

LIFE IN THE HILLS

Just a few kilometres outside the town of Paulpietersburg in Northern Kwazulu-Natal is a village. Almost symbolically, the tar road ends. Several humps along the road and you are confronted by a different existence. In direct contrast to the developed town just a short drive away, the village is a scattered smattering of huts, houses and mielie fields. Cows dot the vast green hills. It's difficult for a city dweller to understand the hardship that such a beautiful setting unleashes on the people who wake to this vista every morning.

Tholakele is a community of underprivileged and mainly unemployed people who are struggling to survive the harsh cycle of subsistence. More than 80% of the community live below the poverty line, while the women, who are the majority, are both breadwinners and care-givers. Many are widowed, others are separated from their husbands who work in the mines. The hardships are many. But it is obvious that in this community severe malnutrition has a high incidence, especially with the children. In fact, stunting in children under five is the main nutritional health problem in the area. To add to the dire nature of the problems, every third child under six has a marginal Vitamin A status. With these statistics it is not difficult to understand why something had to be done to curb the growth of poverty induced nutritional deficiencies.

Or more to the point, people had to start eating, and eating properly.

But what makes this village different is that within it is a kernel of an idea that may just turn the situation around. It may not have started out as ambitious a project as it is now, but the Paulpietersberg community based nutrition-development project is that piece of hope that an entire community can hold on to when all other aspects of their lives seem destitute.

Now the thing about projects is that often they end up as a micro entity that simply continues as a spectacle. And while the rest of the community looks on with distant interest, the blissful members of the project merrily potter on in a vacuum. Not so in Tholakele.

From modest beginnings, this community now displays all the criteria that are required for success in a harsh and unforgiving environment. This according to

the new developmental approach to nutrition taken by the Department of Health. Where feeding was the priority in the past, self-reliance has become the single most important aspect of nutrition projects in rural KZN. Most significant about Tholakele is the will to take ownership of the nutritional problems that plague rural communities.

Ningi Ngcobo, Deputy Director of Nutrition in Kwazulu Natal, presents Tholakele as her *piece de resistance*. The reason is simple. It was not a Health Department initiative. It was a community initiative. Desperation was the mother of invention.

And it was one woman who decided to lead a band of concerned community members to the brink of success. Mrs Queen Ngwenya, one of the few literate members of Tholakele community, decided that poverty was not going to take her children from her. In 1993 she formed the Zamokuhle Women's Association to act as an umbrella body under Chief Dlamini.

This act of organisation immediately predisposed the community to fulfilling many of the criteria set out by the nutrition department as part of its community-based approach to nutrition. As Ngcobo puts it: "We are not in the business of handing out fish anymore, we hand out fishing rods." This seems to be the basis of the new approach by government; to empower communities rather than preserve the culture of dependence on handouts. Especially when a community has one thing that is required to sustain subsistence. time. For Ngcobo, the hardest thing is maintaining the momentum of an interested community when results are often not immediate or sometimes not visible. "It's getting harder now for the members because some of them are asking for salaries for their work," adds Nana Nkosi, the District Coordinator for the Abaqulusi district under which Tholakele falls.

Ngwenya describes the status of the community in her terms: "The people were suffering. When we wanted anything we had to go to town and it was difficult. The women live on income from their husbands who send money from Johannesburg or from the mines. But most of them don't have any income at all." Ngcobo adds: "Usually the men go away and the first few months they send back money or a bag of

mielie meal, then it dwindles to just a bag every few months, then nothing."

In this sort of Situation where both men and women in the community are unemployed, it is difficult to foster a culture of work and subsistence. Psychologically, there is a barrier that has to be overcome. A barrier that stacks all the odds of poverty, a debilitating history and shaky rural infrastructure against both individuals and the community. After all, these are people with their own cultural norms, emotions and traditions. All of which impact on the status of the community and

THE THOLAKELE APPROACH

Being one of KwaZulu-Natal's finer exponents of the Community-based Nutrition Development Project (CBNDP), Tholakele has implemented not only physical change in the community by establishing several means of sustaining micro economic growth, but effected a psychological change as well. Ngwenya explains: "The community is so happy now. They support us by buying our goods and some are coming into the project to help."

