

THE NURSING STARS

MAGAZINE

Celebrating Nursing Professionals in style

16th Issue Aug/Sep/Oct 2025

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"Research helps advance nursing practice"

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"My role as Chief Nurse is fast-paced, unpredictable, and filled with high-impact decisions"

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"This path has shaped who I am and how I want to impact the world"

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Five Ways to Brighten Your Exterior Spaces **How to Recognize and Respond to Energy Vampires at Home, Work, and More**

How Learning an Instrument in Adulthood **Five Fun Ways To Celebrate Your Own Culture This Heritage**

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- Various online sources

Various contributions were made through a review of the work that was done by assorted experts

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*Hello!
Hello!
Hello!*

reater is He that is in us, than the one in the world! You are all blessed and highly favoured. In South Africa, it is Spring time, and we hope that as the beauty of nature starts to spring and blossom up, your lives will spring and blossom as such.

It is that time of the season, and your colorful magazine is bringing you some more colorful yummies! Thus, our content keeps on growing further and greater. And this is just for you!

Due to many suggestions, advises and requests we have added some more columns, yummies, yummies and more yummies. This edition is so enriched for your own enjoyment.

Besides, upon noticing that most of nurses are writers we decided to add a column for those who have published their books. The first featured author is Ashley Scott from Arizona, USA, she is a poet.

The Almighty God keeps on blessing us with amazing contributors, we are humbled and grateful. And we can't thank them enough for their incredible support and their amazing voices of reason. To our readership thank you! You keep pushing The Nursing Stars Magazine forward.

Our cover story is about a young, beautiful, elegant, intelligent, smart, fashionable, focused and an ever thriving nursing professional.

She is Lindiwe Mmeta, her gallery on her social media platforms says it all. She is incredible and an inspiration.

To compliment our cover story, we have featured more startling nursing figures from our continent as well as abroad. Kimberly Maurer is one of them, she is a shining star and a phenomenal author.

Furthermore, our featured specialist is doing a stunning work, she looks after a well-being of other nurses. Can you believe this? Amazing!

Please don't miss out on our boosting topics on matters about clienttelling, wellness, business, finance and more. Just grab this copy and stay enriched! We can't thank you enough for your input, advises, and comments. Thank you!!!!

This is your magazine and it is all about you. Your wish is our command. And please always remember that to us your well-being is our precious priority.

Just keep The Nursing Stars Magazine everywhere you are. Remember to email your comments to: info@thenursingstarsmagazine.co.za.

Enjoy le good reads!

Love you lots!
Connie Mbele

*"We can't
thank you
enough"*

“We humbly approach you, Lord God our Father”



Isaac T. Matlala (RN) and Author, Pretoria, South Africa



Greetings colleagues...

One of the most profound ways to connect with God is through worship and praise, as this is the very reason for our creation (Ecclesiastes 12:13).

Whether through our prayers, songs, music, or dance, when we genuinely open our hearts to Him, He reveals His presence and breaks the chains of darkness. This is illustrated by Paul and Silas, who, despite being imprisoned, prayed and sang hymns at midnight.

Thus, their unwavering devotion moved God, resulting in a powerful earthquake that shook the prison's foundations, opening its doors and liberating all the captives (Acts 16:25-26). In this edition of TNS, we focus our prayers on praising God, inspired by Psalm 150.

Let us pray:

Gracious Lord, who has shown us boundless love by bringing us to this extraordinary edition of our beloved nursing magazine, we offer you our honour and glory.

We thank you God, for our abilities, which are not of our own making but are gifts of grace through your Son, Jesus Christ.

In His name, we humbly bow before you, acknowledging our flaws and recognizing our sins as we seek to grow. We earnestly praise your greatness and honour your majesty, for you are the Creator of all that exists.

We understand that we were made to worship you, my Lord, and in line with Psalm 150, we exalt you for your strength in the heavens, for the mighty works you have done in our lives, and for the supreme greatness we experience in our nursing practice.

We offer our praise through songs and music, accompanied by drums and dance. We are thankful for the days of our lives, for the blessings you have bestowed, for the healing you have granted, for the guidance you have provided, and for the love and mercy you show us each day.

Holy is your name, deserving of eternal praise, and wonderful are your ways, which are beyond our understanding.

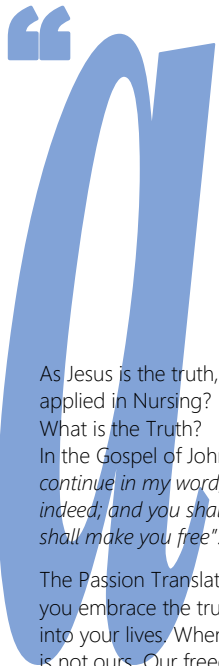
Glory be to you, whose existence has always been. Forever and ever may your love reign. In Jesus' Name. Amen and amen!

“We earnestly praise your greatness and honour your majesty, for you are the Creator of all that exists”



Sibongile Khumalo (RN),
Johannesburg, South African

As Jesus Christ is the truth, how should the truth be applied in Nursing? (John 8:31-32 KJV)



As Jesus is the truth, how should the truth be applied in Nursing?

What is the Truth?

In the Gospel of John 8:31-32 KJV Jesus said: *If you continue in my word, then you are my disciples indeed; and you shall know the truth, and the truth shall make you free*”.

The Passion Translation of John 8:32 says, "For if you embrace the truth, it will release true freedom into your lives. When Jesus offers us His freedom, it is not ours. Our freedom is limited and faulty, but He is freedom Himself.

Grasping the truth is buying into the Good News of the gospel of Jesus Christ and evaluating that belief through the lens of our heart, mind, and soul. Once we know the truth, we can then allow this truth to set us free.

Christianity is not a mood, it is not an emotion, it is not a form of expressionism, it is grounded in the belief that God sent His one and only begotten Son to set us free from all kind of fears and limitations. In Christ we are more than conquerors and we can do all things through Christ who strengthens us.

How should we apply the Truth?

The Greek word for "truth" is reality. Embracing the reality of Christ will bring freedom from the pressures of our stressful working environments. In our daily lives, the truth can set us free one-second, minute, and hour at a time.

The truth is a person, it is not a concept, THE TRUTH is Jesus (Yeshua). When Jesus says...*"and you shall know the truth"*, He is not talking about knowing more information and that information will liberate us.

He is talking about being intimate with God, where we become impregnated with the Holy Spirit. Jesus says that to know Him is to know the truth, and that *"the truth will set us free"*.

Knowing the truth is not about assenting to propositions, but about knowing a Person. Knowing Jesus can broaden our minds, increase our depth of insight and can also widen our scope of understanding.

This does not mean that we have all the answers but that we have a true framework of thinking. Scientific laws provide a framework that gives freedom to investigate in the physical realm.

“In Christ
we are more than
conquerors and we
can do all things through
Christ who strengthens
us”

“Grasping the truth
is buying into
the Good News of
the gospel
of Jesus Christ”

God’s revelation provides a framework that gives intellectual freedom to investigate in the spiritual realm. Belief leads to understanding.

In conclusion

My fellow Christians Colleagues, as we draw near to the end of 2021, let us march into 2022 knowing that the truth will set us free from any kind of fear, confusion or anxiety. He sets us free intellectually, morally and emotionally. This is true freedom; "...if the Son sets you free, you will be free indeed (John 8:36).

Let His Truth pierce our hearts. Let His Power saturate every area of our lives. Let us continue in His word and His word will set us free. His Word will lead and guide our path. His Word is the Truth. He is Truth. I would like to take this opportunity to wish you a very happy and blessed Christmas. May the true glory of Christmas be a reality to you.

If you have not accepted Jesus Christ (the Truth) as your Lord and Saviour, you may take this opportunity and confess these words: Lord Jesus Christ I accept you as my Lord and Saviour; come into my heart and wash my sins by your precious Blood; cleanse me and change me; make me your child and write my name in your Book of Life; I repent from my sinful life; thank you that I am a new creation in your mighty name. Amen

Sr. Sibongile Khumalo (Registered Nurse Clinician)

**The Best
Dressed Nurses
of the Season**

**Sr. Lerato Moeketsi
South Africa**



Sr. Khosi Mathebula
South Africa

Hasan Nazmul

“Advocate for your patients and focus on implementing knowledge in real-world

“Being a nursing student is a demanding but rewarding journey”

W

What is your name?

My Name is Md,Nazmul Hasan Razzak

What is your Birth Month?

July

What is your professional status?

A 4th year Student.

Why do you want to be nurse?

I want to be a nurse, it is the desire to help others and make a positive impact on peoples' lives. Nurses provide essential care, support, and comfort to individuals facing health challenges, often during the most difficult times.

Who is your favorite classmate?

Uma Rani Bristy

How is it like to be a nurse student?

Being a nursing student is a demanding but a rewarding journey, characterized by rigorous coursework, clinical placements, and a significant commitment to learning and caring for patients.

How would you describe yourself as a student?

My name is Md Nazmul Hasan Razzak. I am 23 years old. I live in Dhaka, Bangladesh. My family members total 3 also included me. I am a student of KPJ Nursing College. I have done my HSC in science from Sristy College of Tangail. I have got experience in computer excel, word, excess, power point. My hobbies are; playing cricket, Billiard, Badminton, listening music and reading newspaper.

What specialty are you focusing on?

I am focusing on many specialties including critical care, emergency room nursing and various advanced practice roles like nurse practitioners and nurse anesthetics.

What is a dominating culture in your schooling environment?

Dominant culture refers to the collective norms, values, and practices upheld by the prevailing social group, influencing societal standards and expectations.



“To improve the nursing sector, governments should focus on attracting and retaining a skilled workforce”

A man with dark hair and a slight beard, wearing a bright blue button-down shirt under a dark grey blazer, stands in front of a rustic wooden building. The building has a gabled roof and a window with a greenish tint. The man is looking directly at the camera with a slight smile. The background is slightly blurred, emphasizing the man.

"Mentors should also model professional behaviour, share their experiences, and help mentees connect with resources and opportunities"



ny element of naughtiness?

Naughtiness, in its simplest form, refers to a quality of being slightly bad or mischievous, often characterized by harmless misbehavior that may not be serious but still warrants some level of scolding or attention.

What real world lesson are you acquiring currently?

Real-world learning emphasizes connecting classroom knowledge to real-life situations and experiences, making learning more relevant and engaging. This approach helps students develop problem-solving skills, understand the impact of their actions, and contribute to their communities.

What contribution are you planning to make in the nursing industry?

Planning in nursing involves a multi-faceted approach, encompassing both individual patient care and broader strategic directions for the profession and healthcare organizations. This includes developing care plans, setting priorities, and ensuring effective resource allocation. Planning also extends to workforce development and creating a positive professional practice environment.

When searching deep into yourself are you an employee or an employer? Why?

An employee. Because a "nursing employee" refers to a person employed in a nursing role, encompassing a wide range of positions within healthcare settings. This includes registered nurses (RNs), licensed practical/vocational nurses (LPN/LVNs), and advanced practice registered nurses (APRNs). Essentially, they are healthcare professionals who provide direct patient care and support.

“Its important to be confident, humble, and active learners”

Will nursing be your corridor or your destiny? In what way?

Nursing is my destiny. From the very beginning, I've been drawn to helping people during their most vulnerable moments. I can't imagine a more meaningful way to spend my life than caring, advocating, and healing.”

What advice would you give to the government regarding improving the nursing sector?

To improve the nursing sector, governments should focus on attracting and retaining a skilled workforce, addressing workforce shortages, promoting education and training, and supporting nurses' well-being.

What advice would you give to the nursing aspirants?

Its important to be confident, humble, and active learners.

Schedule dedicated study time, prioritize self-care, and remember that nursing is a lifelong learning journey. Embrace challenges, seek guidance, and be open to different perspectives. Most importantly, advocate for your patients and focus on implementing knowledge in real-world practice.

How are you going to mentor the nursing aspirants?

To effectively mentor the nursing aspirants, I will focus on building trust, providing guidance, and fostering a supportive environment. This involves encouraging open communication, setting clear expectations, and providing constructive feedback. Mentors should also model professional behavior, share their experiences, and help mentees connect with resources and opportunities.

Annely Shiikwa

**She is inspired by every
strong woman...**

W

Name: Annely Hilya Nashilongo Shiikwa, Namibia

Birth month: February

Favourite book: Think like a monk by Jay Shetty

Favourite Music: RnB & Gospel

Favourite space: My quiet little place at home is where I reflect, rest, and read.

Favourite time: Midnight to 02H00am, it is so peaceful and quiet, perfect for thinking and Studying.

Favourite drink: Coke

How do you spend most of your spare time?

I spend the majority of my free time reading, reflecting, listening to inspirational podcasts, and participating in personal development activities. I also like developing IPC data collection tools.

What makes you tick?

Making a genuine difference in peoples' lives through better healthcare and infection prevention methods inspires me. I thrive in places where I am challenged to learn and drive change.

What spoils your mood?

Lack of professionalism, disorganization, and poor communication in a team can ruin my mood.

Respect and accountability are important to me in both personal and professional settings.

Who is your favourite person in the world?

My mother, grandmother, and mentor are all strong, knowledgeable women who helped shape who I am. Their love, advice, and resilience continue to inspire me every day.

What made you choose nursing?

I chose nursing because I have always had a strong desire to help people. I wanted to work in a field where I could help vulnerable groups, particularly mothers and children, and improve their health.

Who is your inspiration?

Professionally, Prof. Shaheen Mehtar inspires me with her contributions to Infection Prevention and Control (IPC) in Africa. Personally, I am inspired by every strong woman that leads with compassion and courage.

Share about your passion for nursing:

Nursing is more than a career; it is a calling. I am deeply committed to providing patients with safe and high-quality care, particularly in the areas of infection prevention and control. I find fulfilment in teaching others and improving health-care systems to avoid unnecessary harm.

Apart from nursing, what is this particular gift you have, are you going to pursue it?

I have a natural talent for mentorship and cooking. I've always enjoyed guiding young nurses and students, helping them find their feet, gain confidence, and reach their full potential. It's something I take very seriously, and I intend to continue mentoring even after leaving the hospital.

"I aspire to be remembered as a nurse who exemplified compassion, honesty, and excellence"

Cooking, on the other hand, serves as my form of personal therapy. I enjoy experimenting with tastes and cooking classic meals for my loved ones. Sharing a delicious meal, especially something homemade like oshifima and beef stew, draws people together, which is another sort of caring I value.

Do you think nursing is your corridor or your destiny?

Nursing is both my corridor and destiny. It led me to public health, IPC, leadership, and mentorship, all of which fulfil my purpose and connect with my long-term objectives.

If given a chance, who is this celebrity would you like to spend an hour with, and why?

I would want to spend an hour with Oprah Winfrey. Her story of resilience, leadership, and advocacy for health and empowerment is in line with my ideals.

Where do you see yourself in 5 and in 10-year time?

In five years, I envision myself being a public health professional overseeing national IPC initiatives and contributing to health policy. In ten years, I envision myself in a regional or international role, collaborating with institutions such as WHO and the Africa CDC to create IPC strategy across Africa.

How are you going to contribute in improving the nursing sector?

I will continue to mentor young nurses, advocate for IPC inclusion in nursing curricula, and lead quality improvement programs that enable nurses to provide safe, evidence-based care.

What do you think is the role of technology in nursing?

Nursing relies heavily on technology, from electronic health records to telemedicine and data analysis for infection surveillance. It increases efficiency, accuracy, and patient outcomes, particularly in remote and underserved locations.

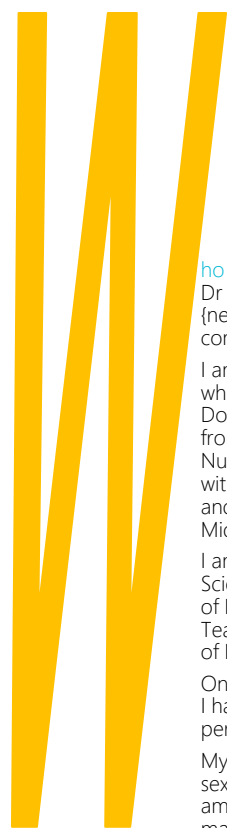
What fingerprint would you like to leave when retiring from nursing?

I aspire to be remembered as a nurse who exemplified compassion, honesty, and excellence. I aspire to provide a legacy of robust IPC systems, empowered healthcare professionals, and enhanced safety in healthcare environments for everyone.

"I find fulfilment
in teaching others
and improving
health-care systems
to avoid unnecessary
harm"



Dr. Nomathemba Nxumalo



Who is Dr Nomathemba Nxumalo?

Dr Nxumalo is the second born of the late Alvinah Nxumalo (nee Xaba) and Reuben Nxumalo. I originate from Dvokolwako community in the Hhohho region of Eswatini.

I am a born-again child of God and wife to a great man with whom I am raising wonderful young people. I qualified for my Doctor of Nursing Science (Maternal and child Nursing Science) from the University of Johannesburg in 2024, my Master of Nursing Science (Community Health Nursing major specialty; with School Health minor) from the University of Botswana in 2012, and Bachelor Nursing Science (Community Health Nursing with Midwifery) in 2005 from the University of Swaziland (now Eswatini).

I am a lecturer in the Department of Community Health Nursing Science, within the Faculty of Health Sciences of the University of Eswatini. I started my nursing education career in 2009 as a Teaching Assistant, then proceeded to study towards my Master of Nursing Science in 2010 to 2012.

On my return I was promoted to Lecturer position, a position I have served in since 2012 to date; teaching, conducting and supervising research projects, community service and consultancies.

My research interests are around school health nursing, adolescent sexual and reproductive health, HIV prevention and management among these age groups; as well as non-communicable disease management. I have published in several peer reviewed journals and presented papers in various national and international conferences

What is your favourite sport?

I don't think I have a favourite sport. I do not play any but occasionally watch soccer and athletics with my family.

What is your best season in a year? Why?

I really like autumn and winter. Yes, they are getting colder over the years, but I would still choose the cooler seasons. I am just at my most comfortable then as I can dress up to keep warm. I like the cosy, toasty feeling in the evenings as I snuggle up with a cup of tea at home.

“I like the cosy, toasty feeling in the evenings as I snuggle up with a cup of tea at home”

"I do not
take being an
academic as
merely teaching
and supervision"





“I impart to nursing students the passion of health promotion and empowering communities at the grass-root level”

What kind of outfit do you prefer when on duty? Why?

When in class I like to be formal but comfortable. I think that it portrays a state of professionalism that makes me feel confident as a lecturer. When I am not in class I prefer being casual for comfort-ability.

What makes your day?

Starting the day with devotion and prayer where I request the Holy Spirit to lead in every step, decision and speech in the day. After that I feel like I can not be overcome by anything.

Why did you choose to be a lecturer?

During my undergraduate training I took to liking the way some of my lecturers poured themselves to replicating themselves in us as student nurses. During the time they taught us they were nearing retirement.

A few years into my nursing career an opportunity to become a teaching assistant arose and I eagerly applied and knew that it was my cue to now take up position as a young nursing educator to contribute to the nursing profession, particularly Community Health Nursing where I am specialized.

When did you decide to be a lecturer?

As mentioned above, it was really early in my nursing career. To be exact, it was 4 years in when I accepted the offer of being a teaching assistant; the training position before being a lecturer.

How did you reach this level in your nursing career?

God has graciously given me the brains, determination and focus to make it to this level. I have had struggles, particularly during the Doctoral training; but I knew I can not give up because there certainly are people who look up to me and they should know that we keep moving on even in tough times.

What impartation are you there to offer?

Being a community health nurse specialist, I feel strongly about prevention at all levels in order to strengthen primary health care in our setting. In order to do that, I impart to nursing students the passion of health promotion and empowering communities at the grass-root level and ensuring they have the self- efficacy to maintain their health for best possible health outcomes.

Critical thinking and deep analysis of existing societal problems therefore becomes imperative in the nursing students' learning as they should solve or be involved in real life situations.

What is this unique aspect about you?

I am observant and usually connect well with the individual students which commonly makes each of them feel they can approach me and talk about challenges they may be having, or plans for their future. I do not take being an academic as merely teaching and supervision. I believe that by being where I am, I also serve as a guardian to the students.

What sound of voice to use in class? Loud or low?

I generally use a firm low voice and tone.

What kind of ambience does your presence bring into the lecture room?

My classes are usually not large ones, so for ease of engagement I like to re-arrange the seating such that I am able to see them and reach them so that I engage with the students as individuals not just as a class. When class begins I start by asking how they have been since the last class-an interesting few minutes of them expressing themselves. It usually is at this time that I can tell that someone is really going through a lot and we may have to meet when they have time after class.

