

DID YOU KNOW?

In 2012/13 we had 12 433 949 million learners in over 25 000 schools.



MY DISTRICT TODAY

Issue no. 77 / August 2013

CONTACT DETAILS OF THE GCIS PROVINCIAL OFFICES

For more information about similar programmes that are run across the country, contact one of the following provincial offices:

EASTERN CAPE

Ndlelantle Pinyana
043 722 2602 or 076 142 8606
ndlelantle@gcis.gov.za

FREE STATE

Trevor Mokeyane
051 448 4504 or 083 255 0042
tshenolo@gcis.gov.za

GAUTENG

Peter Gumede
011 834 3560 or 083 570 8080
peterg@gcis.gov.za

KWAZULU-NATAL

Ndala Mngadi
031 301 6787 or 082 877 9420
ndala@gcis.gov.za

OUTCOME 1: IMPROVED QUALITY OF BASIC EDUCATION

Back to school

By Willem van Dalen: GCIS Northern Cape



Albenecia van Nel who had to leave school to care for her sick mother and siblings at the age of 15.



Albenecia braiding her cousin's hair.



Albenecia wants to complete her Grade 12 and then become an electrical engineer.

Albenecia van Nel dropped out of school in 2005 when she was in Grade 9, to look after her sick mother. Thanks to the intervention of the Northern Cape's Health MEC, Mr Mxolisi Sokatsha, she will now have the opportunity to complete her matric.

Van Nel left school to take care of her family after her mother fell ill shortly after the birth of her younger brother.

Local doctors couldn't diagnose her mother's condition and as a single parent, she didn't have

enough money to consult private specialists. Van Nel had to run the household at the tender age of 15 with income from government grants only.

MEC Sokatsha intervened in May 2013 after the matter caught his attention. Van Nel's mother was taken to Bloemfontein for medical tests. Her results are still to be confirmed.

Sokatsha undertook to enrol Albenecia at the National Institute for Higher Education (NIHE) in Kimberley for 2014. He will see to it that she has

decent clothes to wear and the Department of Health will sponsor her taxi costs to and from NIHE.

"I am grateful to the people that care for my family and all those that assisted us in the difficult days. I want to thank MEC Sokatsha for assisting my mother. I believe that our Heavenly Father opened doors for us and that everything will be fine."

Albenecia dreams of becoming an electrical engineer.



government
communications

Department:
Government Communication and Information System
REPUBLIC OF SOUTH AFRICA



OUTCOME 3: ALL PEOPLE IN SOUTH AFRICA ARE AND FEEL SAFE

LIMPOPO

Thanyani Rhavhura
015 291 4689 or 082 421 3461
thanyani@gcis.gov.za

MPUMALANGA

Tiisetso Ramotse
013 753 2397 or 072 219 5136
tiisetso@gcis.gov.za

NORTH WEST

Mareka Mofokeng
018 381 7071 or 083 382 5909
mareka@gcis.gov.za

NORTHERN CAPE

Marius Nagel
053 832 1378/9 or 083 778 9179
mariusn@gcis.gov.za

WESTERN CAPE

Ayanda Hollow
021 697 0145 or 083 255 7665
ayanda@gcis.gov.za

Women's Month Service Delivery Imbizo

GCIS Western Cape



Bridgton community members at the Imbizo.

DID YOU KNOW?

17 425 backlog cases have been finalised at regional and district courts since from 1 April 2012 until the end of December 2012.

As part of their Women's Month celebration, the Department of Justice and Constitutional Development held two service delivery Izimbizo during August 2013 in the greater Oudtshoorn municipal area.

The purpose of the Izimbizo was for members of the community to share their views with the Justice, Crime Prevention and Security Cluster of government.

Various questions and concerns were addressed in detail pertaining to:

- Why are alleged criminals released on bail?
- How does bail work?
- Are you fed up with drug addicts and gangsters in your community?
- Are you experiencing problems in the serving of Domestic Violence Protection orders?

