

HEALTH MATTERS **FREE** Ezempilo

EDUCATE || INFORM || EMPOWER EDITION 8

**August:
Women's Month –
Saluting our Women**

**NO to
Formula,
YES to
Breastfeeding!**



health

Department:
Health
PROVINCE OF KWAZULU-NATAL





KZN HEALTH MEC - Dr Dhlomo



KZN HEALTH HOD - Dr Zungu

KZN Health wishes to thank all female health staff for their commitment in delivering quality health care to our people, despite all our challenges. Your efforts are appreciated. Happy women s month to all KZN women your spirit and strength is the backbone of our nation!

**Malibongwe igama lamakhosikazi!
Wathint abafazi wathint imbokodo!**

**Give praise to women, for when you strike a woman,
you strike a rock!**



health

Department:
Health
PROVINCE OF KWAZULU-NATAL

Fighting Disease, Fighting Poverty, Giving Hope

Message from...



KZN Health HOD: Dr Sibongile Zungu

As we celebrate Women's month, KZN Health would like to use the opportunity to remind women of the incredible strides we have made over the years. As a country, we have come a long way in elevating women to the top, in providing opportunities for women, and in ensuring that they are represented in every sector in government and civil society. But our journey is not complete, there is a lot more to be done for women especially in health care delivery.

As a department we are committed to making women and children our prime focus, to save more lives of women in labour, to make it easier for women, especially the frail, elderly and disabled, to access health care in areas where transport remains a challenge to provide a health service that places a key emphasis on mother and child. We would like to encourage KZN women to take up the challenge and become more empowered by the choices they make, especially in maternal health and sexual relations. It is your right to say no to sex without condom, as much as family planning is your choice too.

We have come far, but have a lot further to go in ensuring that the sacrifices made by those women who have died for our freedom was not in vain.

To all the women who continue to make a difference in health care in the province – doctors, nurses, community health care givers, midwives, grandmothers who care for their grandchildren while their own children go out in search of better economic opportunities, to every one of these women, we salute you and thank you for your efforts and passion to make a difference.



eThekweni Deputy City Manager, Health & Social Services: Dr Musa Gumede

During this month of celebrating the women of our province, eThekweni Municipality's health unit would like to call on all men to reaffirm their respect and gratitude to women. Physical violence against a woman is never a show of manhood; it is a sign of weakness in a man.

It is indeed our women who are the spine of our nation, especially those who tirelessly work the fields, the elderly and those single mothers, who despite all the challenges, continue to juggle their responsibilities as both providers for their family and as working women. It is not an easy task, and as a province we are fully aware that a lot more needs to be done to improve the lives and economic opportunities for women. We are committed to ensuring that women receive the priority status that they deserve, particularly mothers and the aged.

As eThekweni celebrates women's month, we commend those fearless women, who against all odds, continue to strive for a better life. We commend women across the board, whether they are working mothers in the city or a grandmother working the fields... you are an inspiration to us all. We acknowledge that economic development of women needs to be fast tracked in order for them to become more empowered in decision making at home, and we are committed to making this a reality. Happy women's month!

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With thanks from the following contributors:

KZN DEPARTMENT OF HEALTH
ETHEKWINI MUNICIPALITY HEALTH UNIT

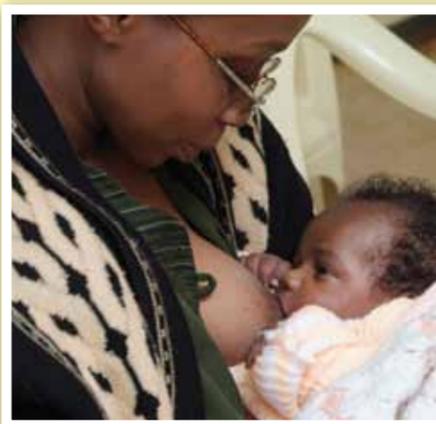
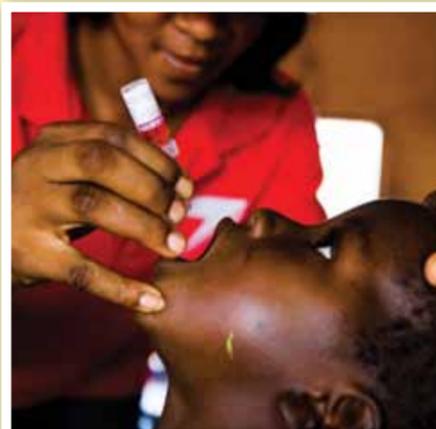
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Your suggestions and comments are welcome, and if you have been impressed by a health worker who provided an outstanding service let us know and we will feature them! Contact us on 031 562 9803, editor@ezempilohealthmatters.co.za or write to us on PO Box 25439, Gateway 4321.