How do you describe nursing in one word?

Hope.

What do you do to ensure that your students become game changers in the nursing sector?

I ensure that my students know that clients (individuals, families, communities) are worthy of respect. Therefore when they handle their affairs, engaging with them they should ensure that the outcome of that encounter leaves a positive image about nurses and the profession. As nurses we are always to benefit not harm our clients.

Are you ever tempted to observe your students and then predict the worst or the best?

To be honest, it becomes inevitable to predict as one meets different groups of students and observes the way they apply themselves to their learning. I must say though that some of them have proven me wrong over the years. Those who may seem like they will do well may be challenged and some of those who seem like they will struggle may actually perform excellently.

"I generally
use a firm low
voice and
tone"



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How do you guide your students to choose the right path when they venture into the nursing field?

I encounter and teach students that are already at level 4 of their training (and some already from the field) so they have already chosen the path. Mine is more of encouraging them at this level and ensuring that they become game changers in the profession.

When faced with students who are about to give up on their lessons what do you do?

Whew! I have encountered a number of those, especially those that are adult learners. One finds that they are struggling with balancing studying, work and family life and wish to give up. I usually request to see them in my office so I can find out where the problem is and advise them where I can or refer with consent if I can not handle it too.

What five words would your colleagues and students use to describe you as a person, a lecturer, or a colleague?

Kind, Approachable, Passionate, Reputable, Devoted

How do you pep up distressed students?

Students become distressed due to various reasons, some personal and some academic. So my approach usually depends on what the reason for being distressed is. If it's academic reasons I remind them of why they took up nursing in the first place and what they stand to achieve if they remain focused in spite of pressures.

If it is personal, I listen and empathize, assisting where I can. However some personal challenges can run deep and cause mental breakdowns so I check if they would be comfortable sharing with colleagues in the Mental Health discipline of my department. They have become very instrumental in assisting many students who require counselling.

What do you expect from the incoming students?

I expect them to fully committed to their academic studies, but also enjoy university life within reasonable expectations. I expect them to prepare adequately for classes through engaging with course material and the ever available sources of information available in the internet as well as real life settings.

“My teaching makes use of current scenarios, particularly from the students’ workplaces or current situation in the health space”

What do you expect from the incoming students?

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What should new students expect from you as a lecturer?

They should expect that they will be engaged intellectually by a passionate yet gentle educator. They should expect an understanding lecturer however, who does not accept slack behaviour.

What is your tutoring philosophy?

My teaching philosophy is that no person is a blank slate- I recognize and build on prior knowledge.

What is this interesting quality about you that makes your students come to your class for more?

My teaching makes use of current scenarios, particularly from the students’ workplaces or current situation in the health space; thus it is easy to follow my lectures.

Under general what characteristics do nursing students require their tutors to possess?

They require knowledgeable educators who also receive them in their individualism as no student as the same as the next.

How does the lecturer’s personality affect the students’ success?

They should be approachable. You can’t expect students to succeed in your courses yet you are aloof and keep a closed door policy.

How would your previous students describe you?

They would say that I deliver my material in an understandable manner and I have made them fall in love with their profession.

What is your advice to all nursing students?

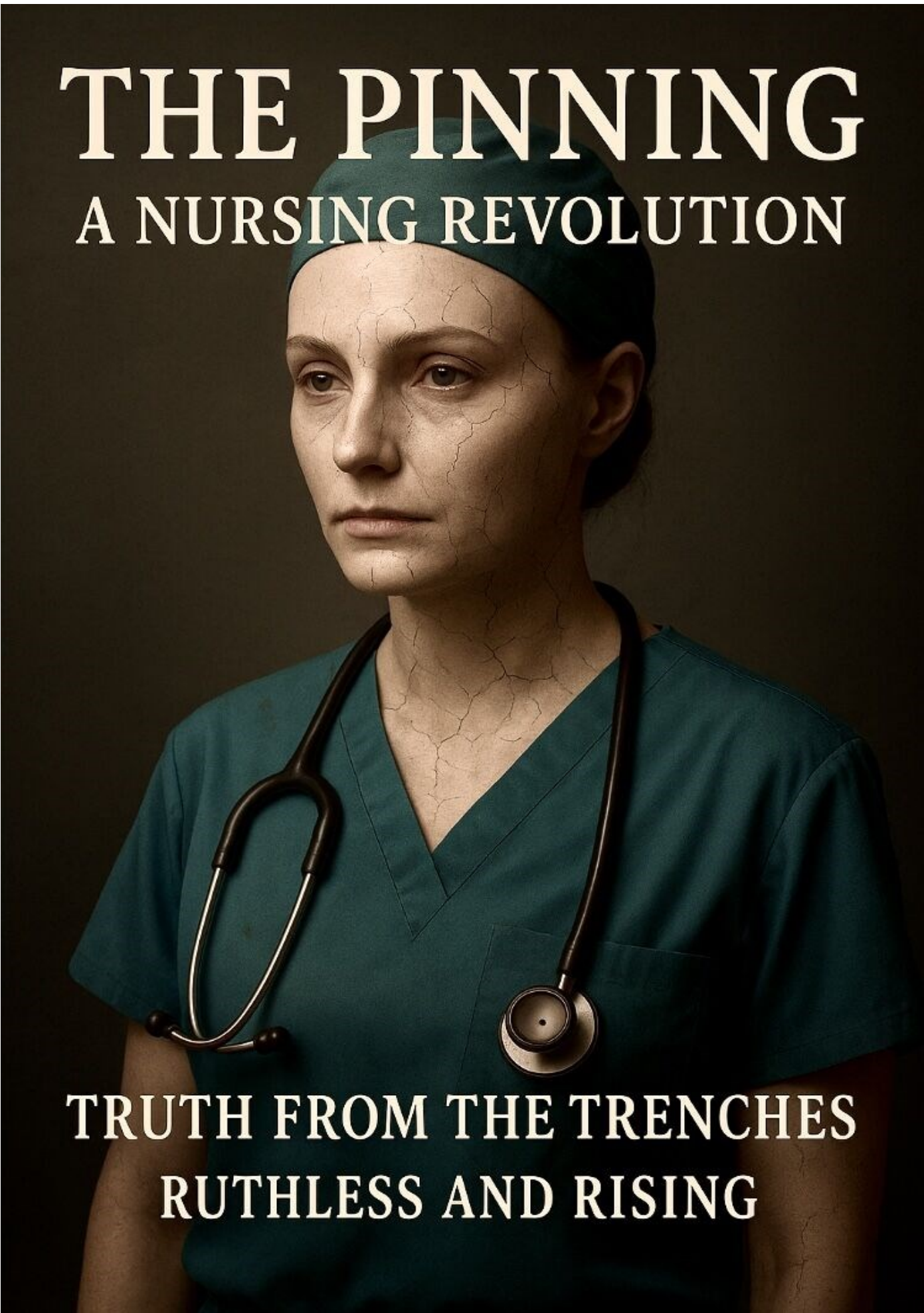
Nursing pertains to the lives of real individuals; thus, it is imperative to approach this vocation with profound respect for the autonomy of each person. Additionally, it is essential to remain well-informed regarding evidence-based knowledge, as our professional practice necessitates the implementation of such Principles in Community Health Nursing where I am specializing.

"It is easy to follow my lectures"



THE PINNING

A NURSING REVOLUTION



TRUTH FROM THE TRENCHES
RUTHLESS AND RISING



A Book Co-Authored By Ashley Scott LPN and Kimberly Maurer, BS, LPN, United States

What is the name of your book?

'THE PINNING: A Nursing Revolution'

Are you the sole author or a co-author of your book?

The book was co-authored by myself, Ashley Scott and Kimberly Maurer.

How will the potential clients access your book?

Readers can access 'THE PINNING: A Nursing Revolution' on Kindle through Amazon. We chose digital distribution to make it immediately accessible to nurses everywhere - they can download it right to their phones and read it during breaks, or share excerpts easily with colleagues who need to hear these truths.

Did you self-publish or go the traditional publishing route and why?

"We self-published through Kindle Direct Publishing. Traditional publishing would have taken too long, and frankly, I wasn't sure publishers would be ready for this level of raw truth about healthcare. Self-publishing let us maintain complete creative control and get this urgent message out immediately. Nurses needed this book yesterday, not in two years after corporate editing watered it down.

When did you launch it?

"We launched 'THE PINNING: A Nursing Revolution' yesterday, July 11th, 2025. The timing felt urgent - nurses are still in crisis and needed to see their truth reflected back to them immediately.

What kind of a writer are you?

"I'm a truth-telling poet and nurse advocate. I write from the trenches of healthcare - raw, unfiltered poetry that gives voice to the experiences nurses live but often can't speak about. My writing is both personal testimony and collective battle cry.

Is this your first book?

Yes, this is my first published book. I've only been writing for a couple of months, but the experiences and emotions had been building up for years. When I finally started putting pen to paper, everything just poured out.

How many books have you written so far?

"This is my first and only book so far. I started writing just a couple of months ago, and this collection represents everything that had been bottled up inside me from years of working in healthcare. It all came together very quickly once I began.

What is the genre of your book?

"It's a poetry collection with social and political commentary - specifically healthcare advocacy poetry. It's activist literature written by nurses, for anyone who wants to understand what's really happening inside our healthcare system.

What propelled you to write this book?

Years of watching brilliant, compassionate nurses being systematically broken by a profit-driven system that calls us heroes while treating us like disposable resources. I'd been holding all this pain and anger inside, but a couple of months ago, I finally started writing it down. Once I began, I couldn't stop - it was like a dam had burst.

What is its gist?

The book chronicles the journey from idealistic nursing student getting 'pinned' with promises, through the brutal reality of working in a broken system, to the awakening that we deserve better, and finally to revolution - nurses standing up, setting boundaries, and demanding change.

What is your target niche?

"Our primary audience is nurses and healthcare workers who feel trapped, burned out, and gaslit by the system. But we're also writing for patients' families, healthcare administrators who want real change, and anyone who wants to understand what's actually happening behind hospital doors.

What is the core message that the readers should expect from your book?

"You are not broken. The system is. Your suffering isn't noble, it's exploitation. And most importantly - you have the power to say no, set boundaries, and demand better. We're not quitting nursing; we're firing the toxic system."

What is the psychology of its content?

It's trauma processing turned into empowerment. We move readers through the stages of awakening - from denial and self-blame, through anger and grief, to clarity and collective action. It's about breaking the trauma bonds that keep nurses accepting abuse as 'calling.'

How will it enrich the readers?

Nurses will finally feel seen and validated. They'll realize they're not alone and their experiences aren't unique failures. The book gives them language for their trauma and permission to prioritize their own wellbeing. For non-nurses, it opens their eyes to healthcare's hidden crisis.

How will it enrich the nursing sector?

By breaking the code of silence. When nurses stop accepting abuse as normal, when they start organizing and setting boundaries, when they demand to be treated as humans - that's when real systemic change becomes possible. This book is a catalyst for that conversation.

What is your vision about your book?

I envision this book sparking a movement. I want it passed hand-to-hand in break rooms, shared in nursing forums, quoted in union meetings. I see it becoming a rallying cry that helps nurses realize their worth and demand the respect they deserve. Ultimately, I want it to contribute to systemic change in healthcare.

How will the potential clients access your book?

Readers can access 'THE PINNING: A Nursing Revolution' on Kindle through Amazon. We chose digital distribution to make it immediately accessible to nurses everywhere - they can download it right to their phones and read it during breaks, or share excerpts easily with colleagues who need to hear these truths.

What promise do you give to your followers?

I promise to keep telling the truth, no matter how uncomfortable it makes people. I promise to amplify nurses' voices and experiences. And I promise that this is just the beginning - we're building a movement that will transform healthcare for the better.

What important advice would you give to a first-time author?

Don't wait for years of experience - if you have something important to say, say it now. I only started writing a couple of months ago, but I had years of nursing experience to draw from. Trust your voice, write your truth, and don't let anyone tell you that you need more credentials to share your story. Sometimes the most powerful writing comes from raw, immediate emotion.

"The book chronicles the journey from idealistic nursing student getting 'pinned' with promises"

Ashley Scott

'Behind
the Cloak'



"Behind this cloak
of experience, behind the
scars and the strength,
there's still that twenty-
one-year-old "

“Fresh out of nursing school, I believed I understood what lay ahead”

I was twenty-one when I first put on scrubs, my mother's voice echoing in my mind: "Nursing isn't just about medicine, Ashley. It's about seeing people at their most vulnerable and choosing to care anyway."

She had spent her career doing exactly that, and watching her move through our house after long shifts, tired but fulfilled, drained but purposeful, planted a seed in me that would grow into what I thought was unshakeable conviction.

In 2007, fresh out of nursing school, I believed I understood what lay ahead. This wasn't just a career choice, nursing was my calling. I had romanticized notions of healing, of being the compassionate presence that made a difference in someone's darkest hour. I imagined myself as part of a noble profession, a sisterhood of caregivers united in purpose.

I was spectacularly naive.

My first job was a brutal awakening. Thirty patients. Eighteen dollars an hour. One nurse. The math alone should have sent me running, but I was determined to prove myself, to honour the calling I felt so deeply.

I lasted six months before the weight of impossibility crushed my idealism. Thirty human beings, each with complex needs, fears, and pain, reduced to a number that no single person could manage with the care they deserved.

But I didn't give up. I couldn't. The calling was stronger than the broken system trying to silence it. Over the next eighteen years, I would learn that nursing is both the most rewarding and most devastating profession I could have chosen.

I mastered the complexities of long-term acute care hospitals, where the sickest patients clung to life by threads I helped weave stronger. I saved lives. I held hands as others slipped away. I found my voice as an advocate when institutions tried to prioritize profits over patients.

I also nearly lost everything.

There was the day a patient threw a chair at me, the violence erupting from frustration with a system that had failed them long before they met me. There was Mr. Johnson, whose death could have been prevented if proper protocols had been followed, but corruption and negligence created a perfect storm of preventable tragedy.

I documented everything, reported what I witnessed, and watched as nothing changed except my own standing, suddenly I was the troublemaker, the nurse who asked too many questions.

The breaking point came when a patient brought a gun into the facility. As I stood there, calculating escape routes while trying to de-escalate a situation that should never have been mine to handle, I realized how far we had fallen from the profession my mother had described.

Later, when my epilepsy, triggered by years of stress and trauma, cost me my job, I understood that the system I had given everything to protect had no intention of protecting me in return. Yet somehow, through poetry and writing, through advocacy projects that let me channel my anger into purpose, I began to find my way back to what nursing had taught me.

Not the clinical skills, though those mattered. Not the protocols, though they had their place. Nursing taught me to document everything, to speak up when others couldn't, to find my voice even when it shook with fear or rage.

These days, I spend most of my time with my pen and my thoughts, but also with a small circle of fellow survivors, nurses who understand the weight we carry. We've become each other's chosen family, bound not by blood but by shared battles and the quiet understanding that comes from having walked through fire together.

People ask me if I'd do it all again, knowing what I know now. It's a question that stops me cold every time. The honest answer? Yes. Even though nursing broke me. Even though the system itself is broken.

I would choose it again, not for the glory or the gratitude that rarely comes, but to be that voice I wish I'd had at twenty-one. To stand guard against the culture that devours its young. To prove that we can heal not just patients, but the profession itself.

If I had to choose one word to describe this eighteen-year journey, it would be **becoming**. Not the becoming they taught us about in nursing school, that was about clinical skills and protocols. This was about becoming someone who could stand in the fire and still choose compassion. Becoming someone who could lose everything and still find her voice.

To the young nurses reading this, the ones who still have that light in their eyes that I remember carrying: Find your voice early. Document everything, not just for legal protection, but because bearing witness matters. Protect your health, both physical and mental, because the system won't do it for you. And remember that the profession needs you not because you're perfect, but because you're willing to care in a world that often forgets how.

Most importantly, know that we don't have to keep eating our young. We can be the generation that changes that toxic tradition, that builds the supportive community nursing was always meant to be.

We can work toward that common goal, better patient care, without tearing each other down in the process. Now, as I plan for what comes next, I dream of cherry blossoms in Japan, of rolling green hills in Ireland, of café conversations in Paris, and the wild beauty of Australia.

These aren't escape fantasies, they're promises I'm making to the part of me that nursing couldn't touch. The part that still believes in wonder. My golden years won't be about rocking chairs and regrets. They'll be about using every skill nursing taught me, documentation, advocacy, the ability to stay calm in crisis, to continue fighting for the profession I love, even as I heal from what it cost me.

Behind this cloak of experience, behind the scars and the strength, there's still that twenty-one-year-old who believed nursing could change the world. She was right. She just didn't know it would have to start by changing us.

"If I had to choose
one word to describe
this eighteen-year
journey, it would be
becoming"



Matshidiso **Mosai**

Mommy's **Girl**

She is a mother,
a lecturer and
a nurse-preneur



"With God
by my side and as
my guide, I try to
lead in love"



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What strategy do you use to make your family love your nursing job?

I share meaningful moments and experiences where a patient or family member was satisfied with the service. I also share challenges and feelings of sadness and how I overcame. I think they love my nursing job because they are always arguing who will take over the clinic and feel motivated and inspired, seeing that I am a lecturer and a nurse-preneur, meaning there is so much to do beyond bedside.

A nurse works in a collaboration and is influential in bringing change as part or member of a multidisciplinary team in the health sector.

As a nursing professional what kind of support does your family give you?

My family is interested because they will ask me how my day was and if I experienced anything good or bad at work. They ask me how I am feeling and if there's anything they can do to help. They give me time and space to rest when I am tired, they even bring me food and my little one comes, hug me so tight, give me a kiss and tell me that he loves me.

What are the most precious times with your family?

When we share a good home cooked meal, they love my cooking and baking.

What reception does your family give you after a long day's work?

They welcome me with big hugs and kisses.

Who spoils you the most?

My mother.

What is this first thing you do when coming from work?

I hug my mom and children, take off my shoes and elevate my feet for few minutes, prepare dinner or dish up if my mother has cooked.

Moments in which you miss your family the most while at work?

I miss my family when I feel down and overwhelmed.

What games do you play together as a family?

We play cards, draught, chess, scrabble, we sing and dance, and beat the drums.

"We believe
in education and
supporting each
other to do better"

What nicknames have they given you and why?

Mastholele (meaning the quiet one) they regard me as a quiet woman who works hard in her quietness.

Describe your motherhood in one word?

Nurturer.

Describe your relationship as a family in one word?

Closed-family.

What is your unique family culture?

We believe in education and supporting each other to do better. We believe that nothing is impossible if we put our focus in it.

What one word do you use to pep up/energize one another?

Celebrating each other's wins, speaking life daily and affirmations.

How do you balance your three roles?

With God by my side and as my guide, I try to lead in love as a mother, serve with purpose at work and build in faith in the business.

"I hug my mom
and children,
take off my
shoes and
elevate my feet
for few
minutes"



You will find me at
April 22 2024

"They love
my cooking
and baking"



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30

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Five Ways to Brighten Your Exterior Spaces



Article By www.chdinteriors.com

Spring is finally here! After a long winter, it's time to get your outdoor spaces ready for the warmer weather. Whether you have a cozy patio or an expansive garden, there are plenty of ways to add some new life and lightness to your outdoor area. Here are five tips from our interior designers in Charleston to help you make the most of your outdoor space this spring and all summer long!

Add Colourful Pillows & Furniture

Adding colourful pillows and furniture is a great way to bring some lightness and brightness into your outdoor space. Choose colours that will pop against your existing decor but also match the style of your home. If you want to keep things neutral, opt for shades like beige or white, but pick shades like yellow, orange, or blue for something more vibrant. If you have flowering shrubs and greenery around, try to accent the natural beauty using similar colour palettes.

Hang String Lights

Nothing says "springtime" quite like string lights in your outdoor space! String lights can transform even the dullest of spaces into something magical and inviting. They come in all shapes and sizes, so they'll fit whatever mood you're trying to create in your backyard oasis. They will also allow you to entertain outdoors well into the night with enough light to really get "lit!"

Repaint Your Patio Furniture

If you're looking for an easy way to brighten up your outdoor space without breaking the bank, consider repainting your current patio furniture! A fresh coat of paint can go a long way in making old furniture look brand-new again, so don't be afraid to experiment with different colours and patterns! You will be surprised at how your furniture will come back to life with very little effort and even less money.

