

THE STRUGGLE FOR HEALTH IS REAL

YOUTH MONTH



MS NOMAGUGU SIMELANE-ZULU
MEC FOR HEALTH

Youth Month gives us the opportunity to honour all the young people who fought against Apartheid and Bantu Education 43 years ago, with some paying the ultimate price - death. Young people today have to wage a war against a new struggle – the scourge of disease confronting them.

We still have the challenge of the spread of HIV and Aids infections, drug and alcohol abuse, teenage pregnancy, illegal termination of pregnancy and trauma as a result of violence and car crashes among young people. According to a report from Statistics SA, about 43.2 percent of young men die from causes like violent crime or car accidents, while young women were likely to succumb to infectious diseases like HIV/Aids and TB.

Additionally, far too many youth live a sedentary lifestyle, with no physical exercise, which makes them vulnerable to obesity and diseases like diabetes and hypertension. If young people can begin to change their lifestyles today, there would be a significant dent in the burden of disease in future.

It is never too late to change, and as the Department of Health – working together with all the people of

KwaZulu-Natal – we want to assure young people that we are here to help them. We have a range of free healthcare services including contraceptives for family planning, counselling and facilities for the termination of unwanted pregnancies (which is a Constitutional right).

Our message to young people is that alcohol and drugs are not good for them. Substance abuse increases their risk of having unprotected sex and contracting STIs, including

HIV, and also makes them vulnerable to poor decision-making on the roads, which can have devastating consequences. They are also at risk of falling pregnant, and giving birth to unwanted babies, which end up in dustbins or grow up without the love, care and support that they need. The priority for young people therefore should be to get an education and the necessary skills to build their future and the country.

We call on all young people to make smart choices

BE A PROUD YOUTH CHAMPION, HAPPY YOUTH MONTH!!!



FIGHTING DISEASE, FIGHTING POVERTY, GIVING HOPE

SA NATIONAL AIDS CONFERENCE

TIME TO END STIGMA AND ACCELERATE HIGH IMPACT HIV PREVENTION ACTIVITIES: 9th SA AIDS CONFERENCE GIVES CLEAR MANDATE



A clarion call was made at the 9th SA Aids Conference for a bold multi-stakeholder response to end the Stigma on HIV and accelerate high impact HIV prevention activities.

The conference was hosted by KwaZulu Natal at Inkosi Albert Luthuli International Convention Centre in Durban from the 11th to the 14th of June 2019. This mega health event attracted a host of local and international delegates (40 countries) among them medical practitioners, representatives from the public sector, NGO's, Faith based organisations and the corporate sector.

The theme for the conference was "Unprecedented Innovations and Technologies: HIV and Change: Lest we forget."

During the conference opening plenary, National minister of Health Dr Zweli Mkhize made an unequivocal call for a collective campaign against stigma and discrimination, as well as expedition of high impact HIV prevention activities.

"Let me be clear as the newly appointed Minister of Health, stigma and discrimination have no place in the provision of health services. We will take action against any health professional that discriminates against anyone on the basis of their illness, gender orientation, social status or any other characteristic," he said.

This call also augurs well for the 3 year Human Rights Plan, which was launched by the South African National Aids Council (SANAC) ahead

of the SA Aids conference at Gugu Dlamini Park in Durban. The Plan's main focus is to set out a comprehensive response to human rights and gender-related barriers to HIV and TB services in South Africa for people living with HIV, people living with TB and vulnerable and key populations.

The plan highlights the following key areas of focus:

- Reduction of stigma and discrimination
- Training of Health and other frontline workers to provide care that is non discriminatory
- Sensitisation and training of law makers and law enforcement agencies on HIV/AIDS matters

- Strengthening of Campaigns that focus on legal literacy and rights
- Strengthening legal support services
- Monitoring reviewing laws and policies
- Reducing gender inequality and gender based violence

A further call for a positive response to these targets was also made in order for the work that is done on the ground and in different parts of the country to ultimately respond to the vision of ending Aids by 2030.



HELPING PATIENTS COMMIT TO LIFELONG HIV/AIDS TREATMENT

When people are sick and medication is dispensed, many of them will take it as long as the symptoms persist. As soon as the symptoms subside, people often stop taking their medication and do not complete the full course of their treatment.

