



From the head and from the heart

2020 has given us a moment to pause. To stop and consider the world as we knew it. How can we compare this academic year with any other we can remember?



Dr (Professor) Ramneek Ahluwalia

Unlike a hundred years ago when the Spanish Flu wreaked havoc in the post-WW1 world, today we hold important aces. Greater educational and scientific resources and networks. Superior understanding of infection control. Technology that enables faster communication and mobilisation across various divides. While not optimal, stronger healthcare systems.

As HIGHER HEALTH, within days into 2020 we realised that our role as the principal guardian and enabler of programmes to protect student and staff health and wellness within our sector, demands quick and dynamic responses.

In March, we started to create alliances with scientific and other partners in order to assemble evidence and knowledge. These became foundations for strategies, materials and processes developed in order to guide and capacitate the PSET sector's reaction to the pandemic.

Looking back – it's incredible how rapidly we produced and rolled out so many tailor-made measures. Several guidelines and protocols now help campuses reduce risk of infections and manage them when they – inevitably – occur.

We trained thousands of staff, students and volunteers to be campus health champions who lead the implementation of these guidelines. In order to ensure a holistic PSET system approach, we brought community education and training (CET), sector education and training authorities (SETAs) and private higher education institutions (PHEIs) into the fold.

Our accessible HealthCheck app provides the users with a quick reading on their level of risk of COVID-19. We launched a dedicated sectoral crisis mental health tollfree helpline that is specifically geared towards helping students manage anxiety, depression and thoughts of suicide.

A mobile clinic fleet launched in September has started to bring routine, primary healthcare services through specialised health workers to the doorsteps of our under-served, rural and peri-urban campus communities.

It has not been simple. But we are learning about the physical, emotional and financial implications of the virus for the PSET sector and how to best meet its challenges through both scientific and other means.

We are addressing deeper societal, environmental and economic gaps that deserve our attention and energy in order to transform our world. As HIGHER HEALTH, we commit to honour our mandate to safeguard our campus communities and continue to use evidence-based approaches to support education as the most powerful known means for change.

Please stay on this mission with us. Stay healthy, stay motivated,

Ramneek

HIGHER HEALTH develops 27 200 COVID-19 guardians

When COVID-19 hit, HIGHER HEALTH jumped into action to strengthen the capacity of the PSET sector to be best positioned to respond to the challenges the pandemic would bring.

To date over 13 000 frontline individuals – security, cleaning staff, and more - have been capacitated with scientific knowledge to recognise and appropriately manage the COVID-19 pandemic within campuses, faculties, disciplines and directorates.

A further 3 200 student and staff volunteers have been trained and capacitated to participate in implementing COVID-19 daily screening, prevention, and education initiatives.

In addition, 11 000 members of management have been exposed to HIGHER HEALTH guidelines and protocols to build understanding of the virus and how to manage the effects of the diseases in the post-school environment.

