

Speech by KZN Health MEC, Dr Sibongiseni Dhlomo on the occasion of the commemoration of the International Nurses Day at Addington Hospital

7 June 2014

EThekweni Metro Speaker – Cllr Logie Naidoo

EThekweni Health District Manager – Ms Penny Dladla

Addington Hospital Management

Representatives from organised Labour

Hard working nurses of our Province

Invited guests

Friends and colleagues

This year as we celebrate the 104th birth day of Florence Nightingale we reaffirm that the nurses are a force for change.

The **force for change** is the theme that is being celebrated internationally and entails the need for nurses to critically assess their own personal responsibility.

What this means is that as nurses we have to recognise our own personal responsibility over the image of nurses and how the public view us.

Upper most in our minds should be the pronouncements of our President, Honourable Jacob Zuma that he made on the historic First

South African Nurses' Conference that was held in the Sandton International Convention Centre in March 2011, where he said:

'Nurses are central to the achievement of health revitalization goals, given the role they play in the health system. You are the backbone of our hospitals and clinics and the engine of our health care system.

For people who are critically ill and are hospitalized; the nurse is usually the first person they see on waking up in the morning and the last before retiring at night.

The nurse is the patient's key source of information, comfort, assurance and delivery of treatment.'

Programme Director; it remains an undeniable fact that nurses remain a pillar of the society and are at forefront of development, education and health. They nurture, they chastise, they build and they protect.

As we literally count days before the target date of the Millennium Development Goals (MDGs) in 2015, we need to acknowledge that there are variations in terms of progress made in some spheres as well other regress in others, particularly on the health related ones.

Our nurses have made it possible for our President to have something to positively report on in as far as the attainment of some of these goals is concern.

GOAL 4: Reduce child mortality

To be precise, let me just say that Maternal, perinatal and under-5 mortality in South Africa remain unacceptably high. South Africa is

amongst those countries that have actually deteriorated with regard to moving towards meeting MDG 4 and 5. According to the 2010 country Report on MDGs, the baseline Maternal Mortality Ratio for South Africa, based on the 1998 South African Demographic and Health Survey, is 150 per 100 000 live births

Our task in **Goal 4** is to ensure that we reduce by two-thirds, between 1990 and 2015, the under-five mortality rate.

Indeed, progress has been made by putting measures in place in the form of **overall immunisation coverage** and the fact that since October 2006, **SA was declared as being Polio-free** by the Africa Regional Certification Commission which is a subcommittee of the Global Certification Commission. We do though still have to do more to achieve the target of 20/1000 live births by 2015.

GOAL 5: Reduce by three-quarters, between 1990 and 2015, the maternal mortality rate

Our target here is the reduction by three-quarters, between 1990 and 2015, of the maternal mortality rate.

Here I need to indicate that even our Premier, Hon Senzo Mchunu in Bergville last week pointed out that it looks like there is a button that we are not able to press to curb the rate of mothers dying whilst giving birth.

My feeling is that we really need to relaunch and again talk about the essence of **CARMMA** which is the Campaign on Accelerated Reduction of Maternal and Child Mortality in Africa. Even though the actual launch took place at Osindisweni in 2012 attended to by Health Minister, Dr Aaron Motsoaledi; Mama Gracia Machel; representatives of the AU; as well as MEC's for Health from other Provinces; we still have a high rate of maternal deaths.

As a reminder to all, the campaign is pursued under the theme: "***South Africa Cares: No Women Should Die While Giving Birth***".

We have placed programmes in place like ensuring that each District has least one specialized dedicated **EMS vehicle for maternity and neonatal care**

We have also established **Basic Obstetric Emergency Care units** in strategic positions within the Districts to bring health services closer to communities and to ensure improved access to essential health services

We have also established **Waiting Mothers Lodges** to **make it easier** for pregnant women about to deliver but who stay away from health care facilities.

All the above indeed fall under the domain of the Nursing Fraternity.

We have gone further to launch the **PHILA MA** campaign as we recognise **Cervical Cancer**, as a Silent Killer that **kills women every day**. For this one that is also wholly depended on **nurses** we have the support of the First Lady; Ms Thobeka Madiba Zuma who offered to serve as its Ambassador. Here we have to ensure that all women above

the age of 35 years are screened for cervical cancer at once every ten years.

Appreciating the fact that Cervical Cancer is caused by a common virus called the **Human Papillomavirus (HPV)**, our progressive government has initiated a **HPV Vaccination** exercise directed at all **Grade 4 girls** who are 9 years and older. Nurses are the pillar of the success of this one too in making a point that all our sexually naïve girls get vaccinated before any sexually debut.

Programme Director, we also need to indicate that both Goal 4 and 5 can be positively impacted upon if our women go back to the basics, again, embrace the notion of **FAMILY PLANNING**.