There is a need to get patients' lifelong commitment as soon as they start ART or there is a risk of people interrupting treatment at some point. This can result in some developing a detectable viral load and some even becoming lost to follow-up care.

The lifelong commitment to ART is part of the plan outlined in the South African National Adherence Guidelines of 2016. Health care workers (HCW) at the health care facility should help patients develop an adherence plan that will ensure they remain in care, will adhere to ART treatment, and will achieve viral suppression.

TAKING ART REQUIRES A LIFELONG COMMITMENT

One way of getting patients' commitment to ART

treatment is through assisting them in setting life goals that can include seeing their children graduate, paying off a bond, or achieving viral suppression so that they can remain healthy, productive, and alive. These goals could be established by asking patients what they value in life, or what they expect or hope to achieve in life.

Once the goals have been set, the HCW should encourage the patient to start ART immediately if they haven't already started. If the patient is reluctant to start treatment, the HCW should arrange for him or her to meet with an expert patient from a support group or a peer educator so that the patient can learn from their experiences and dispel any myths or misconceptions. Newly diagnosed patients can also be referred to the social worker, where they can learn more about HIV, acceptance of their status, treatment options, and learn about healthy living.

As soon as patients start ART they should be encouraged to identify someone close to them, such as a family member or a trusted friend, who can

remind them to take their medication on time every day and who will support them in their treatment journey. Later, when patients are released from the facility, they can also nominate this person to obtain their medication from the pick-up-point in the event they are unable to go get it.

MAKE THE RIGHT DECISION AND STICK TO IT

It is also important to help patients develop a schedule of when they take the medication. They need to have reminders in place to remind them to take their medication. If they miss a dose, they should take it as soon as they remember.

If a patient plans to travel, they should always contact the HCW so that they are given enough medication to cover the period they will be away. In case of unplanned trips, such as travel related to a funeral, they should always report to the nearest health facility where they have travelled so that they can get treatment. They will need to provide evidence of their medical condition and current medication.

Every time a patient faces



challenges in taking their treatment, they should be reminded of their life goals. If the challenges relate to substance use, the patient should be advised to minimize their substance use and to take their medication at the scheduled time. For challenges relating to side effects, patients should be advised to see a HCW if the side effects persist.

The HCW should help prepare the patient for the first viral load test as they approach the six-month mark. The patients should

be counselled and educated about why it is important to take the test and what it measures.

The adherence plan is a tool that will assist patients in remaining in care and adhering to their treatment plan. This will contribute significantly towards achieving epidemic control. HCW are encouraged to use this tool on every patient who is on lifelong HIV/AIDS treatment.

ALBINISM AWARENESS

International Albinism Awareness Day was commemorated across the globe on Thursday, 13 June 2019. Albinism remains largely misunderstood, and sometimes results in people living with it being discriminated against, abducted, sexually assaulted or murdered due to lingering stereotypes and misconceptions. KZN Health Chat Bulletin takes a closer look

What is Albinism?

Albinism is an inherited condition where a person is unable to produce normal colouring of the skin, hair and eyes (lack of pigments) The condition can be limited to the eye or involve the eye and the skin.

What causes Albinism?

Albinism is caused by defects in the hereditary material that determines skin colour. People who have normal pigmentation could be carriers of the hereditary material that is defective for skin colour.

A carrier mother and father can pass their defective skin colour information on to their children which could then have albinism. It is important to note that a child with albinism received the defective information from both parents and that it is common for parents with normal skin colour to have a child with albinism. As explained above, albinism is an inherited, generic disorder. Parents of a baby with albinism should never feel guilty about this, it is not their fault. It is a condition caused by the specific albinism genes that a baby has inherited from his/her mother and father at the time on conception.

What are the signs and symptoms?

Eyes

Light brown to pale blue in colour

Sensitivity to the sun (photophobia)

Fast involuntary back and forth movement of the eyes, which improves with age (nystagmus).

Squinting (strabismus)

Visual impairment and low vision.

Skin

Very light and pale in colour

Freckling or pigmented patches might develop on sun –exposed areas (ephedlides).

Very sensitive to the sun (burns easily)

Hair

Hair colour ranges from white, yellow, light brown to reddish.

Eye lashes and brows whitish.

Intelligence

Within the normal range, although infants with albinism may seem a little slower at first because of the visual problems with which they later learn to cope. It is important to note that not all these signs and symptoms are present in all individuals with albinism and even siblings may vary in colouring and severity of symptoms.

