

AIM OF THE LESSON

Lesson 5.1 aims to share information on high blood pressure.

Learning Outcomes

By the end of this lesson learners should be able to:

- · Explain what high blood pressure is
- · Explain the signs and symptoms of high blood pressure
- · Explain the test for high blood pressure
- · Explain the dangers of high blood pressure

Lesson Contents

- · High blood pressure
- · Care of a client with high blood pressure

References

- 1. Southern African Hypertension Society. Home page. Available from: www.hypertension.org.za
- 2. The Heart and Stroke Foundation South Africa. Hypertension. 2006 2011. Available from: http://www.heartfoundation.co.za/riskfactors/hypertension.htm
- 3. Blood Pressure Association. Salt and Blood Pressure. Cutting down on the white stuff can save your life. Available from:
 - http://www.bpassoc.org.uk/microsites/salt/Home/Whysaltisbad/Saltseffects

Your role as a CCG

Your role as a CCG is to discuss with your clients the importance of knowing the dangers of high blood pressure; what causes high blood pressure; what the signs and symptoms are and how to lower the risk for high blood pressure, including healthy eating, exercising and not smoking. You should also use the opportunity to talk to your clients about the importance of going to the clinic as quickly as possible if they experience any of the signs and symptoms.

1. What is high blood pressure?

In this condition the pressure of the blood in the arteries becomes too high and it can cause illness and problems in the heart, kidneys, eyes and other parts of the body. Arteries are the blood vessels that carry oxygen from the heart to the rest of the body. The name that doctors and nurses use for high blood pressure is hypertension.

2. What are the dangers of high blood pressure?

High blood pressure can quietly damage the body for years before symptoms develop. It is important for people to have their blood pressure checked regularly, especially as they get older.

Some of the serious dangers that come with high blood pressure are:

- Stroke (blood clot or bleeding in the brain)
- Heart attack (a heart attack happens when blood flow to a part of the heart is blocked for a long enough time and that part of the heart is damaged)
- · Damage to the eyes (bleeding in the eye, eyesight and even blindness)
- · Narrowing of the blood vessels
- · Failure of the kidneys

3. What causes high blood pressure?

The exact cause of high blood pressure is not known, but there are some things that can make high blood pressure worse:

- Smoking
- · Being overweight, especially around the stomach area
- Diabetes [see Lesson 5.2 on Diabetes]
- · Not exercising and not doing any physical activity
- · Family history of high blood pressure
- · Not following a healthy diet
- Eating a lot of salt
- Not having enough minerals in the diet like calcium, potassium, and magnesium
- · Lack of Vitamin D
- Drinking more than two alcoholic drinks a day
- Stress
- · As people get older, their risk for high blood pressure goes up
- Medicines
- Chronic kidney disease (this is a condition in which the kidneys become damaged and do not work well) [see Lesson 2.1 on the Human Body]. They are no longer able to remove fluids and waste from the body properly

4. What are symptoms of high blood pressure?

The person with high blood pressure may not show any signs at all, until it's too late. Two out of every three people actually do not know that they have high blood pressure. It is a good idea for people to check their blood pressure regularly, especially as they get older.

Extremely high blood pressure may lead to some symptoms, and these include:

- · Severe headaches
- Tiredness or confusion
- Dizziness
- Nausea
- Problems with blurry vision (eyesight)
- Chest pains
- · Difficulty breathing
- · Irregular heartbeat
- · Blood in the urine
- · Pounding in the chest, neck or ears





Handy Hints IMPORTANT!

It is very important that if a client has any of these symptoms, they must go to the clinic immediately to have their blood pressure checked.

How can a client find out whether they have high blood pressure?

High blood pressure will be diagnosed by a healthcare worker. They will measure blood pressure with a machine called a sphygmomanometer – the machine with the arm cuff, dial, pump, and valve.

A high blood pressure measurement may be false or the result of stress at the time of the check. In order to do a thorough check, healthcare workers will do a physical check and ask for the illness history of the client and their family.

5. What can be done to help control blood pressure?

- Eat 3 6 small meals each day and not 2 3 large meals
- · Eat a healthy diet
- · Overweight people should lose weight
- Limit salt intake by decreasing the amount of salty foods that are eaten each day
- Reduce the amount of alcohol that is drunk
- Stop smoking
- Cut down on the amount of caffeine drinks, e.g. coffee, tea (not Rooibos), fizzy drinks, or energy drinks
- Exercise for at least 30 40 minutes at least 3 to 4 times a week
- Take the medicines as instructed by the healthcare worker



Role Play

Divide into groups.
Divide into groups.
 One member plays a client with high blood pressure and one member plays the CCG. Give the client advice on how to reduce their blood pressure.
2. One member plays the role of the CCG, talking to their client about the symptoms of high blood pressure. For example, the client talks about having severe headaches. The CCG should be encouraging them to go to the clinic to have their blood pressure checked. Tell the client about the test for checking the blood pressure.

AIM OF THE LESSON

Lesson 5.2 aims to share information about diabetes.

Learning Outcomes

By the end of this lesson learners should be able to:

- Identify signs and symptoms of diabetes
- · Advise on correct nutrition and measures to prevent and control diabetes
- · Explain available types of treatment
- · Advise on access to treatment

Lesson Content

- · Signs and symptoms of diabetes
- · Treatment of diabetes

References

- 1. Health Central. My Diabetes. Understanding Diabetes. 2005 2011. Available from: http://www.healthcentral.com/diabetes/understanding-diabetes.html
- 2. National Department of Health. Diabetes. Undated. Available from: http://www.doh.gov.za/diseases.php?type=4

Your role as a CCG

Your role as a CCG is to discuss with your clients the importance of knowing what the dangers of diabetes are; the signs and symptoms and how to lower the risk for diabetes, including healthy eating, exercising and not smoking. You should also use the opportunity to talk to your clients about the importance of going to the clinic as quickly as possible if they experience any of the symptoms.

1. What is diabetes?

Diabetes is an illness where the body is not able to control the levels of sugar in the blood, leading to too much sugar being present in the blood. All the food people eat are broken down into smaller parts and absorbed into their blood to give their bodies energy. The sugar in the blood comes from carbohydrates, e.g. bread, rice, fruit that we eat. In healthy people, a hormone called insulin helps the cells in the body to take in the sugar and helps give us energy (cells are the basic building blocks found in all living things, including people). If a cell is a car, then sugar is like the petrol needed to drive the car and insulin is the key to open the petrol tank. If the key is broken or missing, the petrol tank cannot be opened and the car cannot be filled with petrol. This means that the car will not be able to move. In the same way, when a person has diabetes and the body makes too little insulin or the insulin does not work well or the cells cannot absorb insulin, this means that the sugar cannot go into the cells to give us energy. It stays in the blood.

2. What are the dangers if the diabetes is not controlled?

If the blood sugar stays high it can be very serious:

- The kidneys can stop working properly
- The heart can be damaged, especially if the client has high blood pressure [see Lesson 5.1 on High Blood Pressure] and a high cholesterol level [see Lesson 5.3 on Cholesterol]
- · The vision can be affected and the client can go blind
- Sores and wounds (especially on the feet) do not heal well and this can lead to amputation (infected part of the leg is cut off)
- If the sugar is too high or too low it can cause a coma (becoming unconscious)

3. How will someone know that they have diabetes?

If a person has diabetes then they may have the following symptoms:

- Tiredness
- Blurry vision (eyesight)
- Dizziness
- · Severe thirst
- Frequent urination (passing urine often)
- Headaches
- Hunger
- Loss of feeling in feet

If a client has any of these symptoms, they should go to the clinic as soon as possible.

4. Types of diabetes

There are two types of diabetes. In Type 1 diabetes, the body does not make any insulin at all. This type of diabetes usually starts before the age of 30. A person can be born with Type 1 diabetes and some children have it from a young age. Type 2 diabetes is when the body still makes some insulin, but the insulin may not be enough or the cells may not be able to absorb the insulin. This usually happens after the age of 40.

5. How can diabetes be prevented?

There is nothing that can prevent Type 1 diabetes, but there are things that can be done to prevent getting Type 2 diabetes:

- If overweight, try and lose some weight. Being overweight requires the body to produce more insulin and this causes strain on the body
- Eat a healthy diet
- Exercise at least 3 to 4 times a week
- Avoid sugary foods and sweets
- Stop smoking
- Go for regular check-ups. If there is a family member with diabetes, the client should ask the nurse at the clinic to check their blood sugar regularly

6. How to test for diabetes?

The healthcare worker at the clinic will start by asking the client to give them a urine sample. They will test it to check the levels of sugar. They may do a finger prick test to check the level of sugar in the blood. If they find the level is too high, the healthcare worker may do some other blood tests as well.





Handy Hints

- · Limit sweets and sugary foods that are turned directly into blood sugar
- Eat smaller meals, more often, to keep sugar level in the blood stable
- Eat the right type and amount of carbohydrates. The best choices are vegetables, fruits, beans, and whole grains
- They are digested more slowly and don't enter the bloodstream all at once
- Don't substitute fat for carbohydrates. It makes the sugar go up and makes a person gain weight
- · Limit alcohol intake. Most alcohol is made out of sugar

7. Can diabetes be treated?

Diabetes will never go away, but it can be managed so that the client can stay healthy. Some of the ways to manage diabetes are:

- Take all medicine as prescribed by the doctor: Medicine may be tablets or even insulin injections. It is important that they are taken as the doctor says, to keep the sugar level correct
- Exercise: It is important to stay active. If the client exercises, then their body uses the insulin better and it also helps to lose weight. This exercise can be walking to the shop or working in the garden to keep fit or doing exercises [see Lesson 2.3 on Physical Exercise]

- Follow a good eating plan: The client should ask the healthcare workers at the clinic to be referred to the dietician at the local hospital. The dietician will help them to plan their diet and give tips on easy recipes that are healthy for them
- Test blood sugar: It is important to test blood sugar regularly at the clinic. If the client is on insulin, they can
 get a testing machine (Glucometer) free from Diabetes South Africa (see the Directory of Services in Module 6
 for contact details for Diabetes South Africa). The doctor can order the test strips from the clinic pharmacy. A
 Glucometer is a machine that can be used at home for checking the amount of sugar in the blood. This is done by
 getting a drop of blood through pricking a finger. The drop of blood must be placed on a test strip, which is placed
 into the machine. The machine will read the strip and tell the client how much sugar they have in their blood

 Learn about diabetes: The client should be encouraged to keep asking questions and try to learn as much about diabetes as possible to help them learn to manage it well

manage it well

 Identification: The client should always carry something in their purse or wallet that says they are a diabetic, so that if they are in an accident or very ill and cannot speak, the doctors will know how to treat them

Group Discussion

Divide into groups and discuss the following: 1. What are the signs of diabetes? 2. What can be done to prevent Type 2 diabetes?

AIM OF THE LESSON

Lesson 5.3 aims to share information on cholesterol.

Learning Outcomes

By the end of this lesson learners should be able to:

- Show an understanding of what cholesterol is, how it enters the bloodstream and how cholesterol levels can be lowered
- · Explain what types of food have cholesterol
- Explain what the dangers are of having a high cholesterol level and how it is measured, as well as the importance of testing

Lesson Contents

- Cholesterol
- · Foods containing cholesterol
- · Dangers of high cholesterol

References

- 1. Health 24. Cholesterol. 2000 2011. Available from: http://www.health24.com/medical/Condition_centres/777-792-804.asp
- 2. The Heart and Stroke Foundation South Africa. Cholesterol. 2006 2011. Available from: http://www.heartfoundation.co.za/riskfactors/cholesterol.htm

Your role as a CCG

Your role as a CCG is to discuss with your clients the importance of knowing what cholesterol is; what the dangers of a high cholesterol are; how a high cholesterol is treated and how to lower the risk for cholesterol, including healthy eating, exercising and not smoking.