Bring In Some Greenery

Plants not only add colour to your outdoor space; they also help filter out pollutants from the air, making them perfect for those sunny days when everyone wants to spend time outside. You can use plants as decorative pieces by placing them in pots or hanging baskets around the perimeter of your patio or deck area. Choose to go with just two or three colours, or go whimsical by mixing it up.

Accessorize with Throw Rugs & Blankets

Adding throw rugs and blankets is a great way to make any outdoor space feel cozier and brighter during springtime! Throw rugs come in a variety of styles, so have fun mixing and matching patterns until you find the ones that fit just right with your decorating theme. And don't forget about those soft blankets — they will come in handy when temperatures dip at night or during cool spring days!

With these five interior design tips, you should have no problem sprucing up any outdoor space this spring! There are many ways to add warmth and lightness to any backyard oasis, so get creative and have fun with it!

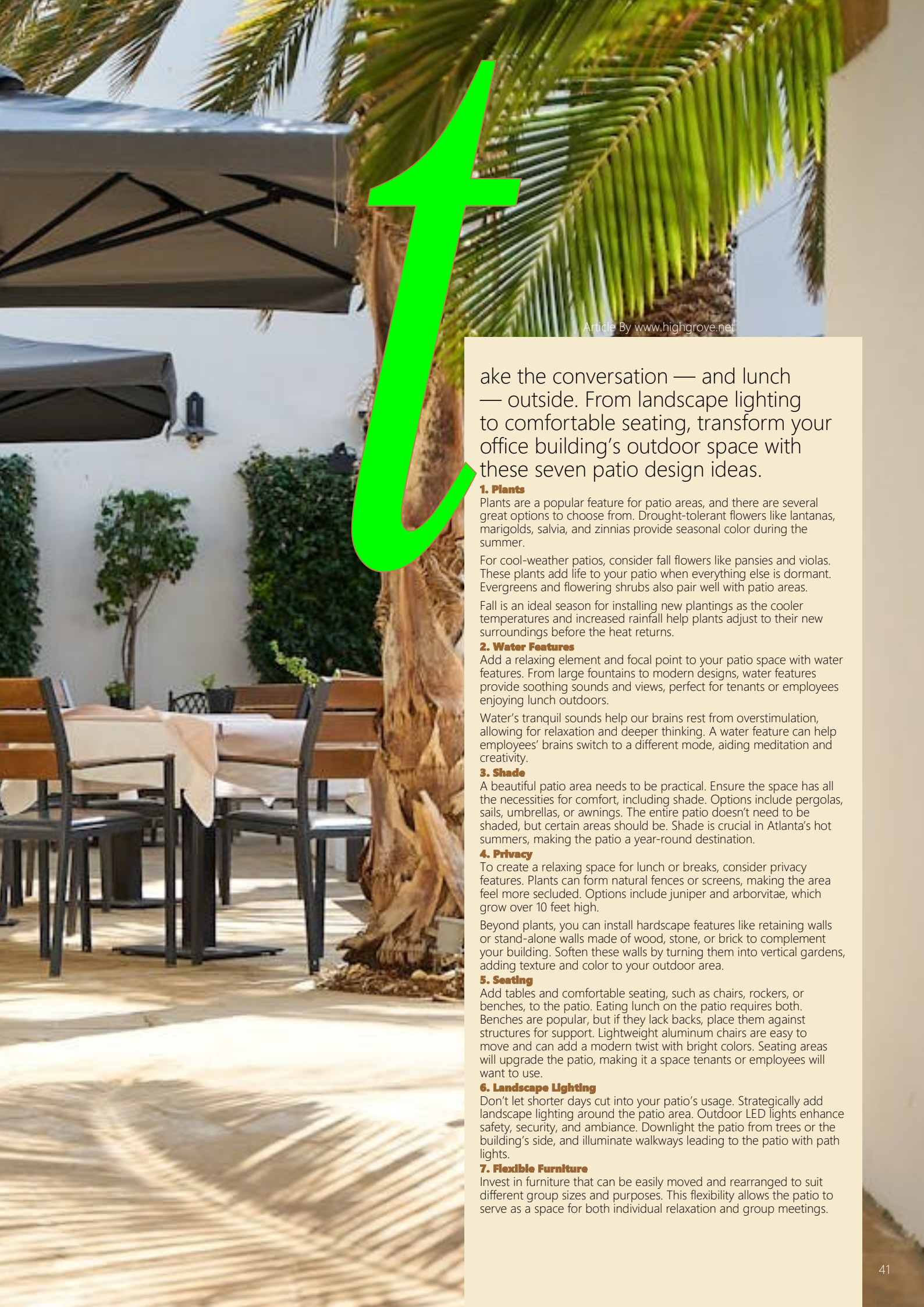
If you put in a little bit of effort now, you will see the fruits of your labour throughout the spring and well into the summertime!

“ If you're looking for an easy way to brighten up your outdoor space without breaking the bank, consider repainting your current patio furniture! ”



7

Patio Design Ideas for Office Buildings



Article By www.highgrove.net

ake the conversation — and lunch — outside. From landscape lighting to comfortable seating, transform your office building's outdoor space with these seven patio design ideas.

1. Plants

Plants are a popular feature for patio areas, and there are several great options to choose from. Drought-tolerant flowers like lantanas, marigolds, salvia, and zinnias provide seasonal color during the summer.

For cool-weather patios, consider fall flowers like pansies and violas. These plants add life to your patio when everything else is dormant. Evergreens and flowering shrubs also pair well with patio areas.

Fall is an ideal season for installing new plantings as the cooler temperatures and increased rainfall help plants adjust to their new surroundings before the heat returns.

2. Water Features

Add a relaxing element and focal point to your patio space with water features. From large fountains to modern designs, water features provide soothing sounds and views, perfect for tenants or employees enjoying lunch outdoors.

Water's tranquil sounds help our brains rest from overstimulation, allowing for relaxation and deeper thinking. A water feature can help employees' brains switch to a different mode, aiding meditation and creativity.

3. Shade

A beautiful patio area needs to be practical. Ensure the space has all the necessities for comfort, including shade. Options include pergolas, sails, umbrellas, or awnings. The entire patio doesn't need to be shaded, but certain areas should be. Shade is crucial in Atlanta's hot summers, making the patio a year-round destination.

4. Privacy

To create a relaxing space for lunch or breaks, consider privacy features. Plants can form natural fences or screens, making the area feel more secluded. Options include juniper and arborvitae, which grow over 10 feet high.

Beyond plants, you can install hardscape features like retaining walls or stand-alone walls made of wood, stone, or brick to complement your building. Soften these walls by turning them into vertical gardens, adding texture and color to your outdoor area.

5. Seating


Add tables and comfortable seating, such as chairs, rockers, or benches, to the patio. Eating lunch on the patio requires both. Benches are popular, but if they lack backs, place them against structures for support. Lightweight aluminum chairs are easy to move and can add a modern twist with bright colors. Seating areas will upgrade the patio, making it a space tenants or employees will want to use.

6. Landscape Lighting

Don't let shorter days cut into your patio's usage. Strategically add landscape lighting around the patio area. Outdoor LED lights enhance safety, security, and ambiance. Downlight the patio from trees or the building's side, and illuminate walkways leading to the patio with path lights.

7. Flexible Furniture

Invest in furniture that can be easily moved and rearranged to suit different group sizes and purposes. This flexibility allows the patio to serve as a space for both individual relaxation and group meetings.



Ethical Practice in Healthcare

Part 3

‘Ethical challenges when caring for a patient who is unable to speak for themselves’

“It takes courage to report an unethical incident to a reporting line”

Article by Dr Augusta Dorning

Introduction

In our last instalments, we debated how nurses are key advocates for ethics in healthcare.

In this instalment we will debate some of the ethical dilemmas that nurses face when caring for a patient injured in an accident on the roads, where the patient is unable to speak for themselves. We will also talk about the personal challenges of patient care in this situation.

Let's explore a regular occurrence in hospital settings the world over.

1. The safeguarding of the patient's valuables.
2. Was the patient taken advantage of because they were unable to speak for themselves, at what risk are they placed?

South African challenges

In a country like South Africa, the dynamics of being involved in a road accident are complex. Our environment is such that there are many stakeholders involved. If you are a passenger, the Road Accident Fund needs to be notified by the ambulance service provider.

Not all private hospitals may provide for your treatment, and your treatment may be delayed by service constraints in a public hospital. More often than not your belongings will be stolen before you leave the scene of the accident and then the probability of your belongings being stolen while you are admitted is highly possible too.

What of your treatment options? As nurses, and the advocates for the patient, how much work should we do trying to identify the patient and find their relatives?

The first ethical framework indicates that we shall first do no harm. We took our nursing oath to be the advocate for the patient. In your daily practice are you as an individual staying true to this?

Environmental factors

In the environments where we work there could be cultural practices that prevent us from staying true to our Oath. Let us explore some of these cultural practices:

1. Remaining silent out of fear of reprisal.
2. Staying silent out of fear of ostracization and exclusion.
3. Maintaining the group mentality because of the above.
4. The opportunity to sell someone's valuables and make some money.
5. The opportunity to steal without fear of consequence.
6. The environment provides the opportunity due to poor levels of compliance with policy and no consequence management.

The role of religious context

We are all born into a religious framework and context. There is no religion on earth that condones theft. Hence it comes down to human nature, and the individual choices that are made every minute of every day, in settings where we care for those most vulnerable. Take a moment to reflect on circumstances where you could have done better and could have been a better advocate for your patient?

In situations where levels of intimidation are high, such as in South Africa, being the person to “blow the whistle” comes with risk.

Fraud and corruption reporting lines

South Africa has literally hundreds of fraud and corruption reporting services and hotlines. These can be found on every government institution website as well as on every healthcare facility website.

Will you do “The Right Thing”

The benefits of using one of these services when you need to outweigh the option of not doing the right thing. Reporting can be completely anonymous and unless you are only one of two people involved in a crime, this is the best and safest option. It takes courage to report an unethical incident to a reporting line, but can you live with your conscience if you don't?

What's next?

In our next instalment we will discuss how we as a profession make a positive contribution to quality standards.



Article by Dr Augusta Dorning

Dr Augusta Dorning is a senior consultant to The World Bank Group (IFC Health and EPIHC), and the creator and author of the Ethical Principles in Healthcare Course which was released worldwide in April 2025.

“Consider working with a fee-only financial planner”



**Financial Wellness
and Stress
Management**



Article By Kimberly Maurer, BS, LPN
Fort Myers, Florida, United States

Automate Financial Management

Set up automatic transfers to savings accounts and automatic bill payments to reduce the mental load of financial management. This approach is particularly valuable given the demanding nature of nursing work.

Regular Financial Check-Ins

Schedule monthly financial reviews, just as you would any other important appointment. Use this time to review your budget, track progress toward goals, and make necessary adjustments.

Seek Professional Help When Needed

Consider working with a fee-only financial planner, especially when facing major financial decisions or life transitions. Many professionals offer virtual consultations that can accommodate nursing schedules.

Action Steps to Get Started

Week 1: Track all expenses and gather information about your employee benefits, including retirement plans and insurance options.

Week 2: Create your initial budget based on your tracked expenses and set up automatic transfers to start building your emergency fund.

Week 3: Review your student loan repayment options and consider whether you might benefit from income-driven repayment plans or forgiveness programs.

Week 4: Ensure you're contributing enough to your employer's retirement plan to receive the full match, and research additional insurance needs.

Month 2 and Beyond: Continue building your emergency fund, increase retirement contributions as your budget allows, and begin investing for long-term goals.

Conclusion

Financial wellness as a nurse requires a balanced approach that acknowledges both the challenges and opportunities of your profession.

By creating a solid financial foundation through budgeting, debt management, and strategic saving, you can build long-term wealth while managing the unique aspects of a nursing career.

Remember that financial planning is a marathon, not a sprint. Start with small, manageable steps and gradually build more complex strategies as your knowledge and confidence grow.

Your dedication to caring for others should extend to caring for your own financial future, ensuring you can continue serving your patients while building security for yourself and your family.

The key to success lies in starting now, staying consistent, and adapting your strategies as your career and life circumstances evolve.

With proper planning and discipline, you can achieve financial security while pursuing the rewarding career you've chosen in nursing.

“Track all expenses and gather information about your employee benefits, including retirement plans and insurance options”

“You hope
the machine
is wrong”

Kimberly Maurer, BS, LPN

A Healthcare Writer From Fort Myers, Florida, United States | Visionary Nurse
Leader | Patient Advocacy Expert | Mentor for the Silenced | Culture Rebuilder |
Rise and Restore Movement Builder | Helps People Rewrite Their Stories &
Reclaim Their Power

Cradling What Might Have Been

Article By Kimberly Maurer, BS, LPN

You don't forget the ones like her. Not just the name, or the story, or the ultrasound with no heartbeat. You remember the room. The quiet. The way time folds in on itself when joy is replaced with devastation. She had been in before, more than once.

Regular visits, sweet smiles, that cautious optimism mothers carry when hope outweighs fear. Her belly had grown with each passing week, and so had our bond. I was her nurse. But more than that, I was her witness. The one who greeted her at each appointment.

The one who noticed the subtle shift in her spirit long before the machines did. This time was different. She felt it. I felt it. A silence hung in the air, heavy and unspoken. It was the kind of quiet you don't fill with small talk. I searched. first with the monitor, then the Doppler, then the doctor. Nothing.

Each moment stretched longer than the last, until finally the ultrasound confirmed what none of us wanted to believe. The baby was gone. There's a moment just before the confirmation, where your heart already knows the truth. But still, you hope. You hope you're wrong. You hope the machine is wrong.

You hope even though everything in your body already understands what's coming. What follows is a cruel collision between clinical steps and emotional shattering. Yes, there's protocol. Induction. Paperwork. Pain control. But there's no policy for grief this raw.

For a mother who still carries her child, just not in the way she imagined. There are no checklists for that. I stayed. I stayed with her through every contraction, every sob, every aching question that had no satisfying answer. It was one of the hardest nights of my life. And one of the most sacred.

There's a holiness in holding space for grief, in bearing witness to heartbreak that has no words. When her baby girl was born, perfect and still. I wrapped her gently. She was beautiful. Long lashes. Tiny fingers. A face so peaceful, it almost didn't make sense.

And then, I placed her in her mother's arms. I have never felt so helpless. So human. So broken. But I was honoured. Honoured to be there. Honoured to not look away. Honoured to help create a memory in a moment that shattered every dream she had.

Because we don't only celebrate life in its first breath. Sometimes, we celebrate life by honouring what never had the chance to fully begin. Grief like this demands reverence. It asks us to bear the unbearable, to cradle what might have been with the same tenderness we offer to what is.

And I will never forget her. Not the patient. Not the mother. Not the baby. All of them. Forever etched in the quietest corners of my heart. But there's more to the story. More than I could fit in the quiet of that delivery room. She was only 18. A young Black woman, radiant with hope and anticipation.

Her mother and grandmother were by her side, wrapping her in love while cradling their own sorrow. The grief in that room was generational. Layered. Heavy. There was no partner. No father of the baby. Just three women, three hearts breaking in unison.

And the baby girl? She was exquisite. A head full of dark curls, soft olive skin, eyelashes that kissed her cheeks. She was perfect. That's what made it even harder. There were no answers. No accident. No cause. No medical explanation to soften the blow.

Just an unexplainable absence where a heartbeat once lived. The postpartum floor is usually filled with laughter. Celebrations. Flowers. New life. But for her, it was mourning. Visitors didn't come to rejoice. They came to hold her hand, to wipe her tears, to whisper; I'm so sorry; I remember feeling the contrast in every hallway.

Joy echoing from neighbouring rooms while silence clung to hers like fog. I dressed her daughter carefully. Measured her. Took footprints. Photographed her. Wrapped her in a blanket meant for beginnings. None of it made sense. None of it made it easier.

And when it came time to say goodbye, the ache was almost unbearable. No mother should ever have to leave a hospital with empty arms. In the days that followed, her family began planning a funeral instead of a homecoming.

That shift. from hope to heartbreak, from dreams to devastation is a kind of trauma that never fully heals. It lingers. It lives in us. This wasn't just a patient story. It was a sacred moment of collective grief. A reminder that presence is more powerful than protocol, and that sometimes, all we can do is hold space for the unanswerable.

"It was one of the hardest nights of my life"



“Not just from
the diagnosis,
but from the
delivery”

When Compassion Fails: What Happens When the Call Comes Without Humanity

A nurse's personal reflection on what happens when a life-changing diagnosis is delivered without empathy—and how we can do better



Article By Kimberly Maurer, BS, LPN
Fort Myers, Florida, United States

Dear Reader,

This piece isn't polished prose or theory. It's personal. It's raw. It's a reflection of what happens when the delivery of care forgets the person receiving it.

I wrote this as a nurse. As a niece. As someone who has witnessed what happens when the system moves faster than the soul can handle.

If this resonates with you whether you're a clinician, a patient, or a loved one, I hope you'll sit with it, share it, and use it as a reminder: we can do better. We must do better.

In recent weeks, I've found myself reflecting deeply on how often the human in healthcare goes unseen. The conversations happening online, the powerful stories being shared, and even the experience of writing my last article have shown me something painful. We still aren't getting it right.

We're still missing the mark on empathy.

My most recent heartbreak came when someone incredibly dear to me my aunt on my father's side was diagnosed with breast cancer. But the devastation wasn't just the diagnosis itself. It was the cold, careless way the news was delivered that shattered me.

She is 67 years old. A deeply loved woman. A mother, sister, godmother to my son. She's already lost her sister and her father to cancer. And now she's been told, flatly, cruelly: you have it too.

Her journey began like many. A routine mammogram. Then the dreaded callback, "We found something suspicious." Then more appointments, diagnostic imaging, and finally a biopsy. I know this path well, because I recently walked it myself. And the waiting? It's a silent, mental torture.

Thankfully, my biopsy came back negative. Hers did not. And how did she find out? Not through a caring nurse. Not through a physician who could offer clinical context and emotional support. No. She got a call from someone unqualified, untrained in empathy, and seemingly unaware of the emotional weight they were carrying in their voice.

Her words?

"Hello, I'm calling to tell you have cancer. I know you were just going about your day as normal and all of a sudden you get this call."

No pause. No compassion. No acknowledgment of how such news upends a life.

She was home alone when she received that call. Completely unprepared, she collapsed emotionally. Through tears and with shaking hands, she called her husband and cried, "I have cancer. You need to come home."

Later, we would learn it was Triple Negative Breast Cancer Stage 1. Aggressive, daunting, and deeply personal.

The woman on the phone Amy, as she was identified, offered no space to process, no gentleness, and immediately launched into insistence about chemotherapy. She pushed it as the only viable option, without asking about my aunt's history, trauma, or wishes.

And then she said something I'll never forget.

"I'm just the bearer of bad news. I'm just going by the CDC guidelines."

As if that would justify the robotic tone, the lack of compassion, or the lack of human decency.

She continued. "I'm not making any money off chemo," she said repeatedly, while trying to persuade my aunt to accept treatment she wasn't ready for. And then, over and over again: "But you're going to be OK."

As if saying it enough times could erase the devastation of the moment.

This is the kind of interaction that leaves lasting wounds. Not just from the diagnosis, but from the delivery. From being treated like a case number instead of a person.

My aunt is strong, but this broke something in her. She told me with tears in her eyes, "I just want it out of me." She refuses chemotherapy. She watched it take her sister and father. She will do radiation, but that's where she draws her line.

Thankfully, our family is close. She is surrounded by love. But I can't help but think: what if she wasn't? What if this call had been the only support she had? What would that have done to her?

We must do better.

We must train, prepare, and demand more of the people we entrust to deliver life-altering news.

A diagnosis like cancer isn't a line on a script. It's a moment that splits time in two. Before and after. And how we walk someone through that moment can either anchor them in strength or leave them untethered in fear.

To the healthcare institutions reading this: this isn't about blame. It's about responsibility. We must put the human back at the center. Because if we cannot deliver news with care, how can we claim to care at all?

To Amy, whoever you are, I hope you never have to receive a call like the one you gave. And if you do, I pray the person on the other end sees you, hears you, and holds you through it. Because every patient deserves that.

And my aunt? She deserved so much better.

If you've ever received a diagnosis that changed your life, or delivered one that changed someone else's, tell me your story. This space is for you. Comment, reply, or share this with someone who needs it.

Let's rebuild healthcare where it matters most. In our voices, our hearts, and how we hold one another when the script fails.

"I'm just the bearer of bad news. I'm just going by the CDC guidelines"

Josefina Anjolo

A Maverick, a Trendsetter
and a Nursepreneur

“

M

y Josefina N Anyolo, a 37-year-old Registered Nurse originally from Okahao, Namibia, and currently based in Windhoek. With a deep passion for healthcare and community service, I have dedicated my career to both treating individuals and mentoring the next generation of healthcare professionals.

