

**SPEAKING NOTES OF THE MEC OF HEALTH IN  
MPUMALANGA, MS SASEKANI MANZINI DURING THE “TB IN  
PREGNANCY” AWARENESS CAMPAIGN AT LYNVILLE  
STADIUM, EMALAHLENI LOCAL MUNICIPALITY.**

**04 March 2020, Thursday**

Program Director,  
Acting Executive Mayor,  
Members of Mayoral Committee,  
Councilors,  
Seniors Managers of the National and Provincial Departments,  
Municipal Officials,  
Stakeholders,  
Ladies and Gentlemen- People of Nkangala District.  
Sanbonani!!!!

Program Director the global theme for 2020 World TB Day is :

**“It’s Time to –End TB”**, in line with the drive to end TB as a public health threat by the year 2030 as set out in the Sustainable Development Goals. Following this, the proposed South African theme is **“Cheka Impilo: It’s Time to End TB”**.

Program Director, it therefore gives me great pleasure to be with you in Emalahleni today in Nkangala District. My visit here today is part of our provincial preparation for the commemoration of World TB Day which will take place in our Province on the 24 of March 2020.

Again, I am here as part of my ongoing efforts to ensure that the Department of Health is brought closer to the people so that we can hear what your needs are, and also to share with you the services that we as Department, are able to make available to you.

Today, I want to discuss with you a disease that is curable and treatable but yet infecting, affecting and killing so many of our families and our communities.

This disease is Tuberculosis, or as many of us call it, TB. TB, alongside HIV and AIDS is a challenge for all of us to fight. Without your help, we in government cannot hope to eliminate it or ensure that our people who contract TB can get early treatment and be cured.

Hence we are here today to encourage everyone to hold hands with us and together strive to our goal end TB. It is not a secret that TB can affect anyone anytime and anywhere. As a Department of Health we are here bringing the services to you encouraging each and every one of us to go and test and be screened for TB and other diseases

South Africa is one of the 14 high burden countries across the world, with a high burden of TB. The nine provinces are affected at different levels, according to the data from National Department of Health.

According to the TB information reported in 2018, Mpumalanga had a total of 12,597 TB patients - Ehlanzeni reported 6,427, Gert Sibande 2,806 and Nkangala 3,364 TB patients.

Men had the highest burden of the disease at 59.2%. The 35-44 years age group was also highly affected with 27.2% reported in the age group.

Program Director, unfortunately Emalahleni is actually leading in the total number of TB patients in Nkangala District. Out of the 3,364 reported from Nkangala, 938 are from Emalahleni followed by the sub-district of Thembisile Hani with 886 patients.

It is crucial to note that one person infected with TB has a potential of spreading the disease to 15 or more people at a time.

We do know that poverty is one of the main contributory factors for most of our people being infected with TB. Without employment, families are unable to provide properly for themselves. They cannot prepare and eat healthy food which in turn makes it difficult for their bodies to develop the required protection (immunity) against infections. Because of poor housing, especially in informal settlements and rural areas, with the related problem of overcrowding, transmission of TB from one person with TB to many others is easy.

As you know, our honorable Premier, Mme Refilwe Mtshweni- Tsipane announced a long-term programme of economic and social development in her SOPA, which aims to reduce, and finally eliminate poverty through creating employment opportunities for our people.

At the same time, there are many other forms of support that the government is already providing, including grants for pensioners, children and people with disabilities. In addition, Primary Health Care services are free to all, and anyone who cannot afford to pay for treatment at public hospitals are treated free of charge. These initiatives are aimed at assisting the poorest of the poor in our communities.

However, even with the current levels of poverty, even if one lives in an informal settlement, even if one is unemployed, TB can be cured, especially if it is discovered very early and if a person with TB takes treatment and finishes the course of treatment.

TB is curable and only requires that “Ugwinye a maphilisi akho” as prescribed.

Problems arise when there is a delay in seeking treatment and not completing the full course of the treatment which is 6 months - then one can both pass the disease onto others and get complications themselves. In fact, if one does not complete treatment, a person can develop resistance to many TB drugs which will make treatment and cure more difficult.

You, our people are one of the key partner and a strong partnership between individuals, families, communities and government will enable us to rid our country of the many diseases and TB in particular.