1. What is cholesterol?

Cholesterol is a fatty substance that is produced by the liver [see Lesson 2.1 on The Human Body] and it is also taken in with the food people eat. There are several types of cholesterol, some are 'good' and some are 'bad'. As cholesterol moves around in the bloodstream, it builds up in the walls of the blood vessels, specifically the arteries. (Arteries carry blood that has oxygen in it from the heart to the rest of the body). This build-up of cholesterol is called plaque. The more the plaque grows, the more the walls of the artery will harden and thicken. This will lead to the flow of blood being blocked.



2. What happens if someone has too much cholesterol in their bloodstream?

A high blood cholesterol level is dangerous to a person's health because of the plaques being formed inside the arteries, as described above. This will cause the artery to narrow. This is worsened in a client who has high blood pressure [see Lesson 5.1 on High Blood Pressure] and diabetes [see Lesson 5.2 on Diabetes]. If the blood cholesterol continues to be high, more fatty material is deposited in the walls of the artery, making the artery narrower. This means blood cannot travel through the artery easily. Imagine a pipe that is blocked. The blood flow that cannot get through can form a clot which can then block off the artery completely (a clot is a clump of blood that forms when blood hardens from a liquid to a solid). If the blood flow is blocked off completely, it can result in a heart attack or stroke.

3. Fats found in the food people eat

There are many types of fats. The body makes its own fat from the food that is eaten. Also some fats are found in foods from plants and animals and are known as dietary fat.

There are two types of dietary fats:

a. Good dietary fats

- These are found in peanut butter, nuts and fatty fish (like sardines)
- These fats protect the heart and can help lower cholesterol

b. Bad dietary fats

- These fats are fats that can be seen, i.e. oil, butter, margarine, chicken skin and fat on meats
- Think about the fats that cannot be seen such as those found in milk, cream, cheese, cakes, biscuits, snack
 foods, fast food and sausage meats. These tend to be 'saturated fats'. This type of fat usually makes up more
 than half of the fat that a person eats
- Saturated fat is usually found in food from animal sources. It's found in pig fat (lard), butter, hard margarine, cheese, egg yolks, whole milk and anything that contains these ingredients, such as cakes, chocolate, biscuits, pies and pastries. It's also the white fat found on red meat and underneath chicken skin
- This type of fat leads to cholesterol levels going up and makes a person's chances of developing heart disease go up

4. Where is cholesterol found?

Cholesterol is mostly found in foods that come from animals such as eggs, meat, fish, dairy products and butter. It is also found in foods made with butter like cake, cookies and biscuits. Cholesterol is not found in fruit and vegetables.

5. How can a person tell if they have too much cholesterol in their bloodstream?

If a person has high cholesterol they usually won't know about it as in most cases there are no signs or symptoms. High cholesterol is not something that one can see or feel. The only way for a person to know if they have high cholesterol is if they have a test done at the clinic. Some people also get hard spots that look like pimples on their eyelids which can be a symptom of cholesterol.



6. How is cholesterol measured?

A simple blood sample taken through a finger-prick test is all that is needed to measure the overall (good and bad) cholesterol level. Sometimes a larger blood sample will be needed, so this blood will be taken from a vein in the arm and tested by the laboratory. The laboratory is able to tell how much 'good' and 'bad' cholesterol there is in the bloodstream. The finger-prick test is a screening test to look for high cholesterol in the bloodstream.

7. Why should a person have their cholesterol tested?

Most people with high cholesterol feel perfectly healthy – there are usually no warning signs of high cholesterol levels. The only way to find out is to test for it. All adults should know their cholesterol level and have it tested as advised by their healthcare worker. Older persons should speak to their healthcare workers about having their cholesterol levels checked regularly.

8. Can cholesterol be treated?

The first step should always be to make sure a healthy diet is eaten. The main focus should be on lowering how much bad dietary fat is eaten, especially saturated fat. Eating less red meat and cooking without oils is a good place to start. Eating lots of fresh vegetables and fruit will also help [see Lesson 2.2 on Healthy Eating].

While it is always important to eat a healthy diet and to exercise, in some cases, diet and exercise are not enough to lower cholesterol, so medicines can be given to help lower the level of cholesterol.



	Group Exercise
Answer the following questions.	
Explain what causes high cholesterol.	
2. What can high cholesterol lead to?	
2. However high abole stored has recovered and	
3. How can high cholesterol be prevented?	
4. What are examples of good and bad dietary fats?	

	Group Exercise
5. How can a person find out if they have high cholesterol?	
6. What kind of a diet and lifestyle should a person follow if they have high che	blesterol?

AIM OF THE LESSON

Lesson 5.4 aims to share information on heart attacks.

Learning Outcomes

By the end of this lesson learners should be able to:

- Explain what a heart attack is and who would be at risk of a heart attack
- Show an understanding of how to reduce the risk of heart attacks occurring
- Show an understanding of the symptoms of a heart attack
- Show an understanding of emergency procedure in the event of a heart attack

Lesson Contents

- What is a heart attack?
- Signs and symptoms of a heart attack
- What puts a person at risk of having a heart attack?
- How to reduce the risks of having a heart attack?
- · Emergency treatment for heart attacks

References

- 1. Health 24. Heart Attack. 2000 2011. Available from: http://www.health24.com/medical/Condition_centres/777-792-812-1728.asp
- 2. The Heart and Stroke Foundation South Africa. Heart Attack. 2006-2011. Available from: http://www.heartfoundation.co.za/hearteducation/heartcondition.htm

Your role as a CCG

Your role as a CCG is to discuss with your clients the importance of knowing what are the risk factors for a heart attack; what the signs and symptoms are and how to lower the risk for a heart attack, including not smoking, healthy eating and exercising. You should also use the opportunity to talk to your clients about the importance of getting medical help as quickly as possible if they experience any of the symptoms.

1. What is a heart attack?

A heart attack happens when an artery carrying blood and oxygen to the heart muscle gets blocked. If the blood supply is cut off, part of the heart muscle may not get oxygen and can become permanently damaged.

2. What are the dangers of a heart attack?

Heart attacks can lead to serious health problems. The damage that a heart attack can cause to the heart muscle could lead to:

- The heart not beating properly
- The heart not being able to pump blood around the body properly

If one of the larger arteries is blocked, it could lead to a serious heart attack or even death.

It is very important that if someone is experiencing any of the symptoms listed below, that they get medical help immediately.

3. What puts a person at risk of having a heart attack?

A heart attack is much more likely to happen when the blood vessels have become narrowed. This usually happens over a period of many years. The blood vessels are narrowed by fatty spots [see Lesson 5.3 on Cholesterol] that form on the side of the blood vessels. There are some things that make this happen more easily:

- · Family history of heart disease
- Smoking
- · High blood pressure
- Poor diet
- · High cholesterol
- Diabetes
- · Lack of exercise
- Obesity/overweight
- · Being stressed

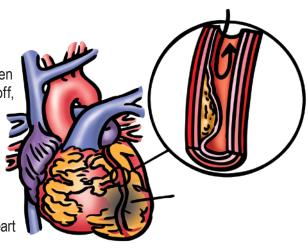
Someone can have a heart attack at any time of the day or night, when they are either resting or being active. Occasionally, a heart attack can be brought on when a person is doing energetic activities that they are not used to, or by physical or emotional stress. If a person starts doing any exercise, they should always start slowly and then build up. Never do too much, too soon.

How can the risk of heart attack be reduced?

There are many things that a person can do to reduce their risk of having a heart attack:

· Stop smoking



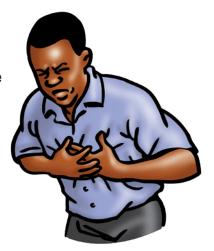


- Lower high cholesterol and avoid fatty foods in the diet [see Lesson 2.2 on Healthy Eating and Lesson 5.3 on Cholesterol]
- Lower high blood pressure [see Lesson 5.1 on High Blood Pressure]
- Control blood sugar levels if diabetic [see Lesson 5.2 on Diabetes]
- Be physically active everyday; doing at least 30 minutes of physical activity 3 to 4 times a week can help lower blood pressure, lower cholesterol and keep weight at a healthy level [see Lesson 2.3 on Exercise]
- · If overweight then lose weight
- Control stress levels
- · Reduce the amount of alcohol that a person drinks

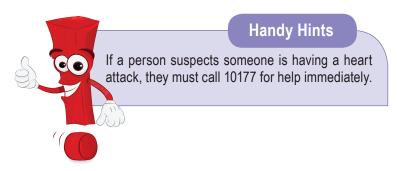
4. What are the symptoms of a heart attack?

The symptoms for heart attacks are:

- Heavy pressure, tightness, crushing pain (like something heavy on the chest) in the centre of the chest. This may feel like indigestion (upset stomach), spread to shoulders, arms, neck or jaw and/or last for more than 15 minutes. It may stop or weaken and then return
- · Feeling sweaty or breathless
- · Feel sick or vomiting
- · Feeling very anxious
- · Feeling faint or light-headed
- · Shortness of breath
- · Feeling tired



The symptoms of a heart attack can come on suddenly, but sometimes the pain develops more slowly. Sometimes the person may not have any symptoms at all, especially if they are elderly or have diabetes.



5. What to do if someone is having a heart attack?

If a person suspects that someone is having a heart attack, they must call for medical help immediately. While waiting for the ambulance to arrive they should also do the following:

- · Tell person to stop all physical activity
- · Loosen tight clothing especially around the chest area
- Help the person into a comfortable position
- · Cover with a light blanket
- · Talk to them and try to keep them calm while waiting for the ambulance

6. If there are signs of a heart attack, how will the person get tested?

Once the person has been taken to the clinic or hospital, they will have tests to see if a heart attack has actually happened. Some tests are done at the hospital and others can be

done by medical staff in the ambulance on the way to hospital. Sometimes they will place a few wires on the person's chest to watch how the heart is beating for a few minutes; this is called an ECG test. This does not hurt at all.

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Role Play

7. How are heart attacks treated?

The doctors will decide what treatment the person will receive. The person may need long-term care after a heart attack. Most heart attacks can be treated successfully if the person gets medical help as soon as possible. The sooner they receive treatment, the more effective it will be.

Role play the following.		
1. One person in the group is having a heart attack. What should a CCG do?		

AIM OF THE LESSON

Lesson 5.5 aims to share information on strokes.

Learning Outcomes

By the end of this lesson learners should be able to:

- Explain what is a stroke and who would be at risk
- Explain the signs and symptoms of a stroke
- · Show an understanding of how to reduce the risk of stroke
- · Show an understanding of emergency procedure in the event of a stroke

Lesson Contents

- Stroke, signs and symptoms
- · Emergency treatment for a stroke patient

References

- 1. National Department of Health. Stroke. South Africa. Undated. Available from: http://www.doh.gov.za/diseases.php?type=55
- 2. Health 24. About Stroke. 2000 2011. Available from: http://www.health24.com/medical/Condition_centres/777-792-822-1847.asp
- 3. The Heart and Stroke Foundation South Africa. Heart Attack. 2006-2011. Available from: http://www.heartfoundation.co.za/stroke/stroke.htm

Your role as a CCG

Your role as a CCG is to discuss with your clients the importance of knowing what the risk factors are for a stroke; what the signs and symptoms are and how to lower the risk for a stroke, including not smoking, healthy eating and exercising. You should also use the opportunity to talk to your clients about the importance of getting medical help as quickly as possible if they experience any of the symptoms.

1. What is a stroke?

A stroke is what happens when the blood supply to part of the brain is cut off. Blood carries essential food and oxygen to the brain. Without a blood supply, brain cells can be damaged or destroyed and won't be able to do their job.

The brain controls everything the body does and so damage to the brain will affect how the body works. For example, if a stroke damages the part of the brain that controls how the arms and legs move, then the arm and leg movement will be affected. The person may not be able to move them very well. A stroke can also affect how a person thinks, learns, feels and speaks. Living in a healthy way will help prevent a stroke. That is why it is important for people to follow a healthy lifestyle.

2. What are the dangers of having a stroke?

A stroke can be severe and cause a lot of damage like loss of use of an arm or speech can be very badly affected. Strokes can lead to people being paralysed and even in death.

