

NMMU ENGAGEMENT AWARDS APPLICATION 2016



DRS JENNY JANSEN & ROSEMARY EXNER

MISSIONVALE COMMUNITY PSYCHOLOGY CENTRE

APPLICATION FORM: NMMU ENGAGEMENT EXCELLENCE AWARDS

(CONSULT THE NMMU ENGAGEMENT EXCELLENCE AWARDS POLICY AND READ THE APPLICATION FORM BEFORE COMPLETING THE TEMPLATE IN ORDER AVOID A DUPLICATION OF INFORMATION.)
COMPLETE THIS FORM IN TYPESCRIPT. PROVIDE ONLY THE INFORMATION REQUESTED.

SECTION A: Application category			
<ul style="list-style-type: none"> Indicate with an X in the appropriate box the award you are applying for. Your application will only be considered for the award you have applied for 	<div style="display: flex; flex-direction: column; gap: 10px;"> <div><input type="checkbox"/> Engagement Excellence Award – Science, Technology and Engineering</div> <div><input type="checkbox"/> Engagement Excellence Award – Social Sciences and Humanities</div> <div><input type="checkbox"/> Engagement Excellence Team Award</div> <div><input type="checkbox"/> Engagement Excellence Project Award – Science, Technology and Engineering</div> <div style="background-color: #e0ffe0;"><input checked="" type="checkbox"/> Engagement Excellence Project Award – Social Sciences and Humanities</div> <div><input type="checkbox"/> Emerging Engagement Excellence Awards <i>(note that Professors and Associate Professors are not eligible for this category)</i></div> </div>		
Surname of Applicant/Team Leader	Jansen		
First Name	Jennifer		
Initials	JM		
Title	Dr		
Telephone numbers	X1333		
E-mail address	Jennifer.jansen@nmmu.ac.za		
Employment position held at NMMU	Clinic manager		
Faculty	Health Sciences		
Department	Psychology		
Division	School of Behavioural Sciences		
Immediate line-manager	Prof Louise Stroud		
Eligibility: Are you permanently employed and/or on a long term (3 years or more) fixed contract? (indicate with an X)	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; text-align: center; padding: 5px;">Permanent</td> <td style="width: 50%; text-align: center; padding: 5px;">Fixed term contract In third year of contract</td> </tr> </table>	Permanent	Fixed term contract In third year of contract
Permanent	Fixed term contract In third year of contract		
If this is an application for one of the <u>Engagement Excellence Project Awards</u>, provide a brief title and description of the project (250 words maximum)	<p>Title: Chameleon Clinic: A dynamic trans-disciplinary approach to mental health services in an impoverished community.</p> <p>Description: The Missionvale Community Psychology Clinic being totally inundated with service requests such as psychometric assessments and mental health issues, has had to adapt its customary psychology service</p>		

delivery in order to attempt to meet the needs of the local indigent community whilst affording the student-in-training quality teaching and learning opportunities. The Clinic has developed into an ideal platform from where the students can learn in the field, hone their skills set and offer quality mental health services to the community. We have found that students are rarely exposed to critiquing the existing medical model of psychology. Training is also not geared in making adjustments to their techniques or learning appropriate methods of intervention in an ever-changing world. The community projects and interactions need to be revisited in order to provide psychologists with appropriate skills that they require in order to work with the community's problems and in this way, stay current and relevant in their field.

As the students engaged more fully with the community in extended interactions, the need for a multidisciplinary approach became apparent. Traditional psychological interventions were insufficient and as this situation was replicated at the local hospital, a synergy emerged where other trained health professionals twinned with the Psychology Clinic and Ukhanyo Psychiatric Clinic was born. This provided the ideal platform to begin creating an effective trans-disciplinary healthcare team consisting of all levels of psychology, social work, and advanced psychiatric nursing students-in-training. Working with trained professionals such as medical doctors, psychiatric registrars, psychologists, clinical social workers and occupational therapists provides an ongoing comprehensive health service. ⁽¹⁾

If this is an application for either the Excellence Awards or the Emerging Award, provide a brief description of your engagement activities and initiatives (250 words maximum)

Description:

If this is an application for the Engagement Excellence Team Award, provide

- **the names of all staff members and students participating**

Staff:

1. Dr Rosemary Exner (psychologist)
- 2 Ms Elzaan Cothill (part time psychologist)

Students:

- the nature of their involvement
- a brief description of the team's engagement initiatives and activities (250 words maximum)

1. Sishle Ntlangu (intern psych)
2. Ms Mingon du Preez (reg counsellor)

Description:

Are your Engagement activities/projects/initiatives registered on the Engagement Management Information System (E-MIS) on SharePoint?

If not, please ensure that they are before you submit this application.

Applications that are not registered and updated on the E-MIS will not be considered for Awards.

The most recent date on E-MIS for each project update (achieved when 'submit' is clicked) must be in 2015.

Provide the exact titles (as featured on the E-MIS) for all of the Engagement activities/ projects/ initiatives with which you are involved.

Visit <http://caec.nmmu.ac.za/Engagement-Information-and-Development/Engagement-Management-Information-System>

Titles:

- 1 A trans-disciplinary approach to mental health.

SECTION B: Engagement categories

- You are required to describe and report in detail on a minimum of two engagement categories (these are 1, 2, 3 and 4 below) in order to be considered for an award.
- If you or your team are involved in three or four of the engagement categories, report in detail on all of these categories.
- Applications that describe and can provide evidence of engagement activities across all four categories are encouraged.
- Refer to section 5 of the attached Engagement Excellence Awards policy which provides a guideline on the specific activities you should report on under each of the categories you have chosen.

Report on your:

1. Engagement through Community Interaction, Service and Outreach:

We have engaged in this area by means of the following:

- 1 Having engaged with the community, we have managed to staff the Clinic so that service provision is available from Monday to Saturday and the local community now views the clinic as offering sustainable service delivery. In the past, work in the community was viewed with suspicion as data-gathering opportunities for students only.
- 2 The core function is in assisting schools where no psychological services are available as well as psychological assistance to a large pastoral care NGO in the area
- 3 Advocacy regarding services has been disseminated in local newspapers as well as University and Faculty newsletters
- 4 Workshops conducted in isiXhosa are held monthly to assist community care-givers with problems they experience when conducting home visits.
- 5 Requests come for assistance in large scale trauma incidents in the area which affords opportunities for multi-disciplinary volunteers.