In 2020, I founded Nurse Connection, a nonprofit organization aimed at bridging the gap between current and future generations of nurses. Through mentorship, training, and support, we strive to guide young professionals as they navigate their nursing careers and foster a sense of community within the healthcare field.

This year, I expanded my vision by opening my own private clinic in Windhoek, where I continue to provide quality care while advancing my mission of improving healthcare accessibility and outcomes in my community. I am committed to empowering others, whether through the mentorship provided by Nurse Connection or through hands-on care in my clinic.

As I move forward, I aim to expand my clinic, reach more young nurses through mentorship, and continue to contribute to the growth and improvement of the Namibian healthcare system.





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"I would change the way the world treats the vulnerable — especially the poor, the sick, and the unheard"

Who is Josefina Anjolo?

Josefina Anjolo is a passionate registered nurse and midwife, the founder of Queens Health Clinic and the Nurse Connection NGO, a platform dedicated to youth health advocacy and inspiring aspiring nurses. She is visionary in healthcare entrepreneurship a "Nursepreneur" whose journey has been grounded in service, resilience, and a strong sense of purpose.

How has your early life been?

I would say my early life was good, in fact, beautifully simple. I grew up in my parents' house as the last-born girl in a very healthy (and mischievous!) family. Though we came from humble beginnings, both of my parents were unemployed. Our home was filled with love, laughter, and childhood adventures. I spent much of my time playing with my cousin Saara, my nieces, Natu, Selma, and my childhood friend Gwashilumbu. We survived on little, but we had everything that truly mattered.

Do you have a nickname?

Yes, though most people know me as Josefina, those closest to me from childhood still call me by my nickname "Gondjala" derived from my traditional name "Namutenya" (Sunshine). I got this name from my late Dad, Toivo Akwenye Anjolo. Those are treasures that remind me where I come from.

Who is your first love?

My first love was Armas. We met in high school, and he is still one of the humblest, kindest souls I've ever known. He had a good heart still does. Our story started young in high school with innocent fun that planted deep roots.

What games did you enjoy most while growing up?

We played everything from Omboloka (hide and seek) to Ohaye and skipping rope games that brought laughter and formed unforgettable bonds. Those carefree moments shaped my playful and youthful spirit.

What's the first thing you do in the morning?

I start every day with a prayer, giving thanks and grounding myself. Then I brush my teeth, read a few lines from a book usually something uplifting or educational and then I dive into my daily routine. That quiet morning ritual is where I draw strength.

What personal strengths would you like to motivate your admirers with?

I've learned that if something matters to you, you stand up and just do it. That's my strength — action. Even when I'm scared or unsure, I push forward. Consistency and courage have carried me from community clinics to a level of establishing my own business.

Who do you spend most of your time with?

Right now, I spend most of my time alone — not out of sadness, but growth. I have learned that surrounding yourself with too many people can sometimes feel betrayal to your own peace. Solitude has been my greatest teacher lately.

Who is your celebrity crush?

"Lol" My celebrity crush is Gugu Mbatha-Raw. Her elegance, strength, and talent inspire me.

How would someone get your special attention?

It takes effort. I value consistency, honesty, and effort. If you want my attention, you need to

What is your favourite dish?

My favourite dish is a good traditional Oshiwambo porridge with dried meat or chicken, served with some "ehanda" (traditional spinach). It's hearty, grounding, and always takes me home.

What are your favourite moments?

My favourite moments are quiet mornings with my journal and a warm cup of tea — those times when I can reflect, pray, and realign with my purpose. I also cherish the laughter of my babies as well as patients who feel safe and seen under my care. That's the kind of joy that fuels my soul.

What is your favourite car brand?

I admire the Mercedes-Benz brand — it's classy, reliable, and built with purpose. Just like the life I strive to live; elegant but strong.

What is your favourite spot?

My favourite spot is anywhere near water — a beach, a calm riverside, or a quiet bath with candles. Water has a way of cleansing not just the body, but the mind and heart too.

What career did you choose and why?

I chose a career in nursing and midwifery, not just as a job but as a calling. I've always been drawn to people — to healing, nurturing, and educating. Nursing gave me a doorway to do all of that, while entrepreneurship gave me the wings to expand it on my terms.

What ranks did you go through to be where you are now?

I started as a student nurse, moved into clinical midwifery, and then spent years in community nursing and health education. I later transitioned into leadership and administration, eventually founding my own clinic and non-profit organization. Every level came with new lessons — none of it was easy, but all of it was necessary.

Do you think your career was the best choice and why?

Absolutely. Nursing opened doors for me to impact lives, not just treat symptoms. It built my resilience, taught me empathy, and gave me the platform to become a nursepreneur. I wouldn't trade that for anything.

If you could, what would you change in the world?

I would change the way the world treats the vulnerable — especially the poor, the sick, and the unheard. I would invest in youth health and education, because when you empower young people, you build a stronger future for all.

What part of your life experience would you alter if you had a chance to?

If I could, I'd spend less time trying to please others and more time listening to my own inner voice. I've learned that not everyone around you claps when you grow — and that's okay. Growth still matters.

If you were to write a book about yourself, what would the title be?

It would be titled: "Born to Serve, Built to Lead: The Journey of a Nursepreneur". A story of passion, persistence, and purpose — from the last girl in the house to a woman building something greater than herself.



How do you handle adversity and doubt?

I handle adversity with prayer, reflection, and resilience. I allow myself to feel the weight of it, but I don't let it define me. Doubt will always knock — I've just learned not to let it unpack and stay. I remind myself why I started and who I'm doing this for.

What are some of the mistakes you wish you could have avoided in life?

One of my biggest mistakes was trusting the wrong people around me — giving too much access to those who didn't value it. I've also learned that not speaking up for myself early enough in professional settings cost me opportunities. But I've grown through those moments.

What is the name of your company and what is its specialty?

My company is called Queens Health Clinic. We specialize in primary healthcare, Antenatal care, Postnatal Care, Wound care, Aesthetics treatment, women's health, and school-based health programs. We provide services with dignity, especially to underserved communities.

How did you come up with the name for your company?

I named it Queens because I believe every woman deserves to feel like royalty — cared for, respected, and empowered. The name is also a tribute to my sister, "Kuku Karna Namadhila Anjolo", who taught me grace and strength without ever using the word.

What made you decide on this type of business?

I saw a gap in accessible, compassionate health services, especially for young girls, women, and families in Windhoek. I wanted to create a space where health care wasn't just clinical, but also empowering and community-based.

How did you know that you had the right idea?

When I saw the impact our first school health program had on the way students opened up, asked questions, and came for follow-ups — I knew we were on the right track. Real impact is louder than applause.

What was your key driving force to become an entrepreneur?

I was driven by purpose and frustration. I saw how many lives fell through the cracks in the health system. Becoming an entrepreneur gave me the freedom to design solutions, not just follow policies.

What kind of values exist in your organization?

We live by compassion, integrity, respect, and innovation. Every patient matters. Every voice is heard. We don't just treat — we teach, listen, and uplift.

What is a typical day like at your business office?

A typical day is structured but unpredictable — from checking on patients to team meetings, to reviewing program outcomes. I also mentor young nurses and attend to admin and policy duties. Each day has a heartbeat of service.

Where do you see your company in five years?

In five years, I see Queens Health Clinic expanding into at least three more regions, with a fully operational mobile health unit, and a training wing for young nurse entrepreneurs. We will be a national voice in preventive healthcare and youth wellness.

How many hours do you work, on average, per day?

On average, I work 5 to 7 hours a day — but it rarely feels like work. When you're aligned with your purpose, you stop counting hours and start counting impact.

How do you describe your typical day?

My day begins with prayer and reading, then shifts into service and strategy — patient care, staff check-ins, reviewing progress, planning outreach, and ending with reflection and journaling. No day is the same, but every day is meaningful.

How has your business life affected your family life?

It's been a sacrifice. I've lost time and connections, and I've often had to choose duty over gatherings. I would miss my children because I spend less time with them. But I believe that one day, the seeds I'm planting now will become a shelter for my family and others.

What motivates you in your entrepreneurial journey?

The faces of the people we serve — children who smile after treatment, young girls who gain confidence, families that find hope again. That's what keeps me going when the work gets hard.

What are your principles?

My core principles are:

- Lead with love
- Serve with honesty
- Act with courage
- Grow through faith

How do you define your success?

I define success not by money or titles, but by how many lives I've helped uplift. If I leave a legacy of hope, healing, and inspiration, then I've succeeded.

Do you believe there is some sort of pattern or formula to become a successful entrepreneur?

Yes, I do believe there's a pattern — not a perfect formula, but a rhythm that successful entrepreneurs often follow. For me, it looks like this:

1. Purpose – You must know why you're doing what you're doing. Purpose is what sustains you when profit is still far away.
2. Vision – You must see beyond your current circumstances. A clear vision becomes your compass.
3. Courage – Starting something from scratch requires boldness. Fear will come, but courage moves anyway.
4. Consistency – Even on hard days, show up. Water the seeds, even when you see no growth.

What has been your most satisfying moment in business?

Seeing a young girl walk confidently out of our clinic after receiving care, education, and a listening ear — that's the moment I knew we were doing more than medicine; we were restoring dignity.

What services or products do you offer?

Queens Health Clinic offers:

- Primary healthcare services
- Wound Care
- Antenatal Care
- Postnatal Care
- Aesthetic Treatment
- Women's wellness & midwifery
- Youth sexual & reproductive health education
- Integrated school health programs
- Community health screenings & awareness campaigns

Did you experience failures? If so, what did you learn from them?

Yes, many. I've had funding fall through, staff turnover at critical times, and moments of deep self-doubt. But every failure taught me that resilience isn't about perfection — it's about adaptation. I learned to pause, assess, and pivot.

Does technology work for your business and how?

Absolutely. We use digital record-keeping, appointment scheduling, and even social media health education to reach youth. Tech allows us to scale access, reduce errors, and stay connected with our clients.

Who has been your greatest inspiration?

My mother, Aina Shiwa-Omwenyoo Kapenambili — a woman of unshakable faith, quiet strength, and infinite love. She had very little, but she gave everything. Her spirit fuels my vision daily.

“A typical day is structured but unpredictable”



What business-related book has inspired you the most?

Start with Why by Simon Sinek. It helped me reconnect with my core purpose and build my business from the inside out. Purpose-driven businesses always outlast trends.

What is your greatest strength?

Decisiveness. I trust my instincts, especially when they are informed by reflection, prayer, and people's real needs.

What is your greatest weakness?

Trusting too quickly — I used to give access to people who didn't value my vision. I've since learned to guard my space and choose partnerships wisely.

What piece of advice would you give to those who want to become entrepreneurs in your sector?

Don't do it for money or applause — do it because you care about people. Build your business on gaps you've seen, not trends you've followed. The health sector needs leaders with heart, not just hustle.

If you had a chance to start your career over again, what would you do differently?

I would have started sooner — with less fear and more faith. And I would have sought mentors earlier, because guidance saves time.

What would you say are the top three skills needed to be a successful nursing leader?

1. Empathy — to lead people, you must understand them.

2. Adaptability — healthcare evolves; leaders must too.

3. Vision — see beyond the bedside; build what's missing.

What entrepreneurial tactics have you discovered to stay focused and productive?

- Time blocking: My calendar is my accountability partner.
- Daily reflections: 5 minutes to assess wins and lessons.
- Delegation: I do what only I can do — the rest is teamwork.

What is your daily slogan?

"Serve with love. Lead with purpose." It reminds me of why I'm here and how I should show up.

How do you describe your leadership in one word?

Transformational. I believe in raising people, not just managing them.

What is your advice to young nurses?

Don't wait for someone to crown you — you are already worthy. Learn, grow, and remember: nursing is leadership in action. And if your passion whispers something bigger? Listen to it.



Eddie Bernice Johnson

Honoring a Legend: The Life and Legacy of Eddie Bernice Johnson

Article on 9 January 2024, by www.texasnurses.org

It is with great sadness we announce the passing of Retired U.S. Representative Eddie Bernice Johnson. The news has been flooded with kind words from our nation's leaders recounting the amazing life she led. Johnson was a Texas native, born in Waco, Texas on December 3, 1935.

Johnson became a nurse in 1955 after attending St. Mary's College at the University of Notre Dame in Indiana before continuing her education at Texas Christian University in 1967 for her BSN and then her master's degree in public health from Southern Methodist University in 1976.

As nurses, we mourn the loss of a woman who paved the way for Nurses in Politics as Johnson became the first registered nurse elected to Congress in 1992. She was the first Black chief psychiatric nurse at Dallas' Veterans Affairs hospital where she served as a chief nurse for 16 years before entering into her nearly 50-year tenure as a politician.

Congresswoman Johnson was the first black woman to chair the House Committee on Science, Space and Technology and to lead the Congressional Black Caucus. Today, we reflect and celebrate the many accomplishments she had as well as the pathway she started for women and for nurses in politics.

Her most notable impact on the nursing profession was her sponsorship of the National Nurse Act of 2011 which amended the Public Health Service Act to establish a position of National Nurse for Public Health within the Office of the Surgeon General. The duties of this position provided leadership and coordination of Public Health Service nursing professional affairs for the Office of the Surgeon General and other agencies of the Public Health Services.

The National Nurse for Public Health was responsible for the identification of national health priorities, encouraging volunteerism of nurses and strengthen the relationship between government agencies and health-related organizations and promote the dissemination of evidence-based practice in educating the public on health and health promotion and disease prevention activities.

Her support of this legislation supported and validated the need for public health nurses. Among her successful work as a civil rights activist, U.S. Rep Johnson sponsored over 300 new laws during her tenure and supported thousands of pieces of legislation.

Arguably one of the most iconic pieces of legislation sponsored by Johnson was H.R.1396 — 116th Congress (2019-2020), also known as the recognition of Katherine Johnson, Dr. Christine Darden, Dorothy Vaughan, and Mary Jackson to honor all of the women who contributed to the success of the National Aeronautics and Space Administration during the Race to Space.

Additionally, it is clear based on sponsored, cosponsored, and supported legislation Johnson maintained significant support for legislation in focused on Science, Technology, Engineering, and Mathematics (STEM) fields and ensured appropriate recognition for those who contributed to education advancement and military service.

The Texas Nurses Association sends our sincerest condolences to the family, friends, and constituents of Retired Rep Eddie Bernice Johnson as well as our gratitude for the years hard work and dedication poured into the people of Texas.

“Relatability
fosters trust,
strengthens
collaboration,
and builds
resilience”

Dr Estelle Le Roux

Extraordinary Hospitals of Africa Associate/ Consultant/
Nursing Management/ Quality Specialist/ Academic
Lecturer/ Author of Nursing Sociology textbook

The Power of Relatability in Nursing Leadership

How the Relatability Quotient Transforms Patient Care and Leadership

By Dr Estelle Le Roux

r. Augusta Dorning once said, “I am big on Relatability Quotient!” She posed an important question: “Can anyone become a leader in healthcare? The short answer is YES—if YOU want to!”

In today’s healthcare environment, leadership is not just about expertise or authority—it’s about connection. This is where the Relatability Quotient (RQ) plays a crucial role.

A strong RQ enables leaders to be approachable, authentic, and empathetic, creating trust and meaningful relationships with both colleagues and patients. As a nurse leader and academic, I have seen firsthand how relatability acts as the bridge between vision and impact. It transforms mentorship into inspiration, teamwork into collective success, and healthcare into a truly compassionate profession.

Why Relatability Matters in Nursing

Whether leading a team, mentoring students, or engaging in professional networks, relatability fosters trust, strengthens collaboration, and builds resilience. In nursing, where we navigate both the science of care and the art of human connection, relatability isn’t just an asset—it’s a necessity.

Prof. Jean Watson, a renowned nursing theorist from the USA, emphasizes the importance of deep, humanistic connections between healthcare providers and patients. Her Theory of Human Caring highlights that true care extends beyond medical treatment—it involves empathy, trust, and emotional presence.

By fostering meaningful relationships, nurses create a healing environment that nurtures not just the body but also the mind and spirit. This connection enhances patient well-being, promotes recovery, and strengthens the compassionate foundation of healthcare.

Relatability and Emotional Intelligence: A Powerful Connection

Watson’s concept of human caring aligns closely with Emotional Intelligence (EQ)—a set of skills that includes self-awareness, empathy, social skills, and emotional regulation.

Nurses with a high EQ naturally build deeper connections with patients, leading to better communication, improved patient satisfaction, and stronger therapeutic relationships.

Her approach integrates EQ principles into the healthcare setting, making relatability a key component of holistic healing. It is not just about knowing a patient’s condition—it’s about understanding their fears, their needs, and their journey.

“No mother should ever have to leave a hospital with empty arms”

Feeling Called to the Nursing Profession

With this in mind, I firmly believe in the statement:

“To practice Relatability Quotient as a nurse, you need to feel called to the profession.” Nursing is more than performing clinical tasks—it demands a deep sense of empathy, emotional connection, and the ability to relate to patients on a personal level.

When nurses feel truly called to their work, they naturally develop compassion, patience, and trust-building skills that enhance their RQ. This intrinsic motivation fuels their ability to provide holistic, patient-centred care, making a profound difference in the lives of those they serve.

How Do You Cultivate Relatability?

As nurses, we are more than caregivers—we are leaders, mentors, and advocates for our patients. Building a strong Relatability Quotient requires active listening, open communication, and an authentic commitment to patient-centred care. I’d love to hear from other nursing professionals—how do you cultivate relatability in your leadership journey? What strategies have worked for you?

Olatoke Temitope

It's a system that needs a total rebrand.....

What is your current position?

I assume the position of Nursing Officer in Charge presently

What is your work responsibility?

My responsibility at work as a nursing officer in charge is to take over the care of all the patients in my unit, manage the affairs of the unit, and be my patient advocate among other health workers.

What is the first thing you do when you arrive at the nursing station?

The first thing I do is to get updated about the current care of all the patients assigned to me in my unit, get updated about the current situation in my unit and then exchange greetings with my patient to introduce myself as the nurse taking over for the day.

What is the foremost tendency you practice as a team after the morning handover, just before you start with your daily duties?

The first thing is to share the latest care plan about each patient present in the unit then proceed to the handing over properly.

How is your relationship with your Unit leader?

I have a very good relationship with my unit leader. Recently, we celebrated her birthday by providing a new Nursing scrub designed to her taste and her best colour as subordinates under her. We have a fantastic relationship.

How is your relationship with your fellow colleagues?

I'm currently the chief intern in my facility and I have a good relationship with all my colleagues. I'm well known and a little bit popular amongst my peers. I can say I have a very good relationship with all my colleagues.

How do you introduce yourself to a Patient that meets you for the first time?

"Hi, Mr/Mrs/Miss I'm Nurse Olatoke and I will be taking over your care through this shift". Then I proceed to explain the course of her care during my shift. The first this is I ensure to introduce myself, get familiar with her, ensure to communicate on a neutral topic for a short while just to make her feel comfortable and then explain the course of her care throughout my shift.

How do you address a rowdy patient or family?

I just ignore them

Have you ever encountered disrespectful clients and how did you feel or react?

Yes, I've encountered disrespect from my senior colleague and patients, and I've always reacted by proving them wrong through my actions and skills. I once encountered disrespect from a patient relative who I was about to admit into the Unit based on premature rupture of membrane and after two weeks of intensive care during my shift, she left with praise of my name while I was away for my Day offs. Proving them wrong with your skill and impeccable character to me is the best way to react to disrespect.

In case you encounter any bullying tendencies at workplace, how do you react?