Skin Care

Because of the lack of pigments, the eyes and skin of people with albinism are very sensitive to light.

Due to this sensitivity people with albinism may develop sores on their skin that could develop to skin cancer. Ultraviolet rays in sunlight may penetrate and damage the skin, resulting in sun-burn and blistering. Rapid ageing of the skin can leave it thin, dry and easily damaged. There is also a higher risk of cancer of the skin on sun-exposed areas, especially if the person does not take the precautions to protect themselves from the sun.

To protect the eyes and skin from the harmful effects of the sun it is recommended that people with albinism:

- Keep out of the sun especially between 11h00 to 13h00
- Use sun barrier cream with at least SPF 25 (sun protection factor) on sun-exposed areas.
- Use lip protection



cream of at least SPF 25

- Use large brimmed hats.
- Long sleeved cotton shirts and blouses with high collars
- Wear long trousers and slacks whenever possible, to protect the legs.
- Wear Broad brimmed hats
- Protective eyewear (appropriate dark glasses) is recommended.
- Regular ophthalmic assessments from infancy and correctly prescribed glasses may be helpful.



COMMUNITY BASED PROGRAMME EMPOWERS YOUNG DOCTORS:

The University of KwaZulu-Natal and the Department of Health in KwaZulu-Natal embarked on a ground-breaking initiative three years ago to ensure that the medical professionals produced are able to function optimally in all South African environments. Through the Community Based Training in a Primary Health Care Model (CBTPHCM) Programme final year students are enrolled in varying health facilities, especially in the rural areas, in order to train them in delivering health services in real circumstances.

THIS YEAR'S INTAKE OF THE PROGRAMME IS AS FOLLOWS:

• Nursing	81
• Medicine	250
• Occupational Therapy	45
• Audiology	35
• Speech Language Therapy	34
• Optometry	65
• Sport Science	75
• Pharmacy	121
• Dental Therapy	52
• Physiotherapy	65



KZN HEALTH MEC PLEASED WITH THE QUALITY OF CARE AND CLEANLINESS AT NGWELEZANE CLINIC DURING SURPRISE VISIT



KwaZulu-Natal Health MEC Ms Nomagugu Simelane-Zulu has applauded management and staff of Ngwelezane Clinic for the smooth running and upkeep of the facility – even when no-one is watching.

During an unannounced visit to the clinic last week the MEC expressed her satisfaction with what she found, from the cleanliness of its premises and wards to the positive experience reviews from patients waiting in the queues. This was the MEC's fourth

unannounced visit to a health facility since her appointment, and she has vowed that more will follow.

"The purpose of our visit, as I've said recently, is to try to visit as many health facilities as possible across the province. We did not receive any complaints about this clinic, but we decided to come just to see how people work when no-one is watching," said the MEC.

"This is one of our 24 hour clinics that work seven days a week, so we wanted to see how they work because

sometimes the level of service that is experienced during the week is not the same as what you'd find on a weekend. Although you can see that the structure is old, the service is of a proper and acceptable level. The facility is clean, and they have a sufficient number of nurses, who are able to help the community.

"There are certain challenges here and there, such as a faulty ablution facility, but we will intervene in that regard. All in all, we are pleased that the facility is running well. We've also been made

aware that access in and out of the clinic is sometimes difficult because it's in the middle of the CBD, which is something we need to raise with the municipality."

MEC Simelane-Zulu also reiterated that the Department would be seeking ways to improve the response times of state ambulances in the province and the number of clinics that comply with the Ideal Clinic Realisation and Maintenance programme.

An Ideal Clinic can be defined as one that has good

infrastructure, adequate staff, adequate medicine and supplies, good administrative processes, and sufficient adequate bulk supplies. It uses applicable clinical policies, protocols and guidelines; harnesses partner and stakeholder support; and also collaborates with other government departments, the private sector and non-governmental organisations to address the social determinants of health.

ARE YOU DEPRESSED?

THERE'S HOPE:

YOU ARE NOT ALONE



"I missed that episode, I'm so depressed." "The heel of my shoe broke, I'm so depressed." The word "depression" is easily passed around in everyday conversation. However, depression is not a minor disappointment but a serious mental illness.