- 6 We negotiated with NMMU Professional Development for an opportunity to afford social work interns practicum opportunities within the community working together with other health professionals
- 7 As various needs have emerged, the Clinic has had to adapt quickly, and transform from primarily a psychological service, to an interdisciplinary one ^(4,5,6,7).

Report on your:

2. Engagement through Teaching and Learning:

We are engaged in this area by means of the following:

- 1 The clinical platform has afforded the students a variety of opportunities to become involved in community experiential learning such as forging partnerships with the special schools in the area as well as mainstream and pre-primary schools where they conduct training sessions or workshops for both pupils and staff
- 2 The clinic by its existence has been able to offer psychology, social work and psychometry internships, clinical exposure to psychiatry registrars and professional practice to registered counsellors, occupational therapists and advanced psychiatric nursing opportunities.
- 3 The opportunity to create short learning courses for teachers in the local schools in order to support their need for better understanding of specific learning disorders, psychiatric conditions, wellness, classroom management, PTSD, career guidance, other disabilities etc
- 4 The clinic has been identified as a clinical platform for the re-curriculated health sciences programmes, with the pilot beginning in June 2016 (120 trans-disciplinary students)

Report on your:

3. Engagement through Profession/Discipline-Based Service Provision:

We are engaged in this arena in the following ways:

- 1 Improving professional standards of students in service delivery, clinical engagement, report writing etc as the changing clinic landscape and the ever-increasing community needs dictate that we have had to re-educate our student- in-training to enable them to adapt very quickly to a dynamic client base and adjust their traditional interventions in order to meet local needs
- 2 Clinic management together with the students go to the schools in the area to test learners, assess, write reports and recommend further action.
- 3 The trans-disciplinary approach is exposing students from various health professions to the need for core health service competencies that are common to all health professions working in the community, using a bio-psych-social-spiritual approach
- 4 This platform in turn will inform academic programmes as to transforming current training to include a stronger emphasis on the provision of community health services in the light of the limited primary health care status in the Eastern Cape

Report on your:

4. Engagement through Research and Scholarship:

This domain has afforded us the opportunity to engage in the following ways:

- 1 The opportunity to attend scholarly mental health workshops and professional training days pertinent to the work done in the community so as to stay abreast of current interventions and therapies
- 2 The necessity to write two articles for publication that capture the development of this community project
- 3 Exposing our students to visiting scholars who both inspire and encourage their research possibilities

- 4 Students, as they work in the community are discovering wonderful opportunities for research such as how parents cope with the developmental needs of their babies which has currently sparked an intended research initiative to be undertaken by students in various health sciences disciplines
- 5 Hosted the Pfizer 2-day Good Clinical Practice Seminar ⁽¹⁰⁾ for local health professionals interested in conducting research in prevalent community diseases such as TB and HIV/AIDS.
- 6 The clinic management duo is involved in the Faculty of Health Sciences TRANSFORMING HEALTH SCIENCES EDUCATION FOR EQUITY project and form part of the group researching Objective 1: Partnering for health and Community engagement that is based at the Missionvale Campus of NMMU ⁽⁹⁾

SECTION C : : Descriptions

1. Describe the impact your Engagement activities have made on stakeholders/beneficiaries/communities and provide details on how these activities are acknowledged/recognized by:

1.1. External

communities/stakeholders/beneficiaries:
(not staff and students of NMMU)

- | | |
|--|---|
| <ul style="list-style-type: none"> • Missionvale Care Centre receives psychological assessment, crisis counselling, pre-and-post-test HIV counselling, etc; support groups for their care workers • Schools and special schools in the area receive workshops on study skills, self-esteem, protective behaviours, bullying and study habits. Social work interns engaged thrice weekly on site with community social problems: violence, family functioning, home visits, and general wellness. Group testing and grant assessments done by psychometry interns. Advanced psychiatric nursing intervention with Red Cross caregivers on a monthly basis • Dora Nginza Psychiatric Unit has partnered with this Clinic to provide a multidisciplinary service (Ukhanyo) to the community consisting of psychiatric registrar, medical doctor, clinical. Social worker, occupational therapists. The Clinic provides the psychologists, psychometrists, and registered counsellors and social workers. | <ul style="list-style-type: none"> • The staff at the MCC rely on the expertise of the clinic and constantly refer clients/patients for intervention. Verbal acknowledgement is prolific • Staff member invited to join a school governing body. Assistance is requested on an ongoing basis, Schools serviced, frequently request further support and interventions as headmasters comment that the Clinic provides an efficient and speedy service delivery. • Qualified staff at both the clinic and the hospital mentor the students. This has led to interdisciplinary treatment of single patients/clients, thus breaking down historical silos where each professional only works in their insular field. This synergy has been commented on as providing a comprehensive service that is efficient and effective |
|--|---|

<p>1.2 Internal communities/stakeholders/beneficiaries: (staff and students of NMMU)</p> <ul style="list-style-type: none"> • Students get exposure to different community interaction within their fields together with other health professionals ⁽⁸⁾ • Visiting international students were provided with exposure to community work and requested to work in the community here rather than state hospitals in the future • Input into the patient management system has been provided by ITC which will ease record keeping and office management 	<ul style="list-style-type: none"> • Skills sets taught in the classroom are adjusted and honed to fit the needs of the community. The MCC, local schools, teachers and parents all attest to the service provided by this Clinic • Norwegian students ⁽¹¹⁾ were in the Missionvale Care Centre and were thrilled with the opportunity of being immersed in community life. The feedback received by them from community members was overwhelming • This project is still in its infancy therefore no acknowledgement
<p>2 Describe how your Engagement activities contribute towards faculty/department/entity engagement goals and objectives. <i>(Refer to your Department/Faculty/Entity's strategic plan here)</i></p>	

2.1 The vision of our faculty is to develop exceptional fit-for-purpose health, social and related professionals for South Africa through transformative and innovative education, underpinned by relevant world-class research. We are responding to the call by attempting to strengthen the health system in the township by:

- Introducing health science students to innovative and challenging aspects of community functioning through face to face interaction with NGO's Care Centre, hospitals and special schools in the area. In order to do this we have had to profile the community in which we work to give us an idea of the most challenging psychological aspects in the surrounding community including MVA, drug abuse, poverty, violence, rape and health related issues such as TB and HIV.
- As a selected clinical platform for the FHS Project "Transforming Health Sciences Education to Support Equity in Health, this project could possibly be used as a blueprint for the establishment of further clinical training platforms.