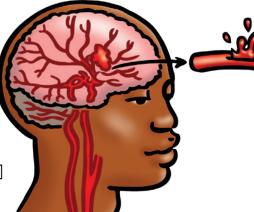
3. What are the common risk factors for a stroke?

- High blood pressure [see Lesson 5.1 on High Blood Pressure]
- High cholesterol [see Lesson 5.3 on Cholesterol]
- Smoking
- Diabetes [see Lesson 5. 2 on Diabetes]
- Increasing age

How will changing the way a person lives lower the risk of stroke?

Living a healthy lifestyle will help reduce the risk of stroke. This means that a person can reduce the risk of having a stroke by watching what they eat, drink, how much they exercise and by not smoking. Everybody should also get their blood pressure checked regularly.

- What is eaten: A diet high in fatty food causes cholesterol to build up in the blood and the blood vessels will become narrow or blocked. Too much salt can lead to high blood pressure
- **Exercise**: Not doing any exercise can lead to lots of health problems. Regular exercise helps keep the heart and bloodstream healthy [see Lesson 2.3 on Physical Exercise]
- **Smoking:** Amongst other health risks, smoking also increases the risk of having a stroke. The chemicals in tobacco smoke are absorbed into the body, damaging blood vessel walls
- Stress: Stress can cause high blood pressure, which in turn is a risk for stroke
- **Too much alcohol:** Regular heavy drinking raises blood pressure. Drinking a lot of alcohol in a short time can cause a blood vessel in the brain to burst



A person's risk for stroke can be lowered by:

- Having their blood pressure [see Lesson 5.1 on High Blood Pressure], blood sugar [see Lesson 5.2 on Diabetes] and cholesterol [see Lesson 5.3 on Cholesterol] checked regularly
- · Stop smoking
- Exercise regularly [see Lesson 2.3 on Physical Exercise]
- · Avoid heavy drinking
- Cutting down on salt and fatty foods and eating plenty of fruit and vegetables [see Lesson 2.2 on Healthy Eating]

4. What are the signs and symptoms of a stroke?

There are five major signs for a stroke:

- a. Sudden numbness or weakness of the face, arm or leg, especially on one side of the body. The person may find it difficult to move on their own. There may be a tingling sensation in the part of the body that is affected
- b. Sudden confusion or trouble speaking or understanding. Sometimes weakness in the muscles of the face can cause drooling
- c. Sudden trouble seeing in one or both eyes
- d. Sudden trouble walking, dizziness, loss of balance
- e. Sudden, severe headache without a cause

If any of the symptoms mentioned above suddenly appear, the person must get immediate medical attention.

Many people who are having a stroke want to go home to rest. They should not go home. They should be taken to the hospital immediately for treatment.



Handy Hints

If a person suspects someone is having a stroke, they must call 10177 for help immediately.

5. What to do if someone is having a stroke?

- Call for medical help immediately
- Let the person lie down or sit against pillows, whichever is more comfortable
- If the person is unconscious lie them on their side
- Try to keep them calm. Many patients become very frightened as they don't know what is happening to them

6. What tests can be done to check if a client has had a



stroke?

The doctor will ask about the person's medical history and they will also do some tests. These tests will include a physical examination; the doctor will measure their blood pressure and take their pulse, as well as making sure their heart and lungs are alright. The doctor will also want to take a look at what is happening inside the brain; to do this they will 'scan' the brain. The scan is a special kind of x-ray that takes pictures of the brain. It lets the doctor take a look at the inside of the brain in far more detail than an ordinary x-ray.

7. How are strokes treated?

People who have had strokes may get different treatments. The treatment a person receives will depend on the type of stroke they have had and how severe it is, and what other health problems they may have.

Rehabilitation is an important part of stroke treatment – it's the process of overcoming or learning to cope with the damage a stroke has caused. After a stroke, the person may need to relearn how to do simple things again, like walking, using their arms and even doing up a button. They might also need to learn new ways to cope with the damage a stroke has caused. But with determination and support from family, friends and the staff at the hospital or clinic, with rehabilitation, these actions can be learnt again. Sometimes a person can regain all their movement or speech, but sometimes they may be left with permanent damage.

It will be difficult to tell how people will recover after a stroke; most people will make the most recovery in the early weeks and months following the stroke. However, recovery can continue after this time. The rehabilitation programme may involve physiotherapists, speech and language therapists as well as doctors and nurses.

Group Discussion
Divide into groups and take 15 minutes for each group to discuss their topic and then give feedback to the larger group.
Group 1: Explain who is at risk of a stroke.

	Group Discussion
Group 2: Discuss what lifestyle factors increase the risk of a stroke and how this	can be changed to prevent strokes.
Group 3: How will a person know when someone is having a stroke?	
Crown 4. Dala play for the class what should be done when company is begin	ag a atroko
Group 4: Role play for the class what should be done when someone is having	ig a stroke.

AIM OF THE LESSON

Lesson 5.6 aims to share information on raising awareness about cancer.

Learning Outcomes

By the end of this lesson learners should be able to:

- Discuss the factors that can contribute to breast cancer
- Show how to do a breast self-examination and explain the importance of early detection
- Discuss the risk factors for cervical cancer.
- Discuss causes of cervical cancer
- Identify the signs and symptoms of cervical cancer
- Explain what a PAP smear is and how the client can access this service
- Discuss prostate and testicular cancer
- Show an understanding of the signs and symptoms of prostrate and testicular cancer
- Explain self-examination of the testicles and the importance of early detection

Lesson Contents

- Breast cancer
- · Breast self-examination
- Cervical cancer
- Prostate cancer
- Testicular cancer
- · Testicular self-examination

References

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Your role as a CCG

Your role as a CCG is to discuss with your clients the importance of doing monthly breast self-examination and how to do it; the importance of going for PAP smear tests; the importance of men over 50 years old going to the clinic every year for a prostate examination and the importance of doing monthly testicular self-examination and how to do it. You should also use the opportunity to talk to your clients about the importance of a healthy lifestyle, including healthy eating, exercising and not smoking. You should also talk to your clients about the importance of getting medical help as quickly as possible if they experience any of the symptoms discussed in this lesson.

1. What is cancer?

The human body is made up of billions of cells that grow, divide, and then die in an organised way. Cancer is a serious disease that happens when something goes wrong with this system, causing the cells to divide and grow in an uncontrolled way. These sick cells spread to other parts of the body. If it is not treated it can lead to death.

In this lesson 4 types of cancer will be discussed:

- a. Cancer of the breast
- b. Cancer of the cervix
- c. Cancer of the prostate gland
- d. Cancer of the testicles

2. What is breast cancer?

Breast cancer is a cancer that starts in the tissues of the breast in both women and men [see Lesson 1.1 on The Human Body].

Who can get breast cancer?

- Women
- People older than 50
- People that have other family members who have had breast cancer (like a mother, aunt or sister)
- Women that have never had children or who have had their first child after the age of 30 years
- People that have been given hormone treatments
- People who smoke [see Lesson 5.9 on Substance Abuse]
- People who drink heavily
- · People that are overweight

What are the symptoms of breast cancer?

In the early stages breast cancer usually does not cause symptoms. A lump may be too small to feel or to cause any unusual changes that they can notice.

This is why regular breast examinations are important. As the cancer grows, symptoms may include:

- · Lump in the breast or the armpit that is hard, has uneven edges, and usually does not hurt
- Change in the size, shape, or feel of the breast or nipple for example, there may be redness, dimpling, or puckering that looks like the skin of an orange
- Fluid coming from the nipple may be bloody, clear to yellow, green, and look like pus
- · Pain in the breast
- · Pain in the nipple or the nipple turning upwards

If the client says that they have any of these symptoms, they must to go the clinic as soon as possible for further examination and tests. As with other cancers, it is better for breast cancer to be found and treated as early as possible.

How can breast cancer be found early in women?

There is a very simple way to detect breast cancer early. Every woman should check her breasts every month by doing breast self-examination. This check should be done one week after a menstruation period has ended.

How to do a breast self-examination?

LOOK

 The woman should sit on the bed or a chair in front of a mirror, with hands raised above the head ①

• The woman may be able to see a lump ②

Advise the woman to look for:

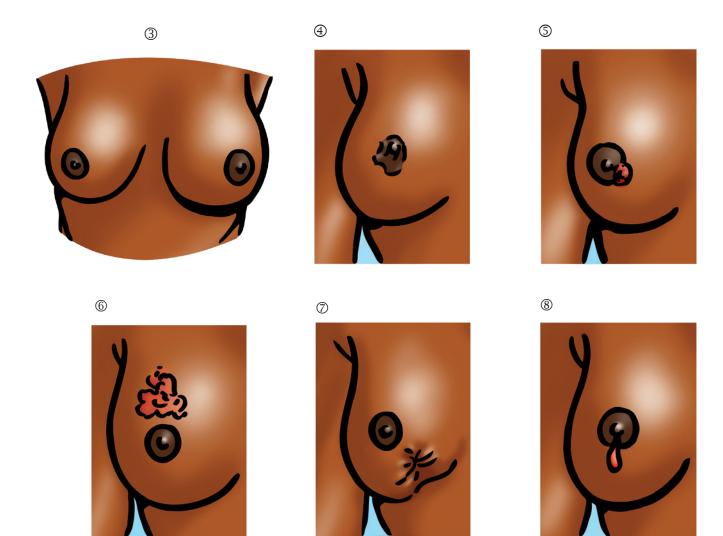
Differences in breast size and shape.
 Remember that most women have one breast slightly larger or a different shape than the other. This is normal, it is only if it changes that a person has to worry ③

 Is the nipple turned upwards and, if so, is it one or both sides?

- Is there swelling? ⑤
- Is there any redness of the skin? ⑥
- Is the skin smooth or are there any dents in the skin? ⑦
- Is there a discharge from the breast ®







FEEL

Advise the woman to:

- Lie on her back with a pillow under the chest on the side of the breast she is checking. Put the arm under the head and use the other hand to feel the breast
- Use a flat hand and with her fingers start at the side of the breast under the armpit. Move the hand in small circles around the breast until she reaches the middle of the breast and the nipple. She must feel around and under the nipple too
- er the way the lump feels from the month before she
- If she feels a lump, or a change in the size of the lump or the way the lump feels from the month before, she should report to the clinic to have it checked as soon as possible



How will they test for breast cancer?

If the client goes to the clinic about a breast lump, the healthcare worker will take a history and do a breast examination. The doctor may send the client for a special type of x-ray called a mammogram, or may even inject the lump with a needle to take out some fluid for testing.

What is the treatment for breast cancer?

The treatment depends on the type of cancer and if it has spread.

Treatments may include:

- · Medicines to kill cancer cells, which is called chemotherapy
- A type of x-ray treatment to destroy cancerous tissue, which is called radiation therapy
- Surgery to remove the lump or the whole breast if the cancer has spread
- · Hormone treatment

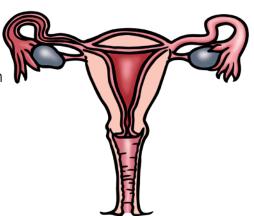
Cancer treatments may often make people feel tired and sick. It is important that if a person has these symptoms while they are being treated, they must tell their healthcare worker so that they can help them deal with this.

Support Groups

If a person has breast cancer it is a good idea for them to join a support group, as talking about the disease and treatment with others who share common experiences and problems can be helpful. In South Africa there is an organisation called CANSA (Cancer Association of South Africa) which can help and advise all breast cancer sufferers [see Lesson 6.8 on Support Groups].

3. What is cervical cancer?

The cervix is the mouth of the womb (uterus) [see Lesson 2.1 on The Human Body]. Women can get cancer of the cervix which is very serious.



Who can get cervical cancer?

Any woman can get cancer of the cervix, but it is more common in women who:

- Have an infection with a virus called Human Papilloma Virus which is passed during sexual intercourse [see Lesson 4.8 on STIs]
- Started having sex at an early age
- Have more than one sexual partner
- Are HIV-positive [see Lesson 4.1 on HIV and AIDS]
- Had children before the age of 17
- Smoke [see Lesson 5.9 on Substance Abuse]



Clients should be encouraged to go for an HIV test so that they know their HIV status.