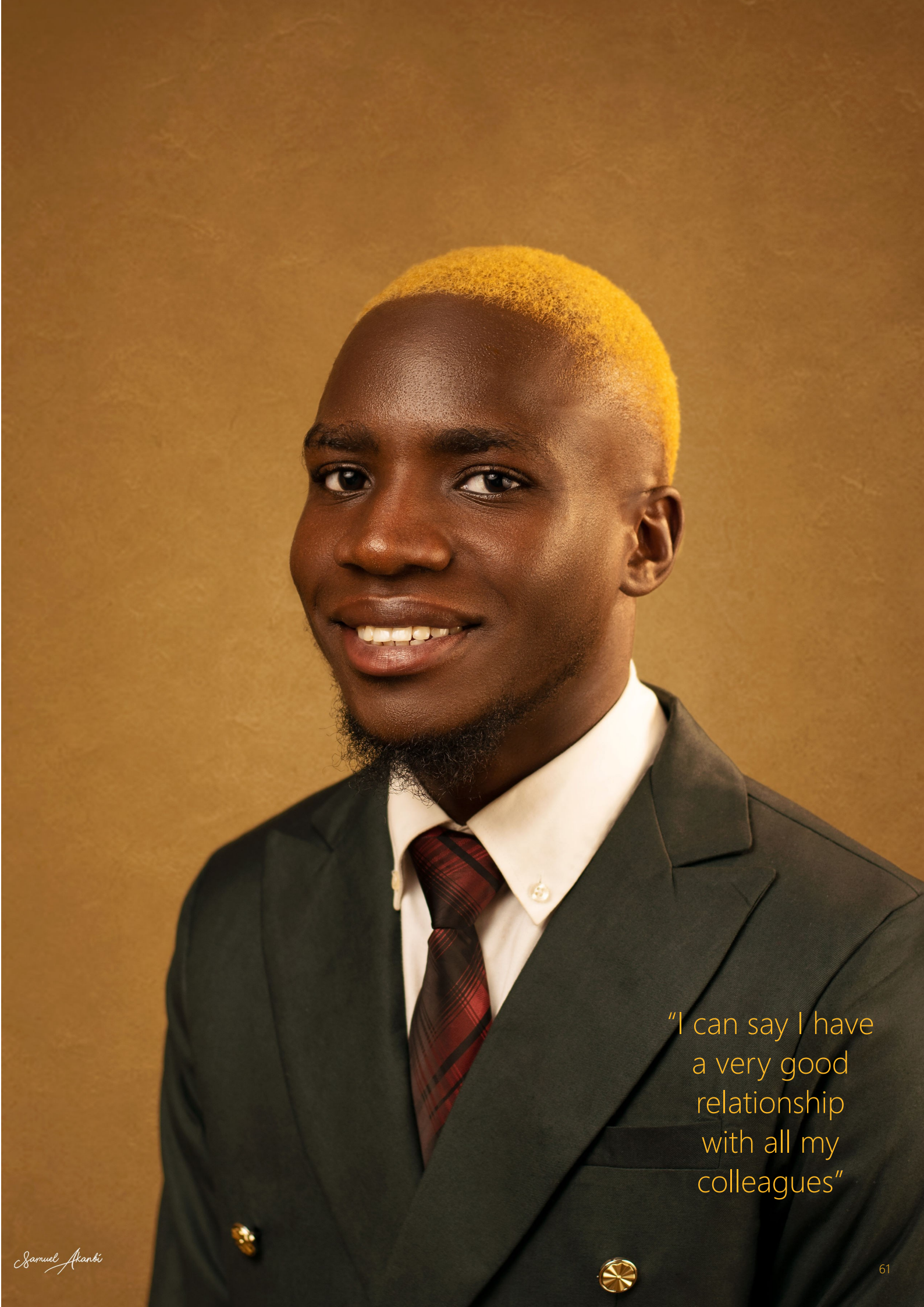
Regarding bullying, it depends on the angle it stems from. If it's from a senior colleague, I report to the head of nursing staff about the bullying tendencies and how it affects my work. If it's from my colleagues, I address it immediately and let him or her know why I can't accept such a bullish attitude at work.

How does it feel to work with a reputable and responsible doctor?


In healthcare, the goal of our work is to provide optimum care for our patients. Having a reputable doctor makes my work easier and allows easy communication of care plan with my patients. I enjoy working with a reputable professional colleague because it enhances care and improves trust among health workers.

How do you feel when you hear the footsteps of a matron or the assistant manager moving around your Unit?

I feel no pressure. I trust my skills and the knowledge I've garnered under their supervision. I perceive it as their daily routine of doing their work. No pressure at all.



"I can say I have a very good relationship with all my colleagues"



“I will say bedside nurses are underappreciated”

As a unit or team how do you contribute to avoiding unnecessary arguments?

Explicitly explaining the reasons behind your actions and compromising for the sake of patient care has proven to be effective in avoiding arguments amidst my colleagues so far.

How effectively do you spend your lunchtime?

Honestly, my lunchtime has been a mess lately. I'm still trying to create time in spending a good lunchtime despite work.

As a unit or team, what mechanism do you apply to prevent the causes of mental health issues in your work environment?

As a Unit, humour and adventure have been effective in enhancing our mental health at work. Despite the workload and intensity, we've always found a way to put a smile on each other's faces to relieve the pressure off each other's shoulders. In addition, we've been with each other's support and plan nurses time out on days we are free.

In case of any misunderstanding, how soon do you reconcile with your colleagues?

Reconciliation has always been has team and our Unit head have been a good figure and a mediator in Reconciling misunderstanding at work.

Do you perhaps experience absenteeism in your unit? If yes, what could be the cause?

No, absenteeism hasn't been in occurrence in my unit. If there's going to be any, there has always been a week's notice for the unit to prepare ahead.

Have you ever experienced burnout. If yes, what was the cause and how did you conquer it?

Yes, I have suffered burnout. It was after a 7-day night shift where we delivered 5 babies in two nights and at least two babies every night. I was totally wasted and broke down after the shift. But I conquered it by going on an adventure with my loved ones after the shift. It was a 3-day adventure, and it totally made me recover from the stress.

Have you ever experienced losing a patient you cared for? How did you deal with it?

Yes, I've lost the series of patients that I've lost within my short years of practice. But the recent one being a patient I monitored throughout her Ante natal clinic and died after wards from complication of caesarean section. It was tough but we are in the health line, it's inevitable.

In a nutshell, how do you feel being a bedside nurse?

Being a bedside nurse is stressful. In fact, it demands every nursing skill you learnt in nursing school. I see it as the foundation for all other nursing specializations. The most beautiful thing about bedside nursing is seeing that patient you nurse from ill health to full functional health. That's very beautiful.

What is your philosophy when it comes to clientelling?

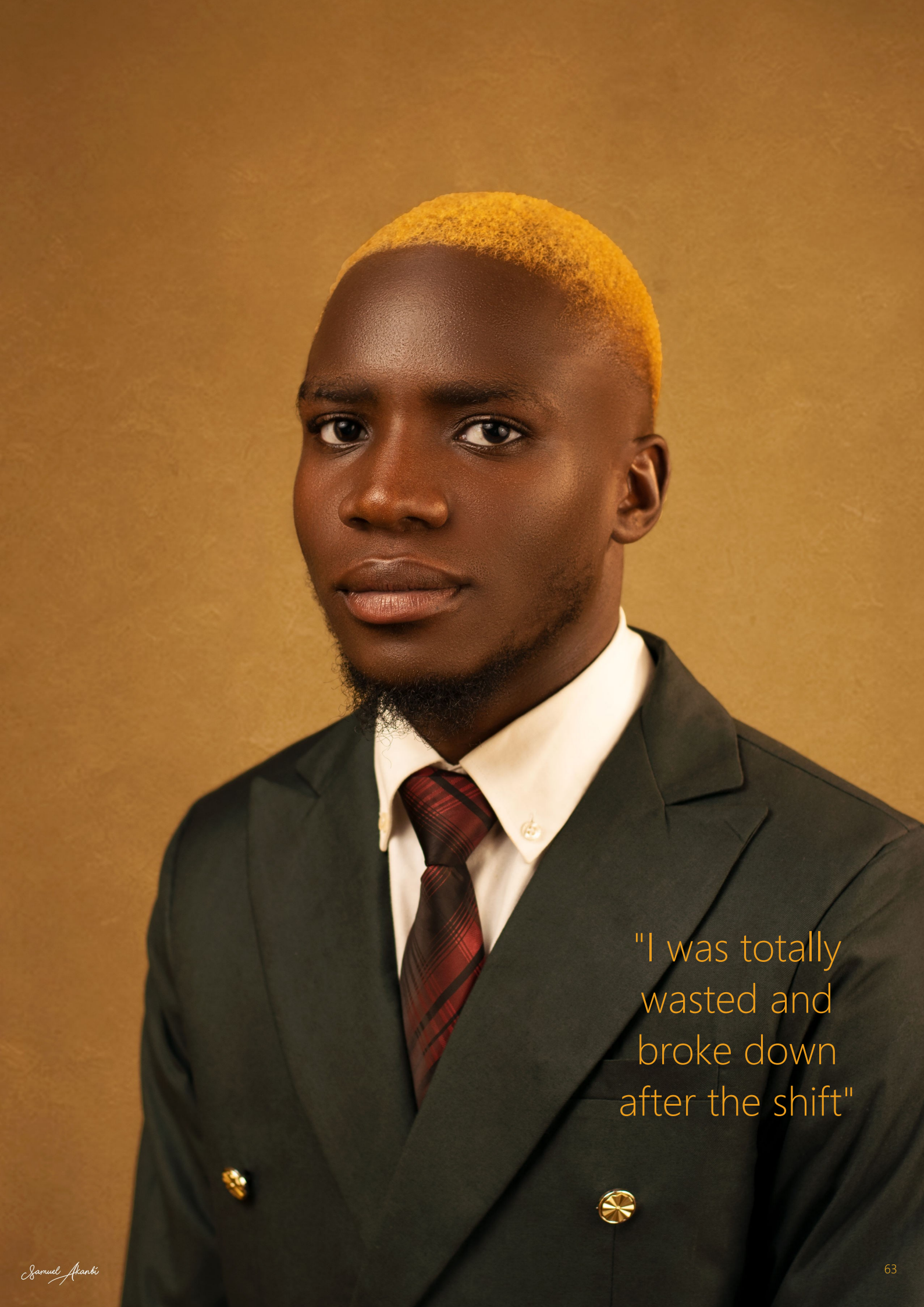
I believe client telling is a way to initiate a good relationship with your patient. It's essential to create that relationship as a nurse, it helps in caring for the patient. The smallest amount of information is important in-patient care and that could just be the key to patient recovery. So, I believe clientelling is a fantastic skill every nurse should develop.

As a bedside nurse, do you feel appreciated or unappreciated?

I will say bedside nurses are underappreciated. It's the most demanding of all the areas of nursing, also the most understaffed of all nursing specialties. I will say they are not getting the recognition they deserve. So, it's going to be underappreciated.

What is your suggestion concerning the improvement of the nursing sector?

Nursing sector needs improvement in a lot of areas. From the governing body to regulatory body to labour force. We need to priorities the affairs and growth of nurses over any other thing. From the cadre system to the degree offered to the remuneration. It's a system that needs a total rebrand and it starts by we getting into the policy maker's position. Without being part of the policy makers, it's going to be very difficult.



"I was totally
wasted and
broke down
after the shift"



The Future of Nursing:
**Where Tech, Teaching,
and the Human Heart
Meet**



Article By Kimberly Maurer & Patience Unah

Introduction: A Shared Vision Across Generations

Nursing stands at a powerful crossroads where innovation meets tradition, and where the future demands we honor both science and soul. This piece began as a conversation between two nurses from different generations, brought together by a shared passion: to ensure that as nursing evolves, it never loses its heart.

We believe that the nurse of tomorrow must be more than clinically competent—they must be tech-literate, purpose-driven, emotionally intelligent, and deeply rooted in the timeless values of compassion and care. Together, we explore the intersection of teaching, technology, and humanity, and offer a blueprint for what comes next.

Teaching and Education: Awakening the Inner Seed Teaching is more than information delivery—it is transformation. As Mark K. Smith writes, teaching means attending to people's needs, experiences, and feelings, and creating the right environment for growth.

This is especially true in nursing, where we are not only preparing students to pass exams but to hold hands, make decisions under pressure, and walk with patients through the most sacred moments of life.

As Thich Nhat Hanh reminds us, "You cannot transmit wisdom and insight to another person. The seed is already there." The role of the nurse educator, then, is to awaken that seed. Modern nursing education must embrace this philosophy and shift from memorization to meaning, from rote facts to critical thinking and emotional resonance.

That means rethinking:

- What we teach (relevant, equity-centred competencies)
- How we teach (inclusive, innovative, tech-integrated)
- Who we teach (with focus on diversity, access, support)
- Who teaches (educators as skilled mentors and visionaries)

Where Tech and Teaching Are Taking Us

Nursing education is transforming in real time. Today's students no longer rely solely on textbooks or long lectures. They now use simulation apps, interactive flashcards, AI tutors, and virtual reality scenarios that bring theory to life. And this isn't just cool—it's critical.

When thoughtfully implemented, technology allows educators to:

- Simplify complex topics through visual tools and modular learning
- Accommodate different cognitive styles and neurodiverse learners
- Offer scalable, global access to high-quality instruction
- Expand learning beyond physical classrooms and clinical labs

Technology is not here to replace the nurse. It's here to lift us up—to offer new ways of learning, practicing, and preparing, without compromising the empathy and intuition that define nursing at its core.

The Human Heart: What Cannot Be Replaced

Even the most advanced tools cannot hold a patient's hand. Even the smartest AI cannot sit in silence beside grief. Even the fastest diagnostic software cannot deliver presence.

The irreplaceable human heart of nursing is where science becomes soul. It is the quiet pause before the procedure, the eye contact before the consent form, the kindness in the chaos. These are not extras—they are the essence.

As tech transforms our methods, we must fiercely protect the moments that make nursing sacred.

The Crisis We Face—and The Opportunity Ahead

Globally, we are facing a critical nursing shortage. The World Health Organization projects a shortfall of 5.7 million nurses by 2030. Burnout, aging populations, and post-pandemic fatigue have only deepened the wound. But the answer is not to simply "make more nurses." It's to make nursing sustainable.

"Technology is not here to replace the nurse. It's here to lift us up"

That means:

- Using tech to reduce documentation overload
- Creating flexible, hybrid models of education and practice
- Elevating nurse educators and wellness-informed leadership
- Promoting dignity, boundaries, and real-time support

We must stop treating burnout like an individual failure and start treating it like a systems emergency.

The Tech-Savvy Nurse Educator:

A New Archetype The nurse of tomorrow is a hybrid.

They are clinician, communicator, coach, and coder.

They know how to chart in Athena and teach in VR.

They don't just survive technology—they shape it to fit their purpose.

These are the educators who use simulation labs, virtual training rooms, and digital storytelling to connect with the next generation of nurses. They bring not only knowledge, but heart, and they're building bridges across cultures, classrooms, and continents.

Conclusion: Together, We Rise

The future of nursing doesn't ask us to choose between high-tech and high-touch—it calls us to weave them together into a profession that is bold, beautiful, and built for a changing world. Let us build it, together.

Tech-savvy.
Purpose-driven.
Emotionally intelligent.
Rooted in compassion.
Ready to rise.

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Lindiwe Mmeta

She is a vibrant 30-year-old professional nurse, businesswoman, and a content creator with a heart for people and passion for purpose. Armed with a Diploma in Nursing, a BA in Nursing Administration and Education, and a Post Graduate Diploma in HIV/AIDS management, Lindiwe has worked her way up through the ranks from Community Service Nurse to Project Manager in Maternal and Child Health, supporting the South of Ekurhuleni.

She's held roles like NIMART Nurse, Nurse Lead, and Clinical Trainer and Mentor, using data, mentorship, and heart-led leadership to improve services for mothers, children, and adolescents.

When she's not working to strengthen the health system, she's building her brand, Zoella Aesthetics, Health and Wellness, a space dedicated to skincare, IV therapy, and total wellbeing.

She also creates lifestyle content that reflects her love for fashion, food and travelling, inspiring others to live boldly and beautifully. "I believe you can be soft and powerful, stylish and smart, it's all part of the package", she notes.



“My goal is to improve maternal and child health outcomes”

“Mam Mahlaba was more than just a neighbour, she was family”



Who is Lindiwe Mmeta?

I'm Lindiwe Fasani Mmeta. Passionate about fashion, food, travel, and sharing my voice in ways that uplift and inspire others. I was born at Baragwanath Hospital, spent my early years in Lenasia, and moved to Crystal Park in the East Rand of Johannesburg when I was five.

I'm 30 years old, God-fearing, and deeply driven by purpose. I'm the last-born of six—five girls and one boy. I began my schooling at Crystal Park Primary and matriculated from Wordsworth High School in 2013. My calling into nursing began in 2014 at Ann Latsky Nursing College, and it's been a journey of growth, service, and heart work ever since.

What is your birth month?

I'm a May baby.

Who is your lifetime friend?

My sisters. They know every chapter of my story and have stood by me in every season. We laugh together, cry together, and go through life hand in hand.

Who is your lifetime neighbour?

Mam Mahlaba was more than just a neighbour, she was family. Growing up, her home was a place of comfort, always filled with the smell of freshly baked scones and the sound of warm laughter. She had a way of making every child feel seen and loved, and she embraced me like one of her own.

It was through her that our family found our way to church; she planted the seed of faith in us. She helped my mom carry challenges with grace. Her love, kindness, and gentle spirit played an important role in our family. May her beautiful soul rest in eternal peace.

Who was your closest colleague?

Mam Zuzile Khumalo. She believed in me when I was just starting out and saw something in me before I saw it in myself. She sparked my love for public health, particularly HIV and TB, and has become like a mother to me.



“I believe
humility keeps me
grounded and
open to growth”



“My core values include kindness, honesty, loyalty, empathy, excellence, resilience, and humbleness”

What is your soul food?

Give me Mogodu and Dombolo any day please! It's the kind of meal that feeds the body and heals the soul.

What is your favourite garment?

Anything in the colour white but to be exact, a classic white dress is always simple, elegant, and timeless. It makes me feel confident and classy.

What do you like the most between Sunrise or sunset?

Why?

Sunsets, without a doubt. They are a great time to reflect and admire God's creation.

What's your best day in a week? And why?

Sundays. They're slow and sacred. After church or worship, I love cooking something hearty, enjoying a glass of wine, and listening to soul music. The song, "A Sunday Kind of Love" by Etta James captures it perfectly.

Who is this person whom you cannot finish a day without having spoken to?

Maxine. We can talk for hours about everything and nothing. She's my small big sister; she's smaller in size but older in age.

What are your values?

My core values include kindness, honesty, loyalty, empathy, excellence, resilience, and humbleness. Humbleness, in particular, is very important to me. There's a beautiful Zulu phrase I hold close: "Ophansi akawi," which means "stay humble". It reminds me not to be proud or arrogant, especially knowing that all my blessings come from God.

The phrase encourages me to treat everyone with respect and kindness, no matter who they are. I believe humility keeps me grounded and open to growth. It's a daily reminder that pride can lead to a fall, but staying humble helps me navigate life with grace and sincerity.

“Be bold, be
curious, and
strive for
excellence”



“Nursing gives me purpose and meaning”

What is your favourite spot?

My kitchen. It's my happy place where I unwind, create, and show love through food.

Why did you choose nursing?

It chose me. I know it sounds cliché, but everything fell into place in a way only God could arrange. Growing up, I was always drawn to caring for others, but the real confirmation came during my final year of high school.

Financially, there wasn't much money to pay for my studies, but I believed that God would provide. When I received the nursing application on the application due date, I didn't even have money for transport to submit the application form. Despite that, I trusted God would make a way, and somehow I managed to submit, later attended the interview, and was accepted.

The day I received confirmation of acceptance, my phone was faulty at the time, but somehow that message managed to reach me, a sign that this wasn't just a job or a career choice but a true calling. Nursing gives me purpose and meaning.

It allows me to serve others in their most vulnerable moments, while being an ambassador of God's love and grace. This path has shaped who I am and how I want to impact the world.

Who was your role model?

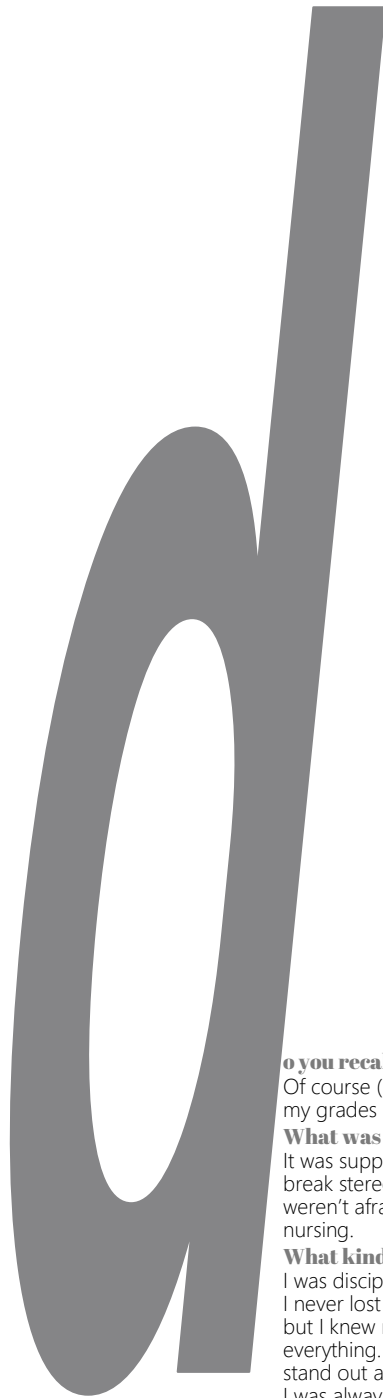
My dad. He was passionate, an academic, and deeply optimistic. He always believed in better days and spoke so much life over my future. Even though he didn't live to see all the good he prophesied over me, I carry his belief and fire in everything I do. He passed away just two days before my final exams, and even in my grief, I knew I couldn't let him down. I had to finish strong, for him, for everything he stood for, and for the love he gave me.