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August: Women's Month

A Grandmother's tale

More and more South African grandmothers are taking on the role of parents to their grandchildren, while the young parents go to the cities in search of work. With scarce resources and advanced ages, many find it a challenge but few complain. During August women's month, we need to consider the burden and hardships many of our country's grandmothers experience in raising our children.

Health challenges

Slindile Mbatha is one of them. At her age she should be retired. But at 60, she is taking care of her three grandchildren on her own while their single mother works as a domestic 200km away.

"I started to take care of them when they were still young. I provide them with everything they need and the younger ones assume I am their real mother," she says. "My day starts at five in the morning. I wake up to prepare the kids for school, and after they leave for school I take some part time jobs, with young Zanele with me because I cannot afford daycare fees," adds Slindile.

Taking the young to the clinic

Little Zanele has been sick for a while and Slindile is getting worried. The child's mother can only afford to visit once a month, if ever she makes it. "It is hard for me to travel all the

way to the clinic, but I have to do it. If I had money for taxi fare it could have been easy," says Gogo Slindile. Unfortunately, she has to walk the 10km journey for Zanele's sake. The 60 year old grandmother suffers from hypertension and feels weak collecting firewood on her way back home. Carrying heavy loads make her condition worse, but she is left with no choice.

"This is my way of life since I started taking care of the kids. Someone has to do it and it is me," she adds.

Helping with school

When the kids get home they have more bad news for her. Sindi, her eldest grandchild, has been fighting at school. Tomorrow she has to go and see the headmaster. "I am getting worried about her behavior. She is always in fights and I cannot even discipline her. I am too old for that. Probably it's because she misses her mother a lot," she says. After their little dinner she will help out with homework. "I did not get a good education but I do not want them to end up like

me in the future. I will help them with anything that I can. They must have a better education," adds a tired Slindile.

Hard days, cold nights

Just after 10 pm, Slindile prepares for bed, tired and sickly. The mud hut that provides shelter for them is getting colder. During the rainy season it leaks and there is no man to fix it.

"I try hard to help my daughter take care of the kids. Their fathers do not help out at all. If I don't take care of them, then who is going to? Maybe one day they will provide for me when they are older," she says with hope.

Don't take our elderly for granted, their silence in the face of hardship does not mean they don't need to be cared for.



WOMEN'S RIGHT TO SAY NO



"The fastest way to change society is to mobilize the women of the world."

August: Women's Month

Women's health is a community issue

When a woman is healthy she has the energy and strength to be a mother, provider and fulfil the many roles in her community and family. Often women ignore their own health needs because they are too busy looking after the needs of others.

During the month of August, as part of women's month, it's important to remind ourselves that women are the backbone of our nation – not just as grandmothers, mothers and providers. A woman's health is a community issue because it is women who are often left with taking care of a family's needs, even if she works outside the home. It is women who end up caring for the young while their children leave home in search of work in the cities. Too often, a woman's health is taken for granted – even by women themselves, until it becomes unbearable or too late. We need to change this, and encourage all the women we know to take better care of their health because a healthy woman contributes to a healthy community. As part of women's month, let's look at some of the health problems that affect women the most:

POOR NUTRITION

Poor nutrition is the most common and disabling health problem among women. As society, we often use the excuse that a 'man eats more' and women sacrifice their own needs for men in the house. A poor diet in a female means that at a young age she grows more slowly, has bones that are not develop properly and begins to suffer poor health, including exhaustion, weakness and anaemia (protein in the blood). When a woman who is malnourished becomes pregnant, she is more likely to have serious labour complications, like heavy bleeding which can lead to death, infection, or a baby that is born too small.

STIs, HIV/AIDS

A woman is more at risk of getting a sexually transmitted infection or HIV/AIDS because they often have little control over their sexual health and many still do not refuse sex without a condom in fear of upsetting the man. When a man's sperm stays inside a woman's body the germs it may carry can enter her blood, and since a woman often has no signs of infection, she may not know she has been infected and may not

get treatment. Without treatment, sexually transmitted infections can cause disabling pain, severe pelvic disease, infertility, problems during pregnancy, increased risk of cervical cancer and even death.

For this reason, it is important for a woman to be in control of her sexual health – saying no to sex without a condom is your right, not a privilege!

TEENAGE PREGNANCY

More than 17,000 teenage girls fell pregnant in KZN last year alone. In many cases young girls are attracted by promises of financial security made by 'sugar daddies' if they have sex without a condom, and are later abandoned when they fall pregnant. The result is a young mother who has to look after a child without having any education or skills to support herself. For this reason, KZN Health MEC Dr Sibongiseni Dhlomo has strongly discouraged teenage girls from falling pregnant. "Firstly, teenage pregnancy increases the risk of HIV/AIDS and can also result in the death of the mother and child," says Dr Dhlomo.