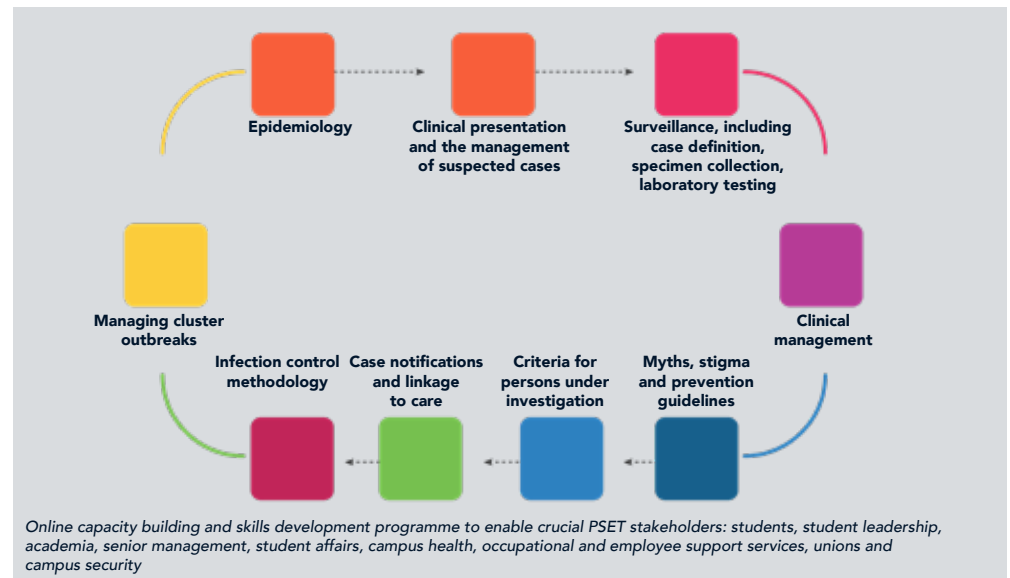
This was done by way of tailor-made evidence-based guidelines to support the post-schooling education sectoral response to COVID-19.

The protocols anticipate and parallel the pandemic's progression as the sector moved from intensive educational and preventive approaches to measures directed at reducing, managing and tracking infections and spikes while remaining vigilant in the knowledge that the coronavirus will be around for a while.

Institutional management was tasked with establishing COVID-19 task and implementation teams, who are backed by HIGHER HEALTH in terms of training, resources and other support.

HIGHER HEALTH's capacity development and skills training programme is delivered in partnership with the National Institute for Communicable Diseases (NICD).

The result is an army of 27 000 guardians to manage and prevent the spread of COVID-19.



	Activity	Number of People Capacitated to Date	
Capacitation Training Conducted through virtual Webinars	All crucial PSET stakeholders: students; student leadership; academia; senior management, student affairs, campus health, occupational and employee support services; unions; and campus security	1 700	
	University Senior Management, Campus Health Staff, Academics, Student Support Services	982	
	TVET Senior Management, Campus Management, Student Support Staff and Academics	2 986	
	CET Senior Management, Campus Management, Student Support Staff and Academics	1 318	
	PHEI Senior Management, Campus Management, Student Support Staff and Academics	958	
	Campus Security Directors and Managers (CAMPROSA)	95	
	University Staff and Student Volunteers, Peer Educator Programme and Student Counselling	813	
	University COVID-19 Task Teams, College Management & Support Staff	607	
	On-site Capacity Development and Training	TVET COVID-19 Task Teams, College Management & Support Staff	7 129
		TVET Campus-based Screening Teams, Campus Management & Support Staff	10 203
TOTAL		27 091	

November 2020

HH joins 4IR

Fighting a 21st century virus requires a 21st century response. HIGHER HEALTH has been monitoring the COVID-19 vulnerabilities for the post-schooling education and training (PSET) sector, based on data received through its HealthCheck tool.

HealthCheck is a purpose-built daily screening and monitoring tool, which is secure to use and which transmits data directly to the national COVID-19 tracking system. It was developed in a remarkably short time-frame and in partnership with the National Department of Health (NDOH) and the Bill and Melinda Gates Foundation.

Its implementation assists the NDOH and the NICD to track and trace the positivity rate, incidence rate, infectivity rate, across all campuses in the PSET system.

