



11/4/11

Wes-Kaapse Provinsiale Parlement
Western Cape Provincial Parliament
IPalamente yePhondo leNtshona Koloni

STANDING COMMITTEE ON COMMUNITY DEVELOPMENT

**COMMITTEE REPORT ON VOTE 6: HEALTH IN THE SCHEDULE TO THE WESTERN CAPE ADJUSTMENTS
APPROPRIATION [EMERGENCY FUNDS] BILL [B5-2017]**

COMMITTEE REPORT

Report of the Standing Committee on Community Development on Vote 6: Health, in the Schedule to the *Western Cape Adjustments Appropriation [Emergency Funds] Bill [B5-2017]*, dated 18 August 2017, as follows:

The Standing Committee on Community Development, having deliberated on the subject of Vote 6: Health, in the Schedule to *the Western Cape Adjustments Appropriation [Emergency Funds] Bill [B5-2017]*, reports that the Committee supports the Vote referred to it.



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MS L. BOTHA, MPP

CHAIRPERSON; STANDING COMMITTEE ON COMMUNITY DEVELOPMENT

DATE: 18/08/2017



11/4/11

Wes-Kaapse Provinsiale Parlement
Western Cape Provincial Parliament
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STANDING COMMITTEE ON COMMUNITY DEVELOPMENT

COMMITTEE REPORT ON VOTE 7: SOCIAL DEVELOPMENT IN THE SCHEDULE TO THE *WESTERN CAPE ADJUSTMENTS APPROPRIATION [EMERGENCY FUNDS] BILL [B5-2017]*

COMMITTEE REPORT

Report of the Standing Committee on Community Development on Vote 7: Social Development, in the Schedule to the *Western Cape Adjustments Appropriation [Emergency Funds] Bill [B5-2017]*, dated 18 August 2017, as follows:

The Standing Committee on Community Development, having deliberated on the subject of Vote 7: Social Development, in the Schedule to *the Western Cape Adjustments Appropriation [Emergency Funds] Bill [B5-2017]*, referred to the Committee in terms of Standing Rule 187, reports that the Committee supports the Vote referred to it.



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MS L. BOTHA, MPP

CHAIRPERSON: STANDING COMMITTEE ON COMMUNITY DEVELOPMENT



11/4/1/2/11

Wes-Kaapse Provinsiale Parlement
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STANDING COMMITTEE ON COMMUNITY DEVELOPMENT

**REPORT OF THE STANDING COMMITTEE ON COMMUNITY DEVELOPMENT ON AN OVERSIGHT VISIT
TO THE DIABETES SOUTH AFRICA SUPPORT GROUP, IN MITCHELLS PLAIN ON TUESDAY, 22 AUGUST
2017**

REPORT OF THE STANDING COMMITTEE ON COMMUNITY DEVELOPMENT ON AN OVERSIGHT VISIT TO THE DIABETES SOUTH AFRICA, SUPPORT GROUP IN MITCHELLS PLAIN ON TUESDAY, 22 AUGUST 2017

The Standing Committee on Community Development (Health) having conducted an oversight visit to the Diabetes South Africa, Support Group in Mitchell Plain on 22 August 2017 reports as follows:

Delegation

The delegation included the following Members:

Democratic Alliance

Botha, LJ (Chairperson)
Mitchell, DG
Wenger, MM

African National Congress

Makeleni, P

Additional Members

Gopie, D (ANC)
Lekker, PZ (ANC)

Apology

Gillion, MN (ANC)

The Parliamentary official accompanied the delegation:

Ms. N Jamce, Committee Co-ordinator

1. Introduction

The Standing Committee as part of its oversight mandate over the Department of Health and complying with the Committee programme resolved to undertake an oversight visit to the Diabetes South Africa, Support Group in Mitchells Plain. The Mitchells Plain Diabetes Support Group (the Group) started 17 years ago, is based at the Mitchells Plain Town Centre library and meets every second Thursday of the month.

2. Overview

The delegation visited the Diabetes South Africa, Support Group in Mitchells Plain on Tuesday, 22 August 2017. The main objective of the visit was to get a better understanding of the programmes and activities of this support group and to ascertain whether this initiative can be rolled out to other communities.

Diabetes is a disease in which the body's ability to produce or respond to the hormone insulin is impaired, resulting in abnormal metabolism of carbohydrates and elevated levels of glucose in the blood. In South Africa, around 7% of people (1 in 14 adults) have diabetes. It is further estimated that more than two-thirds of people with diabetes are undiagnosed. With the increasing prevalence of

diabetes in South Africa, the need for knowledge on how to manage the condition has become significant.

2. Committee findings on the activities of the Diabetes South Africa, Support Group in Mitchells Plain

- 2.1. The main objective of the group is to educate diabetics patients about the dangers of diabetes. The group also aims to assist people with diabetes to understand their condition so that they can look after themselves and live a healthy active life.
- 2.2. The Group consists of 120 members and is empowering all those affected by diabetes through support, education and information. It also provides awareness by highlighting risk factors associated with diabetes and promoting healthy lifestyles.
- 2.3. The work of the support group includes informing, educating and supporting all people who have diabetes and their families. The group acts as an advocate for people with diabetes, lobbying for better facilities, cheaper medication and better services.
- 2.4. Community members that are diabetic join the support group, free of charge but donate on monthly basis for refreshments which are provided during their sessions.
- 2.5. Ms C Hendricks, the founder of the support group reported that she started the support group after realising that the diabetic patients in her community were defaulting on their medication and were not eating a balanced diet.
- 2.6. The activities of the support group are publicised in community newspapers, on notice boards in the public libraries and by word of mouth.
- 2.7. There are several types of diabetes, namely, type 1 diabetes, type 2 diabetes and gestational diabetes.
- 2.8. Early detection of diabetes is important. The longer the body is exposed to high blood glucose levels, the more damage it could cause. Some people with type 2 diabetes have no outward signs associated with high blood glucose levels, so testing the blood glucose level is the only way to be sure. A finger-prick blood test is utilised to screen for diabetes.
- 2.9. The signs of diabetes include feeling very thirsty, sores and boils that do not heal, always feeling tired, poor eyesight and loss of weight.
- 2.10. If diabetes is not treated it can lead to blindness, kidney failure, heart attacks, strokes and amputation of limbs.
- 2.11. Diabetes can be managed by exercising regularly, eating healthy, conducting regular blood tests, and taking the tablets or insulin injections as prescribed by the doctor.
- 2.12. Ms Hendricks also indicated that the group conducts regular blood pressure and glucose level checks, health talks and physical exercises.
- 2.13. It was further reported that people who are at high risk of developing diabetes are those who are overweight, inactive, hypertensive or have a family history of diabetes.