VIOLENCE

Violence against a woman is a health problem, not just a social problem. Violence against a woman affects her mental, emotional and physical health. Many women are still forced to have sex or are abused by their partners if they refuse. Rape often goes unreported. Speak out and take control of your life, break the silence!

WORK HAZARDS

Women face health risks every day from the work they do. At home,

lung diseases from smoke or burns from the cooking fires are common, yet women continue to accept the risks, because they have grown used to working under these conditions. Millions of women work outside their home, often long hours and very hard as domestic workers for example. Yet they usually continue to work hard when they get home, leading to working twice as much. This leads to exhaustion and an increased risk of illness.

Help yourself and other women by taking control of your health and listening to your body – your health is your strength.

"Healthy mothers raise healthy children. Healthy children grow up stronger and better educated and help build more prosperous communities. And a health system that delivers for mothers and children will deliver for the whole community"

Health MEC Dhlomo

WOMEN'S HEALTH RIGHTS ACCORDING TO THE WOMEN'S CHARTER:

- **Equal, affordable, accessible and appropriate health care services which meet a woman's specific need, and which treats them with dignity and respect, must be provided. Women must be made aware of their rights in relation to health services. Health services must be orientated to meet women's health needs and priorities. Basic life sustaining services, such as water and sanitation must be made available to all by the state.**
- **Women have the right of control over their bodies, including the right to make reproductive decisions.**
- **Access to information must be provided to enable women to make informed choices about their bodies. This includes information on reproductive health, sexually transmitted diseases, AIDS, contraception, cervical and breast cancer, infertility, ante-natal care, labour and post natal care.**
- **Education about reproductive health care services should be free to men and women.**
- **Every person shall have access to adequate nutrition.**

"A woman is like a tea bag, you can not tell how strong she is until you put her in hot water"

AUGUST: Organ Donor Month

Inkosi Albert Luthuli Central Hospital making history!



In June this year, 16 year old Akhona Xaba became the first person in KZN to receive a stem cell transplant at Durban's Inkosi Albert Luthuli Central Hospital. Akhona suffers from acute myeloid leukaemia, which is cancer of the body's white blood cells. These cells are produced by a part of the body called bone marrow which fights infection. Akhona needed someone (a donor) who could provide a bone marrow so that her body could produce normal blood cells.

Without that, she would die.

A miracle came in the form of her younger sister, Yoliswa, who decided without hesitation, to donate her own bone marrow to Akhona to save her life. The operation was successful and has made Akhona stronger and more determined to survive. "Yoliswa has brought me hope and saved my life. I was in and out of hospitals when I started suffering in 2008, and my father died the same year. My mother and the rest of my family had to go through so much of pain and I had to leave school due to the sickness. Now I am so happy to have a chance of survival," explains young Akhona.

"I did not feel pain. All that mattered was my sister's life over everything else," adds younger sister Yoliswa.

More black donors needed

Akhona is one of the lucky few. There is a huge shortage of black donors in the country, despite the demand. Donors from the same ethnic group are the best match for patients within the same racial profile. South Africa needs at least 100,000 black donors to save the lives of those suffering a life threatening blood disorder like Akhona.

Sickle cell Anaemia

Take 11 year old Congolese born Sarah Matondo Masamba who lives in Transkei. She was diagnosed with sickle cell anaemia seven months after she was born. This means her blood does not carry enough oxygen. She has been looking for

a bone marrow stem cell donor for years. Having a successful donor would increase Sarah's chance of survival. Her three sisters have all been tested but unfortunately there has been no match. Her only hope is if new donors come forward.

Donors save lives

Every year thousands of South Africans of all ages and races are diagnosed with life threatening conditions. 75% of these patients are under the age of 25 and their only hope of survival is a blood stem cell transplant from a donor who shares the same tissue type. Without this transplant they are likely to die. A donor does not need to pay for costs, and always remember it is against the law to sell any part of your body for money!

For information on becoming a donor, call The Sunflower Fund Toll free on 0800 12 10 82.

BONE MARROW DONATION:

All you need to know



Why should I help?

Every year thousands of South Africans of all ages and races are diagnosed with diseases such as Leukaemia or some life threatening blood disorders. 75% of these patients are under the age of 25. Their only hope of survival is a blood stem cell transplant from a donor who shares the same tissue type. Without this transplant it would mean certain death. It all depends on ordinary people like you who wish to give the amazing GIFT OF LIFE. The chances of finding a match are about 1 in 100 000 and it could be you! You may well be the only one in the world who can provide that match and save someone's life.

Who can become a donor?

Every healthy person between 18 and 50 can be a donor. We are all born with certain "Tissue-types" and these are used in matching donors and patients. People from the same ethnic or racial group are more likely

to match those in the same group, that's why it is important for everyone to try and be a donor; you never know whose life you could save!