The South African Depression and Anxiety Group (SADAG) reports that 1 in 4 university students are diagnosed with depression. With a quarter of youth experiencing this illness, it is important to understand what it is and how you can find help.

WHAT IS DEPRESSION?

According to the World Health Organisation (WHO) "depression is a common mental disorder, characterized by persistent sadness and a loss of interest in activities that you normally enjoy, accompanied by an inability to carry out daily activities, for at least two weeks.

In addition, people with depression

normally have several of the following:

- a loss of energy;
- a change in appetite;
- sleeping more or less;
- anxiety;
- reduced concentration;
- indecisiveness;
- restlessness;
- feelings of worthlessness, guilt, or hopelessness;
- and thoughts of self-harm or suicide.

Fortunately it is treatable, with talking therapies or antidepressant medication or a combination of these."

WHO TO CALL

If you suspect that you or a friend may have depression, please do not hesitate to contact these toll free numbers below for more information and counselling

Suicide Helpline - 0800 567 567

24 hour Substance Abuse Helpline - 0800 12 13 14

Pharmadynamics Police & Trauma Helpline - 0800 20 50 26

Adcock Ingram Depression and Anxiety Helpline - 0800 70 80 90

Destiny Helpline for Youth & Students - 0800 41 42 43

ADHD Helpline - 0800 55 44 33

24hr Department of Social Development Substance Abuse helpline - 0800 12 13 14

SMS 32312

24hr Suicide Crisis Helpline - 0800 567 567

24hr Cipla Mental Health Helpline - 0800 456 789

DID YOU KNOW?

According to SADAG:

- 31.5% of teen suicide attempts required medical treatment;
- 17.6% of teens had considered attempting suicide; Over 20% of 18-year-olds had one or more suicide attempts;
- According to the WHO, half of all mental health conditions start by 14 years of age but most cases are undetected and untreated;
- Male youth die by suicide more than female youth;
- 1 in 6 teens are or will be addicted to cannabis (marijuana/weed).



VIOLENCE AGAINST WOMEN IS

A HUMAN RIGHTS ISSUE



Violence against women does not only mean physical violence. It is much bigger and includes sexual, emotional, psychological and financial abuse.

Violence against women is a worldwide major public health issue with damaging effects on the health of women throughout the world. The KwaZulu-Natal Department of Health itself has been deprived of its hardworking nurses who bring healing to those who are ailing as a result of male abuse.

According to the World Health Organization (WHO), South Africa has one of the

highest rates of violence inflicted on women and girls. Gender-based violence does not discriminate, any person of any race, age, sexual orientation, religion or gender can be a victim or perpetrator.

How you can help victims of abuse?

- believe the person
- listen with empathy and do not judge
- offer practical support, such as accompanying the person to the police station
- Share the

gender-based violence number, **0800 428 428**, so that they can call to get help

South Africans must condemn any form of violence against women; working together with police to ensure that those who hurt and abuse others are arrested and convicted.

Report all cases of rape, sexual assault or any form of violence to a local police station or call the **toll-free Crime Stop number: 086 00 10111**.

FIGHTING DRUG ABUSE HEAD-ON



Substance abuse still remains one of the silent killers among young people. In many lives of young people drinking alcohol and using drugs started as a pleasurable "high," that helped to ease stress, or helped to avoid life problems.

The habit then contributes to risky sexual behaviour, increasing the chances of contracting HIV and other sexually transmitted diseases. It is a huge contributory factor to the spread of HIV/AIDS amongst young people and teenage pregnancy. It contributes greatly to liver diseases, neurological disorders, and chronic memory disorders. The abuse of substances can increase a user's risk of developing a mental disorder and affect the physical health of the user, especially the kidneys, liver, heart and lungs.

The negative consequences of substance abuse affect not only individuals who are users but the entire community they live in. A common consequence is crime and gender based violence which have become an overwhelming occurrence in many households and communities.

Here are a few signs you should look for from your loved one that signify excessive alcohol or drug usage:

Signs of Drug Abuse and Drug Equipment

- Possession of drug-related equipment such as pipes, rolling papers or small decongestant bottles
- Possession of drugs, peculiar plants, butts, seeds or leaves in ashtrays or in clothing pockets
- Odour of drugs, smell of incense or other "cover-up" scents
- Bloodshot eyes and dilated pupils

If you need help for any dependency or addiction to drugs or alcohol or if you have a loved one who's struggling to cope and needs tips on how to deal with substance abuse contact the 24 hour substance abuse Helpline (0800 12 13 14) which offers free telephonic counselling, referrals and support. The Helpline is available 7 days a week nationwide.

