be very cautious of this time. Negligence caused by drivers who abuse alcohol while driving, and drugs in our in our areas are one of the major concerns. Wreckless usage of fireworks, misuse of money, and unnecessary violence, all bring misery in January when one must get back to work. One must be very careful and be responsible.

I wish sometimes, health institutions, transport and police departments work together in campaigns on some of the above issues since during this season, these departments are always troubled with more injuries, deaths, accidents e.t.c If you can imagine a number of step wounds, guns shots and rapes, health institutions deal with in December alone, it means there is a big problem during this season.

Lastly, those who will take long journeys, please drive safely. Do not drink and drive. Enjoy braai's with friends and families in a safe environment, Do not leave kids in the cars or unattended on the beaches, do not abuse alcohol, walk in pairs, make sure you have saved a little bit of money for children school fees and uniform, keep your wallets and money in a safe place, **USE A CONDOM.** Come back to work safe. Do not become the next statistics.

Happy Festive season. God Bless you

*Tyron Khazwayo*

## KDC Staff maximize their support for Mbhele family

**K**waDabeka CHC would like to take this opportunity to thank all staff members who supported the Mbhele family who have just lost their daughter (Sr Nomsa Mbhele) who was working for the institution.

Sr Mbhele passed away late in October and has been with the institution for almost a year. She was posted to KwaDabeka CHC for her Community Service from Lalitha College in Umthatha.

On Saturday, 1st, a number of staff members attended her funeral to pay their last homage in Umzimkhulu.

May you continue supporting each other always.

To the family, May God be with you.

### KwaDabeka Community Health Centre

#### Vision

To provide comprehension PHC to all citizens in the catchment of KwaDabeka CHC.

#### Mission

To render compassionate inpatient and outpatient services based on PHC approach while providing continuing education, admin support, technical support and guidance and referring patients needing a high level of care.

#### Core Values

- Open communication
- Transparency
- Consultation
- Commitment to performance
- Service Excellence



Ms B. S Mdlalose (KwaDabeka CHC Manager)

I would like to take this chance to commend all Staff and Management of KwaDabeka CHC for their hard work and dedication to patient

care. Remember, they are seek they need our full support.

## Impumelelo ARV Clinic gearing up for staff enrollment

**S**ince the launch of the Impumelelo ARV Clinic in October 2006, the clinic has exceeded its targets in double. This in many cases is caused by a number of patients received as transfers and down referrals.

This is according to Sr Shozi who heads the operation. Even though the clinic is currently functioning properly, there are also few challenges, which among them, include: shortage of staff, and space. The space shortage is currently looked at since again RHRU



New parkhome donated by RHRU

has come to the rescue by providing yet another parkhome (pictured right). Behind the building there is a one four roomed parkhome which was not enough. It served both as a consulting room as well as an ARV

dispensary. The new one seen on the picture will cover most of these aspects.

"Currently, we are sitting at 1060 people who are enrolled as new cases. We also have a number of people who are about to be put on programme". Sr Shozi explains.

Another task that the Impumelelo Clinic staff is gearing for, is to prepare for the Clinic to be staff friendly and be used also by staff members, however, this is still in the pipeline. Another biggest issue is that IEC material is sometimes not available or they receive quite little. As a result they fall behind in terms of the teaching aids, including videos.

Check statistics on page 7.

# At least five people were confirmed dead during Molweni Disaster

Two children, Samkelisiwe Nzunga (10) and Sanele Hlongwane (9) were among the victims. They had just come back from school when their house collapsed..

Communities were roaming around in the drizzling, pouring rain, devastated after the hail of storm ravaged throughout the Molweni area on 14 Friday afternoon.

Since Friday, nearby health facilities were working hard admitting and offering basic health care to the victims. KwaDabeka CHC sent mobile clinic vans on that day to Molweni Clinic. People who were injured were referred to nearby hospitals including, St Mary's, R. K Khan, and as far as Prince Mshiyeni.