What is the South Africa Bone Marrow Registry?

It is an organisation that registers potential bone marrow donors and already has 10.6 million people on its registers. Once you are a donor, you will be registered and then they will try to match your tissue type with patients who can benefit.

Why do people need bone marrow transplants?

Every year thousands of individuals with blood diseases reach a stage where this is their only chance of a cure or survival.

How do bone marrow transplants save lives?

The patient's diseased marrow is destroyed by combinations of drugs and radiation. The graft from the healthy donor is given through a

syringe and the blood forming stem cells travel to cavities in the large bones and once they latch on they start producing normal blood.

What is bone marrow?

This is the tissue that could be regarded as the factory for the production of red cells to carry oxygen, white cells to fight infection and platelets to prevent bleeding.

What does a donor do?

If you are suitable, you will need to have a small blood sample taken which is sent to specialised laboratories for tissue-typing. The results are then placed on an international computer registry and then they can start matching your tissue with it.

Are there any side effects?

Sibling transplants have been taking place for over 10 years; a short-term side effect is flu-like symptoms or some mild bone pain.

**"Maternal health reflects the level of social justice and the degree of respect for women's rights in a democratic society."
- KZN Health MEC, Dr Sibongiseni Dhlomo**

WOMAN'S MONTH

Sawubona. Every August we celebrate WOMEN'S MONTH for the whole month. We look back at our history and we look towards our future. We also look at where we are today.



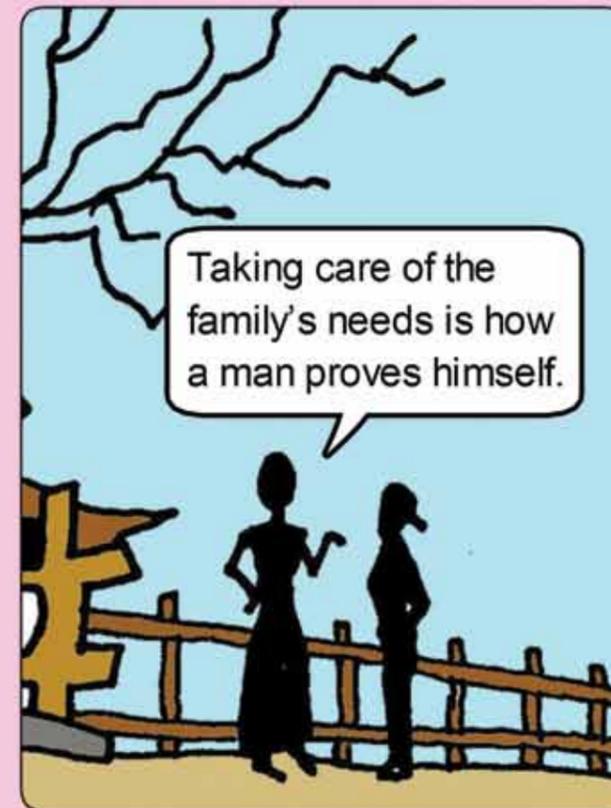
We see many men who do not respect a woman's right to sexual choices. If I do NOT want sex without a condom, it is my choice. Please respect that.



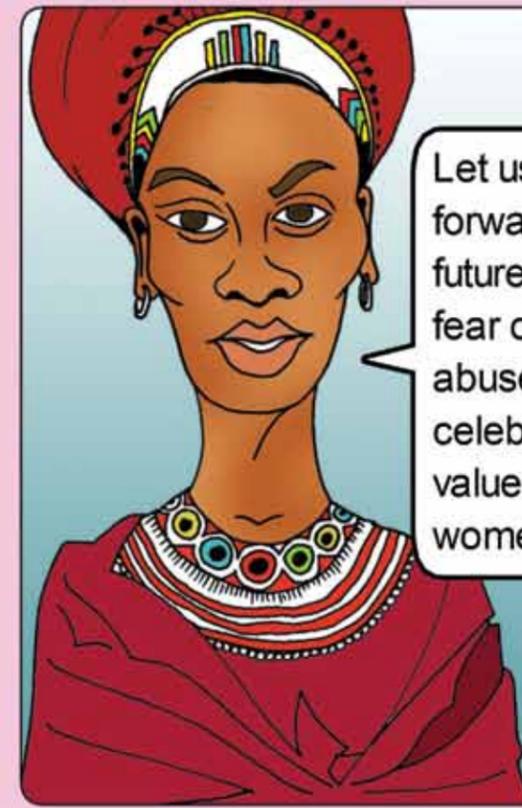
Nowadays, there are those who do not respect the value of a woman in the home. Many women work all day and then still take care of the household when they return.



Also, there is physical abuse. Hitting a woman is NOT the way to prove your manhood. The man around the house also needs to act responsibly.