The Justice, Crime Prevention and Security Cluster explained and confirmed their commitment to:

- improving the efficiency and effectiveness of the criminal justice system, services and assistance rendered to victims of crime
- increased crime-prevention actions
- improving the services rendered by courts
- strengthening the management of bail processes and legislation
- increasing visible policing/patrolling in identified hotspots
- operationalise transformed community safety forums
- implementing social crime prevention programmes
- improving investigation capacity and efficiency (crime-scene detectives, detectives, intelligence operatives and prosecutors)
- implementing actions aimed at court readi-

ness of dockets

- ensuring secure detention of high risk and violent offenders in correctional and police facilities and approving the Restorative Justice Policy Framework with activities across the cluster.

Both Izimbizo were well attended, with sector departments (Home Affairs, SAPS, Labour, etc), having information stalls.

The Izimbizo took place under the theme "Addressing unemployment, poverty and inequality: together contributing towards the progressive future of women."

DID YOU KNOW?

Today 1,6 million more young people under 35 are working than in 1995.



Minister Dlamini, supported by the Deputy Minister of Human Settlements, Ms Zoe Kota during Women's Month Public Participation Imbizo.



OUTCOME 12: AN EFFICIENT, EFFECTIVE AND DEVELOPMENT-ORIENTED PUBLIC SERVICE AND AN EMPOWERED, FAIR AND INCLUSIVE

Youth benefit from ministerial visit

GCIS Western Cape

The youth of Oudtshoorn, in the Western Cape, were the main beneficiaries of the visit by the Minister of Social Development, Ms Bathabile Dlamini, which took place at the Riemvasmaak sports field on 5 August 2013.

The visit formed part of the department's series of Izimbizo (public participation programmes) that are hosted in various places around the country to identify local socio-economic challenges and draw up programmes of action to improve the quality of life of citizens.

Minister Dlamini announced during the Imbizo that her department had put together a group of 50 young people from the local community to be used as change agents and drive youth development initiatives, assisted by the department.

"This group will be assisted to register a non-profit organisation and to raise funds for the various developmental programmes they will identify. We will also provide them with the necessary training to undertake developmental work," explained Ms Dlamini.

The Minister also announced that a youth development specialist from the department, Ms Smangele Khanyile, will be deployed on a full-time basis to Oudtshoorn to work with the young people on issues of development.

Prior to the Imbizo, a series of community dialogues were held to give the community a chance to raise issues of concern. Four key issues were identified as requiring urgent attention by the department namely:

- the abuse of the child support grant, and child abuse
- alcohol and substance abuse
- high levels of crime
- youth unemployment.

Minister Dlamini promised that a team from the department would be deployed to the area during August and together with the local people develop community development plans for urgent implementation.

In a show of commitment to youth development, the Minister also offered university study bursaries to three local youths to study social work. This also seeks to address the shortage of social workers, which have been declared a scarce skill.

The Minister is required through the Performance Agreement she signed with the President to undertake public participation programmes throughout the country.

The Minister and her department undertook 69 public participation programmes in the 2012/13 financial year.

The Izimbizo promotes participative governance and will allow the community of Oudtshoorn to have a say in decision-making processes affecting their future, as well as making them aware of the services available from the department and its agencies, the South African Social Security Agency (Sassa) and the National Development Agency (NDA). Various sector departments such as correctional services, and home affairs, the South African Police Service (SAPS), community protection services, and Sassa deliver actual services during the Izimbizo.



Community members listening attentively to the Minister of Social Development, Ms Bathabile Dlamini.



Community members posing questions to the Minister.



Young people from the community receive bursaries to study Social Science.



A group of 50 young people from the local municipality will be used as change agents to drive youth development initiatives.

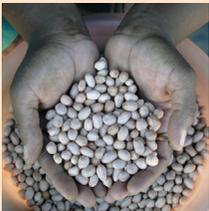
OUTCOME 2: A LONG AND HEALTHY LIFE FOR ALL SOUTH AFRICANS

DID YOU KNOW?