CBNDP is the implementation arm of the Integrated



Ningi Ngcobo

whether it will be possible to turn the situation around.

The answer, however, is not creating more dependence by providing food, money and little else.

In fact under the previous scheme, a mal-administered programme, approximately R70 million was unaccounted for because money was left to untrained communities to manage. Suppliers to the programmes in the province were resistant to the new approach when Ngcobo told them that a new payment system had to be implemented to ensure proper management of funds and feeding, and that advances would not occur again. However, after discussions she managed to quell their fears and money is now being managed in an effective way which ensures that feeding is not just a matter of buying bread for schools.

Although it was necessary for the department of Health to intervene in 1994 to prevent starvation, it is now apparent that this sort of intervention cannot continue. Development has to occur in its truest form: empowerment. Ngcobo calls it going back to our roots.



Queen Ngwenya

Nutrition Programme (INP) which targets nutritionally vulnerable communities and groups. Its focus is

on household food security and food-based income generation. Two fundamental aspects of sustained nutritional feeding in rural communities.

Between 1993 and 1997, the Tholakele project has burgeoned into a near-perfect example of what it means to implement an effective collective scheme that makes use of resources in and around the community. From labour, which is in abundance, to innovation, Queen Ngwenya has managed to incorporate a holistic approach to nutrition and in turn has empowered 62 individuals, who would otherwise have depended on government handouts, to become active creators of food, work and profit.

Ngwenya who played the pivotal role in linking up with the Department of Health says that it all began when she began encouraging groups within the community to start forming official organisations so that they could overcome the basic problems of poverty.

"Department called the leaders of these groups and said that they wanted to sponsor things like poultry farms and piggeries," Says Ngwenya, "Over the years I began trying to combine the community groups and eventually set up the umbrella body."

She continues: "I said that we had started many of the projects already but needed help. So they asked us to make a list of everything we needed and gave us forms to fill in. Those were the proposals."

Today, the Tholakele project boasts the seven basic projects that have been identified by the regional policy makers as the fundamental nutritional and economic generators for every rural community. These are: a piggery, a bakery, a dairy, a poultry farm, vegetable gardens and a sewing club. Tholakele went further when the men in the community decided that a water project was required to feed the gardens and they dug a trough from a stream to create an irrigation system as well as supply the rest of the project.

Regional Director Mrs NG Hlongwane comments on Tholakele: "We have 190 projects in the region, some good some bad, but I wish we had more like Tholakele."

Where other projects have failed, Ngwenya has been able to sustain her projects through determination. Hlongwane explains that for some communities there was just enough funding to erect structures like chicken coops, but no money for the chickens. "Some of them just wait until we give them money, whereas Queen Ngwenya took the initiative and managed to get the chickens herself."



POULTRY

The poultry project is by far the largest income generator for the association and if you consider that since June 1998, the poultry initiative has been selling 200-300 chickens every weekend and more over the festive period at R20 per chicken, then it is quite a healthy means of income. However, the cost of maintaining the farm, especially the food, is heavy, but the project has discovered an ingenious means of covering the cost of sawdust. By using the dirt from the coops to make fertiliser, the poultry project sells it to the community and makes money from nothing.



PIGGERY

The pig project took off around the same time as the poultry farm and has to date generated approximately R500. Once again this is an expensive exercise and it is as much as the community can do to maintain the piggery. Food (first 40 bags) and structures took up much of the budget as did the first five pigs. Bearing in mind that these projects had been conceptualised prior to the Health Department's involvement it is heartening to see that it is flourishing with the Department's aid. Currently the pigs are sold to abattoirs in KZN and Mpumalanga and the breeding scheme has generated over 19 piglets. Unfortunately, most of the profit is invested in feed, so the margins are small.