Taking care of the family's needs is how a man proves himself.



Let us look forward to a future without fear or abuse. Let us celebrate the value of women!

August 1-7: World breast feeding week

Can you breastfeed when you're HIV positive?

GOGOS, nurses and doctors have always agreed on one thing – breastfeeding is the one thing that gives your baby the best start in life. That's because only breast milk contains the perfect ingredients to help your baby grow properly, plus more special ingredients that protect their young immune system.

But HIV/AIDS made people worry when they first found out that the virus could be passed on in breast milk. Some decided that maybe formula-feeding would be safer and tried that. But, results have shown that bottle-feeding is a big risk. HIV-positive babies are twice as likely to die if they're fed formula milk, which is one of the reasons why KZN Health decided to stop supplying formula milk to all hospitals and clinics last month.

Now at last, everyone's sure that breastfeeding is best whether you're HIV-positive or not – but you do have to be careful about how you breastfeed if you're HIV-positive. To help you understand, here are some guidelines from the experts:

1. Make sure that you're on ARVs or your baby is on Nevirapine (speak to your health worker about this).

2. For the first six months, your baby must have breast milk - and only breast milk.

3. Don't be tempted to give juice or even water if baby's thirsty – give only breast milk until six months. Breastmilk contains enough water to quench your baby's thirst.

4. Only introduce solids at six months.

5. If you're leaving baby with a caregiver, express your milk so that the caregiver can give it at feeding time. It will keep safely outside a fridge for up to six hours.

6. If anyone questions what you're doing, explain the reasons why breastfeeding is best, and that all doctors and clinics now support this exclusively!

BREAST MILK Face The Facts

A myth is something that people say without actually having any proof to support their statements. As part of this month's focus on breast milk, let's look at some of these myths:

MYTH 1: "Breast milk is no better than formula from a bottle – just choose which is easier for you".

FACT: Breast milk contains about 100 special ingredients that formulas can't exactly copy, which is why it's often called nature's miracle food. It's been created with an ingredient that helps your baby's new body digest fat, as well as a bodybuilding protein

that's easy for your baby's young stomach to digest.

MYTH 2: "My milk's too weak – I must give baby a bottle instead".

FACT: Believe it or not, that thin-looking milk which appears in the first few days before your full milk supply comes through is probably the strongest milk of all, because it contains an extra top-up of the ingredients that protect your baby and boost his immune system in the first weeks and months of life. So this is a good sign, not a bad one, and it means you must carry on. Breastfeeding is a wonderful investment for your baby's future physical and emotional health, encouraging baby's teeth, gums and jaw to develop properly, helping to protect him against infections and allergies, developing his brain and giving the two of you a closeness you couldn't get any other way.

MYTH 3: "Breastfeeding is too difficult".

FACT: Some mothers are scared of breastfeeding because they believe it should be natural and that they should get it right first time. But, like most things in life, it's something mother and baby need a bit of practice at. It's important to relax and

allow your baby to attach well onto your breast (most of the dark part of your breast should be in his mouth), because his suckling helps your body make more milk. If you're nervous and hold baby away, he'll just nibble your nipple. This can make you sore and bruised and give you cracked nipples. It also means you won't make enough milk, so baby will be hungry and unhappy. Reach out to a friend in your community or someone at your church or clinic for assistance. There is plenty of help out there, just ask - you are not alone.

MYTH 4: "I don't have time to breastfeed".

FACT: Stop a moment and think about the time (and money) you spend buying formula, equipment, sterilising bottles, mixing the feed and even checking that it's the right temperature after being kept in the fridge. Breast milk can't be served at the wrong temperature or be badly mixed or contaminated by germs – because it contains all the right ingredients and is germ-free, all the more reason why they call it nature's gift.

MYTH 5: "I can't fall pregnant when I'm breastfeeding!"

FACT: Many women have fallen for this myth and found themselves falling pregnant! Don't take the risk – instead, plan for your children, for their sake and yours. Speak to your health worker at your local clinic about family planning and contraception choices after giving birth.

**BREAST IS BEST;
DON'T LET ANYONE
TELL YOU OTHERWISE.**



Why stop the formula?

After many years of promoting formula, experts now agree that formula feeding puts your baby's life at risk. Breast milk boosts your baby's immune system in a way that no formula can. That's why infectious diseases (such as diarrhoea and chest infections) kill 10 times more bottle-fed babies than breastfed babies – which is why experts say that breastfeeding your baby is the best thing you can do.

Here are four key reasons why you must think about protecting your baby by breastfeeding:

1. In South Africa, diarrhoea kills nearly 10 000 children under five a year – that's 25 a day. Many are babies whose formula hasn't been prepared or stored safely.