What are the symptoms of cervical cancer?

Most of the time, early cervical cancer has no symptoms. Symptoms that may occur can include:

- Abnormal vaginal bleeding
- Bleeding that occurs between regular menstrual periods
- Bleeding after sexual intercourse, douching, or a pelvic examination
- Menstrual periods that last longer and are heavier than before
- Bleeding after going through menopause
- · Increased vaginal discharge
- Pain in the pelvis
- · Pain during sex

How do they test for cervical cancer?

The clinic can do a test called a PAP smear test to check for cervical cancer. If this test is abnormal then the doctors at the hospital will do more tests.

What is a PAP smear test?

A PAP smear test is a way to examine cells collected from the mouth of the womb. The main purpose of the PAP smear test is to find cancer or abnormal cells that may lead to cancer. It can also find out if there is an infection.

How often should a woman have a PAP smear test?

It is very important for a woman to have regular PAP smear tests. This will make sure that if there are any abnormal cells or cancer, this can be treated as soon as possible.

In South Africa, the National Department of Health has a policy that:

- Women of child bearing age should go for PAP smear tests according to the National Contraceptive Policy
- A woman should have 3 free routine PAP smear tests at 10 year intervals e.g. 30 years, 40 years and 50 years
- HIV-positive women should have annual PAP smear tests
- Women that are screened for the first time at age 55 or more, will have only one PAP smear test, if first test
 is normal

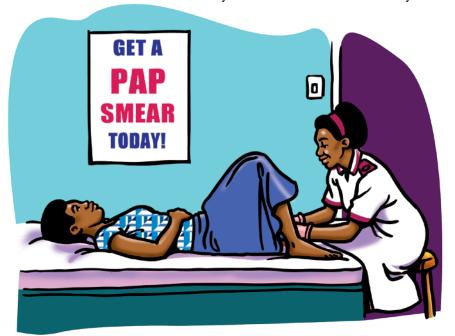
Why is a PAP smear test important?

A PAP smear test is an important part of a woman's routine healthcare because they can find abnormalities that may lead

to cancer of the cervix. These abnormalities can be treated before cancer develops. Most cancers of the cervix can be prevented if women have PAP smear tests regularly. Also, as with many types of cancer, cancer of the cervix is more likely to be treated successfully if it is detected early.

How is a PAP smear test done?

A PAP smear test can be done in a doctor's consulting room, a clinic, or a hospital. The doctor or nurse will put a small wooden spatula (flat blade) into the vagina and scrape off some cells from the cervix. It is not painful. These cells are then sent to the laboratory for examination.



When is the best time to have a PAP smear test?

- A woman should have this test when she is not having a period
- The best time is between 10 and 20 days after the first day of her last period
- · She should avoid using spermicidal foams (creams) because they may wash away or hide abnormal cells
- After the test, she can go back to her normal activities and return to work immediately

PAP smear tests can be requested at any clinic or hospital

What is the treatment for cervical cancer?

Treatment of cervical cancer depends on the type of cancer and how far it has spread. It also depends on the age of the woman and if she still wants to have children.

The doctors may decide to:

- Cut out the cancer from the cervix
- Give a type of x-ray treatment to destroy cancerous tissue called radiation
- · Give medicine to kill the cancer
- · Remove the womb if the cancer has spread

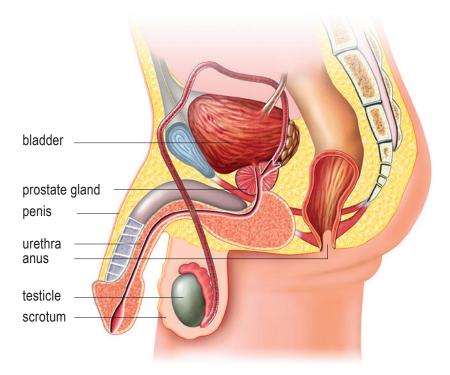
4. What is prostate cancer?

Prostate cancer is cancer that starts in the prostate gland. The prostate gland is a small structure that makes up part of a man's reproductive system [see Lesson 2.1 on The Human Body]. It wraps around the tube that carries urine out of the body.

Who can get prostate cancer?

Any man can get cancer of the prostate gland, but it is more common in men who:

- Are older than 60
- Have a father or brother who has had prostate cancer
- Drink too much alcohol
- Smoke [see Lesson 5.9 on Substance Abuse]
- Are overweight



What are the symptoms of prostate cancer?

- Urinary problems
 - Having a hard time starting or stopping the urine flow
 - Needing to urinate often, especially at night
 - Weak flow of urine
 - Urine flow that starts and stops
 - Pain or burning during urination
- · Difficulty having an erection
- Blood in the urine or semen
- · Frequent pain in the lower back, hips, or upper thighs

If a man is experiencing any of these symptoms, he should go the clinic for further examination and tests as soon as possible.

Also, from 50 years old, a man should go to the clinic every year for an examination to see if his prostate is enlarged.

How will they test for prostate cancer?

A blood test can be done or a small piece of the prostate gland can be removed and sent for tests.

What is the treatment for prostate cancer?

There are many ways to treat cancer of the prostate, depending on age, whether the cancer has spread, and other illnesses that the man may have.

These include:

- · An operation to remove the prostate gland
- Hormone treatment
- A type of x-ray treatment called radiation therapy
- Medicines to kill cancer cells, which is called chemotherapy

5. Testicular cancer

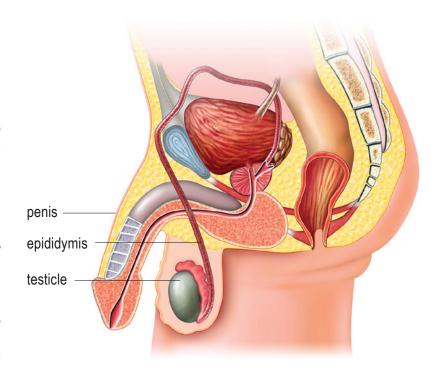
What is testicular cancer?

Testicular cancer is cancer that starts in the testicles, the male reproductive glands located in the scrotum.

Who can get testicular cancer?

Any man can get cancer of the testicles, but it is more common in men who:

- Are born with abnormalities of the testicles, penis, or kidneys
- Have a history of a testicle which does not come down at birth
- Are HIV-positive [see Lesson 4.1 on HIV and AIDS]
- · Have a family history of testicular cancer



What are the signs of testicular cancer?

There may be no signs. Some men have the following:

- · A painless lump or swelling in a testicle
- · Pain or discomfort in a testicle or in the scrotum
- · Any enlargement of a testicle or change in the way it feels
- · A feeling of heaviness in the scrotum
- · A dull ache in the lower abdomen, back, or groin
- · A sudden collection of fluid in the scrotum



If the client has any of these signs, they must to go the clinic as soon as possible for further examination and tests. As with other cancers, it is better for the cancer to be picked up and treated as early as possible.

How can testicular cancer be found early?

A man should check his testicles every month. After a warm bath, stand in front of the mirror and do the following:

- Support each testicle with one hand and examine it with the other
- Gently roll each testicle between the thumb and fingers. Testicles should feel firm and smooth, about the consistency of a hard-boiled egg without the shell

 The epididymis is a rope like structure attached to the back of the testicle. This structure is not an abnormal lump

 Feel for firm masses, lumps, or nodules in the testicle. In cancer, these lumps often are painless, but some men notice some pain coming from the affected testicle

 He should get to know the normal size, shape, and weight of each testicle and epididymis. If a change does happen, this will help the man with recognising the change from one self-examination to the next

If the man finds a lump on his testicle or any of the other signs
of testicular cancer listed above, he must go to the clinic as soon
as possible



How will they test for testicular cancer?

If it is suspected that a man may have testicular cancer, the following tests may be done:

- Blood tests
- **Ultrasound** (this is a scan of the testicle)
- Biopsy (a small cut is made and the whole testicle or a piece of the testicle is removed and sent for tests)

What is the treatment for testicular cancer?

The treatment of testicular cancer depends on the type of cancer and if it has spread, but may include the following:

- Surgery to remove the lump or the whole testicle
- Medicines to kill cancer cells, which is called chemotherapy
- A type of x-ray treatment called radiation therapy

Cancer treatments may often make people feel tired and sick. It is important that if a person has these symptoms while they are being treated, they must tell their healthcare worker so that they can help them deal with this.

Role Play

Divide into pairs. The CCGs should practice advising a woman how to do self-examination of the breast, followed by advising a man on checking for testicular cancer.

AIM OF THE LESSON

Lesson 5.7 aims to explore the topic of mental illness.

Learning Outcomes

By the end of this lesson learners should be able to:

- Show an understanding of what mental health is
- · Identify broad signs and symptoms of mental illnesses
- Show an understanding of the cultural issues associated with mental illness
- Explain what services are available to support clients to cope with mental illness

Lesson Contents

- · Causes of mental illness
- Signs of mental illness
- · Cultural issues affecting patients with mental illness
- Referral of patients with mental illness

References

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Your role as a CCG

Your role as a CCG is to help your clients understand that mental illness is a medical condition and that people with mental illness should be provided with care and support. You should help your client recognise the signs for mental illness. You should also make sure that clients with mental illness are referred to the clinics for proper treatment.

1. What is mental illness?

Mental illnesses are medical conditions that affect a person's thinking, feeling, mood, ability to live and work with others, how they live and their every day functioning. Just as cholesterol is a disease that can affect the heart, mental illnesses are medical conditions that often result in people not being able to cope with everyday life. Often people with mental illness are said to be cursed and are not given the treatment that they need.



2. Causes of mental illness

There are lots of reasons why someone might develop a mental illness. Nobody is sure of the exact cause of mental illness. They might inherit it from their family, it might be because of their lifestyle or it might be because of things that have happened to them in the past. Usually it is a combination of all of these.

3. Signs of mental illness

Abnormal behaviour or thoughts that keep changing which include:

- · Losing interest in things that the person used to enjoy doing
- Suddenly not doing well at work or in school
- Changes in mood that are very extreme or fast and not how the person would normally behave
- Someone hurting themselves, such as cutting themselves
- Changes in eating habits and/or appetite: over-eating, bingeing, not eating
- · Not wanting to have sex, or wanting a lot more sex
- · Having problems sleeping
- Feeling anxious, looking or feeling 'jumpy' or upset, sometimes including panic attacks
- Feeling tired and not having energy
- Not wanting to spend time with other people; spending too much time in bed
- Wanting to go out a lot more than usual, needing very little
 sleep, having lots of energy, making new friends very quickly,
 trusting strangers or spending lots of money
- Hearing and seeing things that others don't
- Other differences in the way the person sees what's happening around them; for example, mistakenly believing that someone is trying to harm them, is laughing at them, or trying to take over their life



4. What can be done to refer clients with mental illness?

There are many different types of mental illness, and they require different treatments, including medicines. It is important that if a CCG suspects the client may have a mental illness that they do the following:

· Refer the client to the clinic to be seen and examined by a healthcare worker

 Encourage a family member or caregiver to go to the clinic with the client so that they can give the healthcare worker information on the client.
 Sometimes the mentally ill client can't remember or can't give good information

 Refer the client and family to the organisations that may offer extra support e.g. South African Depression and Anxiety Group (SADAG) on 0800 205 026 or their Suicide Crisis Line on – 0800 567 567 or SMS 31393

 The client and family can join a support group for families with similar problems which will give them an opportunity to share problems and get advice

 Refer the client to the social worker to get assistance in the form of grants



5. What cultural issues are associated with mental illness?

Mental illness is not always well accepted. Sometimes the mentally ill client is hidden away from the community because the family is ashamed. The mentally ill client could also be locked away because their behaviour towards themselves or the community may be unacceptable.

This is not the right way to handle this. The client should be referred to the clinic where they will be examined and given treatment and medicines to help their illness. If the doctors feel the client would be better in a hospital then they will refer them there.

How to reduce stigma in mental illness

About 20% (one person in every five) of people will experience some type of mental illness sometime in their lives. It is important that individuals and communities are educated about what stigma is and how it can be reduced [see Lesson 4.12 on Stigma and Discrimination].