The infant mortality rate (IMR) has decreased from 40 deaths per 1 000 live births in 2009 to 30 deaths per live births in 2011. The rate was 63 deaths per 1 000 live births in 2001.



From left: Lindiwe Khoza, Meldah Ngobeni, Dr Monica Ndala, Maphuta Malatji CEO Rebecca Peta, Sanna Mathosa and Given Sebashe. In front is Johanna Rikhotso.



There are enough reasons today for women to celebrate Women's Day.

By Eunice Nkuna: GCIS Limpopo



Women were dancing as part of the happiness therapy.

In line with the Women's Month theme, "A Centenary of Working Together Towards Sustainable Women Empowerment and Gender Equality", the Maphuta Malatji hospital management, staff and women from various institutions in Ba-Phalaborwa area celebrated the historic day in style.

The celebration was aimed at building pride among women so that they could take charge of their destinies and change their circumstances to leave an everlasting legacy especially in the working environment. This important month enables women to review the progression of women in our society with regard to emancipation and advancement.

A psychiatrist based at Letaba Hospital, Dr Monica Ndala, talked about the importance of women and

their health. She encouraged women to spend most of their time happy. She encouraged them to spend 67 minutes everyday laughing or smiling as a sign of happiness. "There are three important things in life: soul, body and health. A woman must eat healthy, exercise and be happy all the time." She encouraged all the women to dance as dancing is part of therapy.

Mercy Moagi, a local businesswoman encouraged women to venture into business. "The corporate world needs us to run companies and our own businesses. Don't sit and wait for things to happen. Make things happen. Getting depressed won't bring food to your table," said Moagi.

She encouraged woman to register businesses with the Limpopo Business Support Agency to turn their

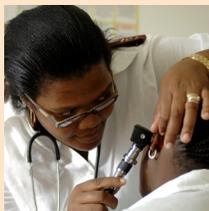
business ideas into reality and also to interact with other institutions to help them get started.

Chief Executive Officer of the Maphuta Malatji Hospital, Ms Rebecca Peta, thanked all participants for joining the hospital in celebrating the occasion.

"We are thinking of taking the event to a bigger venue next year because the response was very good. Women got together and had lots of fun celebrating themselves," said Peta.

DID YOU KNOW?

Economic growth averaged about 3% during the first decade of freedom versus an averaged 1% per year growth in the decade before 1994.



OUTCOME 12: AN EFFICIENT, EFFECTIVE AND DEVELOPMENT-ORIENTED PUBLIC SERVICE AND AN EMPOWERED, FAIR AND INCLUSIVE CITIZENSHIP

New approach to Thusong project

Government Communication and Information System (GCIS) has been directed by Cabinet to reposition the Thusong Service Centres Programme to widen government access.

“Repositioning [the project] means the department, working with our partner departments, will have to look at the possibility of identifying the suitable structure, platforms and partnerships to effectively fulfil the mandate of the programme which is not only limited to information,” says Nebo Legoabe, GCIS deputy CEO overseeing the programme roll-out.

To date, the GCIS, working with all three spheres of government, has operationalised 176 centres across the country, approximately 100 centres short of a mandate given in 2004 to have one centre in every local municipality by 2014. Legoabe explains that the shortfall of centres is primarily due to budget constraints.

The Thusong project is partially funded through the Municipal Infrastructure Grant and National Treasury, but also relies on sponsorship and donations from stakeholders and the private sector. “National departments fund their services in centres through their existing operational budgets, but these are not enough currently to reach everywhere. It is for this reason that government is looking to reposition the Thusong initiative,” she says.

The repositioning of the programme will include the exploration of other less costly ways to bring government services to com-

munities. “We are looking at other platforms, instead of just the brick and mortar infrastructure,” explains Legoabe.

This includes the expansion of the Thusong mobile units, as well as integrating it with other departments’ mobile services. “This way, instead of home affairs visiting a certain area on a Monday, a health services mobile unit on a Wednesday and another service on a Friday, we can combine all the services to be available to the specific community at the same time.”