2. In a survey at SA postnatal clinics, two out of three bottles brought in with babies were found to contain germs that cause diarrhoea – and could kill baby.

3. Fridges, even at hospitals, aren't always cold enough. So harmful germs develop in the formula before it's even fed to baby.

4. Breastfeeding is natural, free and healthier. Formula is costly, which is why as many as one in three mothers use less powdered formula – but that has a very bad effects on their babies' health and development. Breastfed babies who are well fed grow to be taller, fitter, stronger and cleverer, even earning more when they become adults.

Saluting Women in KZN Health



KZN HEALTH, HOD DR SIBONGILE ZUNGU

Dr Zungu comes from a solid background in health care delivery and was appointed HOD in August 2009. She previously served at various levels, including Acting Head of Department for Mpumalanga Health and Social Services, Deputy Director General, Mpumalanga Department of Health and Social Services, Senior General Manager - Health Services Cluster, KZN Health, Chief Director, Institutional Support Services Centre, KZN Health. She also worked as CEO, Ga-Rankuwa Hospital, Senior Medical Superintendent at Sebokeng Hospital, Medical Superintendent at Catherine Booth hospital, Part Time Medical Officer at the University of Zululand Campus Clinic and Senior Medical Officer at Ngwelezana Hospital.

KZN HEALTH HEAD OFFICE ...Meet some of the women who make it all happen!



Mrs Prash Padayachee, General Manager: Corporate Governance

Mrs Padayachee has over 36 years of experience

in administration and management. She believes strongly in good governance and the principles of Batho Pele. Mrs Padayachee has a diploma in Public Administration, a certificate in Public Sector Governance, a Mentoring and Coaching certificate and has completed the Presidential Strategic Leadership and Development Programme.



Mrs Nozipho Mthembu, Manager: Human Resource Strategy & Planning

Mrs Mthembu joined the Department as an

administration support staff then later in 1996 joined the Ministry as Director and Head in the Office of the MEC. She has a BA in Administration, an Honours Degree in Public Administration & Financial Administration, Masters in Administration and a Strategic Management Certificate. She regularly participates in community projects through the Office of the Premier where underprivileged communities are assisted.



Dr Thokosani Mhlongo, Manager: Hospital Services

Dr Thokosani Mhlongo is a young, dynamic, assertive and ambitious

female doctor with a specific healthcare management interest and expertise in Hospital Services Management, policy development, implementation and quality assurance.



Sam Foulkes: Acting Manager, Office Of The HOD

Ms Foulkes started her working for the Office of the Head of Department at 22 years. "I was

a single mother who desperately needed to support my child and was grateful to have been offered a temporary position as an office clerk". She has since then proved herself and worked her way up to her current position of Acting Manager in the Office of the HOD. She thanks her colleagues for encouraging her to study part time for a Business Management degree. "Everyday provides me with an opportunity to learn and in some small way contribute to better health care to the communities in KwaZulu-Natal," she says.



Lenore Spies, Manager: Nutrition

Ms. Spies is a graduate Dietician and specialises in community Nutrition. She was also

part of the committee responsible for the development of a National Nutrition Strategy for South Africa which was later adopted as National policy in 1997.



Mrs Linda Vorster, Manager: Departmental Investigation Services

Mrs Vorster started her career in management in July 1983,

when she was appointed as it was then known as "Matron in Charge" in Lydenburg Hospital. She later changed career path to join Labour Relations at Head Office in 1998 before joining KZN Health.



GT SHAMASE CEO: BENEDICTINE HOSPITAL

Mrs Shamase has this message for all the employees of Benedictine Hospital, "each one of you has an important role to play in ensuring optimal health for the people of Nongoma."



BUYISILE NGESI: CEO: MURCHISON HOSPITAL

I am happy to be part of the Winning Team, that is Murchison Hospital and together with my team we will put Murchison Hospital on the map!



TINY OLGA KHANYILE: CEO: DON MCKENZIE HOSPITAL



NTOKOZO C MKHIZE: CEO: DUNSTAN FARRELL HOSPITAL



MRS ZUMA: CEO: APPELBOSCH HOSPITAL



MRS NTOMBIFIKILE C THEKISO: CEO: EAST GRIQUA & USHER MEMORIAL HOSPITAL



ZANELE NDWANDWE: CEO: EDENDALE HOSPITAL



MRS N P NGCOBO, CEO: EKOMBE HOSPITAL



SIBONGILE NYAWO, CEO: G C CROOKES HOSPITAL

Mrs Nyawo holds the record of being the first woman & African person to head G.J Crookes Hospital from 2002!



DAWN LILLIAN LINDA ZUNGU CEO: HLABISA HOSPITAL



MBALI SIMELANE CEO: ITSHELEJUBA HOSPITAL

Appointed the hospital's first African female!