The eThekwini Health District Office then coordinated all stakeholder's

efforts by calling a Disaster Management Plan meeting for the West Sub District at KwaDabeka CHC on the following Tuesday., where all the tasks were allocated to various individuals and institutions.

This was also in collaboration with the eThekwini Municipality Health Department.

According to Mrs. Penny Dladla, Deputy District Manager eThekwini Health District, the aim was to coordinate efforts and display KZN Health responsibility in the disaster through offering health care to the community of Molweni, and also to prevent outbreak of other opportunistic diseases since people are now in communal living, some in tents and some in the halls.

In this regard, eThekwini Municipality Environmental Specialists are also on board, says Mrs. Busi Grootboom of the eThekwini Municipality.

The situation is closely monitored closely by all stakeholders.

## Community Health Workers Restructured

The KZNPPA has modified the Com-

munity Health Workers role. This has been done through a series of training of CHWs and Health committee from the community of Clermont. The KZNPPA is an organization managing Community Health workers in

the province.

Most of them were reporting for duty in different points and were not properly trained. New supervisors and working precincts were re-demarcated. In November these groups were gath-

ered at the Municipal Building where they were introduced to each other and their new supervisors. KZNPPA Provincial Coordinator said that the programme was successful

## KwaDabeka CHC supporting a fight against Gender Violence and Children Abuse



**16 Days Of Activism**

**25 November-10 December**

**Ngingakuvikela kanji ukusabalala kwe-TB!**  
**Ngingakuvimbela ngoku:**

Ukavala umlomo wami njalo ngendwangu noma i-Tissue uma ngikhwehlela.  
 Ukuvala amakhala ami njalo uma ngithimula.  
 Ukungathimisele phansi, kodwa ngisebenzise i-tissue ebese ngilahla endlini yangasese.  
 Ngizijwayeze ukuvula amafasitela asekhaya lami njalo.  
 Uma ngitholakala ukuthi sengingenwe isifo se TB, ngiqale amaphilisi ami ngokushesha.  
 Ngithembeke ekuthatheni amaphilisi e-TB isikhathi esingengaphansi kwezinyanga eziyisithupha nangendlela engiyalelwe ngayo emtholampilo.  
 Ngigququzele nabantu engihlala nabo ekhaya ukuthi nabo bathole ukuhlelelwa i-TB mahhala.

**HEALTH**  
KwaZulu-Natal

"TB anywhere is TB Everywhere"  
**QEDA I-TB MANJE**

## Staff Notices

### Staff Post

All staff members with uncollected post must urgently collect it next to the kitchen on the first floor. Please contact Ms Jabu Mbonambi for more information.

### Identity Cards

The camera that was used for this purpose is currently faulty. Alternative arrangements will be made. The Management is aware of the problem. Those without identity cards must contact the PRO urgently.

## Health Calender

### November

- Red Ribbon Month
- Quality Month
- Sun Smart Awareness month - CANSA
- 5 : National Children's Day
- 3-7 SADC Malaria Week
- 8 : International Radiographers' Day
- 14 : SADC Malaria Day
- 14 : World Diabetes Day
- 25 : International Day for the elimination of Violence Against Women
- 25/11 - 10/12 : 16 days of Activism on No Violence Against Women

### December

- Sun Smart Awareness Month - CANSA
- 1 : World AIDS Day
- 3 : International Day of Disabled Persons
- 5 : International Volunteers Day
- 9 : World Patient Safety Day

## Have you heard about Cholera Outbreak?

An extract from Communicable Disease Control Programme Circular Minute G80/2008

Following the latest media reports of a Cholera outbreak in southern Zimbabwe which killed about 49 people. Government health officials in the town of Beitbridge, 585km south of Harare, told the Herald newspaper that between

Friday and Monday, 400 people had been hospitalised.

It was also stated that there is a serious outbreak of cholera in Beitbridge and the number of casualties are increasing.

Officials in the town near the South African border blamed the outbreak on water shortages and poor sanitation facilities.

### 3. FACTS ABOUT CHOLERA

#### 3.1 What is CHOLERA?

Cholera is a water-borne disease that causes vomiting and acute diarrhoea, and can rapidly lead to death from dehydration if not treated.