BAKERY



The bakery is currently a skeleton operation and is an extension of the community hall which was also erected thanks to Ngwenya's initiative. Funds are being released to erect the new structure. Electricity is being installed to support ovens. Right now a lone coal stove serves the purpose. Bread is sold at R2.80 a loaf and the project sells around 20 loaves per day. Other confectionary includes sponge cake, vetkoek and fruit loaves. Profit currently stands at 100%.

DAIRY

The dairy is a work of passion. The women chopped the stones themselves for the concrete and laid the bricks as well. Milk comes from a white farmer at the moment, but the cattle have been chosen to supply the dairy with its own milk.



It is inspiring to see that even without a refrigerator, milk is sold at 50c profit. Milk is delivered three times a week and there has been no incidence of diarrhoea or soured milk. There is a freezer that will become operational when the electricity is installed.

WIRE FENCE MAKERS



Wire fencing is done in a little shack attached to the community hall where skilled workers assemble and sell the fencing to the community.

One initiative aims

to try to sell the fences to the Department of Health to secure the vegetable gardens and in turn create a greater pool of money to employ more members of the community.

SEWING CLUB

"I saw other schools with uniforms and thought to myself, why can't our children look like that?"

One of the most fundamental issues within these projects is to give people dignity and a purpose. While this does have a financially beneficial side — the sewing club supplies the school next door with uniforms — the need to retain some sort of dignity permeates the overall drive behind the project. Pride is something that Ngwenya and her colleagues hold very dear. The uniforms sell for approximately R60 and rise per size. Duvet sets have been added to the repertoire and sell for R280.



GARDENS

These are the most intrinsic part of the CBNDP because it is cheap and requires little investment. Also the gardens project has two purposes. One is to

pass on gardening skills and knowledge about which crops to grow, and the other is to train those who have not yet picked up the skills. "We are trying to inform the community that each home should have a garden," says Ngwenya.



THE DOWN SIDE..

We may consider that with all of the good news there is little to be wary of. But the truth is that within KwaZulu-Natal, there are many variables that hinder progress. For instance, the water tower that was constructed for the gardens was destroyed by ANC followers who according to Ngwenya, felt entitled to destroy something they "gave her". It was only after the minister intervened and explained to the locals that the projects are not politically driven that tensions lessened. Politics is a huge part of everyday life in rural KZN. Ngcobo. Hlongwane and in fact every single person associated with projects in the region testified to playing games with the political councillors so that they are able to carry out their duties.

The stories of extortion and intimidation abound. Both dominant parties, IFP and ANC, play major roles in the communities' lives and feel threatened when positive steps are taken without their involvement. Nana Nkosi says that some councillors want everything to go via them so that it appears as though it was their initiative. Hlongwane has to deal with fraud, people whom she expects to charge once her assessments of all 190 projects is complete. Then there are policies that have enshrined the rights of communities to the point where funds are trusted to "barely literate people" and people who can be exploited by the literate.

Training of the community and project leaders is the next biggest obstacle to progress. "Now that we have suppliers and community leaders involved we have to make sure that they are able to do things properly, not everyone is as efficient as Queen Ngwenya. An example is when some of the projects don't list everything they need and end up with only half of their required equipment. We are then tied because the whole budget is already allocated," she says.

The next huge task is to implement monitoring processes that worked. She points out: "We were lucky with current assessments. They worked out well. But now we have to evaluate the new programme." And let's not forget that all-important factor, funds. "We asked for R5 million, but only got R2,9 million," says Hlongwane. She expects that it will increase when she shows provincial government just how successful her projects have been. The fact is that this new approach to nutritional development is still in its infancy, and it costs money. And while the Tholakele project is a beacon of hope, it is still just a beacon. The stark realities will exist for a while to come. There is no changing the fact that Tholakele is made up of only 62 members from a community of 5 000. There is no changing the political wranglings of power-hungry councillors. And there is no changing the fact that people will continue to suffer.