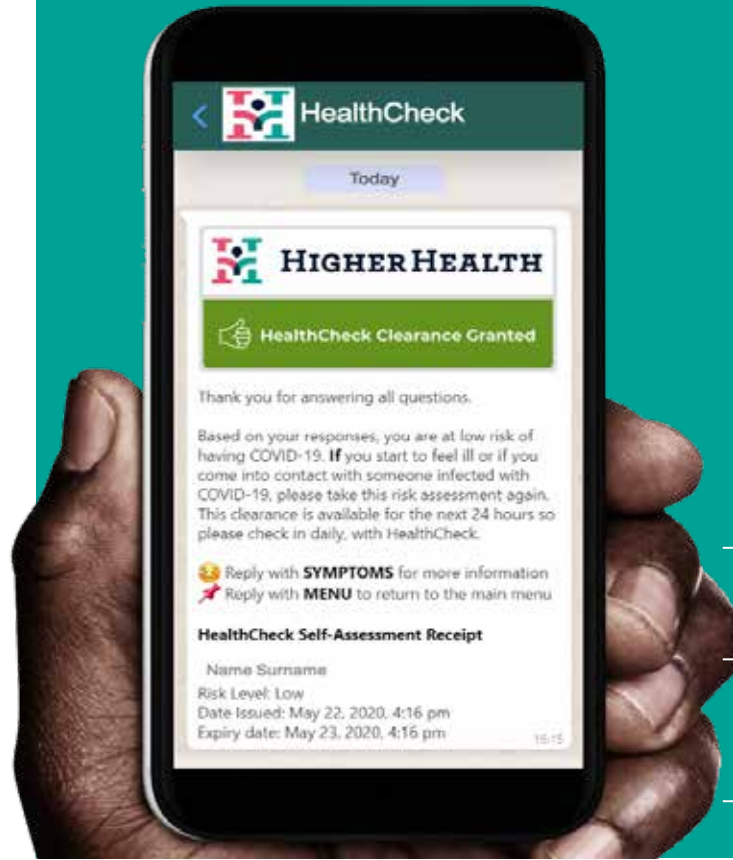
By using the HIGHER HEALTH daily HealthCheck a daily "health passport" is issued to every student, staff member and stakeholder entering campuses. It has assisted the sector with the identification of moderate to high risk individuals and their referral for appropriate follow-up care.

It also reduces the possibility of congestion during campus peak times at entrances which makes social distancing problematic.

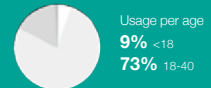
It should be noted that on average 93% of those who use HealthCheck fall into the low-risk category.

To date, over 7 million HealthCheck screenings have been administered since launch.

Over 1,6 million students and staff across the sector have been using HealthCheck on a routine basis before entering the campuses.



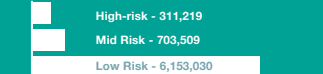
Overall Performance of the HIGHER HEALTH, HealthCheck, since inception to date



Total Users
1,633,850

Total HealthChecks
7,167,758
~ 6 checks per user

HealthCheck Risk Levels Results



Fleets to the rescue

Mobile healthcare services for underserved post-schooling education campuses



The need for routine student healthcare requires that clinical, wellness infrastructure is developed for our TVET, CET colleges as well as rural and disadvantaged university campuses. In addressing this need, HIGHER HEALTH has embarked on a journey to address this need.

Historically this has been an enormous challenge and has impacted our extremely vulnerable and disadvantaged population most severely as there are over 250 TVET, 200 CET and approximately 50 disadvantaged university campuses nationally that are without basic primary healthcare infrastructure.

Keeping in line with the reality that COVID-19 has suddenly put an enormous demand for routine health services to enable screening, testing, primary healthcare and other services to the vulnerable and disadvantaged student and staff community.

HIGHER HEALTH has developed a roving fleet of mobile clinics to provide primary health care to underserved campuses.

The fleet will visit campuses across all nine provinces with priority given to institutions with high student populations. Smaller satellite campuses will be served on a bi-weekly and monthly basis.

The services that will be provided by the nurses, psychologists and community health care workers in the roving teams:

1. Screening and testing services

- Risk assessment questionnaire on COVID-19 (using HealthCheck), HIV, TB, STI, contraception, mental health and GBV using paper-based risk questionnaires
- HIV testing
- Body Mass Index
- Blood pressure and pulse rate
- Cholesterol testing
- Blood sugar testing
- Pregnancy testing
- Breast cancer screening
- Cervical cancer screening (HPV or Pap smear)

2. HIV/STI/TB & GBV prevention

- Social mobilisation and awareness programmes
- IEC material
- Male & Female condoms & lubrication
- Linkage to PrEP and PEP programmes
- Dental dams.