#### 3.2 What are the signs and symptoms of CHOLERA?

The main signs and symptoms include:

- Diarrhoea (watery stools) and in severe cases there is blood in the stools.
- Vomiting;
- Dehydration usually occurs rapidly;

idly;

- Muscle cramps;
- In severe untreated cases, death may occur in a few hours
- Ultimately kidney & circulatory failure followed by death.

#### 3.3 Incubation period

- From a few hours to 5 days (usually 2-3 days).

#### 3.4 Causative organism

- *Vibrio cholera*

#### 3.5 Mode of spread

- Drinking contaminated water also promotes transmission.
- It is spread through the faecal-oral route;
- By consuming contaminated foods and vegetables;
- Eating uncooked sea food

#### 3.6 Population at risk

- People who do not have access to purified water such as tap water.
- People getting their water from rivers, dams and boreholes ( not treated ).

### 4. STEPS IN THE MANAGEMENT OF SUSPECTED CHOLERA:

- Step 1. Assess for dehydration.
- Step 2. Rehydrate the patient, and monitor frequently. Then reassess hydration status.
- Step 3. Maintain hydration: replace ongoing fluid losses until diarrhea stops.
- Step 4. Give an oral antibiotic to the patient with severe dehydration.

tion.

- Step 5. Feed the patient.

### 5. PREVENTION MEASURES PURIFICATION

This is done by adding one teaspoon full (5 ml. or one capful if bottle has a screw cap) of household bleach into 20 – 25 liters of water. Thoroughly mix solution with water and allow to stand for at least two hours (preferably overnight) before using the treated water.

#### BOILING

If water is from an unpurified source make sure it is boiled before you drink it

#### OTHER MEASURES

Wash all the vegetables with treated or boiled water and must be washed thoroughly before and after eating;

- Make use of clean or boiled water to wash utensils;
- Food must not be left uncovered;
- Wash your hands thoroughly after using the toilet;
- Prepare and store food under good hygienic conditions;
- Food must be cooked with purified water and it is preferable that it is consumed while still hot;
- Discourage the habit of people eating from one container at the same time;
- Cooked food should be separated from raw food to avoid cross-contamination;
- Proper sanitary disposal of human waste without contaminating

water sources;

- Control of flies;
- Avoid any potentially contaminated food especially raw or partially cooked fish and shellfish. Vegetables should be peeled or shelled;
- Uncooked food poses the greatest risk;
- There should be boiling or pasteurization of all milk

#### Warn food handlers to :

- Exclude infected persons from handling food;
- Wash vegetables and fruit in treated water before use;
- Prepare and store food under proper hygienic conditions;
- Cook food thoroughly in treated water and eat while still hot;
- Avoid cross-contamination – mixing raw food with cooked food;
- Wash hands thoroughly with soap after defecation and before and after preparing eating food;
- Discourage the habit of people eating simultaneously from a communal food container.
- Remember that left-overs should be reheated before eating.
- Encourage individuals to use cutlery when eating.

## At five he has had more than a fair share of hardship

As health workers we become inured to such situations, but no matter how hardened one might have become, one just cannot hold tears back when one looks at this lad - his bewildered looks hide a human tragedy of untold proportions. At a tender age of 5, he has had more than a fair share of hardships having survived a shack fire in which his elder sibling perished, leukaemia, chemotherapy and now, endless starvation.

Silenced by pain and starvation simultaneously, but his face tells a long story.

You could tell from a mile away that young Phiwayinkosi is longing for hope and had it been for him he would have narrated his story when Mrs Khanyile (KDC Social Worker), Dr Mbhele and Mr T Khuzwayo (PRO) delivered a brand new bed for this cute young boy suffering from Leukaemia, a gift from KwaDabeka CHC Doctors. **Leukemia** or **leukaemia** (Greek leukos λευκός,



Phiwayinkosi at home shortly after released from hospital

"white"; aima αίμα, "blood") is a **cancer** of the **blood** or **bone marrow** and is characterized by an abnormal proliferation (production by multiplica-

tion) of blood **cells**, usually white blood cells (**leukocytes**). Leukemia is a broad term covering a spectrum of diseases. In turn, it is part of the even broader group of diseases called **hematological neoplasms**.