Group Discussion Divide into groups and discuss the following: 1. What signs might indicate that a person is mentally ill? 2. What happens when communities have negative attitudes towards mentally ill people? 3. How can a CCG help to reduce this negative effect?

AIM OF THE LESSON

Lesson 5.8 aims to share information on domestic violence.

Learning Outcomes

By the end of this lesson learners should be able to:

- · Identify the signs of domestic violence
- Show a basic understanding for the types, causes, prevention and procedures for reporting domestic violence
- Show an understanding of victim empowerment

Lesson Contents

- · The signs of domestic violence
- · Types of domestic violence
- · Causes of domestic violence
- · Prevention of domestic violence
- Procedures to follow if a person is a victim of domestic violence
- Victim empowerment

References

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Your role as a CCG

Your role as a CCG is to know what the signs of domestic violence are and to help your clients who are being abused in their domestic relationships understand what services are available to them. You should help your client recognise the signs for domestic violence. You should also make sure that clients who are abused are referred to the proper places for help and support.

1. Domestic violence

Domestic violence is when one person in a close relationship hurts another. This can happen in relationships between men and women or between two women or between two men. The lives of children, individuals, families and communities are seriously affected during domestic violence.

What is a domestic relationship?

A person can have a domestic relationship with:

- · Someone they are or were married to
- Their parents or guardian
- Any family member(s); including their own child or children
- Anyone they have lived with, whether they were married to that person or not
- Their life partner
- · Someone they went out with, even for a short time, or had sex with; or someone with whom they share a child

2. Types of domestic violence

a. Physical abuse is when there is any physical contact which can cause pain, injury, feelings of fear, or other physical suffering or bodily harm. Physical abuse includes hitting, slapping, punching, choking, pushing, and other types of contact that result in physical injury to the person. Physical abuse can also include behaviours such as not letting the person get medical care when needed, not allowing the person to sleep, eat or drink water. It can also include forcing the person to take drugs or alcohol against their will.

b. **Sexual abuse** includes acts by someone such as sexual penetration, touching the private parts (breast, vagina, penis, or anus) or asking the victim to touch theirs; making sexual comments about the victim; making them watch them masturbate; rubbing their body against the victim in a sexual way or making them look at sexual pictures or videos.

c. Rape is an act of violence, control and anger. It is a form of sexual abuse. It uses sexual acts including sexual penetration as a weapon. Child and baby rape is increasing due to the myth that having sex with



a virgin will cure men from HIV and AIDS. Raping lesbians is referred to as correctional rape as this is believed to convert them to heterosexuality. These myths are not true and communities need to be educated on this. These are the worst kind of criminal acts.

Reactions following a rape include feelings of shock, disbelief, numbness, fear, guilt, self blame and sadness.

If the caregivers, police or others respond in an uncaring way, the person may feel abused and ill-treated again.

Most sexual abusers are male, but some are female. It is not true that sexual abuse happen because a man cannot control his sexual urges.

To prevent contracting HIV as a result of being raped, post exposure prophylaxis (PEP) can be taken by women and men. (PEP involves a person taking ARV medicines as soon as possible after the person may have been exposed to HIV to try to reduce the chance of them becoming HIV-positive).

If any of the above things have happened to an abused person it usually makes them feel horrible. They need to remember, it is not their fault; the abuser is responsible for the abuse. It does not make them a bad person and they do not deserve to be treated in this way.

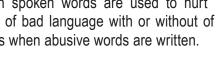


Many children and young people experience sexual abuse. It is against the law. The abuser may tell the victim that it is 'normal; do not tell anyone or it our secret'. The abused person should not accept this. They need to talk to someone to get help and be safe.

d. Emotional abuse or mental abuse includes making the person feel ashamed or putting the person down in private or in public; controlling what the person can and cannot do; not giving information to the person; deliberately doing something to make the person feel small or embarrassed; not letting the person spend time with friends and family; blackmailing the person by either threatening to harm themselves or others or harming others when the person shows independence or happiness; or not giving money or assisting the person in other necessary ways.

People who are being emotionally abused often feel as if they do not own themselves; they may feel that their partner has nearly total control over them. Women or men undergoing emotional abuse often suffer from depression, which puts them at an increased risk for suicide, eating disorders, drug and alcohol abuse. It can also include hurting children or pets, in order to cause psychological harm to the person.

e. Verbal abuse is when spoken words are used to hurt someone. It is the use of bad language with or without of swear words. It includes when abusive words are written.



f. **Economic abuse** is when one partner has control over the other partner's money or source of income. Economic abuse may involve preventing a spouse from earning money, limiting the amount of money used by the person, or by taking the other person's money. The reason behind preventing a spouse from earning money is to stop them from being able to take care of themselves, thus forcing them to depend on the abuser financially, which includes preventing the person from going to school or university, finding employment, maintaining or advancing their careers.



3. The effects of domestic violence on children

A child who has been abused will have problems developing, as well as mental problems. The child will also have problems emotionally, with people in the community, problems with the way they behave and learning difficulties. Emotional and behavioural problems include increased aggressiveness, anxiety, and changes in how a child spends time with friends, family, and authorities. Depression can also follow due to upsetting and painful experiences as well as self-esteem issues. Problems with attitude and learning at school can start developing, along with not developing skills such as problem-solving.



4. Factors that may cause domestic violence:

- Family structure, stress and social learning (they may have had an abusive parent)
- · Substance abuse may also cause domestic violence
- Dependency, where women who mostly rely (depend) on the spouse for money (e.g. homemakers/housewives, women with handicaps, the unemployed), and who are responsible for looking after their children, are afraid of how they will be able to care and provide for themselves and their families if they leave the marriage or their partner who provides all of these. Dependency means that they have fewer choices and few ways to help them cope with or change their partners behaviour
- Social stresses, due to not having enough money or other such problems in a family may further increase tension. Families and couples who are poor may be more likely to have domestic violence, because of increased stress and fights about money and other matters
- Mental illnesses are sometimes related to domestic violence

5. What can the CCG do to help the abused person?

- The CCG should tell the abused person that they are worried about them and ask if they are okay
- The CCG should let the person know that they believe them by saying something like 'I am glad you told me'
- Do not push them for details
- · Let them know that this happens to other people
- Let them know that they can get help, e.g. support and counselling, medical care and protection against the abuser
- · Report the abuse to the police
- If the person is feeling down and in need of some help to get through the tough situation, they may call Lifeline on their 24 hours Stop Gender Violence helpline 080 015 0150 or Childline South Africa 24 hours 0800 055 555 or 031 312 0904 during office hours (08h00 16h00) if it is a child

6. How can the CCG help to prevent an increase in domestic violence in the community?

It is important to stop domestic violence before it begins. The CCG needs to have an understanding of the factors that affect domestic violence. They should:

 Check for signs of domestic violence at household level during home visits

 Do education on prevention of rape and distribute educational materials in the community. Avoid blaming the victim as they are not to blame

Involve the community in awareness campaigns on domestic violence

 Educate families, individuals and groups of people at the work place, schools and places of worship on prevention of domestic violence

 Those at risk of domestic violence refer to a safe shelter and for crisis care

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7. What are the options if someone is the victim of domestic violence?

The victim has the right to:

- Apply for a protection order at the nearest police station or magistrate's court. The purpose of the protection order is to protect family members against spouse and child abuse from other family members within the household
- Lay a criminal charge at the police station
- · Seek out a shelter
- · Visit a social worker

What is a protection order?

It is an order given by a court once the victim has asked for it, ordering the abuser to stop the abuse. It may
also prevent the abuser from getting help from any other person to commit such acts. An interim protection
order can also be issued by the SAPS (South African Police Services) at any time of the day or night for
the victim's protection. A warrant of arrest (this is a piece of paper which allows the abuser to be arrested
immediately) will also be issued to the victim of abuse. This should be kept with the protection order and given
to the police if the abuser disobeys the protection order

Who can apply for a protection order?

- · Any victim of domestic violence
- Children, and if they are too young, a parent or guardian, or if the parent is the abuser, any person acting on behalf of the child, but with the child's permission
- · A police official on behalf of the victim

What other assistance will the South African Police Services (SAPS) provide?

- a. SAPS will help a person find access to:
 - Medical care
 - Shelter
 - · Victim counselling
- b. SAPS will inform them of:
 - The support services that are available in the area
 - Alternative shelters (if available)
 - Counselling services (if required)
 - Medical help
 - Free services that are available; and the time of day these services are available
- c. SAPS will ensure that a medical officer collects and records any medical evidence in support of a criminal charge.
- d. SAPS will go with them to their home when they need to collect personal belongings, if this is provided for in a protection order that has been issued.

What can be done if a police member fails to fulfil this commitment?

Should a police officer fail to carry out this commitment, it can be reported to the station commissioner at the relevant police station. If the victim is not satisfied with the actions of the station commissioner they may lay a complaint with the Independent Complaints Directorate on 031 310 1300.

What happens if an abuser disobeys a protection order?

The abused person must phone the South African Police Service. Thereafter a statement will be taken from them. They will need to provide the police with the protection order (if it is lost, they can apply at the court for another one). If they are in immediate danger the abuser will be arrested, otherwise the abuser will be given a notice to appear in court the next day.

It is always good to have a crisis plan ready:

- Abused people should look for places where a telephone can be used quickly and easily, and always carry a list of emergency numbers with them
- They need to make sure that the people they usually visit have a copy of the protection order and/or warrant
 of arrest
- They need to put some money in a safe place so that they can use it to take a taxi or bus in case of an emergency. They also need to have an extra set of keys for the house or car. If possible, a set of clothes for themselves (and the children) packed in a bag, and kept in a safe place (for example, at a neighbour's house). If they are planning to leave, it should be when the partner is not around. They should also plan to take their children with them. They need to make sure that they are in possession of essential documents like IDs, the birth certificates of the children, medical aid card, and bank cards
- They should tell the children where to hide if violence is happening or about to happen
- They should tell their family and friends not to tell their partner where they are hiding if they have left home

Group Exercise

In small groups, CCGs should educate each other on the procedures to follow if they find a client that is abused in the home.

8. Social welfare services

Social welfare services assist the victims and families in situations where there is domestic violence. These services can be accessed at the local social welfare office and include the following:

- Creating awareness that violence against women and children is unacceptable
- · Making the address list of shelters and services available to victims of domestic violence
- Providing safe houses or emergency housing for the victims of domestic violence
- Supporting gender equality when delivering services to the victims of domestic violence
- Providing prevention services to help community members survive domestic violence e.g. advice on accessing a protection order
- Providing support in the form of legal information services provided by doctors, lawyers, social workers and community workers
- Providing some counselling services or refer for more in depth counselling
- Providing training so that the community member can develop skills, e.g. how to do bead work, cooking and catering, soap making or gardening. These activities build the self esteem of the victim of domestic violence
- Providing other in depth counselling services, e.g. support groups, hotlines, court advocacy and legal services and group work

9. What is the Victim Empowerment programme?

The Victim Empowerment programme tries to reduce the long-term results of crime by proactively paying attention to the needs of all victims of crime and violence.

Who is a victim?

A victim is any person who suffered physical or psychological harm or economic loss because of the criminal acts of others. It also includes people whose human rights were violated as a result of what someone, usually a person or a group of people in power, did or failed to do.

What is victim empowerment?

Victim empowerment is taking control, having a say, being listened to, being recognised and respected as an individual and having the choices one makes respected by others. It is moving from being a victim to becoming a survivor.

The victim becomes more like he or she was before the violence and is able to learn and grow. Victim empowerment prevents and reduces crime and violence and improves the use of the criminal justice system.

The fight against crime and against the effects of crime is everyone's responsibility. The government is focusing on:

- Encouraging partnerships between various government bodies like the Department of Health and the Department
 of Social Development, and between the state, non-government organisations like the Family and Marriage
 Association of South Africa, (FAMSA), business, volunteers, churches and universities to help them work together
 so that communities know what the plans to fight crime are and they know what victim services are available, like
 SAPS Crimestop on 08600 10111 or the Woman Abuse hotline on 0800 150 150
- Seeing crime as an issue that affects all of society and that it is not just about safety
- Crime prevention rather than crime control

How does the government plan to promote victim empowerment?