BUSISIWE S MDALOSE CEO: KWADABEKA CHC

She describes herself as a strong person who does not accept a third class work from her staff.

"Educate a woman and you educate a nation.. educate a man, and you educate an individual".



MARTHA VUKILE
CEO: NEWCASTLE HOSPITAL



MRS. THOLAKELE R ZULU
CEO: PHOENIX COMMUNITY HEALTH CENTER



THANDAZILE NMLEKO, HOSPITAL MANAGER,
ST ANDREWS HOSPITAL



DR. S.B. KADER,
CEO WENTWORTH HOSPITAL



MRS.N.M. ZUMA – MKHONZA, MANAGER:
UMGUNGUNGLOVU HEALTH DISTRICT



NOXOLISA STELLA (GCINA) RADEBE,
MANAGER: SISONKE HEALTH DISTRICT



MS. M.P.THEMBA, MANAGER UMKHANYAKUDE
DISTRICT HEALTH OFFICE



BONGI MTSHALI
CEO: HILLCREST HOSPITAL



MRS DAPHNE MEMELA,
ZULULAND DISTRICT MANAGER

“My achievements are drawn by challenges and working with good team members. I also like to motivate and encourage others to achieve their goals and departmental objectives”.



SIBONGILE DOROTHY DUBE, DISTRICT
MANAGER, ILEMBE HEALTH DISTRICT OFFICE

“As long as women are bound by poverty and as long as they are looked down upon, human rights will lack substance. As long as outmoded ways of thinking prevent women from making a meaningful contribution to society, progress will be slow. As long as the nation refuses to acknowledge the equal role of more than half of itself, it is doomed to failure”
– Nelson Mandela.

Aug 1-7: National Immunisation Awareness Week

You've waited nine months for your baby. Now it's time to make sure you do everything so that he grows healthily – and that ensuring he is immunised against serious infections. Vaccines save the lives of millions of children around the world, and it's free in South Africa at any Public clinic, so don't miss out!

When do I need to get my child vaccinated?

Birth, 6 weeks, 10 weeks, 14 weeks, 9 months, 18 months, 6 years, 12 years. Make sure that your child is immunised against the following eight infections at the right time (your health worker will advise you on this): TB, Polio, Diphtheria, and Whooping cough, Tetanus, Hepatitis B, Measles, Rotavirus Gastroenteritis and Pneumococcal Infection and Haemophilus Influenzae Type B.

Why should my child get vaccinated on time?

Your baby's body develops resistance as his immune system develops. So if your child is vaccinated once, he may not be able to respond fully as his body still needs to develop. Make sure that he receives all the

most important vaccines at due times speak to your clinic about his.

What happens if my child misses some vaccines?

It all depends on his age and which vaccines have been missed. If the immunisation schedule was not started when it should have been, vaccines can be started immediately as normal. But some vaccinations may not be given if they are no longer needed or may not safe for an older child, your clinic will advise you on this.

How are immunisations given?

Drops by mouth or by injection.

How do I know what is being given?

You must be given a Road-to-Health Card for your child, which the health worker will use to record every type and date of vaccine given. This Road-to-Health Card is the official immunisation record needed for clinic visits, hospitals and attendance at school.

Is immunisation safe?

Yes, it is rare to have serious complications from an immunisation.

Mild fever and irritability are common, especially 6 to 12 hours after some vaccines, while some like Measles vaccines or MMR may also result in a slight rash. These are mild side effects and can be treated with Panado if needed.

What if my child is sick?

If he has a minor cold, cough or fever below 38 °C, he should still be immunised. If he is very ill, consult your health worker who will decide. Generally mildly sick or malnourished children should still be immunised to protect them against illnesses.

I'm HIV-positive; can my child still be vaccinated?

Yes, definitely because they are at high risk of infections if they later develop AIDS.

Immunisation brings hope to thousands of infants, children and teenagers who are saved through immunisation and the widespread suffering, sickness and socioeconomic disruptions that are avoided,” – KZN Health MEC Dr Dhlomo.



AUGUST: Awareness Days



National Women's Month

Wathint' abafazi wathint' imbokodo – you strike a woman, you strike a rock!

On 9 August 1956, 20,000 women marched to Pretoria's Union Buildings to protest against an apartheid law which forced women to carry a "pass". After handing over their petition, they began singing the song 'wathint' abafazi, wathint' imbokodo' which has come to represent the bravery and strength of South African women as a powerful force of change. As a result, each year Women's Day is celebrated on 9 August to remember the role women played in fighting against the might of apartheid.

Organ Donor Month

Organ donors are desperately needed to save lives of many people who suffer life threatening diseases. However, the government has also warned people not to be tricked into selling any body parts for money – this is illegal. Saving a life does not need to be done in an illegal manner, you can make a difference to those who need your help, speak to your health worker about organ donation.