Phiwayinkosi was met by Dr Mbhele who when consulting him discovered an untold story and immediately alerted KwaDabeka CHC's Social Worker to intervene. Coincidentally, when the Social Worker was speaking about Phiwayinkosi's ordeal to Dr Deosaran, other Doctors too were touched by the story and donated a bed since he was sleeping on the floor.

Her sister passed away when their shack was burnt down. Her mother is still repaying debts that were incurred, she is not employed and single handedly battling to support her son with high medical needs.

"I do not know what to give them this afternoon, I always go out to neighbours for food and money". His mother told us.

The Social Worker has organized a box of cardboard for staff members who would like to give food or clothing items, not only for Phiwayinkosi, but for other kids who are orphans as well.

Her contact number is 031 714 3758.

# Photo Album

Consultative meeting at KwaDabeka CHC



Visit by social Worker to Phivayinkosi's house



TB Campaign at KwaDabeka School Health Week



## School Health Services identify gaps in schools

**S**chool is the place where learning should not be disturbed and it should be safe, peaceful as it is a place that builds children's future. The Department of Health has long ago realized the importance of a safe and a healthy environment of learning.

Even this year the realization of these vision has been no different when a multi-disciplinary team from various sectors joined forces during the School Health Week which took place from the 20th until the 24th of October in the West Sub District of eThekweni.

According to the organizers and the stakeholders, there are still some challenges facing schools which Health Department is identifying through school health services almost every year. In these schools that were chosen, here are the

challenges identified: 1. There are no employed people who maintain yards and

be referred to Municipality through a local Councillor, 3. to other schools, a feeding scheme is a problem as there are delay relating to supply, and those orphaned and disadvantaged children are suffering.

Among the stakeholders who supported this initiative by the Department of Health eThekweni District, were Mr. Philani Mbanjwa from Fire Department; Mr. Shezi from Metro Police; Mrs. Mzimela from Environmental Health; Ms Non-sikelelo from

Molweni Resource Centre; Ms Meena Christopher and Ms Lindiwe Ngwenya, both from from-eThekweni Health District Office.



Main Picture: Ms T Gabuza of KwaDabeka CHC with children in one of the five schools during School Health Week



Insert: Young boys checking their cabbage in the vegetable garden

ablution facilities, 2. Water supply is still a major problem, e.g. at Inhlangano primary, it was discovered that there is no water supply since July this year. This matter will

**Traffic Cop SEATBELT**

Gauteng Metro policeman pulled a car over and told the driver that because he had been wearing his seat belt he had just won R5 000, in an Arrive Alive safety competition. The driver could hardly believe his luck. "What are you going to do with your cash?" asked the traffic cop. "Well I guess I'm going to get a drivers license," he answered.

"Oh, don't listen to him," yelled a woman in the passenger seat. "He tries to be smart when he's drunk." This woke up the guy in the back seat who took one look at the cop and moaned, "I knew we wouldn't get far in a stolen car."

At that moment there was a knock from the boot and a voice said, "Are we over the border yet?"

**Lowest prices**

A shopkeeper was dismayed when a brand new business much like his own opened up next door and erected a huge sign which read **'BEST DEALS.'**

He was horrified when another competitor opened up on his right, and announced its arrival with an even larger sign, reading **'LOWEST PRICES.'**

The shopkeeper panicked, until he got an idea. He put the biggest sign of all over his own shop. It read **'MAIN ENTRANCE.'**

**Holy Ghost**

One traveling preacher was into theatrics. He would hire a young boy to climb into the rafters with a dove. At the climax of his sermon, he would raise his hands, look toward heaven and call out, "Holy Ghost, come down!" The boy would release the bird and it would fly down to great effect.