3. Linkage to Laboratory testing

- Baseline blood tests (liver function, kidney function)
- CD4 testing, viral load testing
- Adherence & resistance monitoring

4. Referrals to NDOH facilities for clinical management

- HIV positive treatment initiation
- TB positive treatment initiation
- Diabetes, cholesterol and high blood pressure treatment initiation
- Breast and cervical cancers case management
- STIs with comorbidities or risk for other SRH conditions
- High blood pressure with comorbidities or risk for other SRH conditions

5. Referral to psychosocial support

The roving teams also comprise a clinical psychologist who will provide counselling and psychosocial support to referred students. Referral triggers include:

- High risk mental health, GBV and substance abuse cases
- Pregnancy
- HIV positive clients

Psychosocial support will be provided using a mix of face to face consultations (for initial case management sessions and as requested) and mostly remote consultations using telephone, e-mails and m-health platforms.

6. Distribution centres for chronic medicines

In time, the mobile clinics will form part of the Department of Health's Centralised Chronic Medicines Dispensing and Distribution (CCMDD) points for chronic medicines, providing amongst others:

- Routine ARVs to stable patients
- Long acting contraception.

Through this initiative, HIGHER HEALTH seeks to provide early risk detection and case management of health conditions such as HIV and other sexually transmitted infections (STIs), tuberculosis (TB), unplanned pregnancies, gender-based violence (GBV) and mental illnesses that may occur during tertiary studies. It also has initiatives to address the stigma attached to these conditions which often results in students abandoning their studies.

Mental health receives highest priority



It is important to heed warnings by the United Nations, the World Health Organisation and local experts, that the mental health and wellbeing of whole societies have been severely impacted by the COVID-19 pandemic and are an urgent priority.

COVID-19 is intensifying anxiety, depression, feelings of loneliness and fear due to economic and academic uncertainties.

Added to that is the stress of studying, doing practicals and writing exams which can be overwhelming under normal circumstances.

With the Department of Higher Education and Training and the SA Depression and Anxiety Group (SADAG), HIGHER HEALTH has mapped the mental health and substance abuse priorities related to COVID-19 within the post-schooling sector.

A tailor-made three-tier programme considers why and how students and staff may be impacted and how to assist individuals who experience problems.

“At the intervention’s primary level, HIGHER HEALTH’s student-led peer-to-peer programme plays a key role in creating awareness and introducing initiatives to increase psychological resilience, recognise and reduce anxiety, stress and depression and prevent suicide,” says Dr Ramneek Ahluwalia, the CEO of HIGHER HEALTH. Peer-to-peer counselling is enhanced through mental health self-risk assessments and various communication initiatives.

“Notably, addressing factors and detrimental psychosocial and physical effects of gender-based violence – as a recognised challenge to the post-schooling sector – are part of the same conversations and interventions,” Dr Ahluwalia stresses.

The secondary level entails a HIGHER HEALTH 24-hour toll-free student and staff helpline, in alliance with SADAG which enables the provision of help when needed in 11 official languages. The service provides free telephonic and SMS counselling, crisis intervention and support, and referrals to mental health professionals and other psychosocial resources to students and staff across all campuses. Where needed, HIGHER HEALTH will assist individual institutions with capacity building and implementation.

Since inception in late July over 1 100 crises have been managed through the helpline.

At a tertiary level, HIGHER HEALTH is appointing 10 additional clinical psychologists who will work across the country to provide counselling, care and support and linkage to services for relevant cases to the appropriate professionals.