- By putting the needs and rights of the victim first. Government and non-governmental organisations offer a number of services for the men, women and children who have been victims of crime and violence. The services include:
 - Counselling services for the victims of rape and domestic violence
 - Prevention and support services for sexual harassment (sexual harassment is any form of behaviour that is
 of a sexual nature and makes the person feel uncomfortable or promises rewards for sex)
 - Pastoral counselling (this is usually counselling offered by the church)
 - Child abuse services
 - Marriage and divorce services
 - Pregnancy services
 - HIV and AIDS services
 - Gay and lesbian services
 - Disability services
 - Substance abuse services
 - Suicide services

- Services for older persons
- · By focusing more on prevention
 - Empowerment of women, e.g. joining women's groups, adult literacy programmes, etc.
 - Advocacy work on rights and responsibilities of vulnerable groups, e.g. educating the community via the churches and traditional leaders
- By promoting public awareness of domestic violence and educating the community on the available resources in the community

Where to find these victim empowerment services?

The services and programmes listed above are mostly offered by non-profit organisations that either have government funding or are endorsed by government. The CCG can ask for a list of service providers from the local social development department offices and local municipalities.



AIM OF THE LESSON

Lesson 5.9 aims to explore the topic of substance abuse.

Learning Outcomes

By the end of this lesson learners should be able to:

- Explain what substance abuse is, its causes, signs and symptoms
- Explain common drugs abused by youth
- · Describe the signs and symptoms of alcohol addiction
- Show an understanding of the effects of substance abuse on the body
- Explain how substance abuse affects relationships with family members
- · Explain ways to prevent alcohol addiction
- Explain where people who are addicted to alcohol can get help and support

Lesson Contents

- · Substance abuse
- Alcohol abuse

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Your role as a CCG

Your role as a CCG is to know what the signs of substance abuse are and to help your clients who may be abusing any substances and their families understand what services are available to them. You should help your clients and their families recognise the signs for substance abuse. You should also make sure that clients with substance abuse problems and their families are referred to organisations and clinics for proper care and treatment.

1. What is substance abuse?

Substance abuse, which includes alcohol abuse and drug abuse, is when someone overuses alcohol or uses drugs that are bad for them. Substances, like alcohol or drugs, can alter a person's thoughts, mood or behaviours. Because the body gets used to the alcohol or the drugs, a person needs more and more alcohol or drugs to get the same feeling. People who find it hard to deal with stress and people who have a parent who uses drugs or alcohol are more likely to drink alcohol and use drugs and therefore are at a greater risk of becoming dependent on it. Young people are often influenced by friends to start drinking alcohol and using drugs. If the alcohol or drug is stopped, the person will start to feel physical signs as the body wants the drug. People sometimes shake a lot, see strange things or sweat a lot at night

when they do not have the drug. People may also become mentally stressed and anxious as they believe they need the alcohol or drugs to be happy and function well. People who abuse substances are also more likely to behave in a careless or reckless way. This may mean that they can increase their risk of getting diseases like HIV by sharing needles or having sex without condoms [see Lesson 4.1 on HIV and AIDS].

Handy Hints

Drinking alcohol heavily in a short period of time, like over a weekend, can be dangerous to a person's health and wellbeing and that of people around them.

2. What are substances that are commonly abused?

The substances can be divided into two groups; legal substances that can be bought at the shop or pharmacy or illegal substances.

a. Examples of legal substances

Alcohol

Alcohol may be bought legally by anyone over the age of 18 years at shops and bottle stores. It is also found in cough mixtures. People do not have to look like they are drunk or behave in a way that shows that they are drunk for them to be using too much alcohol.

- Immediately after drinking alcohol: Alcohol affects the brain and nerves which makes it hard to walk, not see properly, causes nausea, vomiting and eventually sleep
- Using alcohol for a long period of time: Using alcohol over a long time
 causes stomach ulcers, liver problems and mental illness. It can also lead to
 domestic violence and the breakdown of the family



Effects of alcohol

A heavy bout of drinking affects nearly every system of the body for up to 24 hours. This shows how the body reacts to a large dose of alcohol

- 1 Throat and mouth feel dry & scratchy because of dehydration
- 2 It can cause weakening of the heart muscle which may cause the heart to stop beating. Alcohol also helps to cause high blood pressure and a high cholesterol level in the blood
- 3 It causes serious liver problems. One of the effects is that it affects the liver's ability to break down sugar. This leads to a low level of sugar in the blood, which can cause weakness, problems with mood (e.g. becoming irritated)
- 4 Alcohol irritates the lining of the stomach and delays food from being digested. Drinking alcohol also increases stomach acid, which leads to gastritis (swelling of the lining of the stomach). A common symptom of gastritis is nausea
- 5 The blood vessels in the brain become bigger, causing a throbbing headache. Dehydration can cause the brain to pull away from its lining, making the pain worse
- 6 Alcohol causes the brain to make the incorrect amount of hormones. One of the effects of this is that sleep is not as restful
- 7 Alcohol affects the brain in other ways too. It may lead to difficulty in walking; blurred vision; not speaking clearly; not being able to remember; sweating a lot
- 8 Muscles become weak from dehydration and the low levels of sugar in the blood
- 9 Pancreas makes more chemicals for digesting food than the body needs. This causes pain, nausea and vomiting
- 10 Kidneys have problems taking in water again. This causes urination more often and leads to dehydration

Inhalants (substances whose fumes are breathed in)

- Street names: Whippets/poppers/snappers
- **Examples:** Paint thinners, benzene, petrol, glues, acetone (nail polish remover)
- Immediately after using inhalants: Inhaling substances may have the following effects: Headaches, muscle weakness, abdominal pain, severe mood swings and violent behaviour, slurred speech, tingling of hands and feet, nausea, hearing loss, blurred eyesight, loss of consciousness, fatigue
- Using inhalants over a long period of time: Causes liver and kidney damage, hearing loss, limb spasms, bone marrow and brain damage



Codeine

- Examples: Found in some pain tablets and cough mixtures
- Immediately after using codeine: Being confused and not knowing what's happening around them, seeing things that are not really there, not being able to drive, an 'itchy' feeling, blurred eyesight, convulsions (fits)
- Using codeine over a long period of time: Constipation (not being able to pass stools), nausea, bleeding in the stomach, kidney and liver damage, feeling depressed, sexual problems

Tobacco

- Examples: Cigarettes or loose tobacco
- Immediately after smoking or using tobacco: Fast heart beat, dizziness, bad breath
- Smoking or using tobacco over a long period of time: Smoking tobacco not only affects the person, but
 breathing the smoke will affect the people around the smoker too. The person can get lung cancer, asthma
 attacks; have low birth weight babies or babies that are born too early. A woman's risk for breast cancer and
 cervical cancer and a man's risk for prostate cancer [see Lesson 5.6 on Cancer] increases. Children who
 breath in cigarette smoke have more ear infections, colds and chest infections

Lesson 5.9 Substance Abuse

Effects of smoking

Every 6.5 seconds someone dies from tobacco use, says the World Health Organisation. Research suggests that people who start smoking when they are teenagers, as more than 70 percent do, and continue to smoke for two decades or more will die 20 to 25 years earlier than those who never smoke. It is not just lung cancer or heart disease that cause serious health problems and death. Below are some of smoking's less well known side effects – from head to toe

1 Psoriasis: Smokers seem to be more likely to develop psoriasis. Psoriasis is a skin condition that leaves itchy, oozing red patches all over the body. It is not spread from person to person

2 Cataracts: Smoking is believed to cause or make a number of eye conditions worse. Smokers have a 40 percent higher rate of cataracts, which is a clouding of the eye's lens that blocks light and may lead to blindness. Smoke causes cataracts in two ways: by irritating the eyes and by releasing chemicals into the lungs that then travel through the bloodstream up to the eyes. Smoking is also associated with another eye condition which affects our ability to read, drive a car, recognise faces or colours, and see objects in fine detail. People experience blurriness, changes in the shape of objects, or blind spots in their central vision. Central vision is what they see when they look straight ahead

3 Wrinkling: Smoking causes the skin to grow old before its time by wearing away proteins that give it elasticity; using up vitamins that keep the skin young and able to move more easily and limiting the flow of blood. Smokers' skin is dry, leathery and has many tiny lines, especially around the lips and eyes

4 Hearing loss: Because smoking causes plaques to form of the walls of blood vessels, reduces the flow of blood to the inner ear, smokers can lose their hearing earlier than non-smokers and are more at risk to hearing loss caused by ear infections or loud noise. Smokers are also three times more likely than non-smokers to get middle ear infections

Cancer: More than 40 chemicals in tobacco smoke have been shown to cause cancer. Smokers are about 20 times more likely to develop lung cancer than non-smokers. Smoking causes about 90% of lung cancers in men and 80% in women **5a** and according to many studies, the longer one smokes, the greater the risk of developing cancers in many places in the body, including a two-time risk of developing cancer in the inside of the nose **5b**; cancer of the mouth **5c** (4 to 5 times); two- five time risk of developing cancers of the head and neck; voicebox (10 times); gullet (2 to 5 times); stomach **5d** (2); pancreas **5e** (2 to 4 times) and kidney **5f**. Some recent studies have also suggested a link between heavy smoking and breast cancer **5g**, and stopping smoking greatly reduces the risk for most of the above-mentioned smoking related cancers

6 Rotting teeth: Smoking interferes with the chemicals and saliva in the mouth, leading to extra plaque being formed and yellowing teeth. There is some evidence that smoking leads to rotting teeth. Smokers are one and half times more likely to lose their teeth

Emphysema: In addition to lung cancer, smoking causes emphysema, a swelling and rupturing of the lung's air sacs that reduces the lungs' ability to take in oxygen and get rid of carbon dioxide. In extreme cases, a tracheotomy allows patients to breathe. An opening is cut in the windpipe and a ventilator to force air into the lungs. Chronic bronchitis (not shown) creates a build-up of pusfilled mucus, resulting in a painful cough and breathing difficulties

- 8 Osteoporosis: Carbon monoxide, the main poisonous gas in car exhaust fumes and cigarette smoke, binds to blood much more easily than oxygen, cutting the power of heavy smokers' blood to carry oxygen by as much as 15 percent. As a result, smokers' bones lose thickness, fracture more easily and take up to 80 percent longer to heal. Smokers may also be more at risk of getting back problems: one study shows that factory workers who smoke are five times as likely to experience back pain after an injury
- 9 Heart disease: One out of three deaths in the world is due to heart diseases. Smoking is one of the biggest risk factors for developing heart diseases. Smoking makes the heart beat faster, raises blood pressure and increases the risk of high blood pressure and clogged arteries and eventually causes heart attacks and strokes
- 10 Stomach ulcers: Smoking reduces the body's ability to fight the germs that cause stomach ulcers. It also weakens the stomach's ability to reduce the effect of the stomach acid after a meal, leaving the acid to eat away the stomach lining. Smokers' ulcers are harder to treat and more likely to come back
- 11 Discoloured fingers: The tar in cigarette smoke collects on the fingers and fingernails, staining them a yellowish-brown
- Cervical cancer and miscarriage: Besides increasing the risk of cancer of the cervix, smoking can lead to problems with becoming pregnant for women and complications during pregnancy and childbirth. Smoking during pregnancy increases the risk of low birth weight babies and results in them being in poor health as they grow. Miscarriage is 2 to 3 times more common in smokers, as are stillbirths. This is because the unborn baby does not get enough oxygen and problems with the placenta, which is responsible for supplying the unborn baby with oxygen. These problems are brought about by carbon monoxide and nicotine in cigarette smoke. Sudden infant death syndrome is also associated with smoking. In addition, smoking can lower oestrogen levels causing early menopause
- 13 **Deformed sperm:** Smoking can interfere with and change sperm and damage its DNA, which could cause miscarriage or birth defects. Some studies have found that men who smoke have an increased risk of fathering a child who gets cancer. Smoking also lowers the amount of sperm and reduces the blood flow to the penis, which can cause impotence. Infertility is more common among smokers
- 4 Buerger's disease: Buerger's disease is a swelling of the arteries, veins, and nerves in the legs, mainly, leading to less blood flow. Left untreated, Buerger's disease can lead to gangrene (death of body tissue) and amputation of the affected areas

b. Examples of illegal substances

Dagga (cannabis)