BREAKING DOWN PRIMARY HEALTH CARE

One of the buzzwords within the healthcare sector is Primary Health Care. But just how many people understand what is meant by this concept? What is it all about?

WHO has developed a cohesive definition based on three components:

- Meeting people's health needs through comprehensive promotive, protective, preventive, curative, rehabilitative, and palliative care throughout the life course, strategically prioritizing key health care services aimed at individuals and families through primary care and the population through public health functions as the central elements of integrated health services;
- Systematically addressing the broader determinants of health (including social, economic, environmental, as well as people's characteristics and

behaviours) through evidence-informed public policies and actions across all sectors; and

- Empowering individuals, families, and communities to optimize their health, as advocates for policies that promote and protect health and well-being, as co-developers of health and social services, and as self-carers and care-givers to others.

Why is primary health care important?

Renewing primary health care and placing it at the centre of efforts to improve health and wellbeing are critical for three reasons:

- Primary health care is well-positioned to respond to rapid economic, technological, and demographic changes, all of which impact health and well-being. A recent analysis found that approximately half of the

gains in reducing child mortality from 1990 to 2010 were due to factors outside the health sector (such as, water and sanitation, education, economic growth). A primary health care approach draws in a wide range of stakeholders to examine and change policies to address the social, economic, environmental and commercial determinants of health and well-being. Treating people and communities as key actors in the production of their own health and well-being is critical for understanding and responding to the complexities of our changing world.

- Primary health care has been proven to be a highly effective and efficient way to address the main causes and risks of poor health and well-being today, as well as handling the emerging challenges that threaten health and well-being tomorrow. It has also been shown to be a good value

investment, as there is evidence that quality primary health care reduces total healthcare costs and improves efficiency by reducing hospital admissions. Addressing increasingly complex health needs calls for a multi-sectoral approach that integrates health-promoting and preventive policies, solutions that are responsive to communities and health services that are people-centred. Primary health care also includes the key elements needed to improve health security and prevent health threats such as epidemics and antimicrobial resistance, through such measures as community engagement and education, rational prescribing, and a core set of essential public health functions, including surveillance. Strengthening systems at the community and peripheral health facility level contributes to building resilience, which is

critical for withstanding shocks to the health system.

- Stronger primary health care is essential to achieving the health-related Sustainable Development Goals (SDGs) and universal health coverage. It will contribute to the attainment of other goals beyond the health goal (SDG3), including those on poverty, hunger, education, gender equality, clean water and sanitation, work and economic growth, reducing inequality and climate action.

Source: World Health Organisation

PORT SHEPSTONE REGIONAL HOSPITAL CHOLESTOROL AWARENESS CAMPAIGN AN ASTOUNDING SUCCESS

On Wednesday, 29th of May 2019 Port Shepstone Hospital Occupational Clinic held a successful Cholesterol Awareness Campaign which went along with checking staff's abdominal circumference and weights. The aim of the campaign was to promote a healthy lifestyle and sensitize staff about the dangers of cholesterol in the body.

On this day hospital employees were advised to eat a healthy diet comprised of healthy fats, fruit and vegetables and to drink clean water. The staff came in numbers and Sister Eureka Thompson, hospital Wellness Manager, encouraged them to do regular exercises, avoid smoking and maintain healthy weight.

Cholesterol is an oil-based substance which is present in every cell of the body and has important natural functions when it comes to digesting food, producing

hormones, and generating vitamin D. However, if it is in high concentration, it becomes a danger that puts people at risk of a heart attack. People generally do not feel sick when they have high cholesterol until something severe happens, hence check-ups should be done regularly to maintain good health.

The KZN Department of Health, together with other organisations and stakeholders, is actively involved in creating health education and promoting disease prevention. This is part of efforts to lower the rate of premature deaths from heart-related diseases and their risk factors (tobacco intake, lack of physical exercise, unhealthy diet and alcohol intake).

It is believed that at least 80% of premature deaths from heart disease and stroke could be avoided if the main risk factors - tobacco,

unhealthy diet and physical inactivity - are controlled.

