Community Health Projects

COMMUNITY HEALTH WORK AT BOCHUM



Vegetable gardening is part of the health education

Bochum is a rural area of scattered villages and crowded resettlement areas in the northern Transvaal.

There are no health services nearby, apart from a "hospital" which is largely avoided because it lacks qualified doctors or proper equipment. Serious cases are therefore forced to make use of Pietersburg hospital. But people try to avoid even this hospital if they can, because of the alienating way in which they are treated by hospital staff. On various occasions, people claim hospital staff have accused patients of being "dirty", and therefore having brought about their illness themselves.

Because of the great distance involved and the lack of transport, (villagers have to walk 20 km to Pietersburg), relatives are often unable to visit patients.

A few years ago, the Environmental Development Agency (EDA) became involved in primary health care work in the area.

Here, an EDA field worker, who is also a trained nurse, talks about her experiences.

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Deciding to run courses

EDA got involved in Bochum through a concerned social worker and a health programme was started.

Meetings were held with women's groups to discuss problems experienced in their everyday lives. It was felt that there was a need for health courses and workshops on a number of these problems.

Planning a course

This is an example of how we run a course:

After discussions on health problems that people experience, we choose a disease on which to focus, eg the Mamolele women wanted to start with diarrhoea and vomiting.

I then go back to our office and spend a week planning a course. I use relevant information and material from our resource centre and read and produce my own notes.

At the end of the week, I go back to Bochum, and this is how the course runs, provided there are no obstacles:

Day one

It is important to always approach the matter in a sensitive way, drawing on the women's knowledge, experiences and ideas about the subject. For example, diarrhoea and vomiting is often thought to be caused by witchcraft or small creatures that enter the rectum.

On this day, we talk about how the women see and understand the causes and symptoms, and discuss their traditional remedies. Although many of these remedies are harmless, some are bad.

Day two

I explain the causes, signs and symptoms of the illness using my notes and referring to a text book if need be. I also do demonstrations together with the women, eg: what happens in the body when there is diarrhoea, and how dehydration comes about. Sometimes we use models, such as of the eye and ear.

Day three

The women revise the previous day's discussion and some produce their own stepby-step notes. Most of the women cannot read or write but they participate in discussions and demonstrations.

Because the causes of the disease are now familiar, we use that information to discuss how we can prevent it. The women take down notes on preventive measures.

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Day four

The women choose "helpers" - women who will be responsible for treating sick people. In cases where medicines are required, they will be responsible for handling them.

Further discussions are held on what we did during the past few days.

The women also devise and act out dramas on how to identify and treat the disease. A song is composed about the course. Sometimes it is a variation on one of the village songs.

Day Five

The dramas and song continue until I leave in the afternoon.

On my next visit I do follow-up work on the course, not only within the women's groups but among the other villagers. Most villagers feel that they benefit a lot from these health programmes.

Besides health courses, we sometimes hold discussions on nutrition in relation to health, and I give suggestions for nutritious dishes. I encourage the women to do homestead gardening and to grow their own vegetables.

We have also discussed breast-feeding and other problems concerning women's health. We hope to continue these discussions in the future and look at issues such as abortion and lower abdominal pains, in detail.