- Street names: Grass/ganja/zol/pyp/doobie/pot/weed/joint
- Appearance: Brown and leafy when dried. Often contain seeds and sticks and some leaf material
- Immediately after using dagga: Light-headedness, blurred eyesight
 and not being able to speak properly are the quickest symptoms. Most
 users find everything around them very funny, and get a 'thick tongue'
 and cannot speak properly. They cannot remember or concentrate on
 anything while they are still under the influence of dagga
- Using dagga over a long period of time: Dagga causes a great deal
 of damage to the lungs. If used over a long period of time it could lead to
 coughing all the time, bronchitis (swelling of the air passages leading to the
 lungs) and lung damage. As with cigarette smoking, dagga can also lead to lung
 cancer. Apart from the lungs, the brain is also affected



Mandrax (Methaqualone)

- Street names: Mandies/mx/buttons/whites
- Appearance: Available mostly as a small white tablet, sold in small plastic bags, but it may be in different colours (pink, purple and even black)
- Immediately after using Mandrax: The person may not feel like eating and have a dry mouth. Often he/she has slurred or mumbled speech. The person may stumble or stagger because he or she feels weak and numb
- Using Mandrax over a long period of time: Sometimes stomach pain, nausea and vomiting can happen

Dagga/Mandrax (white pipe) combination

- Street name: White pipe
- Appearance: A combination of the effects above
- Using Dagga/Mandrax combination: A person who is drugged from this will usually have red, glazed or puffy eyes as a result of the dagga mixed with the Mandrax

Heroin

- Street names: skag, H and junk
- Appearance: Can look very different, from a powder that is white or off-white in colour to a solid substance that is black in colour. This type of heroin is known as black tar. It is usually injected, snorted, or smoked
- Immediately after using Heroin: The person feels care-free, relaxed and drowsy. They may experience nausea, vomiting, weakness in muscles, slowed breathing and even overdose and/or death. It is so highly addictive that it is possible to get hooked after just one use
- Using Heroin over a long period of time: The person can get infectious diseases such as HIV/AIDS, Hepatitis B and C, infection of heart lining and valves, arthritis, collapsed veins and abscesses. Heroin addiction is not easily overcome

Whoonga

Whoonga is a new substance in South Africa; it is thought to be made by combining some ARV medicines with detergents and rat poison. Not much is known about this drug, but it is thought to be very addictive and have serious effects on the body.

Handy Hints

It is very important that anybody with an alcohol or drug addiction gets the help they need. In order for this to happen the CCG should be able to recognise common forms of



3. How substance abuse affects relationships with family members?

Substance abuse can cause a lot of damage in families. Some of the damage will not show immediately, but will affect these children later in life:

- Financial problems are caused as more of the family's money is used to buy drugs or alcohol, and the
 family can't buy what it needs like food, medicines and even housing. It could also lead to the person who is
 addicted to the substance losing their job. They could start stealing, including from the family, to be able to
 buy drugs or alcohol
- Shame and anxiety results as family members may be ashamed of the person and try to hide it from friends and the community
- Depression and not trusting people
- They may start to abuse drugs or alcohol themselves as they may start to think it is normal to do so
- People who abuse alcohol or drugs may be violent to members of the family. This can cause a lot of pain and cause a family to break up

4. What questions should be asked to check if there is alcohol or drug abuse?

Alcohol

- **C** Have you ever felt you should **cut down** on your drinking?
- **A** Have people **annoyed** you by criticising your drinking?
- **G** Have you ever felt bad or **guilty** about your drinking?
- **E Eye opener:** Have you ever had a drink first thing in the morning to steady your nerves or to get rid of a hangover

Drugs

- · Sudden change in behaviour
- Changing moods guickly from cross to happy or happy to cross
- Not wanting to be with family members
- Not washing properly or caring for themselves
- Not interested in things that they used to enjoy like hobbies, sports, and other favourite activities
- They don't sleep well and are often awake at night and asleep during the day
- Red eves
- Runny nose

5. How to prevent alcohol addiction

Children that don't learn coping mechanisms when they are growing up have a greater chance of becoming addicted to alcohol.

Parents should:

- Discuss what they expect with their children. Then work with them to meet those expectations
- Talk to their children about alcohol and drug use. If they overreact to bad news about teenagers in the
 community who drink alcohol or take drugs, it is possible that the next time they talk to their children they will
 not get the true version of the story
- Help their children develop a strong sense of self-esteem, and coping skills so they can stand up to peer pressure
- Plan and spend time with their children every day. Parents need to see how the rules they have made work with what happens to their children outside of the home, at school, or with friends
- Let their children know that they know about alcohol and drug use in the schools, and that they understand that their children may be under pressure to use these substances
- Make a drug and alcohol-free agreement with their children through high school and education after the children have completed high school. Remind them often of the dangers of drugs and alcohol, and try to help them find other ways to lessen stress and emotional problems, e.g. playing sport, joining youth groups or getting counselling
- · Set rules and punishments so that if the children misbehave, they have to deal with the results of misbehaving
- Get help for their children if they suspect there may be abuse of substances (see resources below)

Adults:

- A person should not use alcohol to forget problems. It is better to find a trusted person to speak to about the
 problems or to contact a social worker for help as the problems do not go away if a person gets drunk. The
 problems are still there when the effects of the alcohol wear off
- · Recognise the signs of addiction early and get help

6. Places that people with an alcohol or drug addiction can get help and support

a. Alcoholics Anonymous South Africa

Alcoholics Anonymous is a group of men and women who share their experiences, strengths and hope in order to help themselves and other alcoholics remain sober. It is free to join and does not belong to any religious group. AA only wants to help people stay sober.

Helpline - 0861 435 722 from 9am to 2:30pm Mondays to Fridays and after hours 031 464 8301; Cell 084 551 3941

b. The South African National Council on Alcoholism and Drug Dependence (SANCA)

SANCA is an organisation that helps people and their families with alcohol and drug dependence. They receive money from the Department of Social Development to assist them to provide counselling and treatment services.

Helpline - 031 202 2241 from 8am to 4pm and after hours 031 303 2202

c. Al-Anon

Al-Anon Family Groups offer understanding, help and support to the families of problem drinkers. Meetings are free, anonymous and confidential. Al-Anon also has a programme for teenagers called Al-Ateen.

Helpline – 086 252 666 to 4pm and after hours 031 539 1142 or 031 402 1086 or Cell 074 458 3119

d. Narcotics Anonymous

Narcotics Anonymous is a group who share their experiences in order to help themselves and other people get off and stay off drugs. It is free to join and does not belong to any religious group.

National helpline - 083 900 6962

	Exercise	
List six common drugs abused by people in South Africa.		
2. What are some of the dangers of smoking for the smoker and the family?		

	Exercise	
2. What are the signs and symptoms of alcohol and drug abuse?		
3. What are the signs and symptoms of alcohol and drug abuse?		
4 Where can people get help with substance abuse?		
4. Where can people get help with substance abuse?		

AIM OF THE LESSON

Lesson 5.10 aims to share information on child abuse.

Learning Outcomes

By the end of this lesson learners should be able to:

- Show an understanding of Children's Rights
- · Explain what child abuse is
- · Show an understanding of myths and facts about child abuse and neglect
- · Explain the results of child abuse
- · Show an understanding of the types of child abuse and neglect
- Describe the warning signs of child abuse and neglect
- List the risk factors for child abuse and neglect
- · Explain how the parent or caregiver can recognise his or her abusive behaviour
- Discuss tips for breaking the cycle of child abuse and neglect
- Explain how to help an abused or neglected child
- Have an understanding of how to report child abuse and neglect

Lesson Contents

- · Definition of child abuse
- Myths and facts about child abuse and neglect
- Types of child abuse
- · Signs of child abuse
- · Risk factors for child abuse and neglect
- · Breaking the cycle of child abuse and neglect
- · Helping the abused and neglected child
- · Reporting child abuse and neglect

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Your role as a CCG

Your role as a CCG is to recognise children who may be abused and to make sure that they are referred to the proper facilities for the care and support they need.

1. What are children's rights?

Children have the right to:

- A loving and caring family, a proper safe and comfortable home, clothing and healthy food
- Have the house rules of where they live explained to them
- Not be forced to work
- An education suitable to their talents and abilities
- Have a say in their care, and any changes to how they are cared for, according to their age and maturity
- · Get special care for special needs
- · Be protected from hurt
- Good healthcare if they are sick and to be kept away from cigarettes, alcohol and drugs
- · Be treated properly
- · Be taken seriously and to make mistakes
- · Their own religion and culture
- Their name and their nationality

- Be treated the same, no matter what their colour, race, gender, language or religion
- · Be proud of their heritage and beliefs
- · Speak and be heard
- Send and receive private mail that is not read or opened by others
- Privacy
- · Own their own things
- Speak and visit in private with their family or any other person like their friend, a person representing them like their social worker or their lawyer
- A lawyer in courtrooms and hearings affecting their future
- Live in a nice place and not be put in prison or in a police cell
- · Know what their rights are



2. What is child abuse?

Child abuse is more than bruises or broken bones. Physical abuse is shocking due to the scars it leaves, but not all child abuse can be seen. Ignoring children's needs, putting them in unsupervised, dangerous situations, or making a child feel worthless or stupid are also types of child abuse. Regardless of the type of child abuse, the result is serious emotional harm.

3. Myths and facts about child abuse and neglect

Myth 1: It is only abuse if it is violent

Fact: Physical abuse is just one type of child abuse. Neglect and emotional abuse can be just as damaging, and since it cannot be seen and may not be noticed, others are less likely to get involved.

Myth 2: Only bad people abuse their children

Fact: It is easy to say that only 'bad people' abuse their children. Not all abusers hurt their children on purpose. Many have been victims of abuse themselves, and do not know any other way to take care of their children. Others may be struggling with mental health issues or a substance abuse problem.

Myth 3: Child abuse does not happen in 'good' families

Fact: Child abuse does not only happen in poor families or bad communities. It crosses all racial, economic, and cultural lines. Sometimes, families who seem to have it all from the outside are hiding a different story behind closed doors.

Myth 4: Most child abusers are strangers

Fact: Most abusers are family members or are known to the child.

Myth 5: Abused children always grow up to be abusers

Fact: It is true that abused children are more likely to do the same as adults. They repeat what they experienced without realising that they are doing so. On the other hand, many adult survivors of child abuse have a strong motivation to protect their children against what they went through and become excellent parents.

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4. What are the consequences of child abuse?

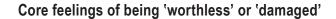
All types of child abuse and neglect leave lasting bad experiences. The scars might be physical, but bad emotional experiences have long lasting effects throughout life and as these children grow into adults, damaging their sense of self, ability to have healthy relationships, and ability to function at home, at work and at school and becoming abusers themselves.



Examples of bad experiences:

Lack of trust and relationship difficulties

If a child cannot trust their parents, who can they trust? Abuse by a person who is the main caregiver damages the most important relationship that children have and their belief that they will safely, reliably get their physical and emotional needs met by the person who is responsible for their care. Without being able to learn this as a child, it is very difficult for them to learn to trust people or know who they can trust. This may lead to them having problems having and keeping relationships because they will be scared that they may be controlled or abused. It can also lead to unhealthy relationships when they grow up because they will not know what a good relationship is.



If the child has been told over and over again that she/he is stupid or no good, it is very difficult to overcome these core feelings. The child may experience them as reality. When they grow up into adults, they may not work hard and make every effort for more education, or settle for a job that may not pay enough, because they do not believe they can do it or are worth more. Sexual abuse survivors, with the stigma and shame they feel because of the abuse, struggle with a feeling of being damaged.