Fact of the matter is that Family Planning can help save the women's and children's lives as it allows women to delay motherhood; serves as a mechanism for space births; curbs unintended pregnancies and abortions and curtails childbearing when couples have reached their desired family size.

We need to again start popularizing the practice especially now that various methods of family planning have been made available to our women folk, one of which is the **Implanon**. This is easy to sell as it is a convenient; highly effective and reversible contraceptive method, which provides protection against pregnancy for three years.

GOAL 6: Have halted by 2015, and begin to reverse the spread of HIV and AIDS and begin to reverse the incidence of malaria and other major diseases

Remarkable achievements have been made in this sphere, particularly through innovations that include **NIMAART**.

Our antenatal survey results now show evidence of a decline in HIV prevalence. Thanks to the 2009 World Aids Day Presidential announcement where changed the policy of ARV eligibility that entailed:

- Moving a CD4 threshold from 200 to 350 for the general population and pregnant women.
- Initiation of all TB/HIV co-infected patients irrespective of CD4 count.
- Initiation of all HIV infected children under 5 years of age.

Without doubt our nurses have played a pivotal role in this sphere to the extent that the Old Mutual Report published in the Business Day of 10th January 2013, reported as follows:

“The death rate among employees of companies that bought risk cover from Old Mutual fell almost 20% between 2008 and 2011 – a decline that came as the Government’s drive to get more HIV patients on treatment gathered pace. ...”

One other sphere in which we have made progress is on Mother to Child Transmission. It will be prudent to recall that in 2002 when Prevention of Mother to Child Transmission was initiated, studies conducted showed transmission in KwaZulu-Natal to be hovering around 20%. Now we are all elated because of the results of the Medical Research Council tell us that the rate of mother to child transmission in KZN last year stood at

2.1%, with the latest information now pointing at 1,6%; a noteworthy achievement indeed.

Our nurses have also played a role and continue to do so in screening males and boys who are positively responding to clarion call by His Majesty the King that they be circumcised as a means of curbing the spread of HIV.

Lastly, we need to put an extra effort in the strengthening of primary health care which is essential in addressing the burden of chronic disease.

Our President, again, during the 2011 Nurses' Conference emphasized the issue of working directly in the communities saying:

'We want to see our nurses doing more to educate our people about how to manage their chronic conditions such as hypertension (or BP as ordinary people call it), diabetes, arthritis and other ailments.

Our nurses can and should be seen in schools teaching boys and girls about how to prevent pregnancies and sexually transmitted infections such as HIV, providing information on dental care and generally promoting healthy lifestyles."

Let us keep up the good work and improve where there are still gaps and commit to a Long and Healthy Life for All South Africans

As we end, allow me to narrate something very touching and magnificent that came out of **The Witness Newspaper** about one of you:

According to Felicity Du Preez, Northdale Hospital CEO, the patient who cannot be named because of the hospital's confidentiality clause was admitted to hospital land was asked if he had any valuables to be put away for safekeeping. He replied that he had none.

The patient's condition did not improve and he died on Monday. His brother and son arrived to collect his belongings and mentioned that he always had a red packet with him. They said he usually slept with it under his pillow. Dladla and Ndlovu helped look for the packet, but without any luck.

Later that day, Dladla was sorting out beds for new patients and pulled out a packet from a locker that was supposed to be empty. Tucked inside and wrapped in folds of plastic was the red packet. She peered inside.

"I got the shock of my life. It was the first time I had seen such a lot of money," she said.

Dladla went running to her manager, who was just as shocked.

"What worried me was that we had no idea how much there was in the packet. What if we counted R10 000 and the family turned around and said there was more?" Dladla said.

*The two nurses carried the packet to security where its contents were counted and amounted to a whopping **R45 500**.*

The 55-year-old unmarried patient had listed his mother as his next of kin. She was contacted, and went to the hospital with his brother and son. They explained that the patient, who in his later years received a

grant, lived frugally and always kept money in his red packet. They thought he had about R7 000 and could not believe that it was more than R40 000...

Dladla said she had learnt her own values from her mother, Beauty Mnguni.

"She taught me to be grateful for what I have and to always help others. She did not do this by lecturing me but by leading by example.

I try and live the same way to make my mother proud. She is going to be so happy when she sees me in the newspaper," said Dladla.

How is that for integrity?

I think all of us should learn from **Nonhlanhla Fortunate Dladla**, a 31 year old nurse, who truly adheres to her **Nurse's Pledge**; "to serve humanity and to practise her profession with conscience and with dignity".

I thus have the pleasure to now present the certificate of recognition to an outstanding nurse and a good professional for her honesty and integrity displayed during the call of duty.

I thank you