The Department has numerous institutions that offer screening for cardiac ailments as well as treatment.

There are three spheres in terms of cardiac treatment:

- The District sphere, which deals with unstable, congestive heart failure;
- The Regional sphere, which deals with unresponsive heart failure, hypertension for investigation and hypertension on treatment with poor control; and
- The Tertiary sphere, which deals with congestive heart failure. The Department's Inkosi Albert Luthuli Central Hospital, which is in the Quaternary sphere, helps patients who are referred from the other three spheres.

The Department also urges people to:

- Eat a healthy diet that is low in sodium, saturated fat, and



cholesterol and high in fresh fruits and vegetables;

- Get active by running regularly or taking a brisk 10-minute walk, 3 times a day, 5 days a week;
- Quit smoking as soon as possible or consult health care teams for help in developing a plan to quit.

- Members of the public are also encouraged to visit their local clinics for a regular check-up for cholesterol at least once a year. Those who are on treatment are urged to check twice a year i.e. (every six months).

10 FLU FACTS

1 There common cold and the flu are caused by different viruses. Whilst the flu has mild symptoms such as a runny or congested nose, the flu is likely to cause body ache and fever and can result in severe complications such as bacterial infections or pneumonia

2 Flu is spread mainly by droplets in the air from infected people (through coughing, sneezing and talking). These droplets can land in the mouths or noses of people in close proximity.

3 You can also catch the flu by touching an object or surface that has flu virus on it and then touching your mouth, eyes or nose.

4 A person with flu may be contagious 1 day before symptoms appear and for about 3-7 days after the onset of symptoms.

5 Avoid spreading the infection by coughing into a tissue or sleeve, not touching your eyes or nose and washing your hands frequently with soap.

6 The majority of people with flu will recover in 3-7 days.

7 Children under the age of 5 years and any child with other health problems (such as asthma, chronic lung conditions, disorders of the brain or nervous system and diabetes) are at a higher risk of flu complications such as pneumonia, bronchitis, ear and sinus infections.

8 if your child has flu ensure that he drinks plenty of fluid and gets lots of rest. Medication for fever and nasal congestion can be administered for symptom relief. Keep your child home from school. Your child should stay home for at least 24 hours after the fever (temperature > 37.8°C) has subsided without the use of fever-reducing medicine.

9 The flu vaccine is developed every year with the strains predicted for that year. The vaccine is effective after 10-14 days and should thus be administered yearly before the start of the flu season

10 Some people that the flu vaccine is recommended for are; pregnant women at any stage of pregnancy, healthcare workers, persons with medical conditions, persons aged 6 months to ≤18 years on long-term aspirin therapy, children aged 6 months to 59 months, persons aged ≥65 years and others.

For more information, visit www.NICD.ac.za

KZN HEALTH WORKERS PRACTISE WHAT THE DEPARTMENT PREACHES



The KZN Department of Health congratulates all of its employees who took part in the 94th Comrades Marathon on Sunday. They have been hailed for leading by example and acting out the Department's efforts at promoting a healthy lifestyle.

A healthy lifestyle is a way of living that lowers the risk of being seriously ill or dying early. Not all diseases are preventable, but a large proportion of deaths, particularly those from coronary heart disease and lung cancer, can be avoided. Scientific studies have identified certain types of behaviour that contribute to the development of non-communicable diseases and early death.

Everything you eat has a bearing on your health. Lower your intake of oily food. People are urged to eat boiled food, fruits and vegetables. The body only needs a particular amount of food. Don't eat more than you need to.



HERE ARE SOME OF THE BENEFITS OF EXERCISING:

- It produces changes in the parts of the brain that regulate stress and anxiety. It can also increase brain sensitivity for the hormones serotonin and norepinephrine, which relieve feelings of depression.

- Additionally, exercise can increase the production of endorphins, which are known to help produce positive feelings and reduce the perception of pain.

- Interestingly, it doesn't matter how intense your workout is. It seems that your mood can benefit from exercise no matter the intensity of the physical activity.



HEALTH INVENTIONS

1595 – The Birth of the Wheelchair!

The earliest record of wheeled furniture dates all the way back to ancient times, but it wasn't until 1595 that the first wheelchair was invented. It was designed for King Phillip II of Spain, so it had an elaborate design but lacked the ability to be self-propelled.