Trouble controlling emotions

Abused children cannot express emotions safely. As a result, the emotions get stuffed down, coming out in unexpected ways. Adult survivors of child abuse can struggle with unexplained anxiety, depression, or anger. They may turn to alcohol or drugs to numb out the painful feelings.

5. Types of child abuse

a. Emotional child abuse

Emotional abuse can damage a child's mental health or social development very badly, leaving lifelong emotional bad experiences. Examples of emotional child abuse include:

- Constantly making the child feel small and unimportant, shaming, and putting a child down
- Calling names and making negative comparisons to others
- Telling a child he or she is 'no good,' 'worthless,' 'bad,' or 'a mistake'
- · Frequent yelling, threatening, or bullying
- · Ignoring or rejecting a child as punishment, giving him or her silent treatment
- Limited physical contact with the child no hugs, kisses, or other signs
 of affection
- · Letting the child see violence or the abuse of others, whether it is the abuse of a parent, a sibling, or even a pet



b. Child neglect

Child neglect is a very common type of child abuse. It is linked to not providing for a child's basic needs, e.g. enough food, clothing, hygiene, or care and supervision. Child neglect is not always easy to spot. Sometimes, a parent might become physically or mentally unable to care for a child, such as with a serious injury, untreated depression, or anxiety. Other times, alcohol or drug abuse may seriously affect and harm their thoughts and feelings and their ability to keep a child safe.

c. Physical child abuse

Physical abuse involves physical harm or injury to the child. It may be the result of an intentional attempt to hurt the child, but not always. It can also result from severe discipline, such as using a belt on a child, or physical punishment that is not suitable for the child's age or physical condition.

Many physically abusive parents and caregivers say that their actions are simply ways to make children learn to behave. But there is a big difference between using physical punishment to discipline and physical abuse. The reason for disciplining children is to teach them right from wrong, and not to make them live in fear.

d. Child sexual abuse

This is a hidden type of abuse. Child sexual abuse is a complicated form of abuse because of its links with guilt and shame. Sexual abuse does not always involve body contact. Letting a child see sexual situations or material (e.g. pictures) is sexually abusive, whether or not touching is involved.

Sexual abuse is usually done by someone the child knows and should be able to trust, e.g. close relatives. Boys and girls both suffer from sexual abuse. Many families do not want to do anything about this and keep it as a secret because they are ashamed. Also, sexual abuse of boys is often not reported due to shame and stigma.

Sexual abuse causes both physical and emotional damage, but the emotional part is powerful and has a major impact on the child's life. Sexually abused children suffer from shame and guilt. They may feel that they are responsible for the abuse or somehow brought it upon themselves. This can lead to them hating themselves and sexual problems as they grow older like having many sexual partners, not being able to stay faithful to one partner or an inability to have intimate relations.

The shame of sexual abuse makes it very difficult for children to report it. They may worry that others will not believe them, will be angry with them, or that it will split their family apart. Because of these difficulties, false accusations of sexual abuse are not common, so if a child confides in the caregiver, take him or her seriously. Do not ignore the child.

6. Warning signs of child abuse and neglect

The earlier child abuse is caught, the better the chance of recovery and correct treatment for the child. Child abuse cannot always be seen. By learning some of the common warning signs of child abuse and neglect, it is possible to catch the problem as early as possible and get both the child and the abuser the help that they need.

Warning signs of emotional abuse in children

- Child is very quiet, fearful, or anxious about doing something wrong
- A child that listens very well (does exactly what you tell them to do immediately you tell them to) or wants lots
 of attention; sits very quietly and does not want to do anything or is extremely violent
- Child seems not to be attached to the parent or caregiver
- Acting in a way that is out of place or wrong e.g. rocking, thumb-sucking, having tantrums (bad moods)

Warning signs of physical abuse in children

- Child has injuries often or unexplained bruises, welts, or cuts
- Is always watchful and 'on alert', as if waiting for something bad to happen
- Injuries appear to have a pattern such as marks from a hand or belt
- Does not like to be touched, moves backwards at sudden movements, or seems afraid to go home
- Cover up injuries by wearing unsuitable clothing, such as long-sleeved shirts on hot days

Warning signs of neglect in children

- · Clothes are ill-fitting, filthy, or unsuitable for the weather
- · Hygiene is consistently bad e.g. does not wash the body, matted and unwashed hair, noticeable body odour
- Illnesses and physical injuries are not treated
- Is frequently unsupervised or left alone or allowed to play in unsafe situations and environments
- Late or missing from school often

Warning signs of sexual abuse in children

Child has a problem in walking or sitting

 The child knows about and/or interest in sexual acts that are not right for his or her age, or even seductive behaviour

 He/she makes strong efforts to avoid a specific person, without an obvious reason

- Doesn't want to change clothes in front of others or take part in physical activities
- Has a sexually transmitted infection or pregnancy when she/ he is under the age of 14
- · He/she runs away from home



7. Risk factors for child abuse and neglect

Children that are at a greater risk of child abuse are those in following situations:

- Where there is domestic violence. Seeing domestic violence is very frightening and emotionally abusive to children. Even if the mother does her best to protect her children and keeps them from being physically abused, the situation is still extremely damaging. If anybody is in an abusive relationship, getting out is the best thing for protecting the children
- Where there is alcohol and drug abuse. Living with an alcoholic or addict is very difficult for children and can
 easily lead to abuse and neglect. Parents who are drunk or high are unable to care for their children, make
 good parenting decisions, and control often dangerous impulses. Substance abuse also commonly leads to
 physical abuse
- Parents or caregivers have untreated mental illness. Parents who are suffering from depression, an anxiety
 disorder or another mental illness have trouble taking care of themselves, much less their children. A mentally
 ill or upset parent may be unfriendly, quiet and withdrawn from his or her children, or quick to anger without
 understanding why. Treatment for the caregiver means better care for the children
- Caregivers lack of parenting skills. Some caregivers never learned the skills necessary for good parenting.
 Teen parents, for example, may not realise how much care babies and small children need. Or parents who
 were themselves victims of child abuse may only know how to raise their children the way they were raised.
 In such cases, parenting classes, therapy, and caregiver support groups are great ways and provide support
 for learning better parenting skills
- Children are left with people who the parents don't really know
- Leaving children alone with people of the opposite gender
- · Orphans living on their own without adults to care for them
- Parenting that is very demanding and lack of support. Parenting takes up a lot of time and can be a difficult job, especially if the parents are raising children without support from family, friends, or the community or they are dealing with relationship problems or financial difficulties. Caring for a child with a disability, special needs, or difficult behaviours is also a challenge. It's important for the parents to get the support they need, so they are emotionally and physically able to support their child

8. What are the signs of abusive behaviour?

- The parent or caregiver cannot stop the anger. What starts as a smack on the bottom may turn into many smacks getting harder and harder. They may shake their children harder and harder and finally throw them down. They may start screaming louder and louder and cannot stop themselves
- The parent or caregiver feels emotionally cut off from their children. They may feel so weighed down that they do not want anything to do with the child. They just want to be left alone and for the child to be guiet

The parent or caregiver is always struggling with dressing, feeding, and getting children to school or other activities

 They do not have other people in their lives that they can share their worry and concern with **Handy Hints**

RECOGNISING ABUSIVE BEHAVIOUR

Recognising that a person has a problem and the person recognising that they need help is the first step to getting them help.

9. How can the cycle of child abuse be broken?

The following advice is important for parents and caregivers. They should:

- Get help for themselves and for the abused child. This help is required to deal with frustration and anger. Parents can learn new behaviours to deal with children who are abused, making the children wiser to deal with their present situation and learn how to deal with their own children later in life
- Set boundaries for themselves and for children so that they know what kinds of behaviour are acceptable
 or unacceptable and what is expected of them. Boundaries on behaviour should be set that keep the child
 safe from injury, neglect and abuse. For example, children should be safe at home between certain times;
 if ill they should be taken to the clinic and should be left with caregivers known and trusted
- Protect the child from others who might abuse them including their own partners. They should listen to their child if they tell them someone has abused them especially a step parent or someone known to the family
- Teach children about their body; the names and functions of their body parts so they are able to tell what has happened to them and to be taken seriously if they do report abuse
- Nurture the child. Children can be nurtured without touching them, e.g. by listening to them, taking an interest
 in their lives, helping them to solve problems, playing together and sharing time, looking at them
 and smiling
 at them
- Praise and reward children for good behaviour so they feel appreciated at home, making them less vulnerable
 to other people who appear like they love the child, but sexually abuse them

How to help an abused or neglected child?

Child abuse is a difficult subject that can be hard to accept and even harder to talk about. When talking with an abused child, the best thing the caregiver can give is calm, comfort and unconditional support. The caregiver should let their actions speak for them if they are having trouble finding the words. It is their responsibility to comfort the child and provide whatever help they can.

Tips for talking to an abused child

 Do not let the child think that the caregiver does not believe him or her. It is very important to remain calm. If the caregiver shows denial to a child, or shows shock or dislike at what they are saying, the child may be too scared to continue and will shut down

 Let the child explain in his or her own words what happened, but do not ask leading questions.
 This may confuse and upset the child and make it harder for them to continue their story

 Tell the child that they did nothing wrong. Let him or her know that what they are saying will be taken seriously, and that it is not the child's fault



Reporting child abuse and neglect [see Lesson 6.6 on Social Services for Children]

Making your voice heard

If the CCG suspects a child is being abused, it is important to get them the help he or she needs. The law says that all healthcare workers have a duty to report any suspected child abuse to the nearest police station.

	Group Discussion
Divide the learners into small groups and ask them to discuss the followi	ng:
Warning signs of child abuse and neglect.	
2. Helping the abused and neglected child.	

	Group Discussion
3. Children's rights.	

Case Study

Mrs Rose Shange is an overweight 48 year old woman. Her mother died of breast cancer. She has high blood pressure and diabetes which is out of control and goes to Ntabeni clinic for her diabetic medications. She last had a PAP smear test 10 years ago. Rose is a smoker. She tells the CCG that she has recently experienced a tight feeling in her chest and shortness of breath. She is employed as a domestic worker and has noticed these symptoms when she climbs stairs.

Rose is married to Mandla who is 53 years old. Mandla is unemployed and abuses alcohol. He used

to enjoy gardening. Since he lost his job, Mandla doesn't spend time in the garden any longer. He complains that he is tired all the time and that he is not sleeping well. The CCG suspects his drinking bouts lead to abusive behaviour with his wife and children as she has seen blue marks on his wife.

Their four children aged between 14 and 22 years also live with them. They have three sons and one daughter.

The CCG observes the food that the family is eating includes pies, fried potato chips, buttered white bread, and no vegetables. Two weeks later Rose experiences weakness on the one side of the body.

Case Study

Divide into groups and discuss the following questions:
1. Discuss Rose's medical problems; what would you advise her to do?
2. What could happen to Rose if she does not control her diabetes and high blood pressure?
2. Paged on his symptoms, what could be wrong with Mandle? What could be the cours?
3. Based on his symptoms, what could be wrong with Mandla? What could be the cause?
4. How could you help the family to deal with Mandla?
5. Given Mandla's age, what other tests should Mandla have? How often should these tests be done?
6. How would you identify if anyone in the household has been abused?
7. Where could you could them for help?
7. Where could you send them for help?

	Case Study
8. What can be said about the family's diet?	
9. What are the dangers of not eating a healthy diet?	
10. What else could the family do to improve their lifestyle? (Use information from previous this question)	s modules when answering
11. What do you think has happened to Rose?	
12. Do you think that Rose is taking her medicines for diabetes? Why do you think so?	
13. Is Rose due to have another PAP smear test? If so, why do you think so?	
14. What does a PAP smear test show and how often should it be done?	

	Case Study
15. Based on her family history, what other tests should Rose have?	
16. What can Rose do at home to pick up any signs of this condition?	
17. How can the problem of the blue marks on Rose be dealt with?	
18. What test should their sons be doing? How often should they be doing this?	
19. What other information should you be giving the children in this home?	

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