“Essentially, our approach seeks to promote mental health as an integral part of every person’s overall health, prevent mental ill-health and provide support and appropriate services when required,” says Dr Blade Nzimande, Minister of Higher Education, Science and Innovation.

“All our programmes and interventions have the needs of students and everyone who is part of the higher education and training sector at the heart. We are confident that the mental health service will go a long way to helping students and staff cope with the heightened complexities of this academic year, but it is also a valuable investment in the future health and wellness of our students and staff,” concludes Dr Ahluwalia.

SA’s other crisis: GBV



South Africa’s gender-based violence (GBV) rate has seen an alarming spike during the national lockdown - the PSET sector has not been spared.

President Ramaphosa has called this the second epidemic facing the country, attributing it partly to alcohol and substance abuse.

Turning the tide on this disaster will take a collective approach – addressing structural and societal issues such as unemployment and gender inequality.

An important step in addressing GBV in the PSET community is the Policy Framework to Address Gender-Based Violence in the Post School Education and Training System (PSET) that was launched following Cabinet approval by the Minister of Higher Education, Science and Innovation, Dr Blade Nzimande.

The Policy Framework on GBV in the PSET system forms an important milestone in the fight against this deadly epidemic. It calls for a unified, comprehensive implementation plan, across the entire PSET system.

Therefore, HIGHER HEALTH is currently in the process of cascading the new PSET GBV policy framework to all institutions.

It is especially important as women who experience mental health challenges as a result of GBV are three times more likely to have suicidal thoughts or commit suicide. HIGHER HEALTH introduced a toll-free helpline which is a potential life saver.



Toll-free call 0800 36 36 36



SMS 43-33-6



higherhealth@sadag.org

HIGHER HEALTH and HSRC researches the impact of COVID-19 on the youth



HIGHER HEALTH and the Human Sciences Research Council is conducting a study to explore young people’s experiences and perspectives on the impact of COVID-19 on their wellbeing, education and learning in South Africa.

Young people are an often not mentioned in the context of COVID-19, and are not prioritised. While many believe that exposure to COVID-19 affects mostly the elderly, youth are not impervious to the novel coronavirus. This is patently not true as the rising number of infections following

a single celebration at a popular bar – Tin Roof in Claremont - in Cape Town in October has proven.

The research aims to provide a greater understanding of the social impact of the COVID-19 pandemic among youth in South Africa, and to better understand the youth’s use of the internet, media and technology during the pandemic. The study will deliver youth-specific interventions in areas such as community outreach, and technology and social media use.

This study utilised a quantitative online-based cross-sectional survey among young South Africans between the ages of 18 – 35 years who are enrolled in higher education institutions. It was conducted in all 9 provinces. Both male and female students enrolled at a public university, private institution, TVET college or CET college will be targeted.

The survey has been completed and the data is being analysed. Once the report is finalised, there will be dialogues and forum discussions emanating from the report.



NSF increases funding to deal with COVID-19 in the PSET sector



Mvuyisi Macikama is the Executive Officer of the National Skills Fund

By Mvuyisi Macikama

Our partnership with HIGHER HEALTH was founded on the urgency to address the threat of the HIV and AIDS pandemic for the future growth and development of the country. Due to its impact on the youth, and informed by the transformation and developmental imperatives of government, skills development initiatives and the entire post-school education and training (PSET) sector were expected to be active participants in the fight against the pandemic and management thereof in the different education and training environments including workplaces.

The Department of Higher Education and Training partnership with HIGHER HEALTH was, therefore, aimed at developing skills support programmes and strengthening core systems of PSET institutions in managing and mitigating the causes, challenges and consequences of HIV/STI/TB. In recent years, we have seen HIGHER HEALTH diversifying its service offering to reproductive health, gender-based violence and other health and wellness factors affecting the student community.

The partnership, funded through the National Skills Fund (NSF), has now been extended to deal with coronavirus (COVID-19) matters among the PSET community of more than 2.5 million beneficiaries. The pandemic necessitated an increase of HIGHER HEALTH's capacity in response to COVID-19 in the PSET system.