One day, the preacher called out, "Holy Ghost, come down!" Nothing happened. Again, he called, "Holy Ghost, come down!" Some scuffling was heard from the rafters, followed by a voice that said, "Preacher, a big yellow cat just ate the Holy Ghost. You want me to throw down the yellow cat?"



**Big picture strategies for healthy eating**

Eat enough calories but not too many. Maintain a balance between your calorie intake and calorie expenditure—that is, don't eat more food than your body uses. The average recommended daily allowance is 2,000 calories, but this depends on your age, sex, height, weight, and physical activity.

Eat a wide variety of foods. Healthy eating is an opportunity to expand your range of choices by trying foods—especially vegetables, whole grains, or fruits—that you don't normally eat.

Keep portions moderate, especially high-calorie foods. In recent years serving sizes have ballooned, particularly in restaurants. Choose a starter instead of an entrée, split a dish with a friend, and don't order supersized anything.

Eat plenty of fruits, vegetables, grains, and legumes—foods high in complex carbohydrates, fiber, vitamins, and minerals, low in fat, and free of cholesterol. Try to get fresh, local produce

Limit sugary foods, salt, and refined-grain products. Sugar is added to a vast array of foods. In a year, just one daily 12-ounce can of soda (160 calories) can increase your weight by 16 pounds. See suggestions below for limiting salt and substituting whole grains for refined grains.

Don't be the food police. You can enjoy your favorite sweets and fried foods in moderation, as long as they are an occasional part of your overall healthy diet. Food is a great source of pleasure, and pleasure is good for the heart – even if those French fries aren't!

Get moving. A healthy diet improves your energy and feelings of well-being while reducing your risk of many diseases. Adding regular physical activity and exercise will make any healthy eating plan work even better.

**One step at a time.** Establishing new food habits is much easier if you focus on and take action on one food group or food fact at a time

**Quick Puzzle**

**Across**

- 1. Eminent (7)
- 5. Fertile area in desert (5)
- 8. Critical juncture (6, 2, 5)
- 9. Stage play (5)
- 10. Scornful mockery (7)
- 11. Club used on green (6)
- 12. Fencing sword (6)
- 15. Trapeze performer (7)
- 17. Detest (5)
- 19. Extra strength (13)
- 20 Occurrence (5)
- 21. Long eventful journey (7)

**Down**

- 1. Wanderer (5)
- 2. Repeatable (4,5,4)
- 3. Servitude (7)
- 4. Selfishness (6)
- 5. Web-footed river animal (5)
- 6. Oversensitivity (13)
- 7. Plotter (7)
- 11. North American grassland (7)
- 13. Specialist College (7)
- 14. Three-dimensional sound (6)
- 16. To suit (5)
- 18. Elegantly luxurious (5)

1	2	3	4	5	6	7
8						
9			10			
11				12	13	
			14			
15		16			17	18
19						
20				21		

**Treat time**

**Orange-glazed chicken breasts**

Preparation time: 10 minutes

Cooking time: 20 minutes

**Ingredients**

- 4 chicken breast fillets
- 2 cloves garlic, peeled and sliced

**MARINADE**

- 80 ml apricot jam
- 1 orange, juice and zest
- 30 ml soya sauce



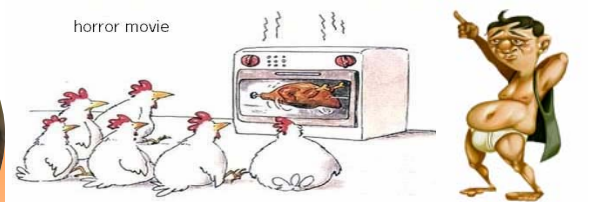
garlic in each cut. Combine the remaining ingredients in a shallow bowl. Add chicken breasts, coat well and marinate for at least 30 minutes.



Place chicken on a baking tray and grill for about 5 minutes on each side, brushing regularly with marinade until the chicken is cooked and nicely browned.

**Variation**  
Substitute the orange juice and zest with lemon for a different citrus flavour.

Add 30 ml grated ginger and 5 thinly sliced spring onions to the marinade.



horror movie

**Wise up**

"Even a mistake may turn out to be the one thing necessary to a worthwhile achievement."