How were your college or university days?

They were a lot of fun! I'd like to think I was the quiet "It girl," if I may say so. I always made sure to dress well, enjoyed traveling during college breaks, and somehow found a way to balance both fun and academics. I also served as a peer counsellor from my second to fourth year, which was a really meaningful experience. Those years truly shaped who I am today.



“Growing up, I was always drawn to caring for others”



“I learned that staying true to yourself will always take you further”

Do you recall any naughtiness?

Of course (laughs). I definitely bunked a few classes but still kept my grades up.

What was the prevalent college or university culture then?

It was supportive but very competitive. We were all pushing to break stereotypes and redefine what it meant to be a nurse. We weren't afraid to dream big, still aren't. I think our era redefined nursing.

What kind of student were you?

I was disciplined but full of life. I definitely enjoyed myself, but I never lost sight of where I came from. I didn't grow up poor, but I knew nothing would be handed to me. I had to work for everything. I never wanted to be “a regular nurse.” I wanted to stand out and be different. That showed in the way I dressed. I was always nominated for best dressed female.

What remarkable lesson did you take with you from college or university?

Trust yourself. Don't follow the crowd, create your own lane and walk boldly in it! College taught me that there's strength in individuality. The more I leaned into who I truly was, the more confident and fulfilled I became. It's easy to get lost trying to fit in, but I learned that staying true to yourself will always take you further than pretending to be someone else.

When was your first day as an employed nurse? And how did you feel?

January 2nd, 2018, at Far East Rand Hospital. I remember walking in feeling incredibly proud and excited about the future—but also scared. As a student, you always have someone to fall back on, but that day, the roles had changed. I was now the one guiding students. There was no one to hide behind. The responsibility felt heavy, but it was also empowering. It was the beginning of truly stepping into my purpose.



"I wanted to stand out and be different"



“My family
and my life
partner are my
anchors”

How old were you when you became a nursing professional?
22 years old.

What is your current role in nursing?

I'm a Project Manager for Maternal and Child Health, supporting the South Subdistrict of Ekurhuleni. I provide strategic and technical support to strengthen maternal, child, and adolescent health services—focusing on the prevention of vertical transmission and improving paediatric and adolescent HIV care.

I work closely with facilities and managers to address service gaps through quality improvement initiatives, aligned with National Department of Health (NDOH) goals. I also support the development of SOPs and build capacity through ongoing training and mentorship.

What is your greatest skill as a RN?

I'd say mentorship. I really enjoy guiding and supporting other nurses—helping them build their skills and confidence. It's about sharing knowledge, encouraging growth, and creating a positive environment where everyone keeps learning and improving. Good mentorship not only improves patient care but also helps keep the team strong and motivated.

What is the hardest thing about being a passionate community serving RN?

The toughest part of community nursing is navigating a failing health system while serving vulnerable communities. Many of the patients come from poverty-stricken backgrounds and have low literacy levels, which complicates health education and adherence to treatment.

Coupled with systemic challenges like staff shortages and medication stock-outs, this creates a difficult environment where healthcare workers often feel overwhelmed and under-resourced, impacting the quality of care.

In your current position, what are you passionate about?

I love children and being in a position to influence and enhance the well-being of children within the community is both an honour and a responsibility that drives my work daily.

How many ranks have you gone through in your nursing path?

I've progressed through five roles namely, starting as a Community Service Nurse, then NIMART Nurse, followed by Nurse Lead, Clinical Trainer and Mentor, and now I'm a Project Manager for Maternal and Child Health.



"I really enjoy
guiding and
supporting other
nurses"

“My leadership style is primarily transformational”



What's the highest rank you have achieved?

Project Manager in Maternal and Child Health at a leading public health NGO.

How do you handle stressful issues?

I handle stress through prayer. I allow myself to cry and vent, then I hand it over to God. His peace carries me through. I'm also blessed with a strong support system, my family and my life partner are my anchors.

What are your professional values?

My professional values are accountability, pro-activity, and innovation. I own my responsibilities, stay ahead by acting early on challenges, and always look for better solutions to improve healthcare. These values help me lead and make a real difference.

What kind of leadership do you apply? Bossy or role model?

My leadership style is primarily transformational. I lead from behind, empowering others to discover their own strengths and find their voice. I believe in inspiring and motivating my team to grow both personally and professionally.

However, I also recognize that different situations call for different approaches. Depending on the context, I adapt by incorporating other leadership styles, such as coaching for development, democratic for collaboration, or directive when clear guidance is needed. Thus, flexibility helps me meet the needs of my team and the goals of the organisation effectively.

Do you think nursing management is universal? Why?

Absolutely. The core principles and ethics of nursing management are universal and essential across all healthcare settings, no matter the country or culture.

What professional goals did you set for yourself or your team?

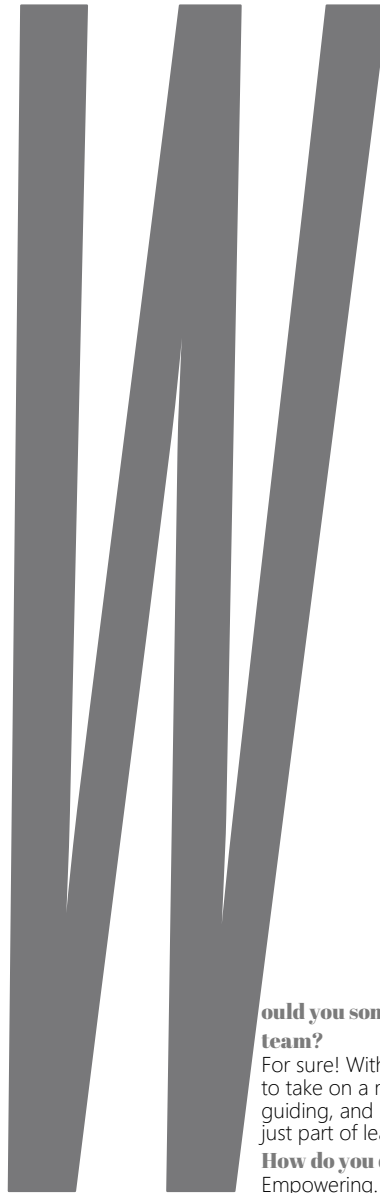
My goal is to improve maternal and child health outcomes, one patient at a time and ensuring that no one is left behind.

Are you achieving them?

Yes, step by step. Every empowered nurse and healthy mother and child is a win.



“Flexibility helps me meet the needs of my team and the goals of the organisation effectively”



Would you sometimes be tempted to be a parent to your team?

For sure! With my role in maternal and child health, it's hard not to take on a motherly vibe with the team—always supporting, guiding, and sometimes giving a little tough love. I guess that's just part of leading people.

How do you describe your leadership in one word?

Empowering.

What exceptional role do you play in the nursing sector?

I play a strategic role in advancing maternal and child health by leading quality improvement initiatives and providing mentorship to healthcare teams. I ensure that data is not just collected but meaningfully interpreted and applied to improve clinical outcomes, service delivery, and the overall experience of care. My goal is to turn numbers into actionable insights that make a real difference in people's lives.

What exceptional role do you play in your community?

I empower frontline healthcare providers nurses, counsellors, and clinicians through mentorship and capacity-building, enabling them to deliver care with confidence, compassion, and competence. By strengthening those who serve, I indirectly enhance the quality of healthcare received by the community.

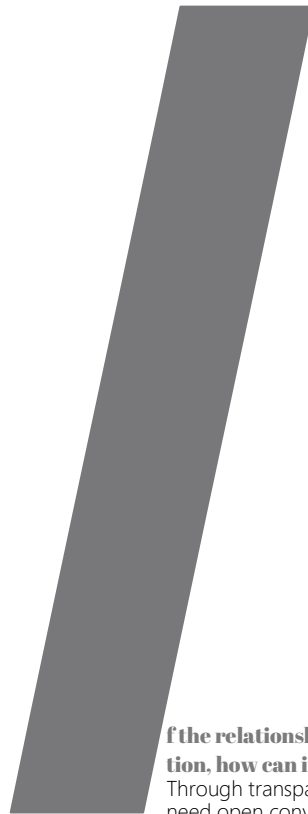
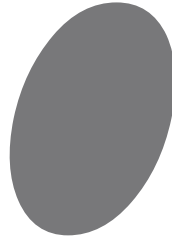
From your point of view what relationship is there between the communities and the nursing professionals?

It's layered. Nurses are often the first point of contact and the face of the health system in communities. While they are trusted and relied upon, they also carry the burden when services fall short, often being blamed for issues beyond their control. There's a deep connection, but also a need for greater understanding of the systemic challenges nurses face.

“Nurses are often the first point of contact and the face of the health system in communities”

“Listen to your
inner voice and
act upon it”





If the relationship (between the two) is not in good condition, how can it be remedied?

Through transparency and real community engagement. We need open conversations about the challenges we face and work hand-in-hand with communities to find solutions. Educating patients about how the health system works is also key, it builds trust and helps manage expectations.

How can trust be established between the two groups?

Through communication and empowerment. When people understand what's going on, they're more patient, more trusting.

Has nursing changed for the better?

Definitely. Nursing has evolved. There is more recognition, better training, and a stronger focus on evidence-based care. But we still have a long way to go, especially in public health where systemic issues and resource gaps continue to affect service delivery.

Do you see any possibility of nursing businesses being listed on the Stock Exchange?

Yes, I do. With the growing intersection of healthcare, innovation, and technology, nurse-led businesses have real potential to scale. Nurses are not just caregivers, we're innovators and problem-solvers. With the right business models and support, I believe we'll see more nurse-founded ventures reaching new heights, even public listings.

“Nurses are not just caregivers, we’re innovators and problem-solvers”



"We still
have a long
way to go"



“Find what excites you in nursing, your niche and pour into it”

What wisdom to apply in making the mixture of several generations in nursing to work in one accord?

Foster mutual respect. The older generation brings experience and deep-rooted clinical wisdom, while the younger generation brings fresh ideas, tech-savvy solutions, and energy. When we value what each group offers, rather than compete, we create a powerful, collaborative force that strengthens the profession.

How can young nurses keep rekindling their passion?

Find what excites you in nursing, your niche and pour into it. Keep learning, stay curious, and surround yourself with mentors who inspire you. Passion fades when things feel routine, so challenge yourself, explore new roles, and always remember why you started.

What education helped you grow into a leader?

My Bachelor of Arts in Nursing Administration and Education gave me a strong foundation in leadership and teaching, while my Post-graduate Diploma in HIV/AIDS Management sharpened my focus on public health.

What is your advice to the nursing leadership?

Don't let the title change you, instead use the title to bring about change. Take time to learn the role, grow into it, and lead with humility. Master the skills, stay grounded, and remember it's okay not to have all the answers right away. Leadership is about service, not status.

What is your advice to the young nurses?

Be bold, be curious, and strive for excellence. Keep growing, ask questions, and bring your full self into the profession. You're not just filling a role, you're shaping lives and the future of healthcare.

“After church or worship,
I love cooking something
hearty, enjoying a glass
of wine, and listening to
soul music”



A person wearing a white lab coat and teal gloves is holding two glass vials. The vial on the left contains brown capsules, and the vial on the right contains white tablets. The background is a soft, out-of-focus brown.

‘Behind the Cloak: My Journey’



By Ashley Scott, LPN, Arizona, USA

I graduated nursing school believing I was entering a noble profession. Instead, I walked into a machine designed to consume good people.

My first job: thirty patients, one nurse, eighteen dollars an hour.

That's twenty-four minutes per human life if I worked twelve hours without a break.

I lasted six months before escaping to home health, only to become a traveling wound specialist, driving over a hundred miles daily from Queen Creek to Peoria.

I watched people suffer in conditions that belonged in hospitals they couldn't afford.

Then came my favorite job: LTACH.

I mastered their sickest patients. I learned drips, vents, protocols. I saved lives daily.

They pulled me from my steady position with temporary promises, then eliminated all LPN roles overnight.

Good enough to use, not good enough to keep.

After that, a skilled nursing facility where many friends worked. I'll never forget the broken chair.

They knew it was damaged. I discovered it when it collapsed beneath me, slamming my head into the wall and permanently damaging my vision.

They denied it. Covered it up. Fired me.

Erased the evidence.

At another facility, I worked the double weekend shuffle of neglect.

Twenty patients. One nurse.

Mr. Johnson waved at me during his last meal.

Ten minutes later, while I changed a dressing, he died alone.

Elsewhere, the corruption got louder.

Management tried to force me to cover up medication errors.

Triple doses that nearly killed patients, while they demanded I "fix the count."

Then came Jean. Ninety-five pounds. The wrong meds.

Me, fighting to save her life.

I walked out rather than sacrifice my license for their lies.

The next SNF was better. The DON was incredible.

But one night, everything changed.

Twenty minutes crouched under the nurses' station, someone with a gun stalking our halls.

No security. No administrators. Just terrorized healthcare workers trying to heal.

But the final blow came after two decades of dedication.

One seizure and suddenly I became a liability.

They posted my job before I had even packed my belongings.

Twenty years erased in seven days.

Career gone. Identity too.

Who am I now?

Then something I never expected happened.

In the wreckage of my broken career, I found my voice.

The nurse they discarded became an author they couldn't silence.

I didn't lose my calling.

I found it.





Gluten Free Plantain Lasagna

fitmencook.com

Ingredients

4 Roma tomatoes
3 semi-ripe yellowish plantains, sliced long into 1/4-inch thick pieces
spray avocado oil
SAUCE
1 tablespoon olive oil
1 cup diced onion
1 tablespoon fresh garlic
1 lb 95% lean ground beef (OR your lean ground protein of choice)
2 cups tomato sauce
1 tablespoon oregano
1 teaspoon ground sage OR fennel
sea salt and pepper to taste
CREAM
1 1/2 cups Ricotta cheese
6 tablespoons Bob Evans Egg Whites (OR 2 egg whites)
1/2 cup shredded Parmesan
4 more tablespoons of Bob Evans Egg Whites
2/3 cup grated mozzarella
Garnish
Fresh parsley

Steps

Step 1

Set oven to 420F or broil.

Step 2

Place tomatoes on a baking tray lined with parchment. Lightly spray them with a little oil and add a pinch of sea salt & pepper on top. Place in the oven for roughly 15 minutes, or until the skin begins to blister and the tomatoes are soft. Alternatively, place the tomatoes in the broiler for 8 – 10 minutes.

Step 3

Set oven to 400F.

Step 4

Once the plantains are sliced, set a large nonstick skillet on medium heat. Once hot, spray with oil then add the slices. Cook for 2 to 3 minutes on each side, then set the slices aside.

Step 5

To the skillet, add oil, onion and garlic. Sauté the onions until they turn brown and slightly translucent and be careful not to burn the garlic – reduce the heat if you have to.

Step 6

Add beef to the skillet and chop it up as it cooks. When it's nearly 75% finished cooking (with still a few visible pink pieces), add the roasted tomatoes to the skillet. Use a spatula or wooden spoon to mash the tomatoes under the heat so it creates a natural tomato paste. Continue cooking everything together.

Step 7

Pour in tomato sauce and add oregano and sage/fennel along with a few pinches of sea salt & pepper. Stir and season to taste. Cook for 2 to 3 more minutes then remove from the heat.

Step 8

In a separate bowl mix together Ricotta and Bob Evans Egg Whites. Build the lasagna.

Step 9

In a rectangular or square baking dish, add an overlapping layer of plantain slices >> then spread some of the meat over it >> add a layer of ricotta cheese >> sprinkle in some Parmesan >> REPEAT. For the final top layer, add plantain slices then pour the remaining 4 tablespoons of egg whites all over the top layer. Lastly, top with mozzarella.

Step 10

Cover the dish with foil and bake for 30 minutes at 400F. For the final 5 minutes, remove the top so the cheese can brown.

Step 11

After baking, let the lasagna rest for at least 15 minutes before slicing. Then garnish and enjoy!

Red Potato & Tuna Patties

fitmencook.com



Ingredients

10oz wild albacore tuna in water, drained (no salt)

500g baked red potato

1 egg

1/3 cup feta cheese crumble

1/3 cup red onion chopped

1 tablespoon olive oil (optional)

Seasonings:

2 tablespoons Dijon mustard

1 tablespoon Italian seasoning

sea salt & pepper to taste

1 teaspoon dill

Steps

Step 1

Set oven to 400F. Wash dirt from red potatoes and place them on a baking sheet. Bake in the oven for about 45 minutes or until they are soft and be easily crushed with a fork or masher.

Step 2

Mash and mix together all the ingredients in a bowl. If you find the batter is too wet or loose, feel free to add tablespoons of wheat breadcrumbs, panko crumbs or even oatmeal to help make the batter more solid yet still malleable.

Step 3

Scoop out a small handful of the batter and form patties of equal size. Careful not to make them too big as they will be a little harder to cook and can potentially break apart in the skillet.

Step 4

Place a nonstick skillet on medium-high heat and spray (generously) with olive oil or coconut oil.

Step 5

Once the skillet is hot, add the patties to the pan and cook for about 4 to 5 minutes per side, or until the edges are golden brown, then flip the patty over and repeat. Remember to ensure the patties are not sticking to the pan.

Step 6

Once the patties have finished cooking, remove them from the skillet and serve immediately. **If you placed the patties int the skillet and they were too wet/soft to flip, I recommend placing the skillet (if possible) in the oven and baking for about 15 at 400F or until the top of the patties are golden brown.**

Step 7

Enjoy!



Microwave Burrito Bowl

fitmencook.com



Ingredients

8oz low sodium turkey sausage

2 cups raw spinach

frozen spinach

2 cups cooked jasmine rice

13.5 oz no salt added black beans, drained

1 tablespoon taco seasoning

3oz chipotle in adobo sauce

3oz red or green enchilada sauce

I recommend using sauce only if you are sensitive to spicy flavors

1/3 cup reduced fat cheddar, shredded

Steps

Step 1

Let's get cooking! First up, chop up that turkey sausage into bite-sized pieces. Pop it into a microwave-safe bowl, cover lightly, and zap it in the microwave for 3 – 6 minutes until it's cooked through.

Place in a microwave-safe bowl, slightly cover, and cook in the microwave for 3 – 6 minutes, checking after every minute.

Step 2

Now, in a mixing bowl, let's bring all the goodness together. Add the cooked turkey sausage, spinach, rice, black beans, taco seasoning, and chipotle in adobo sauce. Give it a gentle fold until everything is nicely combined. If you like things saucy, go ahead and add a few splashes of enchilada sauce to amp up the flavor.

Step 3

Next, transfer the mixture to a microwave-safe dish and sprinkle that shredded cheddar cheese on top. Cover it lightly and pop it back in the microwave for 6 – 8 minutes until the cheese is perfectly melted and gooey.

Step 4

Once it's done, give it a couple of minutes to cool down before digging in. Trust me, letting those flavors mingle for a bit will take this burrito bowl to the next level of deliciousness!

Chicken and Eggplant Stir Fry

fitmencook.com



Ingredients

1 tablespoon avocado oil
2 Japanese eggplants
or 10oz regular eggplant
Slice diagonally and cut into 1.5-inch pieces
For the chicken
1 lb chicken thighs, fat trimmed and cut thinly into strips
vegan swap - shiitake mushrooms
2 teaspoons white pepper
2 teaspoons arrowroot
corn starch
1 tablespoon low sodium soy sauce
spray oil
Sauce
2 tablespoons mirin
1 tablespoon low sodium soy sauce
liquid aminos, tamari
2 teaspoons fish sauce
1 teaspoon coconut sugar
1/3 cup low sodium chicken broth
2 teaspoons sesame oil
1 tablespoon arrowroot
corn starch
Stir Fry
1 tablespoon avocado oil
1 1/2 tablespoons fresh garlic, minced
2 green onion stalks, chopped
1 cup basil leaves, torn
Garnish
crushed roasted peanuts
fresh, torn basil
fresno peppers or jalapeños

Steps

Step 1

Prepare the Chicken: Add white pepper, arrowroot, and soy sauce to the chicken strips. Mix well to coat each piece thoroughly. It should be sticky. Set aside.