2.2 The Faculty promotes quality education in health, social work and sport to ensure relevant, capable and compassionate professionals and the project has afforded students numerous opportunities to develop these core competencies as they engage with the local schools and social support entities.

- The students find themselves in situations where theory learnt has had to be very quickly transformed to meet the changing day to day challenges. The students have had to adapt a medical model to incorporate many bio-psycho-social and spiritual challenges. By interacting as a multidisciplinary team in the community, they are learning to become resilient.
- The ability to manipulate textbook interventions is leading students in becoming innovative and flexible in the knowledge that they are also able to draw on community members to assist and support their initiatives. This is strengthening their practice and the knowledge gleaned from their interactions can inform future academic practice.

2.3 Community support and involvement are vital to our faculty which aims to train students to serve the best interests of all its stakeholders and meet the staff shortages in South Africa whilst pursuing world-class research in health and wellness.

- The voice of the community is heard in that it dictates the nature of the Clinic's functioning, the type of client, type of intervention, interaction with NGO's and schools in the area

2.4 The FHS wishes to inspire graduates to become visionary leaders in their workplaces, communities and professions. By being exposed to new situations and having to dig deep, our students are becoming relevant to an ever-changing unique workplace

- Office-based intervention is no longer the order of the day as our students often work under extremely difficult circumstances. Working at grassroots level, they are better informed as to the traditional and healing practices which complement our existing medical model. By being in touch with community functioning, they become more relevant, more resilient and better accepted by the community in which they work.

3 Describe how your Engagement activities contribute towards the achievement of the NMMU Vision 2020 Engagement Strategic Goals and Objectives. (Refer to the attached NMMU Engagement Strategic Goals and Objectives).

- Because the Clinic is situated in the heart of the community and the students are discovering areas of ongoing concern, the possibility of conducting research that contributes to local, national and global sustainability is ever present. With students rotating sites every six months, they have the opportunity to engage with the community in depth and research areas of interest.
- Registered counselling students do action research every year in the community. For example, our current RC conducted research into Conflict in the School setting thus creating and supporting an environment that facilitates research productivity.
- The aim of the clinic managers is to develop and sustain the research capacity of staff and students and we encourage everyone to do research. Our office manager, a registered counsellor, is researching the relationship between mother and the developing toddler in the community in order to conduct a fit-for-purpose programme for the mothers in the future. This programme that will be assisted by occupational therapists and human movement science students in supporting the child's early development.
- All of our outreach engagement activities reflect respect for diversity, excellence, ubuntu, integrity, responsibility and respect for the natural environment.

4 Describe how your Engagement activities contribute towards: (Refer to any relevant media coverage, representation on boards or committees, scholarly publications, conference presentations etc.)

4.1 Addressing the needs of society and various external communities served by NMMU:

- Westview Special School SGB member (Dr Jansen)
- Chapters in the two following books: *Child and Adolescent Development*, (2013) and *Psychological Assessment in the South African Context* (2009: under revision) ⁽²⁾
- Both Jansen and Exner serve on the TRANSFORMING HEALTH SCIENCES EDUCATION FOR EQUITY project : Objective One committee
- Hosted the Pfizer Good Clinical Practice 2-day Seminar
- RC presented a poster at Rhodes in a national conference on Autism and the caregiver ⁽³⁾

4.2 Profiling and promoting the NMMU as an engaged university:

- Various articles in NMMU Talk and Health Sciences Newsletters ^(2,3,4)

5 Describe how you have successfully integrated engagement into the Teaching and Learning and Research functions of the university. (Refer to sections 5.1, 5.2 and 5.3 of the Engagement Excellence Awards Policy as a guideline)

- Experiential learning is undertaken by our students interacting at grassroots level, to promote mental health in the local schools and via referrals from all health professionals and concerned parents ⁽¹²⁾. - 12.2.
- Our service learning strategy integrates meaningful community service with instruction and reflection which informs the traditional classroom-based learning
- Work- integrated learning happens through the internships that our students undergo where their traditional clinical and professional practice is adjusted to meet community needs

- Community-based education is important to us at the Clinic. A number of educational sessions have been conducted by the student interns in schools such as pregnancy and self-protective behavior, bullying, study methods, anger and aggression management, self-esteem and personal growth, self-care,
- Continuing professional development is encouraged and students have attended the Mental Health Symposium run by the Elizabeth Donkin Hospital and weekly tutorials run by the Dora Nginza Psychiatric Dept. The clinic managers attended a five-day training course on Child and Adolescent Mental Health Community based practice at Lentegeur hospital, WC. Our Registered Counsellor presented a poster at a psychology conference held at Rhodes University entitled Stress, resilience and coping of housemothers caring for children on the Autism spectrum⁽³⁾.
- Customised training and short learning programmes have been requested by professionals working in the community (teachers etc) covering the following topics: PTSD, AHD, Looking after yourself as a professional educator, autism, Specific Learning Disabilities, Developmental Barriers. We have devised the programmes and are awaiting approval and certification

6 Provide details of scholarly outputs/contributions made to a body of knowledge as a result of your engagement activities. (Refer to publications, new teaching programmes, technical reports, conference proceedings, etc.)