What can be changed is attitude. People must begin to own their lives. Tholakele is a beginning.

NUTRITION UNITS

NDLOVU NUTRITIONAL UNIT

The treatment of acute children's illnesses like Kwashiorkor has taken a new turn in the north-eastern province of Mpumalanga - with doctors now seeking to fight the underlying causes of such diseases directly. According to one doctor attached to the Ndlovu Nutritional Unit in Elandsdoorn, Moutse, many mothers who visit their clinic present their children with acute illnesses, but this often has an underlying cause of chronic malnutrition.

"It is mostly easy to treat the acute problem. If, however, nothing is done to treat the malnutrition, one can then expect to treat the same child for the same problem in a few weeks' or months' time," says Dr Hugo Tempelman, a former Dutch national now based in Mpumalanga.

Dr Tempelman and his wife Liesje established the Ndlovu Medical Centre (NMC), a community-based health care centre, in Moutse in 1994. A year later in 1995, they built the Ndlovu Nutritional Unit (NNU). This consists of a vegetable garden and a small community hall with cooking facilities.

"The concept was an easy principle," says Dr Tempelman, "The children seen at the Medical Centre with chronic malnourishment, kwashiorkor, hygienic neglect and related problems are invited together with their mothers and other non-school-going children in each affected family, to participate in the programme."

According to Dr Tempelman, every child that enters the programme is fully screened for worms and other parasites, tuberculosis, anaemia and other diseases. During the intensive phase, the children are monitored on a daily basis. As soon as they start gaining weight, a weekly check-up is done.

Specially made chart cards are used to monitor each child. These detail personal information, living conditions at home, the family's financial status and the number of people dependent on that income, as well as data concerning the health status of the child. The reverse side of each chart card is used to monitor growth and weight gain.

All mothers joining the Nutritional Unit have to be trained in setting up vegetable gardens both at the centre and at their own homesteads. The idea behind this is to help them upgrade their own food-chain with little financial investment. During the period that mothers and their children are part of the programme, trained Community Health Workers (CHW) make frequent home visits

During these home visits the CHW will fulfil two major tasks: firstly they will assess the ground preparations for family vegetable gardens and provide a small toolkit and seeds as an incentive if the work has been done properly. The CHW also gives advice on domestic hygiene, including guidelines on how to dispose of family and animal waste. Families are advised on how to build well-ventilated pit latrines.

The Nutritional Unit offers a mornings only programme.



A typical day begins early in the morning when mothers and their children arrive to a full and hearty breakfast. The group of mothers is then divided into two. Half of them start working in the vegetable garden while the other half does sewing work inside the unit.

At the NNU, the mothers who work inside the unit are taught how to use sewing machines and how to produce clothing for their families. The mothers are allowed to keep clothing for their individual families free of charge, if they also produce a corresponding number of sewn articles for sale.

This is meant to encourage good workmanship and a sense of pride in one's work. The sense that one is receiving charity is also removed and replaced by a sense of value, in that profits received from the sale of goods are ploughed back into the project, explained Dr Tempelman.

