



1 Photo.

UNICEF

UNITED NATIONS CHILDREN'S FUND  
FONDS DES NATIONS UNIES POUR L'ENFANCE

INTEROFFICE MEMORANDUM

TO: Revy Tuluhungwa, Chief, PSC Service,  
New York

DATE: 13 July 1984

FROM: Obediah Mazombwe, PSC Officer, Harare

FILE No.: HANY/88

SUBJECT:

Thank you for your note dated May 14, 1984.

.....

I am attaching two posters and two brochures already in use. The posters are in the vernacular but I have attached some English translations.

Admittedly these are more information giving rather than those which ensure participation, through reaction and debate. We are trying to move more into the latter through radio and newspaper quizzes, and the promotion of drama.

I will keep you updated.

Best regards.

cc. Juan Braun  
PSC Regional Advisor  
Nairobi

PSC SERVICE	
Date 25/7	File
Attention	1/10
Action	
Also seen by	Date
1. AVF	
2.	
3.	
4.	
<input type="checkbox"/>	Note and Return

**SUPPORT  
YOUR VILLAGE  
HEALTH WORKER**



**FOR A HEALTHY  
COMMUNITY**

**PREVENTION  
IS BETTER  
THAN CURE**

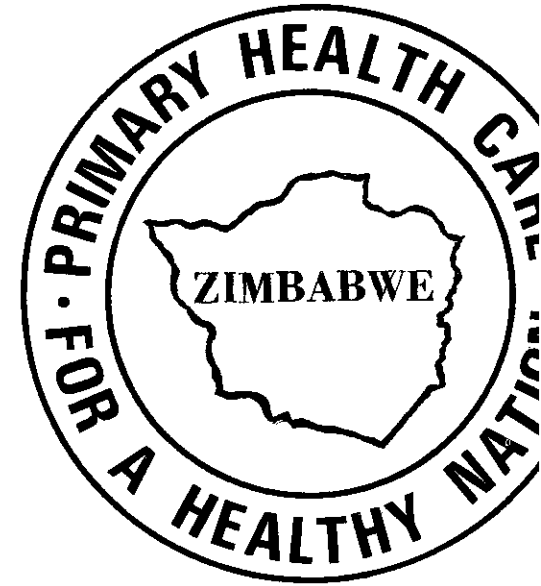
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**THE VILLAGE  
HEALTH WORKER  
HELPS  
PREVENT  
DISEASE**

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**SUPPORT  
THE VHW**

**FOR  
GOOD HEALTH**



**SUPPORT YOUR  
VILLAGE HEALTH  
WORKER**

## **PRIMARY HEALTH CARE**

Zimbabwe has adopted the Primary Health Care approach to make essential health care accessible to all individuals and families in the community.

This approach implies a shift of emphasis from the past curative, expensive approach which served limited selected areas, whilst ignoring the rest of the country, to an approach that emphasises prevention, is evenly distributed and involves community participation.



*Village Health Worker advises young mother on the health of her child.*

Under this approach the health delivery system extends right down to the village level. The Village Health Worker is at the frontline of this system, providing the first contact between the community and the health system. He or she therefore plays a vital role.



*Village Health Worker discusses well protection and importance of clean drinking water with community.*

## **YOUR VILLAGE HEALTH WORKER**

1. Is a village health educator
2. Teaches how to prevent diseases
3. Treats minor illnesses
4. Refers serious illnesses to the clinic or health centre
5. Only works part time
6. Only receives a small allowance.

## **THE VHW TREATS THE FOLLOWING ILLNESSES**

Headaches	Diarrhoea
Fever	Wounds
Cough	Scabies

## **THE VHW ADVISES ON THE FOLLOWING**

1. Well protection
2. Latrine construction
3. Home hygiene
4. Nutrition
5. Immunisation.

Produced by the Ministry of Health in co-operation with UNICEF.

## **YOUR ROLE AS A COMMUNITY MEMBER**

1. Participate in the selection of the VHW.
2. Follow her instructions on all health matters.
3. Assist her with her work at home and in the field.
4. Explain to other members of the community the vital importance of operating with the VHW.



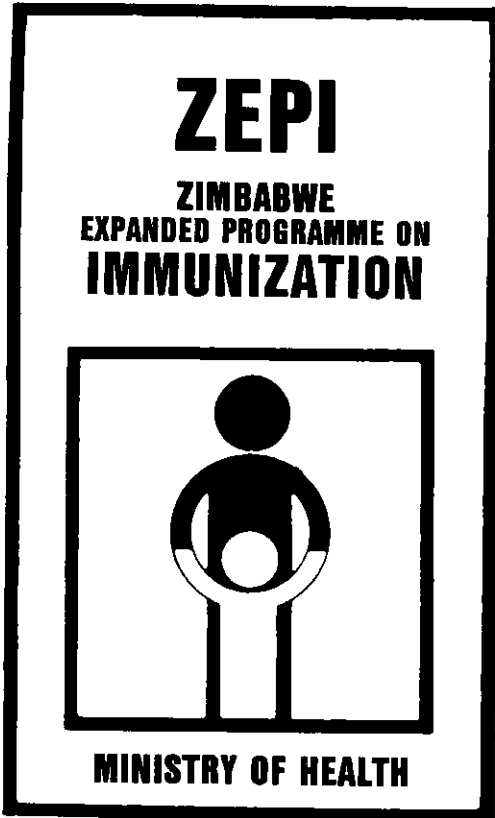
*Village Health Worker advises a family on home hygiene.*

IN ORDER TO FUNCTION EFFECTIVELY THE VILLAGE HEALTH WORKER NEEDS STRONG SUPPORT FROM HEALTH PERSONNEL: HEALTH ASSISTANTS, MEDICAL ASSISTANTS, NURSES, HOSPITAL ADMINISTRATORS AND DOCTORS.