- Two articles in the pipeline
- A chapter in *Child and Adolescent Development*, (2013)
- A chapter in *Psychological Assessment in the South African context* (under revision)

7 Describe the important role performed by you or the team in:

a. The leadership and management of the engagement activities and initiatives:

b. The level and extent of partnerships/collaborations/networks/linkages formed internally and externally:


a. Internally (*inter-departmental, inter-faculty and interdisciplinary*):

Internally, we have had to negotiate space on campus, office furniture and human resources. On an inter-departmental level, we have worked with ITC, Disability, Social Development, Dietetics, Art, Nursing, Community Engagement, On an interfaculty level, we have forged relationships with Education having addressed foundation phase students before their move to Missionvale. Interdisciplinary collaboration has been with, psychiatry, occupational therapy, social development, psychiatric nursing science, education

b. Externally (*at local, national and international level*):

Locally we work with the Missionvale Care Centre (NGO), principals, teachers and parents of mainstream and special schools, places of safety, old age homes. The Departments of Health and Education have an ongoing working relationship with the Clinic.

SECTION D: Signature

Applicant Signature		Date	12 April 2016
SECTION E: FOR OFFICE USE <i>(Administered by the Centre for Academic Engagement and Collaboration and the NMMU Engagement Committee)</i>			
Resolution regarding application from Awards Committee:			
Feedback to applicant:			

SECTION F: Portfolio of Evidence

Attach any relevant documents as a portfolio of evidence to support your application. **Limit this portfolio of evidence to a maximum of 20 pages.** This can include photographs, promotional material, commendations from stakeholders/beneficiaries etc., publication references, (extracts from) annual or project reports to funders/sponsors etc., or any other relevant materials that may serve as evidence.

List of supporting documents submitted along with this application as addendums:

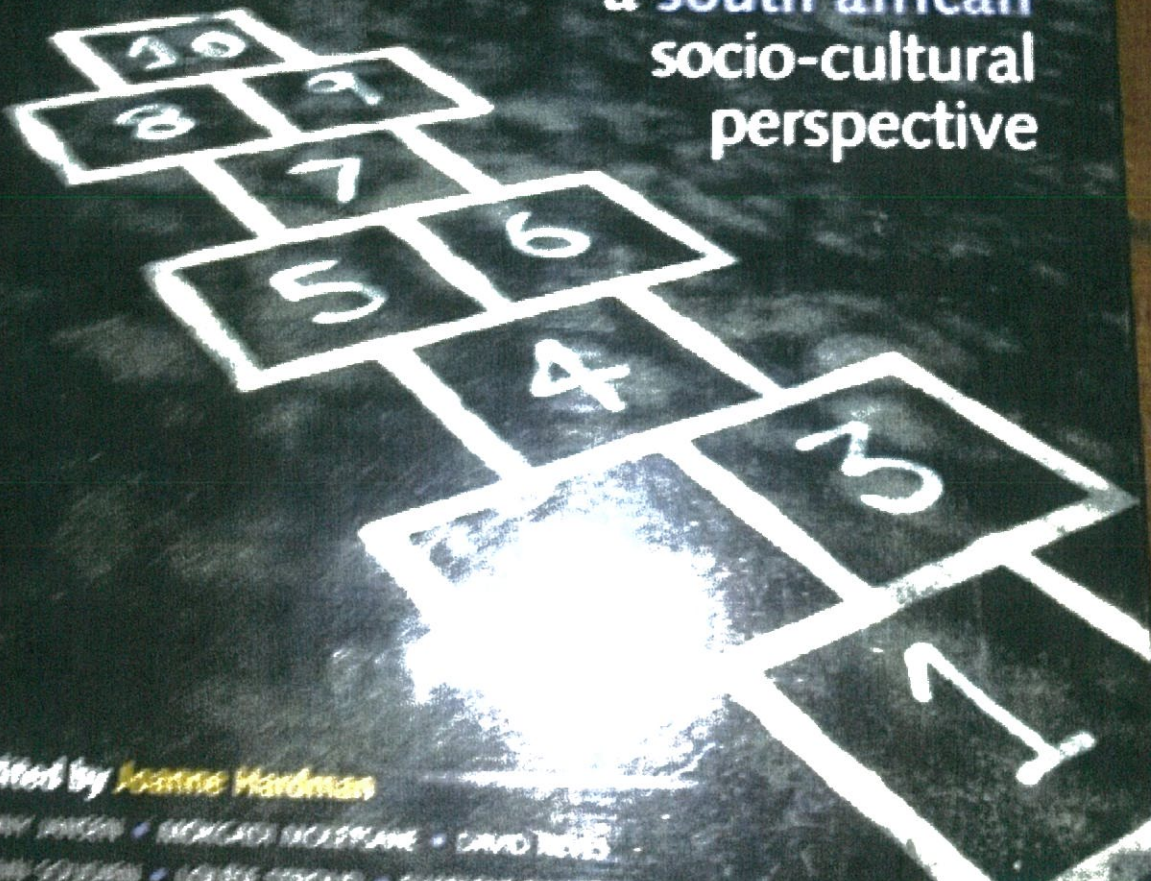
Please ensure that the documentary evidence below is clearly cross-referenced with the relevant section and number in the application template, for example Section B1 or Section C4.

- | | | |
|----|---|--------|
| 1 | Promo video | (A) |
| 2 | Chapter in psych book | (C4.1) |
| 3 | Students' poster presentation | (C4.1) |
| 4 | Play therapy room launch Talk June '14 | (B1.7) |
| 5 | Ukhanyo Clinic Launch (1) Talk June '15 | (B1.7) |
| 6 | Ukhanyo Clinic Launch (2) Talk June '15 | (B1.7) |
| 7 | Ukhanyo clinic launch The Herald | (B1.7) |
| 8 | Ukhanyo service extension plan | (C1.2) |
| 9 | Blue Skies Objective One project | (B4.6) |
| 10 | Pfizer seminar programme | (B4.5) |
| 11 | Foreign student visit | (C1.2) |
| 12 | Clinic report excerpt | (C5) |

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CHILD and ADOLESCENT DEVELOPMENT

a south african
socio-cultural
perspective



Edited by Joanne Hardman

BARRY JANSSEN • BECKY CATHERINE SICKLE • DAVID TREVES
CHRIS SLOAN • LOUISE STREET • CHARLENE SWARTZ • LAUREN WILD

2

(C4.1)

Helping hands

CHILDREN receiving play therapy in the Missionvale Campus Psychology Clinic now have a warm, safe and memorable environment thanks to Studio Arts' students and staff.