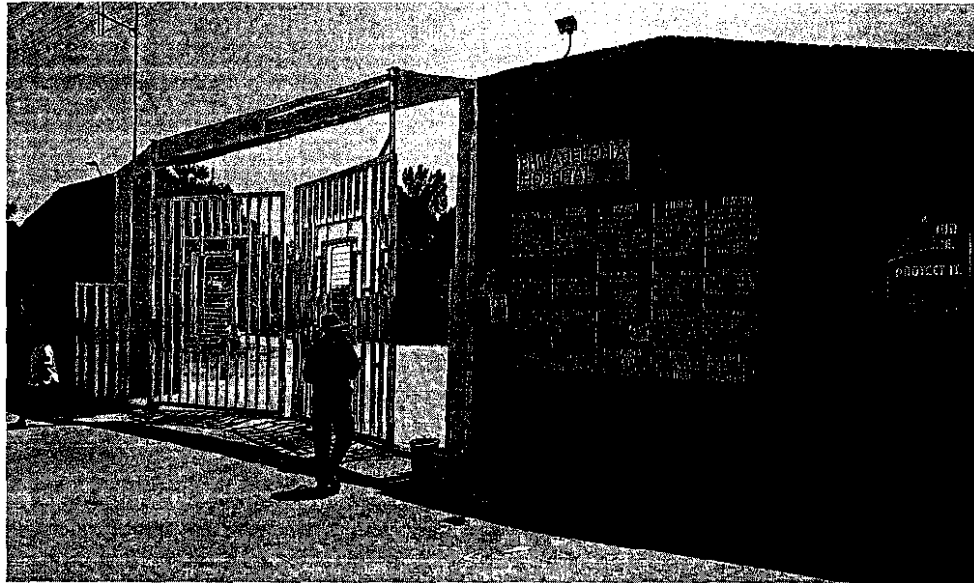
At mid-morning each day all mothers have tea while the children are fed a high protein high caloric drink. After tea there is an hour's lecture by CHW, covering a wide range of topics such as food gardens, child abuse, sexually transmitted diseases, sexual abuse, how to prevent and how to act on gastro-enteritis in childhood, how to build proper pit latrines, money budgeting and the importance of vaccinations. Home safety awareness lectures are also given.

The daily programme ends at about 1 p.m. with a proper lunch consisting of most of the vegetables reaped from the food garden at the centre. During the rest of the day mothers are expected to tend to their own families, households and food-yards.

CASE STUDY

Thirty-four-year-old Lizzy Nkosi is a grateful woman. She cannot find the words to describe her joy at how the NMC and NNU both changed the life of her family. "When I first brought Bongani [a mentally challenged boy] to the Ndlovu Medical Centre he was two-and-a-half years old. He couldn't walk and he neither wanted nor ate his food."

According to Dr Tempelman, when Bongani and his mother first joined the programme the boy was highly malnourished and 60% below his expected weight. He said while the boy was generally in bad health, his mental handicap aggravated his overall outlook.



PROBLEMS

The Moutse region is made up of 18 townships and Elandsdoorn is one of the better-established ones. It is however, plagued by some practical issues that affect rural lifestyle. Being in remote, less established and poorer areas creates its own problems, as most mothers cannot afford the daily transport to the unit. Some mothers tended to default or drop-out of the programme before the end of the three to six-month ideal period of care. Mothers have to walk long distances to reach them, thereby rendering them valueless.

SOLUTIONS

In order to supplement the mothers in their transport to the clinic a little transport fund was incorporated in the budget. The mothers who really need it are given taxi money for the following day. If they come the next day, money is again given for the following day and so on and so on. Mothers who, after being given taxi fare for the following day, do not turn up are excluded from the system unless they have a very good excuse for not coming. The Ndlovu Medical Facility finds it easy to operate and control this system.

Satellite nutritional units could be set up in more outlying areas. Tempelman revealed that already five nutritional satellite units are in the offing.

These units would be run under the auspices of the NMC. Health workers will man these units on a half-day basis with daily monitoring and co-ordination of all units done by a social worker. A doctor will visit the units weekly for medical evaluation of the participating children.

PHILADELPHIA HOSPITAL'S NUTRITIONAL REHABILITATION CENTRE

A few kilometres from the Ndlovu Medical Centre is the Philadelphia Hospital which serves 21 villages. There are also four health centres and seven satellite clinics that operate under the auspices of this hospital. Because of the wider area served by this hospital it was decided that a Nutritional Rehabilitation Centre should be set up.

This Rehabilitation centre will be run along the same lines as the Ndlovu Medical Centre, where children treated for malnutrition and other related diseases at the hospital will receive follow up care before they are released to their home. Mothers will also be educated on nutrition and on the creation of vegetable gardens. According to the hospital's dietician, Mrs Monica de Beer, the same food garden concept will be followed.