As South Africa is emerging from the restrictions and regulations, based on the COVID-19 risk-adjusted strategy implemented by the government since March 2020, we look to HIGHER HEALTH to continue leading the PSET sector in providing health advisory services and fulfilling the advocacy role for the importance of the health of young South Africans, especially those in the PSET system.

We're in this together

If the COVID-19 pandemic has taught us anything, it is that we are in this together. HIGHER HEALTH owes a great deal to its funders and supporters who have made all interventions possible. Thank you to the National Skills Fund, the National Student Financial Aid Scheme, the Health and Welfare Sector Education and Training Authority and Old Mutual.

We spoke to Elaine Brass, CEO OF HWSETA, on the impact of COVID-19.



Elaine Brass, CEO of HWSETA

Q What has the impact been on your organisation?

A Significant. Particularly in health and social development sectors, where we have seen revenues decline and the capacity of frontline staff tested. As these are the HWSETA's

sectors, we have taken this journey with them. Early in March we identified COVID-19 as a strategic risk, and by the end of the month our Board had identified R100 million in projects requiring urgent support our sectors. This has resulted in the HWSETA being at full productivity levels to manage these projects during the lockdown period, as well as maintain our other operating functions.

- Planning prior to lockdown ensured that the HWSETA could continue operations off-site. A number of measures were put in place to support this including support to our staff on equipment and data needs. The reporting structure of the HWSETA was communicated and effected immediately to ensure that all staff know what is expected and were able to work productively from home. Since then we have slowly opened our workplace to mainly critical staff. All regulations are adhered to without exception.
- President Ramaphosa announced a 4-month Skills Development Levy Contribution Holiday effective 1 May 2020. This has severely affected meeting our planned funding and administration expenditure. We had to revise the 2020/21 budget. However, the HWSETA made a decision to ensure that the sectors of health and social development are still supported in this historic time.

Q What are the most valuable lessons COVID has taught you?

A There will always be that "black swan risk" that comes as a total surprise and has a significant impact. One cannot always plan for the future.

It has taught us that if you have proper systems and governance in place, one can quickly adapt to a changed environment. There comes a time when in the midst of tragedy, there is opportunity to step up and take your place. This is what HWSETA did. We quickly responded to the needs of our sectors. We formed partnerships to ensure greater impact and quicker delivery. The overwhelming passion I have seen by the people in the sectors, leadership and organisations have encouraged all of us to work harder to ensure that our country comes first.

We have also identified more effective practices that we implemented during COVID-19 that we will ensure is embedded into our normal organisational processes. These practices save on time and costs. We can do things more effectively and efficiently. E-Learning has been brought forward as it is a viable alternative to the expensive traditional classroom teaching. This will ensure that our Rands can stretch further to reach more.

Call to action

While the country has been in lockdown and the world around us has slowed down, HIGHER HEALTH has been ensuring the health and safety of our campus community through its actions as a result of participation in the Ministerial Task Team.

A n important part of the response was to communicate the work done in generating policies, protocols and guidelines to ensure that the PSET community is safe.

A bulk SMS campaign that kicked off mid-April this year has reached over 1 000 000 students. To reinforce the message a dynamic social media drive was initiated using Twitter, Facebook, LinkedIn and You Tube.

Information, education, and communication materials such as posters, flyers, pamphlets, resource guides, second curriculum manuals, guidelines and protocols were printed, distributed and shared online.

In addition, HIGHER HEALTH's flagship **Future Beats** radio programme which reaches over 1 million students and staff every month through 21 campus and community radio stations has been airing daily COVID 19, HIV/TB/STI, Sexual Reproductive Health, Human Rights, Mental Health, Gender Based Violence and many other health and wellness content.

In the case of COVID-19 and other student health and wellness epidemics, knowledge truly is power.



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