3. Resolution

The Committee resolved to find out whether the Department has pamphlets with educational information on diabetic, if yes, the Department should provide the Committee and the Diabetic Support Group in Mitchells Plain with these pamphlets if the pamphlets are not available, the Department to create infographic pamphlets to raise awareness about diabetic.

4. Conclusion

The Committee successfully concluded the oversight visit at the Mitchells Plain Diabetes Support Group and thanked Ms Hendricks and the other members of the support group for the good work they provide in their communities.



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MS LJ BOTHA, MPP

CHAIRPERSON: STANDING COMMITTEE ON COMMUNITY DEVELOPMENT

DATE 26/10/2017



11/4/1/2/11

Wes-Kaapse Provinsiale Parlement
Western Cape Provincial Parliament
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STANDING COMMITTEE ON COMMUNITY DEVELOPMENT

**REPORT OF THE STANDING COMMITTEE ON COMMUNITY DEVELOPMENT ON OVERSIGHT VISITS TO
THE SUNBEAM CRECHE IN WESTLAKE AND MASAKHANE CRECHE IN MASIPHUMELELE ON TUESDAY,
26 SEPTEMBER 2017**

better school preparedness to improve long-term educational outcomes. The first phase of the project commenced from July to December 2016 and the second phase of the pilot project is underway. Since the inception of the project, a total of 50 ECD sites had been identified after the quality control assessments were concluded, and 14 ECDs benefited from the project thus far.

Mrs Flynn reported that a team of professionals that include social workers, psychologists, and occupational therapists have a direct contact time with children in a small group of six, on a rotational basis. A total of 1072 children were screened and 757 children were identified as at risk and were all identified as one standard deviation below the norm. In addition to this, 208 children had ear screening done, 939 parents attended workshops and 53 ECD practitioners participated in a transfer of skills workshop. The highlight of the project has been the development of the Mobile Application CareUp. The application was developed as a communication tool for parents and practitioners. It allows them to consistently engage through the exchange of messages.

Ms Flynn indicated that the Department of Social Development is working closely with the Department of Health, Education and the City of Cape Town in this project. These Departments are able to use the CareUp Mobile Application for the dissemination of information to communities and to give feedback to the parents. For example, the Department of Health is able to use this Mobile Application to share information about immunisation and the first 100 days while the Department of Education utilise the Mobile Application for Mathematical Literacy and other subjects.

The Department reported that for the 2018/2019 financial year, the Department is planning to reach 100 ECDs sites. The rollout of this pilot project is dependent more on the number of beneficiaries available. The budget allocation for the pilot project is as follows:

- a) The Reach Trust has been allocated R2, 994,415, approximately R181 per child per month. Next year it will be reduced to R147, according to the Department's scale, which will further be reduced to R99 per child.
- b) The Learning Initiative has been allocated R7 245 000. R695 per child per month, which includes a three year programme development cost. This will be completed by 2019/2020. The costs will drop substantially.
- c) The Knysna Education Trust has been allocated R2 61 200.00, R 272 per child per month.

3. Findings on the activities of the Sunbeam ECD in Westlake

- 3.1 The Sunbeam ECD in Westlake is operating in an impoverished community and the structure of the building is informal.
- 3.2 The ECD is not registered and the teachers do not have the required ECD training qualifications.
- 3.3 The ECD caters for 40 children, six babies and the youngest is six months old.
- 3.4 The ECD is not getting funding from the Department of Social Development due to non-compliance with norms and standards. The rezoning requirements by the City of Cape Town are also a challenge.
- 3.5 The operating hours of the ECDs are between 06:30 in the morning and 17:30 in the afternoon and parents pay R200 per month for each child.
- 3.5 The infrastructure is inadequate and more space is needed.

The Committee proceeded to the oversight visit to the Masakhane ECD in Masiphumelele.

8. Conclusion

The Government prioritised Early Childhood Development since 1994. It has been recognised as one of the most powerful tool for breaking the intergenerational cycle of poverty in South Africa. Overwhelming scientific evidence confirms the tremendous importance of the early years for human development and the need for investing resources to support and promote optimal child development from conception. Lack of opportunities and interventions, or poor quality interventions, during early childhood, can significantly disadvantage children and diminish their potential for success.

Early Childhood Development can help drive the transformation which the Department and the government hope to achieve in future, because Early Childhood Development reduces inequalities, poverty, provides decent work and economic growth, quality education and gender equality. This requires investments and interventions to reach children that are at greater risk of being left behind, recognise interdependencies between nutrition, healthcare and education.

The Committee successfully concluded its oversight visit to the ECDs in Westlake and Masiphumelele.



MS L BOTHA, MPP

CHAIRPERSON: STANDING COMMITTEE ON COMMUNITY DEVELOPMENT

DATE