**KUDZIVIRIRWA  
KWEZVIRWERE**

The Child Health Card reproduced below is  
your child's passport to good health.



*Breast Feed for at Least 18 months*

**UKUVIKELWA  
KWEMIKHUHLANE**

Every child in Zimbabwe under the age of five  
should have a card which is a record.



2. (a) **Tuberculosis**

This is a highly contagious disease

Signs and Symptoms:

- loss of weight
- Fever
- Coughing

It is caused by a bacteria.

(b) **Polio (Poliomyelitis)**

Polio is a virus infection most common in children under the age of two years.

Signs and Symptoms:

- A cold with fever
- Vomiting
- Sore muscles
- Weakness to one or both legs
- Paralysis of one or both legs.

(The affected limb becomes thinner than the other and does not grow as fast as the other one.)

(c) **Diphtheria.**

This affects the throat, nose or lips.

Signs and Symptoms:

- A cold with fever
- Head ache
- Sore throat
- The neck may swell

The child can choke and die.

(d) **Whooping Cough**

Signs and Symptoms:

- Starts like a cold with fever
- A runny nose
- Coughing
- Two weeks later coughing with a whooping sound.
- Vomiting after the whoop

Small babies may die without developing the typical whoop.

(e) **Tetanus**

In the new-born, tetanus germs enter through the umbilical cord.

Signs and Symptoms:

- Child begins to cry continuously and is unable to suck
- Stiffness of the neck
- Lock jaw
- Convulsions

(f) **Measles**

This severe virus infection is dangerous in children who are poorly nourished or have T.B. (Tuberculosis)

Signs and Symptoms:

- A cold with fever
- Runny nose
- Red, sore eyes
- Coughing
- The child becomes increasingly ill
- May have diarrhoea
- A rash which lasts about 5 days.

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*Produced by:*

**ZEPI,  
Ministry of Health and  
United Nations Children's Fund (UNICEF),  
Harare,  
Zimbabwe.**

# THE ZIMBABWE

## EXPANDED PROGRAMME

### ON IMMUNIZATION

1. It is the intention of the Ministry of Health to ensure that by the year 1990 the immunization programme in Zimbabwe will reach all children. This will protect the children against six diseases.

2. **WHAT ARE THESE DISEASES WHICH KILL AND LAME THE CHILDREN OF ZIMBABWE BUT WHICH CAN BE PREVENTED?**

- (a) **Tuberculosis** — Rurindi
- (b) **Poliomyelitis** — Mheta Makumbo
- (c) **Diphtheria** — Kuzvimba Pahuro
- (d) **Whooping Cough** — Chipembwe
- (e) **Tetanus**— Kuoma Mutezo
- (f) **Measles** — Gwirikwiti

3. **SIMPLE, SURE PROTECTION—IMMUNIZATION**

Go to your nearest clinic or health centre to have your children vaccinated while they are healthy so that they stay healthy, strong, and happy.



The most important vaccines for children are:

- (a) DPT.
- (b) POLIO.
- (c) B.C.G.
- (d) MEASLES
- (e) TETANUS.

(a) **D.P.T.** For diphtheria, whooping cough (pertussis), and tetanus three injections are given: first at 3 months and second at 4 months and third at 5 months. The child may have a slight fever and pain at injection time.

(b) **POLIO.** The child is given drops in the mouth once each month at third, fourth and fifth month after birth. The drops are sweet.

(c) **B.C.G.** For tuberculosis (TB). A single injection is given into the skin of the shoulder. Vaccination is done at birth or first as early as possible after birth of child. The vaccine makes a sore and leaves a scar.

(d) **MEASLES.** One injection is given when child is 9 months of age.

(e) **TETANUS.** Everyone should be vaccinated against tetanus—especially pregnant mothers, so that their babies will be protected against tetanus of the newborn. For adults and children over 12 years old — see your nearest clinic or health centre.

2. (a)

(b)

(c)

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**INFORMATION ON THE SIX DISEASES:**

(1) Infectious childhood diseases can kill or will have after effects that leave the survivors handicapped for life. Immunisation can prevent infection of these diseases.

**HELP PROTECT THE NATION  
AND YOUR FAMILY,**

**PREVENTION  
IS BETTER  
THAN CURE**

**SHARE THIS BROCHURE WITH  
YOUR FRIENDS**

**EVERY ZIMBABWEAN  
SHOULD KNOW  
ABOUT IMMUNISATION**

**Kudzivirirwa kwezvirwere  
muZimbabwe**

**Ukuvikelwa kwemikhuhlane  
eZimbabwe**

**INFORM YOUR  
FRIENDS AND  
RELATIVES ABOUT  
THE SIX DISEASES**

**“YOU CAN HELP TOO”**



CF-RAI-USAA-PD-GEN-2008-000042

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Notes

**4 pp**

**With covering memo from Obediah Mazombwe, PSC Officer, UNICEF, Harare. The poster was not scanned.**

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Number of images without cover

SAROJA DOUGLAS

Saroja Douglas

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