1-5: Rheumatic Fever Week

Rheumatic fever is a serious disease that usually affects children and young adults. It affects different areas of the body, including the joints, heart, skin, nervous system and brain. It can develop after a serious infection with a strep throat (a type of a sore throat). There is no actual

cure but medication can reduce the pain. For best advice speak to your health worker or contact KZN Health on 0800 00 5133.

1-7: World Breast Feeding Week

Many years after grandmothers have been advising everyone that breast milk is best, experts now agree with this! During this week, world health focuses on encouraging mothers to breastfeed their new born babies, because breast milk is best. It has everything a baby needs to protect him against infection, so why change what works?

1-7: National Immunisation Awareness Week

Vaccines give protection against many dangerous diseases, and most are freely available at state hospitals and clinics. As a parent, it is important to ensure that you get your child immunised as this could prevent life threatening diseases like polio and measles.

22-28: African Traditional Medicine Week

Simply because we learn something about modern medicine does not mean we should no longer appreciate the customs and traditional ways of healing people. This week is aimed at raising awareness of the important role traditional healers play. It is important to remember though to visit traditional healers that are recognised by the Department of Health.

12: Youth Day

International Youth Day was created by the United Nations on 12 August 2000. The aim of the day is to raise awareness of international youth, their role and needs in society. It is also used as a day to highlight the poor working conditions many youth experience due to their age. In many countries, young people are often forced to work long hours for low wages in order to feed their families.

**NOW YOU HAVE TOUCHED
THE WOMEN. YOU HAVE
STRUCK A ROCK?
YOU HAVE DISLODGED
A BOULDER!?
YOU WILL BE CRUSHED!**



COMMUNITY in action



← eThekweni Health's Dr Musa Gumede hard at work on the ground!

▼ Let me straighten your scarf, Mr MEC!



MEC on an unannounced visit to Madadeni Hospital



▲ MEC Dhlomo handing over a site for a clinic in Ezimwini, Mkhambathini

▼ MEC handing over 210 track suits to grade 1s at Khulakahle Primary School



▲ MEC hands over science equipment at Sekusile High School



Through the keyhole

KZN Health Head of Department:

DR Sibongile Zungu

Acting Head of Health and Social Services to head the department in KZN.

Woman of our time

A single mother, Dr Zungu is reluctant to talk about herself, despite whisperings of her incredible journey to the top. "I just want to be judged by the work I do, not where I come from or what I did to get there," she says modestly with a smile, hoping not to offend. Her hands on approach though has not gone un noticed. She's been recognised with several awards – though none of which hangs on her office wall, another sign of her need to keep her feet firmly grounded.

Doctor by profession

A qualified doctor by profession, with a string of additional qualifications, including a Post Graduate Diploma in Health Services Management Structures and contemporary governance structures, Dr Zungu is a recipient of the Martin Luther King Junior Peace Award, Best second year student in Commerce and Administration, awarded Top 20 Influential Leaders in the South African health care sector in 2007 and in the same year, received an award of recognition as one of the leading women in the transformation

of the Status of women in KwaZulu-Natal through the Office on the status of women. Her formal training spans international waters. These include studies on HIV/AIDS Training, improving the quality of health, sustainable financing – all earned through universities in South Africa and abroad, including Harvard and Universities in Australia and New Zealand.

Working challenges

Handling a huge staff compliment is all in a day's work, and the HOD often stays in the office long after her staff has left. Weekends are often spent trawling the deep rural areas, assisting those in need, or talking to women in the communities on health and social issues. She is also currently involved in social upliftment projects in several areas, including child headed households as part of her own contribution to improving the lives of others.

Despite all her achievements though, she remains humbled, a distinct characteristic which sets her apart, and perhaps allows her too, the space to remain focused on what matters most – the delivery of a health service to all in KZN which gives hope, improves lives and fights poverty. A woman of our time.

Most people will recognise KZN Health MEC, Dr Sibongiseni Dhlomo. He is out and about, hands on and maintains a very public profile, often with media in tow wanting to capture his every visit at a hospital or clinic. His Head Of Department (HOD) however, Dr Sibongile Zungu, is a quiet force, which explains their perfect harmony in working together. But who is Dr Zungu, the department head?

Humble servant of the people

She's not quite the HOD one would expect. No airs or graces, no whiff of arrogance, no dazzling jewels on display. Just a simple, modestly dressed human being you might come across shopping, without drawing attention to herself. She has a contagious laugh, and those who work closely with her admit she brings a certain positive energy and compassionate spirit in the office. Dr Zungu admits though, that she is media shy. But despite her soft spoken character, she is a force to reckon with – after all, she was handpicked by the MEC and recalled from her previous position in Mpumalanga as

"If the world were ruled by women then there would be no war... just couple of nations not talking with each other"