LENDING A HAND FOR FEET

When six year old Sinentlantla presented to the physiotherapists at Zithulele Hospital in mid-2017, her feet were very stiff and she was having problems balancing as she could only walk on her toes.

Sinentlantla was born with clubfeet, a condition that usually requires 6 to 8 weeks of serial casting at birth (where a new plaster of paris cast is fitted each week as the foot stretches and adapts, until a better position is achieved), followed by wearing a brace for the feet until age four or five in order to prevent relapse. Unfortunately although she did receive serial casting at birth from another hospital, Sinentlantla was never fitted with a brace and by the age of four, both her feet had relapsed.

Following advice from Frere Hospital in East London, the team at Zithulele started the serial casting again. Knowing that a relapse of clubfoot would require much more casting than normal, financing multiple trips to the hospital for Sinentlantla and her mother was a real factor, considering that a return trip cost R140 and casting needed to take place weekly. The treating physiotherapist approached Jabulani, to see if Sinentlantla’s prolonged and indefinite travel costs could be covered by our Patient Transport Assistance Fund (previously known as the Relief of Social Distress Fund)*. The Patient Transport Assistance Fund (PTAF) seeks to help patients overcome the barrier to adequate healthcare presented by a lack of access. Access to healthcare is still a significant issue for rural communities as distances to clinics and hospitals are big, roads and transport are inadequate, transport costs are high and incomes are low.

Sinentlantla received 12 weeks of casting, and her transport was fully covered by Jabulani. The fund also covered her transport to get to Mthatha to access Department of Health transport to Frere Hospital in East London, where she was reviewed and assessed for an operation where tendons in both ankles would be released. She had a three hour operation a week later and although her ankles are stiff, she is recovering well and will be able to get good ankle movement again in due course.

The doctor at Frere reported that the casting she received from Zithulele Hospital got her feet into the best possible position and he was very impressed with the dedication of Sinentlantla’s mother. What an incredible outcome; testament to exactly why this fund exists. Thank you to the generous individuals who make this fund possible.

*In 2016, it became clear that the majority of our Relief of Social Distress Fund money was being used to assist patients to access healthcare appointments and therefore the fund was realigned to meet this need. Members of the clinical team at Zithulele Hospital are able to refer patients to the fund and there are strict criteria in place for referral. Before money is given, the patient is met and “assessed” by a Jabulani employee who has experience of dealing with patients and is able to converse with them in isiXhosa. These measures are to ensure that those who need it most are able to access it, and to attempt to eliminate opportunities for those who may try to take advantage of this service.
**BUILDING SAVINGS**

"Before I joined the group I had problems in life. I had to borrow money from loan-sharks and return it with a ridiculous interest rate of 50%. I joined this group because I wanted to succeed in life and be debt free. Now I’m self-reliant, I can do budgets properly. It may not be on a piece of paper but I am happy that I budget wisely and spend my money on necessary things for my household" says Mama-Kalimashe, a mother of a child with Cerebral Palsy.

What group is she talking about? Well, she’s a member of the Masakhane Savings and Credit Group, based in Zithulele. Our Rural Ability Programme (RAP) partnered with SaveAct, an organisation that developed a community based model for saving and lending money, in order to implement their model in our communities. This is necessary because access to financial services in rural areas is mostly through “loan sharks” who charge very high interest fees, and through informal “stokvels” (saving schemes). For people with disabilities, accessing financial services can be even more difficult, not only because of physical inaccessibility but also the attitudes of community and even family members.

Our RAP Livelihoods Coordinator has been trained by SaveAct so that he can mobilise and support Savings and Credit Groups in our catchment area. We currently have four groups in action across our catchment area, with about 75 members across the groups. Approximately 70-75% of each group is made up of people with disabilities or their relatives.

The groups are responsible (with guidance) for developing their own constitutions and deciding what their interest rate will be when members borrow from the group. At start up, each member sets goals for themselves on what they would like to do with the money they save. Some of the goals set by our group members have included: having enough money to send their children to school; being able to renovate their home; and being able to get out of the cycle of debt through having to pay the high interest repayment rates charged by illegal loan sharks in the area.