Although the Philadelphia Nutritional Rehabilitation Centre has not started operating, everything else is in place.

A number of job-hunting women from the local hospital have been recruited as volunteers. These women will be encouraged to help with the Centre's own food garden while still maintaining their own gardens at home. The volunteers will also help to prepare and serve well-balanced meals and help sell all extra produce from the hospital food garden. Nutritional Coordinator, Mrs Thalitha Mashego says the volunteer workers will also be trained to help as home garden monitors as soon as the project takes off.

Mrs Mashele says the hospital's Nutrition Rehabilitation Centre will become part of the Dennilton District Nutrition Committee. This committee, which examines and seeks to deal with nutrition and related problems in the area, includes members from the Departments of Works, Water Affairs, Environmental Affairs, Agriculture, Social Welfare, the local government, traditional healers, women and men's local organisations

So far so good. But Mrs Mashele says there will be major problems if there is a lack of water in the province. And this is a hot province with sandy soil

SCORES OFF BREAD

Cricket fever has hit Strydenburg. In fact, the game is in full swing. With tomato-box bat and pulp wood wickets, a bunch of boys smack a tennis ball all over the dirt road. Their thin legs run like the wind, but it's probably the peanut butter sandwiches from school that get them going. Give them the gusto for the game.

Strydenburg is a good name for this place. It means Struggle Town in old Dutch and its positioned 180km south of Kimberly, directly under the sun. The place is parched and debilitatingly hot, but it's still home to 3 000 people. Three thousand desperately poor people, 80 percent of who survive on social security grants from the government. Most of the town's folk are unemployed and those who do work can only do so seasonally on the local farms. For this they earn around R50 a month. Thing is, there's just nothing much going on in the area, which equates into there being no work to do.

The off-shoot of such poverty is poor nutrition, which is Strydenburg's biggest problem. As a preamble to the Strydenburg Community Based Nutrition Programme a survey was done in 1996 on children six years and younger. Over 100 children were weighed and measured and the findings were quite shocking. Of those checked, 34 percent were underweight for their age, 28 percent were stunted and 11 percent were underweight for their height. This nutritional deficiency at best leads to underdevelopment and at worst to poor productivity in every sense of the word. As adults these people will become a liability to the government and social services, and bear children who will probably perpetuate the problem. It's a downward spiral.

Something had to be done. And it was. The government asked the community for ideas to improve their lot, and they had plenty. The children at the local creche desperately needed food, so the bakery idea came out tops. It would provide jobs, while feeding the hungry of the town. The idea got the nod from government, they provided the capital and in 1996 the first loaf was baked.

That was after the vetkoek project didn't work out. Katryn Hendriks used to get up at four every morning to



knead dough and deep-fry it in time for sale. A hard, hot job, and the profits were extremely low. Now Katryn makes bread.

"We started with 12,5kg bread flour, plus another five kilograms, some yeast and two litres of oil. That was the first day. Now we bake more than 100 loaves a day, and 60 of them go to the primary school. We won the contract to supply the children with sandwiches every day. But we also bake biscuits to sell and in summer we make ice-llies for the school kids. Oh, and we have 60 chickens and we sell their eggs."

This was exactly what was intended with this provincial pilot programme. It planned to empower women to take responsibility for seeing and solving the nutritional problems in the community. And diversifying from bread to biscuits and eggs is a great start to the home-industry aim of the project. Now the dedicated bunch of women clean and pack raisins, roast peanuts and make popcorn for sale. They also grow vegetables in the garden of the disused school hostel, from where



they will soon be operating their bakery too. But for now the bakery is in a hot home kitchen where 17 loaves are baked at a time, and there's a long queue outside to buy the crisp, hot bread

The bakers earn R10 a day for their labour and work on a rotational basis so more women have a chance to be productive and earn a little money. They are mostly the mothers of children at nutritional risk, which was the idea of the clinic sister. Get the moms involved and they will monitor and attempt to solve the food problems of their children. In addition, the project helps the community to see and use their available

resources and so contribute to their overall upliftment and development. Business skills also come into play and basic filing, administration and report-writing skills are being taught to the willing bunch – so that the project can be run as efficiently as possible and monitoring it also becomes easier.

