

**Keynote Address by MEC for Health and Social
Development Mme Dikeledi Magadzi during the Intensified
Case Finding and HIV Counseling and Testing Campaign
on 06 October 2011, Tzaneen Correctional Services**

Correctional services Area Commissioner

Tzaneen Correctional Services management and staff

Executive mayor of Mopani District Municipality

Mayor of Greater Tzaneen Municipality

Chaplain Chiko

Traditional Health Practitioners

Councilors from District and Local Municipalities

Offenders

Ladies and gentlemen

Good morning

Programme director, the department's priority is to improve the health status of the entire population and to contribute to government's vision of "A Long and Healthy Life for All South Africans".

This will only be possible by broadening and deepening the extent and scope of community involvement and social mobilisation in all aspects of health provision at local level.

To tangibly contribute towards the realisation of this vision, the National Department of Health's Strategic plan for the period 2009 to 2014 lists 10 priorities as part of the 10 Point Plan for the overall improvement of the performance of the national health system.

Programme director, within the 10 Point Plan we are focusing on a core set of strategically selected areas namely:

- The enhanced overall stewardship and governance of our health system
- The strategic implementation of infrastructure development and maintenance initiatives, including the use of public private partnerships
- The comprehensive and aggressive combating of HIV, AIDS, TB and other communicable diseases
- Mass mobilisation of communities and key stakeholders to promote better health outcomes for all
- The review and strengthening of our drug policy and procurement systems
- And strengthening the manner in which we generate information and use it to support our planning, decision making, research and development processes to better the overall performance of our health system.

To this end, government has identified four strategic outputs which the health sector must achieve being:

- Increasing Life Expectancy
- Decreasing Maternal and Child mortality
- Combating HIV and AIDS and decreasing the burden of disease from Tuberculosis
- Strengthening Health System Effectiveness

Programme director, as a department we are doing our best to provide all the basic health services but we cannot do it alone, hence we appeal for the cooperation the offenders who should also be responsible for their health. They can do that by knowing their health status through testing for Hypertension, Sugar diabetes, Blood Pressure checks, Hemoglobin test, TB screening and testing, HIV Counseling and Testing including Cancer screening to give us a clear direction to help them.

This will also ensure that offenders do not become burden to their families and the community on their return because they would have cleared their health status, while on the other hand they will be able to encourage the large community to live a healthy life style.

Some of these diseases are caused by physical inactivity, eating unhealthy food which contains much fat, sugar and salt, abuse of alcohol and drugs including smoking.

You are all encouraged to eat a healthy diet which will include at least one fruit and vegetable per day. You need to exercise on regular basis, avoid food with too much fats, sugar and salt, if you are smoking or drinking just stop it.

Should you live a healthy life even your life expectancy will increase in line with the department's plan to have the life expectancy of all the citizens increasing from the current 53.9 years for males to 58 years and from 57.2 years for females to 60 years by 2014.

Programme director, HIV prevalence from the antenatal surveys has consistently shown the prevalence of 20% to 21%. The prevalence rate in Limpopo increased from 20, 7% in 2008 to 21,4% in 2009. This is an insignificant increase of prevalence, it is mainly due to the life expectancy of HIV positive people on treatment that has increased.

Limpopo is the 3rd lowest in HIV prevalence in the country, the second lowest being Northern Cape and Western Cape being the lowest in the country.

The highest in antenatal HIV sero-prevalence is Waterberg District at 28, 8% in 2009 followed by Mopani District at 26.2%, Capricorn at 23.8%, Sekhukhune 16.6% and Vhembe District remain the lowest at 14, 3%.

The number of TB cases reported in Limpopo Province, increased from 6286 in 2000 to 21287 in 2010.

However we are impressed that according to the case detection rate of 1.8% the Province is below the World Health Organization target of 2.10%.

The TB cure rate for new smear positive cases remains low at 70,1%, which is lower than the World Health Organization and the Millennium Development target of 85%. The cure rate has been increasing steadily from 48.7% in 2005 to 73.4% during the 2nd quarter of 2011.

Mopani District's cure rate has improved from 72% during 1st quarter 2010 to 74.1% during 3rd quarter of 2010. Amongst the five sub-districts in Mopani, Maruleng has a cure rate of 82.1% followed by Greater Giyani at 81%, Greater Tzaneen at 72.2%, and Ba-Phalaborwa at 67.35 and the least performing being Greater Letaba at 64.6%.

TB is a curable disease but we still experience the challenges of people who are dying while on TB treatment this is indicated by a high death rate at Mopani which is at 8.5%. The sub-district with a high death rate of 11.4% is Greater Letaba followed by Ba-Phalaborwa at 9.1%.

Programme director, we are re-engineering the health system to one that is based on a primary healthcare approach, with more emphasis on promotive and preventive healthcare will underline all interventions needed to achieve the outputs.

I am happy that our Minister of health Dr Aaron Motsoaledi and Minister of Correctional Services Nosiviwe Mapisa-Nqagula have signed a Memorandum of Understanding to ensure that offenders get health assistance from our officials. In the province we will continue to enhance the implementation of this programme to ensure that our people, wherever they are receive health services.

It is encouraging that the department of correctional services is availing all the health services to ensure that you live “Long and healthy life” which is the government’s vision.

We are well aware that some of the offenders are faced with psychosomatic disorder which is a disease that involves both mind and body. Some physical diseases are thought to be particularly prone to be made worse by mental factors such as stress and anxiety. Some of those diseases are psoriasis, eczema, stomach ulcers, high blood pressure, and heart disease.

The symptoms of the psychosomatics are: to be afraid or anxious we may develop, a fast heart rate, palpitations, feeling sick, shaking (tremor), sweating, dry mouth, chest pain, headaches, a knot in the stomach, and fast breathing. As a department we have health facilities including special hospitals to deal with such diseases.

Programme director let me remind the offenders that they are undergoing a restorative justice which is about addressing the hurts and the needs of both victims and offenders in such a way that both parties, as well as the communities which they are part of, are healed.

It is in the spirit of ubuntu that the criminal justice process seeks the healing of wounds, the redressing of imbalances and the restoration of broken relationships.

Not only government, but victims, offenders and their communities should be actively involved in the criminal justice process at the earliest point and to the maximum extent possible.

As part of the restorative justice as the offenders you are expected to have accepted responsibility for your deeds, you must express repentance, know reconciliation and make restitution as you prepare yourself for life after prison.

We hope that when you return to your communities you will no longer be part of the problems and burden to the society, but instead you will become part of the solution.

Working together we can and must do more

I thank you