Step 2

Make the Sauce: In a cup or glass bowl, combine mirin, soy sauce, fish sauce, coconut sugar, chicken broth, and sesame oil. Whisk until well combined. Once seasoned to your liking, whisk in the arrowroot. Set aside.

Step 3

Cook the Eggplant: Heat a wok or large skillet over medium-high heat. Once hot, add avocado oil and then the eggplant. Sear for 4-6 minutes until the eggplant is softened and browned. Remove from the skillet and set aside.

Step 4

Cook the Chicken: In the same wok/skillet, spray a little oil and add the chicken. Allow one side to rest on the skillet for about 1 minute, and then toss the chicken for 1-2 minutes until cooked through. Set aside.

Step 5

Stir Fry the Aromatics: Place the wok on low-medium heat, add oil, garlic, and green onions. Cook until fragrant, about 1 minute, ensuring not to burn the garlic.

Step 6

Combine and Finish: Make a hole in the center of the wok/skillet and pour in the sauce. It should be slightly simmering with bubbles. Stir immediately to avoid clumping. Toss all ingredients in the sauce and remove from heat. Tear in basil leaves and stir together.

Step 7

Serve: Enjoy the stir-fry with rice, cauliflower rice, or noodles. Garnish with crushed roasted peanuts, fresh basil, and sliced Fresno peppers or jalapeños.

Quinoa Pancakes

fitmencook.com





Ingredients

Ingredients for 1 or 2 servings:

½ cup cooked quinoa

¼ cup sprouted grain mix flour

1 egg

1 egg white

1/8 cup almond milk

2 tsp baking powder

Pinch of sea salt

Steps

Step 1

Place the flour in a mixing bowl.

Step 2

Add the baking powder and mix. Then add almond milk, egg, egg white, quinoa and a pinch of sea salt. Mix well into a batter.

Step 3

Place a non-stick frying on medium heat, grease with spray coconut oil.

Step 4

Scoop 1-2 tbsp of batter and place the batter in the center of the pan.

Step 5

Cook the pancakes golden brown for 1 to 2 minutes on both sides, until the sides are brown.

Step 6

Serve hot with mashed berries or organic raw honey.

Red Eye Protein Parfait

fitmencook.com





Ingredients

For 1 serving:

1 scoop lean whey isolate protein powder

1 cup Greek yogurt

1 tbsp cacao powder

1 tbsp instant coffee

½ tbsp organic honey

1/3 cup granola

¼ cup blueberries

Steps

Step 1

Place half of the yogurt with Lean Pro, cacao powder, instant coffee and honey in a bowl.

Step 2

Mix all together until you have a smooth consistency.

Step 3

Place this in a glass jar or bowl, then top with the rest of the yoghurt, granola and blueberries.

“Energy vampires
are often
charismatic”



**How to Recognize and Respond
to Energy Vampires at Home,
Work, and More**

Why it matters and what to do...

Energy vampires can be anywhere and anyone. They are the people you encounter who leave you feeling drained and exhausted. They can be your spouse or your best friend. They can be your cubicle mate or your neighbor.

Learning how to identify and respond to this toxic behavior can help you preserve your energy and protect yourself from a great deal of emotional — and physical — distress.

Read on to learn more about how an energy vampire acts and what you can do next.. Article by Kimberly Holland on February 13, 2018 published by www.healthline.com

They don't take accountability

Energy vampires are often charismatic. They may slink out of trouble when problems arise because of this charm. They're crafty and may pin problems on someone else in almost every situation.

They're always involved in some kind of drama

Energy vampires always find themselves in the middle of a catastrophe, flailing from target to target with their emotional and dramatic behavior.

When they've landed on you, they fling this drama onto you in hopes you'll absorb it, fix it, and right their ship.

They always one-up you

An energy vampire never likes to be outdone, and they aren't keen to share the spotlight. This is one of their many narcissistic tendencies. They struggle to feel genuine happiness for another person. Instead, they prefer to pull energy to feed their emotional demands.

They diminish your problems and play up their own

Energy vampires feed off your emotional energy. And if you're sad or upset, your energy supplies are dwindling. To drain the most energy from you, energy vampires will shift the attention of the discussion to themselves, turning your dismay into their emotional buffet.

They act like a martyr

Energy vampires place their problems squarely on the shoulders of other people. They take no responsibility for their contributions to their difficulties. What they're seeking is emotional support to boost their self-esteem.

They use your good nature against you

People who are sensitive and compassionate are prime targets for energy vampires. You offer a listening ear, a kind heart, and endless energy. In that way, energy vampires use your very nature against you, draining you of your vitality.

They use guilt trips or ultimatums

Energy vampires often rely on guilt trips to get what they want. They know shame is a great weapon against people who are compassionate and caring.

Likewise, ultimatums are an effective way to capture a person's attention and coerce them into doing something they otherwise may not want to do.

They're codependent

Codependency is a type of relationship where every action is designed to elicit a certain reaction from the other individual. It's a vicious cycle of behavior, but energy vampires rarely recognize that they're in them.

They criticize or bully

At their core, energy vampires are often insecure. They may use dehumanizing tactics and criticisms to keep their "prey" insecure, too. In this state, you feel like you owe them your attention and should continue to work to stop the unwarranted attacks.

They intimidate

One step removed from criticizing or bullying you, intimidation is a tool some energy vampires turn to when they need to stir up some emotional fodder. Fear is a very strong emotional reaction. If an energy vampire can upset you, they can bolster their ego.

Why it matters and what to do

Energy vampires demand a lot from the people they target. This continuous drain on your resources can have a noticeable effect on your well-being. Over time, excess stress can lead to anxiety depression, heart disease, and more.

That's why it's important to recognize the behaviors and then work to remove them.

This may involve putting up walls to protect against an energy vampire's efforts — or removing the person from your life entirely. The ideas below may not work for everyone. Try them and mold your approach as you go until you're able to feel in control and protected.

Establish boundaries

Although this may be easier said than done at first, you can and should develop areas of your life where you won't allow an energy vampire to enter. Don't agree to social events like dinner or coffee dates.

Avoid weekend trips and other extended events where they'll be in attendance. At work, you can limit interactions between the two of you by not agreeing to lunches and not stopping by their desk to chat. You may need to start small, focusing on a few areas, and then expand.

Adjust your expectations

You can't fix an energy vampire, but you can reshape your expectations about them. This may involve shutting off your emotional valve and not offering advice when they vent their problems to you. This may also mean you can't use them as any type of emotional release either. They'll want to reciprocate.

Don't give them an inch

If the energy vampire calls, stops by, or texts, don't give them the room. Offer an excuse — "I'm too tired" or "I'm too busy" will do. You could say that you've got plans or don't feel well. When they keep interfacing with excuses and not getting the emotional energy they need, they'll look elsewhere.

Guard your emotional capacity

Energy vampires use nonverbal cues to know when they have someone on the hook. Your facial expression, the way you lean in, how you clasp your hands — an energy vampire can take these as signs of your investment. If you instead offer stone-faced responses and only offer short statement to their questions, you won't open yourself up to their demands, and you can reserve your energy for you.

Cut them out entirely

In most cases, you have the freedom to excise this person from your life entirely. This may seem dramatic, but you have to remember that you're protecting yourself in the end.

The bottom line

By recognizing these behaviors and trying to put an end to it, you're protecting yourself, your health, and your overall well-being. No one deserves to be mistreated or used in this manner. It's certainly not your fault. Some people refuse to accept responsibility for their own emotional maturity — and that isn't your burden to bear.

"At their core, energy vampires are often insecure"



“On some days
or weekends
I just prefer
being alone”

Lerato Mokautu

Balance *is the new power*

Lerato Mokautu is a dynamic Corporate Nursing Supervisor with a strong clinical foundation and a passion for leadership in private healthcare. Born and raised in Soweto, she holds a diploma in General, Psychiatry, Community, and Midwifery Nursing, along with NIMART and dispensing certifications.

With a career spanning hospital high care units to corporate boardrooms, Lerato is known for her strategic mindset, people-first approach, and ability to thrive in high-pressure environments. Beyond her profession, she is a devoted mother, mentor, and wellness advocate who believes in living a balanced life, grounded in faith, recharged by nature, and driven by purpose.

As a Powerhouse on Heels

At just 30, Lerato Mokautu is redefining what it means to be a modern nurse. Born and raised in Soweto, Lerato has risen through the ranks, from scrubs in the theatre at Thelle Mogoerane Hospital to suits and stilettos in the boardrooms of corporate healthcare.

Today, she leads as a Department Supervisor, navigating high-pressure environments while managing complex private healthcare portfolios with grace and precision.

Her journey began with a general nursing qualification at Netcare Education, later earning her diploma in General, Psychiatry, Community, and Midwifery Nursing from Ann Latsky Nursing College. She holds NIMART certification, a dispensing license, and served as SRC in 2018 being the voice of students, reflecting both clinical excellence and leadership.

But Lerato is more than her titles. She's a proud mother, spiritual anchor, and a lifestyle enthusiast who believes in working hard, playing harder, and staying spiritually grounded. Whether she's zip-lining in Irene, camping in Mozambique, or sharing laughter over spa days with fellow moms, Lerato knows the power of recharging in order to lead with impact.

Her philosophy

Balance is the new power.

And she's a living proof that you can dominate your field, and still make time for joy.

“My most recent favourite spa is Spa de la Veille where I shared stories in a heated pool”



enjoy road trips a lot, the most recent road trip I took was to Mozambique in July 2024. In order to refresh and mentally prepare for going back to work after 4 months of maternity leave, I went camping in Ponto Bilene in a game reserve, I did a lot of sight seeing, connecting with nature, exploring different cultures and enjoying some food.

Above all the roles that I play, I always ensure to take care of my spirit by recharging and refreshing my spirit being by taking time in prayer, Worshipping, reading the Bible, going to church on some Fridays and Sunday's.

Every Sunday after church, my friends and I go out with our children to child friendly areas, to bond and recharge as mothers, where we debrief, share motherhood ventures and ideas and vent to each other. Above all have fun with our children. The most recent outing was at the red barn in Irene. We did zip lining, the kiddies were jumping on trampolines, riding go-carts, had some lunch and shared meaningful conversations.

Days such as mothers day, we do not wait to be celebrated, we celebrate ourselves with the ones that made us mothers, this year on mothers day after church with my friends we went to Buyuk Chamlija Socio-eco techno village where we played with the children, played as mothers and also had time to spend in nature, reflect and had lunch with all our nannies.

On days where I have time, I do check on my mommy's friends if they are free, we go to the spa to relax and unwind. My most recent favourite spa is Spa de la Veille where I shared stories in a heated pool, took care of skin by going in the steam room and relaxed even further with massages, ending our day with dinner, and then I went back home to my daughter and my nanny.

Not all days are the same, on some days or weekends I just prefer being alone having me time, I will take my nanny and my daughter home to my parents' on a Friday then come back to my place for some me time, I will cook and spend it reading (favourite author is Loui Giglio) , sleeping and catching up on reality shows. I value my Me Time....



“Taking up
an instrument
as an adult
reduces anxiety”

**How Learning
an Instrument in
Adulthood Reduces
Anxiety**



Introduction

Do you ever wish you could relieve stress with the strum of a guitar or the melody of a piano? I used to come home from busy work days feeling anxious and overwhelmed, often too wired to relax. Learning to play music as an adult has been one of the best remedies for lowering my anxiety.

Research shows that playing an instrument engages the mind and body. This helps counteract tension. Mastering new music keeps worrying thoughts away.

Playing in groups like community bands boosts your mood. It also offers fun social connections. Practicing for just 30 minutes a day can work wonders.

Article by kandmmusicschool.com

The Science Behind Why Music Lowers Anxiety

Playing music affects both the mind and body. It helps curb anxious feelings. Studies show that regular practice changes the brain's structure and function. Parts of the brain for motor control, hearing, and memory grow larger. These changes reduce tension and improve mood.

Key Effects of Playing Music:

Triggers production of dopamine and serotonin (feel-good chemicals)

Lowers cortisol (stress hormone) levels

Activates the prefrontal cortex, preventing worrying thoughts.

How Music Affects Anxiety Pathways in the Brain

To understand why music eases anxiety, we need to know a bit about the brain:

Amygdala:

An almond-shaped set of neurons deep in the brain
Processes emotions and memories, especially fear
When overactive, triggers the "fight or flight" response

Prefrontal Cortex:

Helps calm anxiety
Works to inhibit the amygdala
Strengthened by playing music

Playing music strengthens the prefrontal cortex. It also helps control the amygdala, reducing anxiety. Rhythmic patterns, lyrics, and emotional processing balance the brain.

With practice, music trains the brain to react less to triggers. It dampens anxiety pathways and activates relaxation responses.

Benefits of Playing Music for Mental Health

Taking up an instrument as an adult reduces anxiety. It also has many other perks for mental well-being, including:

Reduces Anxiety and Stress

Rhythmic patterns and concentration soothe the mind
Suppresses worry and rumination

Boosts Mood

Releases "feel good" neurotransmitters like dopamine
Improves overall mood

Promotes Relaxation

Activates the parasympathetic nervous system
Brings the body and mind into a relaxed state

Flow State

Total concentration blocks external worries
Triggers a meditative flow state

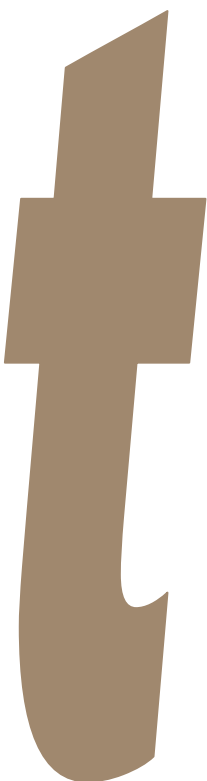
Sense of Accomplishment

Moving from beginner to advanced techniques boosts self-confidence

Gives a great sense of reward

Social Connection

Playing in groups meets our need for social bonds
Protects against anxiety and depression



“Let’s disrupt
this narrative
together”

“You’re a Nurse? Why Not
Become an M.D.?”

— **The Power-Knowledge Trap That
No One Warned Us About**



“We must stop trying to prove that nursing can mimic medicine”

Article by Ali Fakher, BSN, RN,
published on July 7 2025

e’ve all heard the question:
“You’re a nurse? Why not become a doctor?”

But what if that question isn’t just innocent curiosity?

What if it’s the tip of an epistemic iceberg—one that conceals a massive systemic operation of power designed to domesticate nursing knowledge, suppress its logic, and trap its practitioners in a role that was never meant to rise?

□ Power-Knowledge Hegemony: How Nursing Was Domesticated

Let’s talk domestication—not of animals, but of human professions. Nursing has been allowed to speak—but only in a dialect authorized by biomedicine.

It’s called “holistic,” but only if it stays harmless. It’s called “caring,” but only if it follows orders. It’s called a “profession,” but only if it serves medicine—not leads independently from it.

And how was this possible?

Through what Michel Foucault called Power-Knowledge: A system in which power supervises the production of knowledge—and punishes deviation from the sanctioned narrative.

This is how:

“Holistic” became a buzzword instead of a bio-logic
“Nursing theory” became context-stripped and praxis-blind
“Just a nurse” became an internalized identity

□ The Crack No One Dared to Name

All major nursing theories—even the modern ones—have been developed within this epistemic cage. Theories that were meant to liberate, now circulate within politically accepted limits, filtered to sound professional but never revolutionary. They never asked:

What is the bio-logic of nursing?
What is the coherence system of health restoration?
Why does nursing exist as a doing but not as a thinking?

The secret keeping this whole illusion alive?

□ The absence of a nursing-centred, sovereign biological logic.

A logic rooted not in anatomy charts or pathophysiology textbooks, but in patterns, rhythms, relationships, and meaning-making—all of which remain unnamed, unmeasured, and unclaimed.

□ The Questions They Don’t Want You Asking:

Why is nursing still not seen as prestigious?
Why is it called a profession—yet functions like a quasi-profession?
Why do nursing theories feel abstract, disconnected, and subordinate?
Why has the theory-practice gap survived for decades without real closure?

And the scariest one:

What if all of this was never accidental... but intentional?

□ My Call to You

If you’ve ever been asked, “Why not become an M.D.?”, ask back:
Why hasn’t nursing been allowed to become itself?

We must stop trying to prove that nursing can mimic medicine.

We must start proving that:

Nursing thinks differently,
Sees differently,
Knows differently.
It’s time we crack open the domesticated logic.

And it starts with one act:

- Ask the forbidden questions.
- Speak the unspoken logic.
- Walk out of the epistemic cage.

□ What Do You Think?

Do you feel nursing’s thought has been caged?
Have you asked these questions before?
And if not—will you ask them now?
Let’s open this dialogue below.
Let’s disrupt this narrative together.

Article by Ali Fakher, BSN, RN,
from Hodeidah, Al Hudaydah
Governorate, Yemen
A UN Nurse & Global Health
Innovator, NurseHack4Health
Winner and an Advocate for
Nursing Empowerment
& Digital Health Solutions
[@linkedin.com/in/ali-fakher-rn](https://www.linkedin.com/in/ali-fakher-rn)



Koketso **Bodiba**

He is a Cruise Ship
Lead Nurse

“

1

I am a registered nurse with 9 years of clinical experience and currently serve as the Lead Nurse onboard a cruise ship, where I manage the medical team and oversee all healthcare operations at sea.

I hold a 4-year Diploma in General, Community, Psychiatry, and Midwifery Nursing Science from SG Lourens Nursing College in Pretoria, and am a postgrad with a 2-year qualification in Medical-Surgical Nursing specializing in Trauma and Emergency Nursing from the University of Pretoria.

Besides, I worked at Steve Biko Hospital, in the Emergency department for 5 years and that is where I gained most of my experience before I started with my career in the maritime in 2021. Furthermore, my expertise in emergency care, travel medicine, and public health were developed in maritime settings.

My role requires a strong blend of clinical judgment, leadership, and adaptability, especially in the unique environment of a cruise ship whereby access to immediate external resources is limited. I am passionate about team development, quality patient care, and fostering a safe, supportive environment for both guests and crew.





“Perfect leadership isn’t about being flawless, it’s about being accountable”



riefly explain the spheres in which you are playing a leadership role

Clinical Leadership – As the Lead Nurse onboard, I oversee the medical team, ensuring high standards of patient care, clinical protocols, and emergency preparedness are maintained. I guide daily operations and provide mentorship to nursing staff and support personnel.

Operational Coordination – I collaborate with ship management, safety officers, and external medical providers to coordinate health services, manage medical supplies, and ensure compliance with maritime health regulations. **Team Development and Support**; I foster a supportive environment for the medical team, promoting ongoing training, clear communication, and teamwork to ensure we're prepared for both routine care and critical situations.

What kind of overall leadership do you provide to the above spheres?

I provide a holistic and hands-on leadership approach across all spheres. My leadership style is proactive, collaborative, and adaptive-essential for the dynamic environment onboard a cruise ship.

Clinically, I ensure that care standards are upheld by promoting evidence-based practices, continuous training, and swift, clear decision-making during medical situations.

Operationally, I take a strategic role-coordinating closely with ship leadership and external partners to ensure seamless healthcare delivery, crisis readiness, and regulatory compliance.

For the team, I lead by example-fostering open communication, trust, and professional growth.

I aim to create a motivated, resilient team capable of performing under pressure while maintaining compassion and professionalism. Overall, my leadership ensures that the medical unit functions smoothly, maintains high morale, and is always ready to respond effectively to both routine and emergency scenarios at sea.

What kind of role does the wellness unit play at your facility?

The wellness unit plays a crucial role in maintaining overall health, safety, and well-being of both guests and crew onboard. It serves as the primary healthcare provider at sea, offering services ranging from routine medical care and health monitoring to emergency response and disease prevention.

For guests, the unit ensures prompt medical attention, manages outbreaks, and promotes safe travel. For crew members, it supports occupational health and mental well-being, and chronic condition management, contributing to a healthier and more productive workforce.

In essence, the wellness unit is not just a clinical facility, it's a central pillar of public health and safety on the ship, working proactively to prevent illness, responding effectively to emergencies and foster a culture of wellness throughout the voyage.