Not only do the Savings and Credit Groups provide an opportunity to save money, but they are also a platform for providing financial education modules (also developed by SaveAct), one of which is covered each quarter. Groups meet monthly to save and lend money, for the period of one year, after which they conduct a “share out”. Careful records are kept by the groups to ascertain how many shares each person has in the total savings of the group. At share out meetings, group baseline assessments are also reviewed and at two of the share outs towards the end of last year, most group members indicated that they had achieved the goal they wanted to achieve by joining this saving group.

At one share out, Lubabalo* said, “The scheme has helped me to clothe my children, to pay for their school fees and to build us a house. Even if it’s a small house, we are happy and I feel fulfilled as a parent, a husband and a son to my mother who also resides with us”. Savings groups have brought such hope to the individuals who are saving but also to the RAP staff and the Jabulani team. It is so encouraging to see people financially educated and empowered to save their money and achieve their own goals. If you’re interested to learn more about SaveAct, go to www.saveact.org.za

*Name changed

**COUNSELLED FOR COURAGE**

When 12 year old Thembi* was diagnosed with HIV and Multi drug resistant Tuberculosis (TB) and later Extreme Drug Resistant TB, she thought she was going to die. In fact when the team at Zithulele Hospital realised the severity of her TB and that they needed to isolate her, she just wanted to go home and die. She was in pain. She was going to be isolated from her family. She wasn’t going to be able to go to school or spend time with her friends. She didn’t think she could bear it.

But when Jabulani’s HIV/TB support team and one of the nurses from TB Point in the hospital took time to counsel her and explain the benefits of staying and adhering to treatment, Thembi found the strength and courage to stay.

“My stay was not as bad as I thought it would be, because the counsellors visited me regularly, they brought me toys and colouring books. Every time they visited me, they
would give me hope. They encouraged me to take my pills every day and I even found my own tactics for how to swallow them so that I did not vomit”, says Thembi.

Thembi took her pills every day. She wanted to get well, she wanted to get strong again. She was motivated by her love for her family and a desire to get back to her education. The counsellors were like a mother to her, when she could not be with her own mothers. Both Thembi and her mom are so grateful for this that they make sure that they pop in to see the team each time they come to the hospital.

For other kids like her, Thembi advises them to take their pills every day and correctly even if it’s not nice because they will get well at the end. “Ekunyamezeleni ukhona umvuzo (perseverance prevails)” says Thembi, and we couldn’t agree more. We are so proud of Simlindile, Zonke and Chwayita for having such a profound impact on this young life. What a privilege it is to be able to serve in such a way.

*name changed to protect identity

**AT A GLANCE**

**THREADING PEOPLE TOGETHER**

We are very appreciative of the Helping Hands Cambridge SA charity group in East London, who selflessly knit and sew multiple items each month, for the benefit of our communities. Among the items that we regularly receive from them are warm blankets, clothing and beanies with which we can bless new mothers. Patients for whom a stay of weeks or months in hospital can be very psychologically challenging, can derive some comfort from a lovingly made blanket. And patients, for whom eating while in a hospital bed or even when back at home, is a struggle can gain some dignity from especially made extra-length “bibs” that cover their eating tray and/or clothing to prevent messing. You can find the Helping Hands Cambridge SA on Facebook if you’d like to learn more about them.

**CODE RED**

When the South African National Blood Service (SANBS) stock levels reached critical levels last year, and Zithulele Hospital was not able to access much needed blood products, one doctor took it upon himself to be part of the solution. After liaising with SANBS, and rallying interest in Zithulele, he arranged for SANBS to come out to Zithulele to collect blood from donors, as it is difficult for us rural dwellers to access donation points elsewhere. The enthusiasm levels were fantastic, with many donating (including a number of Jabulani staff). Blood donation needs to be regular, as a unit of blood can only last for 42 days after donation, so they now come here monthly. South Africa needs 3000 units per day to ensure a safe and sufficient blood supply in the health care system and at the time of writing this, the SANBS only had enough blood to last 3.8 days. Only 1% of South Africans are active blood donors. Please can it read: “Only 1% of South Africans are active blood donors. Madwaleni Hospital staff have taken up the challenge and we extend the challenge to you…visit www.sanbs.org.za to find out where you can donate blood. Do it today. You never know when you might need someone else’s blood for your life to be saved!”