Of course the willingness and dedication of the group to practise their preaching has had further reaching positive effects. The Strydenburg community which was once politically divided is united again, as everyone is working for the common goal of upliftment through improving the lot of the town's young ones.

And Deputy Director of the Department of Health in the Northern Cape Lizeka Magwentshu agrees. "The Strydenburg community is a great example of a project working because of the commitment of the people. They had the original idea and now they are working hard to see it through." The next step is to further link projects in the community so that more people can participate in more areas. Already, women in the feeding project take an active role in monitoring the growth of the children in the community through home visits. The snowball effect is that the clinic attendance has increased and a referral system between the health centre and the community has been established. The bottom line is that fewer children are now at nutritional risk than when the programme first started.



Lizeka says parents know what food their children need, they just don't have the resources to give it to them. "You won't believe it, but many kids go to school without anything to eat. Their first food of the day is a peanut butter sandwich at school."

Doortjie Vlink says it's true. She was on her way home from feeding the kids sandwiches at the primary school. Doortjie has been involved with the project since it began. And every school day for the past three years Doortjie has been at her post at the primary school at 7am to be ready to feed the kids at break-time. She mixes peanut butter and jam together, cuts each loaf into 16 and makes a sandwich for each child. Eight children eat from a loaf. Nobody goes without. Sub A to Std 5 eat together at 9.45am. And there's no fighting for food. The higher standards get any left-overs, but only once the primary goers are satiated. Doortjie Vlink is dedicated. And for a salary of R75 a month, Doortjie is a saint.

Now the cricket has reached fever pitch and the town's folk are watching from their windows. Everyone's home, so the game has fine support. And energy levels are high. These are regular kids and like

true-blooded South Africans they love the game. And if they can't watch cricket on TV, well, they'll just play it themselves.

Back at the bakery, bread is in progress. After all, the townsfolk also patronise the constant fresh supply. And now that the children have eaten, it's the adults' turn. Oom Elliot is one of these patrons.

A rotund man of colossal proportions, he buys three loaves a day. He loves the stuff, and it shows. He says the bread is good, but Oom Elliot is too busy watching the cricket to elaborate. You would swear it's a test match for all the attention the game is getting. All those skinny legs chasing a wildly bouncing tennis ball. Then there's not much else to do in Strydenberg. And certainly no entertainment to speak of. Just the cricket. And watching the bread rise. But that's entertainment for the women folk.

The rotational system of baking has enabled 78 mothers to be involved in the project, which last year boasted a turnover of R4 500 per month with R115 of that being pure profit. But most of the bakers' salaries are ploughed back into the project to ensure there is an income for the following month.

Now there are new ideas on the horizon. Lizeka says the community should be encouraged to supply cooked meals to the school as the nutritional value would be better and so would the profits for the hard-working moms. As a highly qualified dietician, Lizeka suggests moms start cooking soya mince, mealie rice and vegetable stews from

vegetables grown in the project's garden. Although the town's children have benefitted enormously from the bread programme and there are far fewer underweight and stunted children than there were when it started, cooked meals could further improve the nutritional status of children at risk. And at the same time give the needy town's folk work and money.

Besides, now it's entirely possible to implement this 'meals on wheels' programme because the enthusiastic baker bunch won a Competition for their hard work and bought a bakkie with their winnings. So transport is one problem they no longer have. The idea is certainly a good one as the future of the children of Strydenberg depends on right now. That their bodies and minds be fed and fueled to give them a future that isn't a struggle like the town they were born in.