Legoabe says that, through the Department of Public Service and Administration (DPSA), the department was approached by the Passenger Railway Agency of South Africa to look at the possibility of launching a project where a train will be refurbished to provide all the services normally offered at the centres. The train can then move throughout the country, targeting specific areas according to a predetermined schedule.

However, this project is still in the planning phase and the DPSA is currently looking at its viability, she says.

Move to ICT

She explains that the GCIS was mandated, in 1999, to establish information centres in rural areas to assist communities to access more information about government systems. However, the project quickly evolved into an ICT project when it became evident there was a pressing need for citizens to be closer to government service offices.

By 2004, GCIS had erected 96 centres in district municipalities. The project overview was then redesigned to extend to one centre in every local municipality by 2014. The name was also changed to Thusong, a Sotho word meaning ‘a place of help’.

The redesign of the project meant centres had to be connected to be able to offer all government services to the communities; for example, payment of municipal bills, applications for official documents such as IDs and marriage or birth certificates, renewal of drivers’ licences, applications for social grants, labour services, etc.

In addition to rolling out more centres, the GCIS also focused on training service providers in the centres, appointing centre managers, installing reception areas in all the centres to streamline rendering of services, and branding all the centres.

DID YOU KNOW?

Overall life expectancy of South Africans has increased from 54,9 years in 2001 to 56,5 years in 2009 and 59,6 years in 2011.



OUTCOME 2: A LONG AND HEALTHY LIFE FOR ALL SOUTH AFRICANS

The intergrated chronic-care model.

By Prinesha Naidoo

LIFE for patients treated for chronic diseases in public health facilities is expected to become much easier with the roll-out of a new management system in April next year.

The integrated chronic-care model will not only ease the burden for chronic patients, but also make space in public healthcare facilities for patients with acute conditions, Malebona Matsoso, Director-General in the Department of Health, said on Wednesday.

Patients treated for chronic diseases such as diabetes and hypertension have to visit a clinic or hospital on more than one day to obtain various services.

“We cannot have someone who presents on a Wednesday for hypertension come back on a Thursday to be seen for diabetes and yet come back again on a Friday to be treated for HIV,” Ms Matsoso said.

Speaking on the sidelines of the Inter-academy Medical Panel Conference on the Changing Patterns of Non-Communicable Diseases, she said the new system — successfully piloted in North West, Mpumalanga and on Gauteng’s West Rand — would allow patients to receive treatment for a host of ailments and chronic diseases during a single session on a single day, rather than in multiple sessions on different days.

Ms Matsoso said the results of the pilot programme had given the department hope of integrating services and improving healthcare. “We have to ensure that our health system performs and we have to ensure that human resources in our health facilities are appropriately addressed, including training, recruitment and retention.”

She also announced that the department was partnering with the World Health Organisation to assess its workforce in terms of its workload and skills base. She said the quality of services offered at 4 000 public sector health facilities had been audited and necessary corrective measures were being considered.

Ms Matsoso said that as part of the integrated chronic-care model, the department would be working with the private sector to assist patients to collect their medication.

Instead of having to queue at state facilities on specified days, patients would be able to collect their medication from selected facilities and pharmacies.

Ms Matsoso said the department had finished mapping suitable facilities and pharmacies across South Africa.

South African Pharmacy Council CEO Amos Masango said yesterday the pro-

posed integrated care model was good for patients. “If all the pharmacies in the country can be utilised to assist in the distribution of medicines, it is better — long queues can be reduced.”

Mr Masango said there are 5 000 registered public and private sector pharmacies in South Africa.

Ms Matsoso said the department was now placing emphasis on evidence, and districts were being used as planning units.

“In each district, we can tell you what the burden of a disease is in that district, we can tell you what the socioeconomic indicators that need to be tracked are, we can tell you what the performance of the health system in each district is, and we can also tell you what the service delivery outputs are,” she said.