For us to be able to be able to reverse the high levels of TB in our Province and the country, we need your help to do the following:

1. We should practice good hygiene by covering our mouths when we cough or sneeze and avoid spitting on the ground - this is the easiest way to spread the disease as the bacilli (the germs that cause TB) travels through the air and can infect anyone.
2. We should all take responsibility for ensuring that we reduce the chances of anyone of us getting TB. Specifically, we should allow for the free flow of air in our homes, schools, workplaces and public transportation vehicles, especially taxis and buses by always opening windows as often as possible.
3. We should also avoid smoking and drinking alcohol.
4. We should keep healthy by eating properly, especially fruits and vegetables, and drink lots of water.
5. We should exercise daily to keep our body healthy so that it can fight off infections.
6. We should always look out for signs of TB which include: coughing for more than 2 weeks, loss of weight, loss of appetite (the desire to eat) and sweating at night.

If anyone has any of these signs, they should go to the nearest clinic or hospital as quickly as possible to be examined by a nurse or doctor and to be tested for TB

Remember that prevention is better than cure and that TB is curable. Anyone who gets TB will receive treatment free of charge in any government clinic or hospital. However, it is important that once a person is put on treatment, they should take the medicines according to the directions provided by nurses and doctors. They should also finish all the medicines that they are given. This therefore requires a lot of responsibility from everyone affected, that is, patients, their families and friends and our health professionals.

We should support those who live among us who have TB, by being kind to them, and not discriminating against them. We should help them and remind them to take their TB medicines. We should also assist in caring for them if their sickness makes it difficult for them to take care of themselves. This is "Ubuntu" which we as Africans are well known for.

The Department through its Community Health Workers, is running a program of tracing those patients who default / stop taking their medication and helping them to restart and completing the course.

I want to speak a little more about these supporters and tracers. The Community Health Workers are members of our own communities, who receive training in order to help us care for people including those with TB so that they can regain their health. These Community Health Workers are there to remind and ensure that TB patients in the community (not hospitals) take their medicines according to the prescription of the nurses and doctors until they finish them.

Unfortunately, some of our patients stop treatment before they are cured. When this happens, it creates problems because the TB, which is normally simple and easy to treat becomes more difficult and complicated. This complicated type of TB is called Drug Resistant TB because the medicines we have cannot easily cure this form of TB.

It is therefore important that we avoid this cruel form of TB by remaining on treatment until we finish our medicines. When people stop taking treatment, they are called defaulters. Because of the problem of the complicated TB I just spoke about, it is important that such people are identified and located wherever they are so that they can be assisted to return to treatment until they become healthy again. We rely on a group of community members to find such people.

I urge you to always provide assistance to our healthcare workers as they are providing a service to our communities.

We are also aware of the fact that amongst the key population including inmates/prisoners, migrants, miners, mining communities, children, immune compromised (such as cancer sufferers, diabetics, HIV positive) pregnant women too, are at the highest risk to contract TB.

The 2016 Saving Mothers report indicated that non-pregnancy related infections were the first cause of maternal mortality/deaths. TB in pregnancy can have fatal consequences, which includes, low birth weight, prematurity, congenital TB (babies born with TB), increased neonatal and maternal

mortality, increased pregnancy complications, abortion, postpartum hemorrhage and pre-eclampsia.

The World Health Organization (WHO) Global, report of 2019, indicate that TB among pregnant women is associated with a six-fold increase in perinatal deaths and a two-fold risk of premature birth and low birth-weight.

Therefore, it is important that when planning to fall pregnant or when pregnant already, that you:

- Visit your nearest clinic or doctor for advice before falling pregnant
- Visit your nearest clinic immediately you suspect you are pregnant
- Know your HIV status
- Ensure that you get screened for TB, HIV and other Non-Communicable Diseases (NCDs) such as Hypertension, Diabetes, and Mental Health
- Keep your antenatal card with you always
- Ensure that you are registered on Mom Connect
- Visit your health facility immediately you experience the following:
  - -Severe headache, vomiting, vaginal bleeding, reduced baby kicks,
  - Abdominal pains and rupture of membranes.
- Avoid smoking, drinking of alcohol and un-prescribed or over the counter medication
- Eat a well balanced diet: vegetables, fruits, proteins and drink at least 2-3 litres of clean water per day
- Take your prescribed medication as advised by the nurses



- Plan for the place of delivery and identify a birth companion to support you (Doula)
- Be prepared to sustain the opted infant feeding practices.

As I conclude, let me extend an invitation to all of you to join us on the occasion of the commemoration of World TB Day at Kwamhlushwa Stadium on the 24<sup>th</sup> of March 2020.

Our people should continue to Abstain, Be faithful and Condomize.

I thank you.