Seventy years later Stephan Farffler, a 22-year-old German watchmaker with disability, became the first person to invent a self-propelled wheelchair. In 1750, James Heath invented a wheelchair named after the town of Bath. Looking more like a fancy carriage than a wheelchair, it quickly grew in popularity. The first electric-powered wheelchair was invented by Canadian inventor, George Klein, to assist injured veterans after WWII. Wheelchairs have advanced a long way since then! Designs have improved in size, comfort and technology.

In 2016, Diwakar Vaish, a robotic researcher in his early 20s, developed the first brain controlled wheelchair, which uses the brain's electrical impulses to move the wheelchair. The future possibilities for wheelchair designs are endless!

- The Tipping Foundation (www.tipping.org.au)



KwaZulu-Natal Department of Health



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KZN Department of Health



FIGHTING DISEASE, FIGHTING POVERTY, GIVING HOPE

ETHICS TALK

CODE OF CONDUCT: RELATIONSHIP WITH THE PUBLIC

An employee promotes the unity and well-being of the South African nation in performing his/her official duties.

In order to realize and maintain the high ideals of the Constitution of the Republic of South Africa, purposeful and determined efforts are required from all citizens. Public Servants are inevitably seen to be part of "Government" so this is even more important in their case.

Example: A good team spirit, good interpersonal relationships and a generally pleasant, helpful and professional atmosphere amongst a group of public service employees will set an example for the community at large.

An employee should be polite, helpful and reasonably accessible in his/her dealings with the public, at all times treating members of the public as customers who are entitled to receive high standards of service.

It is important for employees to realize that by joining the Public Service, they have committed themselves to serving the community at large.

The Public expects to be served and requires employees to be available and to help them in a friendly and efficient manner.

Example: When an employee receives a call from a member of the public and realises that the person's enquiry should be dealt with by another section/Department, the employee should offer to find out who the right person or Department is so that a positive image of the Institution/Department is developed.

An employee should not unfairly discriminate against any member of the public on account of race, gender, ethnic or social origin, colour, sexual orientation, age, disability, religion, political persuasion,

conscience, belief, culture or language.

The Public Service serves all individuals and communities, irrespective of who they are in South Africa. Each member of the Public has the constitutional right to be treated with dignity.

Employees are therefore required to treat all members of the public equally, with friendliness and efficiency, making them feel that they are receiving the kind of service that they are entitled to.

Example: A number of people are waiting in a queue and an influential member of the community comes in and expects to be served immediately. If the employee providing the service allows the person to jump the queue, it means that he/she is discriminating against the other clients waiting to be served.

An employee should serve the public in an unbiased

and impartial manner in order to create confidence in the Public Service.

The Public Service serves the total community and the public expects to be treated equally, efficiently, professionally and in a friendly manner.

Employees are therefore required to live up to this expectation by treating those with whom they work and those they serve equally, in a manner that will not only create trust in the Public Service but will also establish an appreciation for the quality and efficiency of services rendered.

Example: An employee should request his/her clients to queue as they arrive so that each will be attended to when his/her turn comes, without favoring anyone or being perceived to be doing so.

An employee should respect and protect every person's dignity and his/her rights as contained in the

Constitution.

Employees must behave in a respectful manner towards all their colleagues and the public, irrespective of who they are, how they look, what their status is.

Employees' behaviour towards others should always be friendly, helpful and efficient.

Example: If an employee is providing a counter service and is approached by a member of the public who is highly agitated or noisy, they should treat the person in the same manner as they would treat others, calmly and politely.





health
Department:
Health
PROVINCE OF KWAZULU-NATAL



DUAL PROTECTION

a CONDOM

+

*a CONTRACEPTIVE
METHOD OF YOUR
CHOICE*

=

*the best way to prevent
pregnancy, HIV and Sexually
Transmitted Infections
(STIs)*

MALE CONDOM



FEMALE CONDOM



ORAL CONTRACEPTIVE PILL



INJECTABLES



COPPER INTRAUTERINE
DEVICE (Cu IUD)



KwaZulu-Natal Department of Health



kznhealth



KZN Department of Health



FIGHTING DISEASE, FIGHTING POVERTY, GIVING HOPE

GALLERY

AIDS CONFERENCE - ETHEKWINI DISTRICT





health

Department:
Health
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(KWAZULU-NATAL DEPARTMENT OF HEALTH)

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