Designed by Studio Arts' Joy Black, the mural in the playroom consists of a large bird and protea flowers in warm and inviting colours.

The project was completed over two and a half days with different students involved each day. Studio Arts also covered all expenses involved.

Postgraduate Psychology students do professional training and research in the clinics on the Missionvale and South campuses where children dealing with a variety of difficulties, such



CELEBRATIONS ...: School of Behavioural Sciences Director Pi Stroud (from left), Studio Arts' Joy Black, Psychology's Don Coelho, Health Sciences Dean Prof Vic Exner and Psychology Clinic manager Jennifer Jansen at the "Saying Thanks to Helping Hands" event celebrating the art project at the clinic.

as aggression, abuse, environmental difficulties and bullying, are being assisted. Psychology recently thanked

the art students and staff at a "Saying Thanks to Helping Hands" event also including Technical Services staff who sponsored time and equipment in upgrading not only the playroom, but other facilities in the clinic as well.

► Faculty news

Psychiatry needs now also met

THE Missionvale Psychology Centre, previously known as the Vista Community Clinic, heeding the needs of the surrounding community, has joined forces with the Walter Sisulu Department of Psychiatry at Dora Ngiza Hospital to offer a multifaceted mental health service.

Social work, psychiatric services, registered counsellors and psychotherapeutic services are now included.

This led to the recent launch of the Ukhanyo Community Clinic on Missionvale Campus. Its name Ukhanyo, meaning 'light' or 'enlightenment', embodies the vision of the psychiatric services division of the Missionvale clinic as it strives to serve the community in diverse areas and by diverse means.

Having only offered psychological services in the past, the clinic now offers invaluable academic and greater community experiential learning opportunities within the extended Eastern Cape provincial clinical training platform, while engaging with community related health problems.

The clinic, together with staff from the Dora Ngiza hospital, currently focuses on the child and adolescent and offers psychiatric services, psychotherapeutic services, psychometric evaluation, counselling, psycho-social wellness and personal development workshops and opportunities for outreach and research.

"Due to the inclusion of a greater range of mental health workers, a variety of services will now reach diverse target groups. Collaboration has been established with the Missionvale Care Centre. This centre offers community, nutritional and medical support while we in turn, offer psychiatric, psychological and social support", says School of Clinical Care Sciences' **Dr Rosemary Exner**.

Future plans include the establishment of a



MORE NEEDS MET... School of Behavioural Sciences Director **Prof Louise Stroud** (from left), School of Clinical Care Sciences' **Dr Rosemary Exner** and Missionvale Psychology Centre Manager **Dr Jennifer Jansen** celebrate the launch of the Ukhanyo Community Clinic on Missionvale Campus now including social work, psychiatric services, registered counsellors and psychotherapeutic services.

small school as currently there are no psychological services offered by the Department of Education in Port Elizabeth. This leaves the community with no assistance for learners experiencing psychological and scholastic barriers at school.

This new venture will focus on children and adolescents with severe behavioural problems that impact on their learning. The intention is to assist them on a daily basis for a period of six months, using a trans-disciplinary approach. This includes intensive multi-modal therapies and remediation so as to keep abreast with academic demands.

Also envisaged are support programmes for local teachers in the areas, young mothers, the aged as well as outreach programmes for the youth. These

programmes would involve students from other disciplines within the Health Sciences Faculty.

Dean of Health Sciences **Prof Vic Exner** noted that Ukhanyo underscores the drive of the Faculty, namely a trans-disciplinary approach to teaching, training and research, helping to strengthen both the local health and social systems by becoming fully responsive to the needs and adjusting services.

School of Behavioural Sciences Director **Prof Louise Stroud** and Walter Sisulu University Psychiatry Department Head **Dr Zukiswa Zingela**, both endorsed the establishment of Ukhanyo and believe that it will indeed be a 'light' in the lives of many local people as well as a place and agent of enlightenment in the larger community.

5.

(B1.7)



6.
(BI.7)

grieved children

Parents affected by violence



The photography committee of the NMMU Child Psychology Clinic is, front, from left, Cora Bekker, Jenny Jansen, and Prof. Dr. An Pennington and back, Darren Coxhill and Prof Louise Stroud