**Henry Ford**

"The happiest people are those who discover that what they should be doing and what they are doing are the same thing."

**Unknown**



**World of God**

**I Peter 5:6**

Therefore humble yourselves under the mighty hand of God, that He may exalt you in due time,

# No longer under-dogs

Saturday, August 30, Lahee Park Soccer Stadium in Pinetown was buzzing with soccer entertainment, a fine fun day which took the whole day.

This was during the six team tournament which included KwaDabeka CHC, Hlengisizwe CHC, Hillcrest Hospital, Wentworth Hospital, Don McKenzie Hospital and St Mary' Hospital.

Since KwaDabeka CHC has joined other health facilities in the soccer & netball sports category, it has made a remarkable effort to be noticed and

recognized as one of the best playing teams in the eThekweni Region. During the last tournament it has played well qualifying for the next round, however, games were not finished due to unforeseen problems emanated during the games. Many in the institution were hesitant when the team invited to participate in the eThekweni District Tournament for the first time last year, but the team performance was incredible.

KDC has played with the best teams and has proved many wrong.



KwaDabeka CHC Soccer team taking pictures before the match with Hillcrest hospital at Lahee Park Soccer Stadium

The tournament will be hosted again to find the winner, both soccer and netball, this is according to the organizers.

The first match was played against Hillcrest Hospital I-I, Wentworth I-0.

## Statistics Office *Information on this page was supplied by Mr Sfiso Shabalala*

(Statistics Officer/Facility Information Officer) Phone 031 714 3714 Email: sifiso.shabalala@kznhealth.gov.za

### VCT UNIT (2nd Quarter 2008)

	JUL	AUG	SEP
HIV client pre-test counselled (excluding antenatal) - Female	142	154	152
HIV client pre-test counselled - Male	118	119	104
HIV client tested (excluding antenatal) - Female	118	140	144
HIV client tested - Male	106	101	98
HIV test positive - new (excluding antenatal) - Female	66	76	69
HIV test positive - new - Male	59	48	56

### HIV/AIDS UNIT (2nd Quarter 2008)

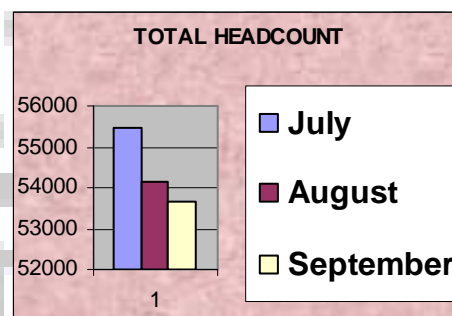
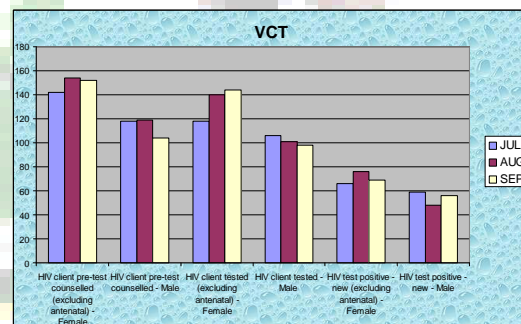
	JULY	AUG	SEP
Total Headcount for over 5 years	1737	1201	1291
Total Headcount for under 5 years	32	37	13

### STI UNIT (2nd Quarter 2008)

	JUL	AUG	SEP
STI treated new episode	581	460	419
Male Urethritis Syndrome treated	201	235	102
STI partner notification slip issued	677	510	687
STI partner treated	82	79	102

### IMPUMELELO ARV UNIT (2nd Quarter 2008)

	ARV Visits	Initiation of treatment
July	1128	59
August	960	56
September	977	31



# iso mpilo



**HEALTH**  
KwaZulu-Natal



**KwaDabeka CHC first staff members 1977**

*Silwa Nezifo, Silwa Nobubha, Sinika Ithemba*