It would be a real shame if the next Paul Adams was out there playing cricket on that dirt road in Strydenburg and nobody even knew. He may have thin legs and skinny arms now, but he hits a mean ball to the applause of the whole town. Next game should be the Wanderers. To the applause of the nation.

NORTHERN PROVINCE:

MAFEFE AND NGOBE

MAFEFE – POULTRY IN MOTION

It could be Kentucky. Or even Texas. There's a lot in common. Chickens and big ideas. But it's Mafefe in the Northern Province, 170km from Pietersburg; hot, dry and quite deserted. Only a couple of die-hard bushes decorate the landscape. Still, plenty of people call it home. Their hearts are there.

Champ Moshobane works with the people. He's the Committee Liaison Officer for the southern regions in the Northern Province, and he says the commitment of the people of Mafefe is "amazing".

"It's a dusty place that one. Very impoverished. They used to mine asbestos in the area, but the mine closed because of health problems amongst the workers. So now most people are unemployed."

Mafefe may be backward in many respects, but definitely not in thinking. These people think big, just like in Texas. When the government asked them for ideas to solve their nutrition, unemployment and health problems, the people of Mafefe delivered a prompt answer. They quite simply wanted a mammoth chicken rearing and slaughtering project, so they could supply fresh chickens commercially. They figured the profits from the project could be used to alleviate the nutrition problems in the 14 villages that make up Mafefe.

So the dedicated bunch of project workers learnt about book-keeping, business management and, of course, mostly about growing chickens. Now their plans are in motion and the first batch of chickens will arrive in early June.

The project will consist of four broilers, already built with finishing touches being made to the last two. Fences are up and the offices are complete. When up and running, the four broilers will house 400 chickens which will be sold to neighbouring communities and hospitals, and the eggs will be a secondary product.

Champ says he hopes the project will have a "trickle down effect" so that ultimately the community's children will have better nutrition and care. Of the 160 people to be involved in the project, most are unemployed women – the idea being that they will care for their families with the profits.

It seems all the teething problems of the Mafefe project are over and the future for this community looks quite fine. Champ says the project is a "means to an end, because when this pilot project picks up it will encourage other projects, and so put the area on the map".

Then maybe a name change would be in order. Something like Texas Town or Kentucky Corner. Something that reflects the minds of the people. And their big idea that went right.



NGOBE – VEGGING OUT

The big thing about Ngobe is its problems. The project they're working on is small and so are the funds. It's been a long struggle for this community. Sixteen years so far.

Ngobe village, 12km from Giyani in the Northern Province, has 46 000 inhabitants but only 65 people started the first community care group project back in 1983. They were all women concerned about the ill health and poor nutrition of their children. Now the health aspect has improved, but the nutritional needs still have to be met. Hopefully that will change soon.

The Chief decided to lend a hand and gave riverfront land to the group of women to plant vegetables. The National Nutrition and Social Development Programme provided the money. But 13 years later the aims of the project have not yet been met. Lack of funding and apathy from the community are seemingly insurmountable problems at the moment.

Lyndie Malumbete is from the Department of Health and Welfare and is involved with the Ngobe project. She worries that the community members are just not dedicated enough yet "they expect overnight changes". But there's new hope for the committed few. The Department of Social Development has granted R10 000 to the busy ones to continue their vegetable gardening project. And the creche for the children of gardening moms has also received a daily subsidy. So things are looking up.

And there's more on the go. A brick-making project has been started to make cement bricks, so community houses don't collapse during storms, and a sewing project is also underway to make affordable school uniforms for the children of Ngobe.

Then when things really take off, the project members hope to upgrade the creche with educational books and toys, employ a qualified teacher and give the children balanced meals. The veggie growers think this might all be possible if they could just irrigate their crops properly. Then they could produce enough in their garden to feed the community and sell the surplus for profit.

If Ngobe had its way it would provide its people with homes, clothes, food and care through its projects. It all sounds fair and simple. They just need something to work with.

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