Picture: MIKE HOLMES

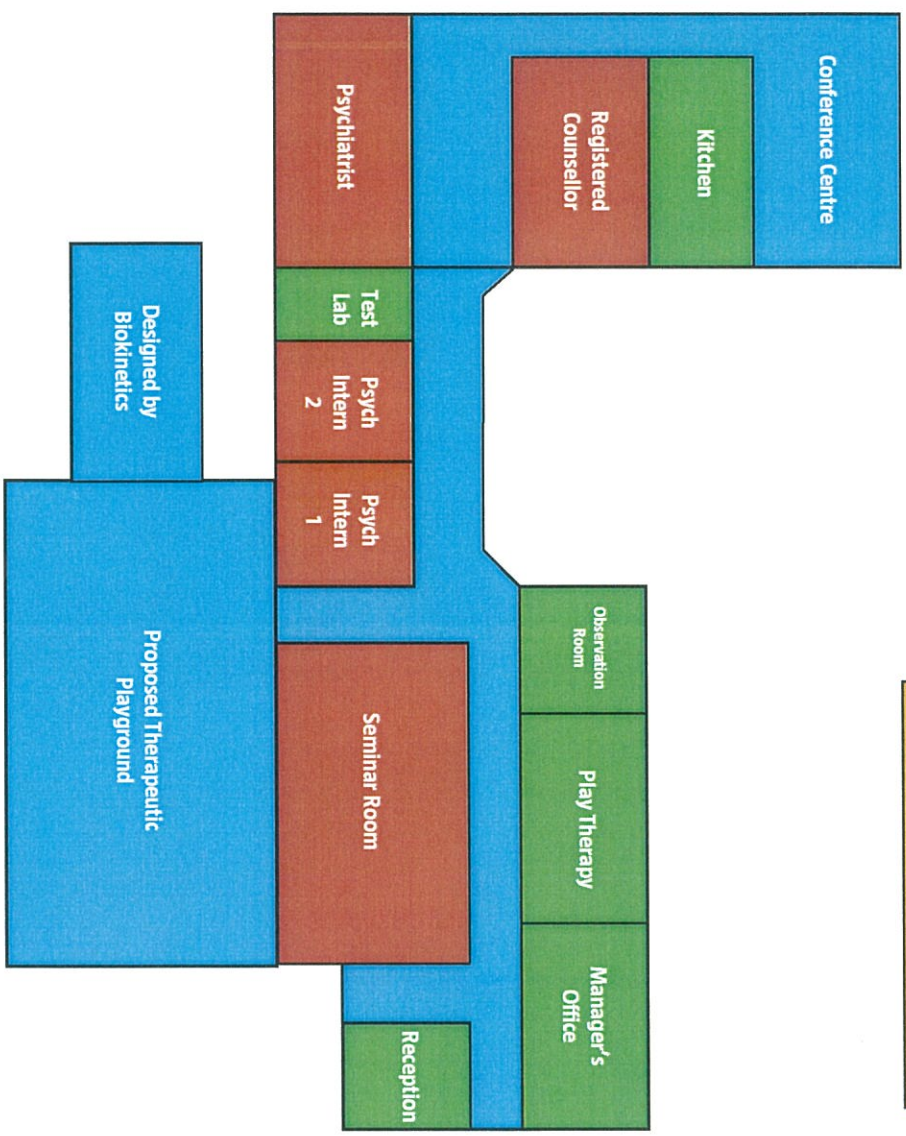


7
(B1.7)

Occupational Therapist
Scarce Resource
Speech Therapist
Scarce Resource

Art Therapy
Music Therapy
Dance Therapy
Drama Therapy

Ukhanyo School
Class Teacher
Psychiatrist
Nurse
Psychologist
Class Teacher
Dietician



Collaborative future scenario with Dora Ngina Psychiatric Unit

Child and adolescent patients in the new inpatient unit can attend the school situated at the Missionvale Campus

8
(01.2)

Criteria for admission to the school

- ▶ Average intellectual ability.
- ▶ Primary problem must be psychological in nature.
- ▶ Length of stay - 6 month period.
- ▶ Children remain in their present schools registered with for this period
- ▶ School fees must be paid to Ukhanyo School.
- ▶ Maximum number of learners will be eight.
- ▶ All learners will be in the same schooling phase (Foundation phase, GET phase)
- ▶ Parents must be willing to be involved in the treatment during this time.
- ▶ Parents must commit to keeping their child in the programme for the full period.

PARTNERING FOR HEALTH

MISSIONVALE AREA DEMOGRAPHIC PROFILE FIRST DRAFT NOVEMBER 2015

1. Introduction

The mandate of Objective 1 (Blue Skies) is *to partner with our community to provide community healthcare services and, through these partnerships, enhance the practice opportunities for NMMU Faculty of Health Science (FoHS) students.*

The Missionvale area has been identified as a potential initial site for FoHS community work. Such work opportunities can be facilitated through the strengthening of existing community health partnerships, the creation of new partnerships, and the establishment of new sites based on community needs.

This report reviews available statistics to describe the lived experiences of the residents of the Missionvale Area with two aims in mind: Firstly, to provide a guideline for future demographic profile work; and secondly, to provide a demographic profile of the population of the Missionvale area as a first step in mapping healthcare services.

This report begins with a working definition of the term 'community', establishes the geographic location of the Missionvale area, and then positions the Missionvale area demographically within the Nelson Mandela Bay Metropole (NMBM), the Eastern Cape, and South Africa at large. The report is wide-ranging and offers statistics on a variety of population measures including age, sex, race, language, education, employment, housing, and crime. In addition, emphasis is placed on local health statistics including mortality rates, facilities, and environmental and mental health.



3.10.6 Mental health¹⁹

Official estimates approximate 14% of the global burden of disease is attributable to mental disorders. The prevalence of PTSD in an Eastern Cape sample was found to be 10%. It is also shown approximately 30% of South African adults have experienced a DSM-IV d

9

(B4.6)

most are not treated¹⁹. Given the adverse living conditions, and high levels of violent crime, in the Missionvale area, the mental health impact could be higher. The following points are just a few of the significant areas mental health impacts significantly on the national disease profile²⁰:

- Neuropsychiatric disease surpasses both cardiovascular disease and cancer as the leading cause of disability due to non-communicable disorders.
- Mental disorders cause considerable individual and collective suffering.
- Mental disorders mark a significant loss of social and occupational functioning and productivity.
- Mental illness is a major burden on caregivers and families.
- Maternal and perinatal mental illness are common and associated with a number of negative infant outcomes (including low birth weight, under-nutrition, poor growth, diarrheal disease and impaired motor and cognitive development).
- Mental illness and disability is both a cause and outcome of traumatic injuries and accidents.
- Substance use disorders commonly co-occur with mental illnesses and are associated with multiple negative health and social effects²⁰. Alcohol is the dominant substance of abuse in the Eastern Cape²¹



Pfizer's Investigator Training Workshop

Pfizer will be conducting a clinical trials training workshop, part of our International Investigator Training Program (ITP)



Date: 10-11 March 2016

Where: Conference Centre

Missionvale Campus, Nelson Mandela

Metropolitan University

Old Uitenhage Road

Bethelsdorp

Port Elizabeth

Time: 08h00 - 17h00, Daily

Audience: *Everyone involved in critical trials, both experienced and inexperienced individuals, and those wishing to get involved in clinical trials. Updates to regulations are discussed.*

The ITP is a structured workshop program that takes participants through all stages of conducting a clinical trial. It is based on the principles of the International Conference on Harmonisation Guideline for Good Clinical Practice, incorporating the SA GCP Guidelines 2006.



RSVP by completing and returning the response form before 29 February 2016, to Lenie Simmonds
f: 011 895 1500 | t: 011 320 6320
e: lenie.simmonds@pfizer.com



CLINICAL TRIAL SUPPORT AND COMPLIANCE
SAFEGUARDING THE QUALITY OF PFIZER'S INVESTIGATOR SITES

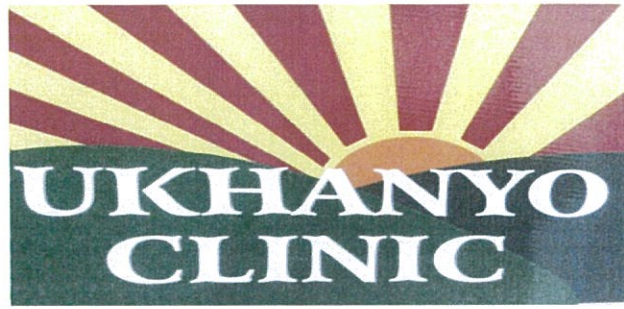
Mitigating Risk, Assuring Healthy Monitoring and Developing Tomorrow's Investigators Today



CLINICAL TRIAL SUPPORT AND COMPLIANCE
SAFEGUARDING THE QUALITY OF PFIZER'S INVESTIGATOR SITES



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MISSIONVALE COMMUNITY PSYCHOLOGY CLINIC SERVICES AND OUTPUT IN 2015

Missionvale Clinic rendered service to 264 clients in 2015. The year under review saw an increase in individual clients seen by the students at the Missionvale Community Clinic. The total does not include the number of sessions per client, workshops, needs analyses and other community services rendered. Clients were seen by B. Psych Registered Counsellor students, Masters' students and Interns as part of their required practicum.

5 MISSIONVALE CLINIC SERVICES

While the Centre has almost exclusively been rendering services to the black communities, services provided to our Xhosa-speaking clients continues to be severely limited as a result of not having sufficient Xhosa-speaking psychologists-in-training. As before the Centre has a priority to expand and improve our capacity in this regard. The substantial improvement of engagement with our communities and expanded student training opportunities augurs well for the future. However, in order to secure the viability and continuity of the Clinic we would like to reiterate that it is essential that paid internships are established at the Centre and that more Xhosa-speaking students are recruited into our department's Masters programme.

5.1 SCHOOL OUTREACH IN THE LOCAL COMMUNITY

The post-apartheid era saw all schools in the Eastern Cape lose school counselling posts, and school clinics with psychology and remedial posts were made redundant. The medical model underpinning psychology in the schools was replaced in totality by a social model that transferred the responsibility for a child's welfare to all concerned, removing the restriction to specialists. Teachers lacked training in barriers to learning despite attempts to address the deficit by training Institution Learner Support Teams (ILST) in school context.

As a result of this phenomenon a rainbow of school-related cases was referred; a large number of the 370 schools in the metropole requested assistance in the form of assessment and therapy for their learners and this became the main referral source. The volume of this type of referral has continued to grow exponentially and the co-morbidity has made us realise that a singular disciplinary approach is insufficient to meet the multifaceted needs of the clients and that other disciplines needed to be brought on board as nutrition, poverty and family discord underpinned many of the so-called scholastic referrals. To this end, two social development students were allocated to assist the Clinic with the social problems underpinning some of the learning difficulties.

Widely published is the occurrence of drug-related problems in the Northern Areas of Port Elizabeth, Non-government organisations dealing with these issues used the Clinic as a referral source. One such non-profit association, the Missionvale Care Centre, is an organisation that has cared for the basic needs such as education, nutrition, life skills, HIV support and medical care for the past 27 years. This liaison emerged as a reciprocal interactive relationship whereby patients and clients were referred for psychological assistance and clients arriving at the university clinic needing help other than psychological intervention were referred to the Care Centre. The local hospital and the community care centre made use of the limited services that existed yet the waiting list remained overwhelming. All these interactions facilitated networking among the schools, hospital, civic organisations and the university clinic. Unfortunately civic leaders in the area do not see mental health as a priority and this is one aspect that needs to be sensitively addressed due to cultural diversity.

During the past five years schools in the Eastern Cape have lost their counseling posts, as well as "school clinic" that assist pupils with learning problems. All remedial posts have also been made redundant in favour of assistance to learners by teachers working at the schools. This has led to most of the referrals being school-related. These referrals include school-readiness, career guidance, and assessment with a view to placement in special schools. The Screening Assessment Intervention and Support process has been promulgated in parliament (DOE White Paper 6, 2008) and lack of expertise and support in the schools will continue to influence our client base in terms of assisting schools. There is a definite role for qualified registered counsellors, especially at Missionvale as they are able to assist the schools with psych-educational programmes, basic screening of learners as well as basic counselling. The client population at the two clinics is becoming more differentiated as a result of the location of the clinics. These clinics are both informed by transformational leadership and social context. A need to introduce Education Psychology training will further enrich the existing psychology offered at the university in the future. In turn, this field will help to stem the tide of scholastic and related difficulties that have emerged within the current schooling system.

WORKSHOPS

During 2015, the Missionvale clinic was approached by a variety of schools in the area for the following services:

- School readiness
- Assessment and special school placement
- Workshops to assist with behavioural problems
- Self-development
- Career guidance

A total of 654 individuals were reached within groups and no payment was required for the various services

5.3 THE EMERGENCE IN 2015 OF A MULTI-DISCIPLINARY PROFESSIONAL HEALTH TEAM AT MISSIONVALE

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With research findings regarding health sciences and the perceived rapidly and dynamic changing health challenges faced by the local communities in and around the Nelson Mandela Metropolitan Area, the Faculty of Health Science (FHS) at the Nelson Mandela Metropolitan University is currently rethinking health sciences education from a “bottom up” approach. This approach has both short and medium range objectives. These include the provision of health and social development undergraduate and post-graduate learners with experiential inter-professional training in a community-based context. *The Missionvale Community Clinic is the ideal provider for such experiences.*

5.3.1 COLLABORATION WITH PSYCHIATRIC DEPARTMENT OF DORA NGINZA HOSPITAL

Still only rendering psychological assistance to the community and periodic social and scholastic interventions, a broader base is continuing to be sought in order to meet the varying health needs of the community. Negotiations began with the Psychiatry Department at a local academic hospital whereby a psychiatry registrar was assigned to the Clinic one day a week together with a clinical social development practitioner. In order to house both the new services, appropriately demarcated medical space was a necessity. A retiring medical practitioner graciously afforded the Centre the opportunity to equip the locale in order for it to fully function. The decision to call the collaborative initiative the **Ukhanyo Clinic** (meaning light) marked the first step in trans-disciplinary service delivery albeit a service that encompasses mainly mental health treatment.

The practicum semester bearing four registered counselling students and a qualified registered counsellor helped to swell the service provider ranks. Intern Psychology students working during the week and over weekends continued to provide a valuable service and there was no longer a 3 year waiting list. Two intern social development students completing their practicum were assigned to the Centre and office space had to be procured for them. Clients were attended to timeously, able to move between psychiatrist and psychologist, social worker and registered counsellor all within one physical space. Word spread in the community as to assistance that was available and the demand continued as the students went out into the community, new needs came to light that necessitated exploration and attention. Different avenues opened up for the students as they sought novel methods to address various issues.

The appointment of a part-time psychologist was necessary in the latter half of the year which eased the therapy burden for the psychiatric staff.

6 THE WAY FORWARD

6.1 THE TEN-YEAR BLUE SKIES PLAN AND THE ROLE OF MISSIONVALE CLINIC

Becoming part of a much larger plan for Health Education and Training has brought with it a number of challenges. In order to understand the needs of the community, specific demographics of the area had to be profiled. These included geographical location, population, current general service delivery, housing, education, school health, economy, poverty, crime and health (mortality, Missionvale Municipal Clinic, Missionvale Care Centre and mental and environmental health). This has highlighted the quadruple burden of disease, HIV/AIDS/ injury, mental health care, communicable and non-communicable diseases as well as mental health care.

The services that the Clinic currently offers will change. Post-graduate Psychiatric Nursing students will add a further dimension to the established practice and they will fulfill much needed services such as working with traumatised families in the community, working with indigent children and adolescents presenting with a wide range of psychopathologies. Negotiations are underway to pave the way for psychologists doing community service to have access to the Clinic's resources such as assessment material and use of the play therapy area. Psychometry interns will assist the clinical practitioners in assessing their patients/clients.

It is envisaged that students studying amongst others, Biokinetics, Human Movement Science, Dietetics, Pharmacy, Environmental Health, Social Development, Psychology, Nursing Sciences will work as teams.

Another objective is to improve the relevance and quality of health professionals' education within the FHS through the establishment of an inter-professional consolidated base designed to be socially accountable to the community it serves. This inter-professionally consolidated base will ultimately benefit both undergraduate students in the various Health Sciences schools and provide invaluable experience in the areas of experiential learning, clinical internships and hands-on skills development.

The Missionvale Community Clinic as facilitator is poised for such activity.

The third objective is the development of a curriculum transformation with specific goals and objectives in order to establish an inter-professional foundation curriculum which will include all FHS students in the future. Benefits for the students will include increased flexibility and articulation through the many degree programmes offered within the FHS faculty as a result of common foundation courses that all students will be required to take. The last objective is to develop a Master Plan for a Pre-Med/Medical Programme at the above-mentioned university.

In order for the prospective Health Sciences students to have access to, be involved in and provide various health services to the communities, a number of possible training sites were identified. Because the Missionvale Community Clinic had already embarked on community engagement type activities and had the beginnings of a strong multi-disciplinary approach to service delivery, *it was selected as a prime example of a sound trans-disciplinary learning and teaching platform.*

6.2 THE CLINIC AS A FUTURE TEACHING AND LEARNING PLATFORM

The Clinic provides the springboard from which all disciplines will work and students will function in multidisciplinary teams, *Students will learn from each other, with each other and about each other.* No one discipline takes precedence over another. What gets taught in the classroom will be practiced in the field. Discipline-specific specialists will be at hand to guide and support students when needed. The Clinic will ultimately allow for a variety of health services under one roof thus no patient/client has to travel elsewhere to obtain any specific service. The space will accommodate group testing for schools and an opportunity for foundation phase education students to interact with student health professionals. Workshops and support groups can be offered to the public/schools/organisations/parents with multiple inputs from students in the various disciplines leading to rich and effective interaction. Short courses will be offered to enrich/further educate individual/organisations/school teachers/individuals wishing to improve their knowledge base or skillsets.

The Missionvale Clinic aspires to be the ideal community platform.

EXPANDING THE PSYCHOLOGY FOOTPRINT ON MISSIONVALE CAMPUS.

The Missionvale Community Psychology Centre recently launched its new assessment centre as part of the extension of the pre-existing clinic. As a result of the limited psychological services in the Department of Education together with the advocacy and engagement roles played by the university, an increase in school based assessment requests came to the fore. A large number of schools in the metropole requested assistance in the form of assessments for their learners and this has become a major referral source. The volume of this type of referral has grown exponentially but due to the current limited space the centre has been unable to accommodate this fast growing need.

This type of intervention has necessitated a multidisciplinary approach and fortunately extra space was procured and renovations of the old Vista psychology centre began. The assessment centre as it is now known, provides a warm welcoming area, 3 consultation rooms and a seminar room and we believe that the centre has the potential to reach a greater cohort of learners due to this addition. In order to facilitate the renovation, the Missionvale Community Psychology Centre has functioned on a limited budget, the goodwill of the psychology department, local business and the community and has done the best with what they have. We believe that the new assessment centre has the potential to impact many lives and that the legacy will live forth.



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