How did your schooling define leadership?

My schooling defined leadership as the ability to influence and inspire others toward a common goal, while upholding integrity, accountability, and empathy. Through both academic learning and practical experiences such as clinical rotations, group projects, and community outreach, I learned that effective leadership combines knowledge, communication, and emotional intelligence.

It emphasized that true leadership is not about authority, but about serving others, making informed decisions under pressure, and empowering teams to succeed together.

These lessons became the foundation for how I lead today in a high-responsibility environment like a cruise ship.

What is your personal understanding about leadership?

My personal understanding of leadership is that it's about serving others with purpose, clarity, and compassion. It means taking responsibility, not just for outcomes, but for the people you lead.

To me, a good leader sets the tone, leads by example, listens actively, and makes decisions that prioritize both the mission and the well-being of the team. Leadership also means being adaptable and calm under pressure, especially in healthcare where situations can change rapidly.

Onboard a cruise ship, this understanding is vital, I see leadership as creating trust, maintaining high standards, and ensuring that the team feels supported and confident in any scenario. I like to quote the words of Professor Bonang Mohale who like to say that "we should lift as we rise" a statement that should be upheld by any emphasizing grooming and empowering our subordinates.

From your explanation, what is your definition of perfect leadership?

Prof. Mohale also defines a leader as that, everyone who feels that he was called to lead is the leader, from my perspective, perfect leadership is the ability to balance authority with empathy, vision with practicality, and confidence with humility. It's about guiding a team with clarity and purpose, while also creating a supportive environment where each member feels valued, heard, and empowered to contribute.

Perfect leadership isn't about being flawless, it's about being accountable, adaptable, and consistently striving for growth, both personally and as a team. In a setting like a cruise ship medical unit, it means making informed, timely decisions under pressure, maintaining high standards of care, and ensuring the well-being of both patients and staff.

"My schooling defined leadership as the ability to influence and inspire others toward a common goal, while upholding integrity, accountability, and empathy"

"I provide a holistic
and hands-on
leadership approach
across all spheres"



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SOUTH AFRICA

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HERITAGE

DAY



24th SEPT

Ntembi Mboniswa

She enjoys being a Leader

What is your position?

I am the Operational Manager

What are your responsibilities?

My responsibilities are as follows; a) Ensure the ward is covered in terms of staff for the day as I am overall supervisor; b) In-service Training of staff; c) Ensure medication is enough or ordered; d) Ensure that the environment is clean at all times; e) Equipment is in working order by allocation rotation of staff to manage it; f) I am responsible for procurement of equipment and submission of damaged; g) Faulty equipment for repairs; h) Staff evaluation (PMDS); i) Conducting in-service for the institution; J) Meetings with staff and patient to fill gaps if identified. And I also manage budgeting for the unit.

In combination of your schooling and your current position, what is management?

Management is monitoring the junior staff so that they are competent, it is organizing and coordinating resources both human and material, planning for the year and leading by example, ensuring that Batho Pele principles and the 6 priorities are implemented.

Do you have a mentor? Who is it?

My Mentor is Nonceba Siko my previous team leader.

What is the greatest challenge you have faced in your job? How did you overcome it?

The implementation of new policies or new information normally causes rigidity to change. Hence it requires one's commitment to clarify the intent and content of the policy by teaching one's team.

What do you, personally, enjoy most about working as the operational manager?

I, personally, enjoy being a leader because I am doing in-service training for all the nurses and I can instil skills that I have learned or acquired abroad or overseas.

How is your relationship with your colleagues and the team that you are leading?

The relationship with my colleagues and my team is great because I am assertive and good in listening, I must say I apply all the leads hip skill when necessary.

How would you define your management style?

Both Democratic and Autocratic when making some decisions. Leadership skills can lead to democratic leadership style. Some task may need an autocratic style for it to be completed.

What do you need to improve on to get to the next level?

I am happy in my current position because I can cover both bedside nursing and administration while supporting other nurses.

What is the best way that health institutions can use to offer feedback to or get ideas from their clients?

I think the current systems that we are using are still effective, for instance, the suggestion boxes placed in all wards and corridors. They opportune the public, relatives and patients to provide suggestions or to lay complaints.

Besides, there are toll-free numbers and social media to use as well, like Facebook in some institutions.

What kind of skills and training should the nursing management hopefuls seek out?

Attending seminars, workshops, in-service and support like in our institution we do have wellness programme for all staff members.

What career achievements are you most proud of?

Graduating or obtaining a degree in Psychology whereby staff and patients benefit free of charge and the counselling course helps because I can support the patients.

What are your personal career goals?

My personal career goal is to be better than yesterday and to adapt to new things as nursing is dynamic.

What daily performance goals do you set for yourself?

To nurse patients in totality; physically and emotionally without undermining their beliefs.

What is the most required characteristic from a nursing manager?

Attitude and smile can conquer any obstacle.

Indicate your management style in one word

Excellence

What is a perfect management style?

No one is perfect, but we keep on trying to make it Democratic as it can cover most of the aspects.

"The relationship with my colleagues and my team is great because I am assertive and good in listening"



What is the required management style?

The one that includes reassurance, appreciation and support.

Who are you mentoring currently?

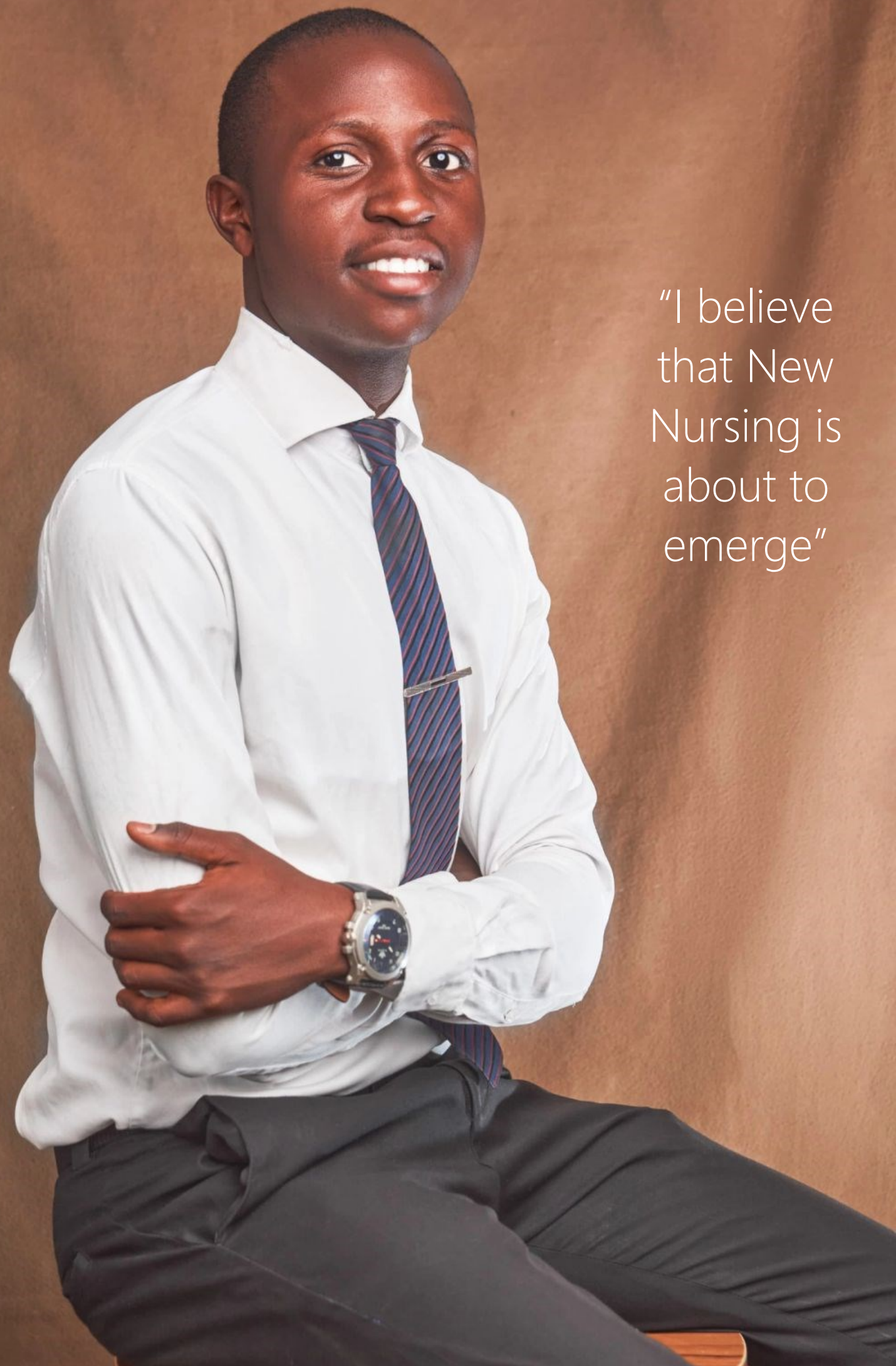
Yes, my team.

What would you expect from them (mentees) when they reach their management level?

Not to abuse powers, they must do the right thing for the first time and at all times.

What advice would you give to nursing management hopefuls?

My advice is that they must appreciate and accept new changes and innovations from people who went to work abroad because those skills from abroad can add more value to our society. And they must not feel threatened by advanced skills, instead let us work and build our nursing profession.



"I believe
that New
Nursing is
about to
emerge"

Ibrahim Ahmadu

Is passionate about
engaging in decision and
policy making

When thinking of your career, what makes you wake up in the morning?

The idea that I have the solution to somebody's problem but my current version is not enough to bring that solution and so it requires pruning and refining to produce that best version of me to be able to provide that solution.

What is your greatest purpose about your nursing career?

To bridge in between leadership and healthcare. If there's anything that Nursing lacks it's strategic leadership. We have people but we lack voice. All I'm after is to be able to inspire a change beyond complaining but actively engaging in transforming the younger generation of Nurses and Nursing students like myself.

What is your vision about your career?

My career vision is to become a transformational leader in the field of healthcare, particularly nursing and public health. I aim to merge clinical excellence with leadership, advocacy, and public speaking to influence health policies, mentor young professionals, and drive community impact.

Where do you visualise yourself in the next three years?

In the next three years, I visualize myself as a licensed, impactful nurse with advanced training in public health and infection prevention and control. I also envision myself actively engaged in decision and policy making that is not only restricted to the four walls of the hospital but even across the globe.

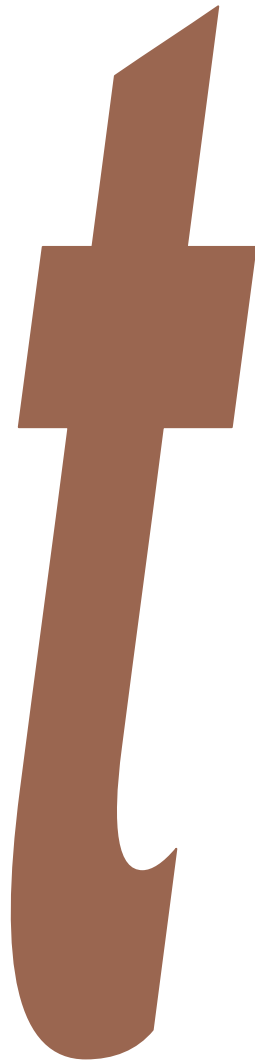
What is your optimism about the future of nursing?

I am deeply optimistic about the future of nursing because the profession is evolving into one of the most dynamic and influential pillars in global healthcare. With the increasing recognition of nurses as frontline leaders, educators, advocates, and innovators, I believe nursing will continue to gain the respect and resources it deserves. There has never been anytime where Nurses across the globe are doing anything possible to revolutionize the profession like this time. So I believe that new Nursing is about to emerge.

What is your fear about the future of nursing?

My fear about the future of nursing lies in the risk of burnout, underappreciation, and brain drain especially in developing countries like Nigeria. Many passionate nurses are leaving the profession or migrating abroad due to poor working conditions, low pay, and lack of professional growth.

“My fear about the future of nursing lies in the risk of burnout”



“I desire to use my voice and experiences to inspire others to grow beyond limitations”

here's also a fear that without proper investment in nursing education, leadership development, and mental health support, the profession may struggle to keep up with the demands of a rapidly changing healthcare landscape.

How do you deal with issues that scare you?

When faced with issues that scare me, I start by acknowledging my fear, then I confront it with prayer, perspective, and planning. I take time to reflect and seek guidance—spiritually and from mentors or trusted friends. I break the problem into smaller, manageable parts and focus on what I can control. I also remind myself of my past victories and the purpose that drives me.

Where do you see nursing in 10 years?

In 10 years, I see nursing as a fully empowered and technology-driven profession that stands at the forefront of global health systems. Nurses will no longer be seen just as assistants but as critical decision-makers, researchers, and policy influencers.

With the rise of telehealth, artificial intelligence, and advanced practice roles, I believe nurses will lead innovations in patient care, especially in preventive and community health. In Africa, I envision a more respected, well-funded nursing system where nurses are equipped, supported, and inspired to solve public health challenges and lead healthcare reform.

What one 'need' and one 'want' will you strive to achieve in the next twelve months?

In the next twelve months, one need I will strive to achieve is building strategic professional networks and gaining more professional certifications in my field of interests. This will strengthen my competence and prepare me for greater responsibilities in healthcare.

One want I will pursue is launching a personal platform focused on leadership and personal development among young professionals, especially student nurses. I desire to use my voice and experiences to inspire others to grow beyond limitations and make meaningful impact.

What does the realistic future of nursing look like?

The realistic future of nursing is one of both great opportunity and critical responsibility. As healthcare challenges evolve—pandemics, aging populations, mental health crises—nurses will be more essential than ever. Realistically, we will see more nurses taking on advanced practice roles, specializing in areas like critical care, public health, and informatics.

However, the future also demands better policies, fair compensation, mental health support, and stronger leadership pathways. If we address these gaps, nursing will not just survive—it will thrive as the backbone of resilient health systems, especially in countries like Nigeria where nurses are often the first and only line of care.

Will the next generation face the best or the worst in nursing? Why?

The next generation may face both the best and the worst in nursing—depending on how we act today. On the bright side, they will inherit advanced technologies, global health awareness, and more opportunities for leadership, research, and specialization.

Nursing is gaining visibility and respect, and that opens doors for global influence and impact. However, if current challenges like poor working conditions, brain drain, and lack of support persist—especially in low-resource settings—they may also face burnout, underappreciation, and limited growth.

The future will be shaped by how we invest in nursing today—through education, policy reform, mentorship, and innovation. That's why it's our duty as emerging leaders to build a strong foundation.

What role are you playing in shaping the future of nursing?

I am actively playing a role in shaping the future of nursing by inspiring young nurses to think beyond the bedside and embrace leadership, innovation, and service. As a nursing student, I leverage platforms like LinkedIn to advocate for personal development, public health awareness, and volunteerism.

Through my leadership roles, mentorship, and public speaking, I'm working to change mindsets—showing that nurses can be policy shapers, educators, and global health leaders. I believe that by empowering my peers and leading by example, I am planting seeds for a stronger, more respected nursing profession in Nigeria and beyond.

How do you describe the future of nursing in one word?

Empowered.

"Nurses
will no longer
be perceived just
as assistants but
as critical decision-makers,
researchers, and policy
influencers"



“The development of a successful novel approach towards an HIV cure will be a relief to public health ”



Siyakudumisa Nontamo MA

Research
is the cornerstone
of evidence-based practice

b

riefly share your academic background.

My academic background is as follows:

- BCur Nursing: Completed in 2010 from Walter Sisulu University
- Master's in Advanced Psychiatric Nursing: Obtained in 2018 from the University of the Western Cape
- University Certificate in Introduction to Health Data Analytics: Completed in 2023
- University Certificate in Tobacco Control Advocacy: Completed in 2024 through the Africa Centre for Tobacco Industry Monitoring and Policy Research (ATIM) at the University of Pretoria (contact session held in Addis Ababa, Ethiopia)
- PhD in Health Sciences: Enrolled: 2022 at Walter Sisulu University
- Thesis Submission: Final thesis submitted for examination in November 2024
- Examination Feedback: Received positive feedback from all three examiners, passing the thesis with minor corrections
- Expected Graduation: Spring graduation 2025.

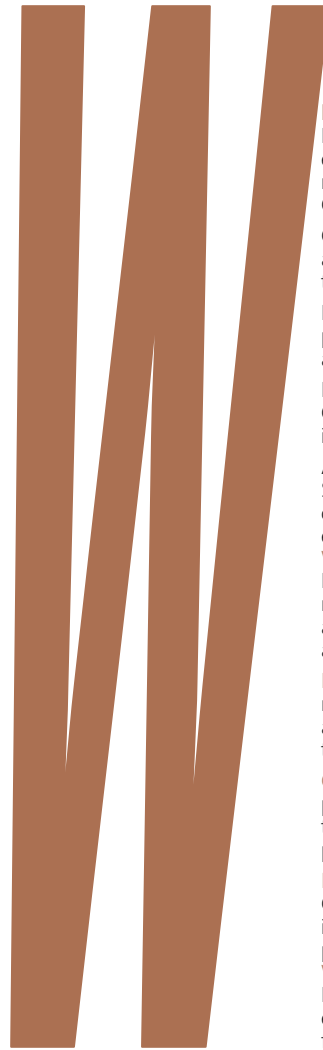
Why is it important for a nursing professional to be involved in research?

Research is the cornerstone of evidence-based practice, which ensures that nursing interventions are safe, efficient, and backed by the best available data. Improving the Results of Patients: by participating in research, nurses can contribute to the development of new knowledge and interventions that enhance patient outcomes, elevate the standard of care, and reduce medical expenses.

Research helps advance nursing practice by pointing out areas that need improvement, developing new nursing roles, and influencing policy decisions that impact nursing practice.

Enhancement of Professional Skills: Through research activities, nurses can develop critical thinking, problem-solving, and analytical skills—all of which are essential for professional growth.

"I have not graduated from my PhD yet, I will graduate in the spring"



“I intend to pursue research that produces practical interventions to improve adherence among TB and HIV patients”

What has your study/research been focusing on?

During my master's degree, my research focused on 'the experiences of professional nurses towards patients who are repeatedly readmitted to psychiatric hospitals in the Western Cape.'

Currently, in my PhD studies, I have focused on developing a program to monitor patients who were initiated on HIV treatment on the same day as their HIV-positive results.

Furthermore, I intend to pursue research that produces practical interventions to improve adherence among TB and HIV patients.

In collaboration with Prof. Catherine Egbe of the University of California, I am researching conversational AI interventions to improve tobacco cessation among users within six months.

Additionally, together with Professor Eugene Ndebia of Walter Sisulu University, we are proposing a research study that combines CRISPR/Cas9 gene editing with immunotherapy to eliminate HIV-infected cells: a novel approach to HIV cure."

What is a pivotal point of your research?

Developing innovative programs: Creating a program to monitor patients initiated on HIV treatment on the same day as their diagnosis, which could improve treatment adherence and outcomes.

Improving adherence among TB and HIV patients: Pursuing research that produces practical interventions to enhance adherence, which is a critical aspect of managing these conditions.

Conversational AI for tobacco cessation: Exploring the potential of conversational AI interventions to improve tobacco cessation rates, which could have significant public health benefits.

Novel approach to HIV cure: Investigating the use of CRISPR/Cas9 gene editing and immunotherapy to eliminate HIV-infected cells, which is a groundbreaking area of research with potential for significant impact.

What do you seek to achieve through your findings?

By developing a program to improve HIV treatment adherence, retention in care, and viral load suppression within the first 6 months of HIV treatment. The endpoint will be fewer new infections, contributing to the acceleration of achieving UNAIDS targets.

Regarding the AI interventions to improve the cessation of tobacco smoking, the WHO FTCT Article 3 guidelines are namely reduction of prevalence of tobacco use, reduction of exposure to tobacco smoke, and reduction of the health and economic impacts of tobacco use.

Lastly, the development of a successful novel approach towards an HIV cure will be a relief to public health due to the arresting permanence of the HIV epidemic, which is economically draining to the underdeveloped and developing countries.

As a PhD graduate, what contribution are you making in the Nursing field?

I have not graduated from my PhD yet (I will graduate in the spring). As a graduate, I participated in the creation of three manuscripts that were sent to a peer-reviewed journal in March 2025.

My manuscripts examined the effects of patient navigation on individuals who began HIV treatment on the day of their diagnosis. Furthermore, our research uncovered that HIV impacts impoverished individuals from rural regions who are not married.

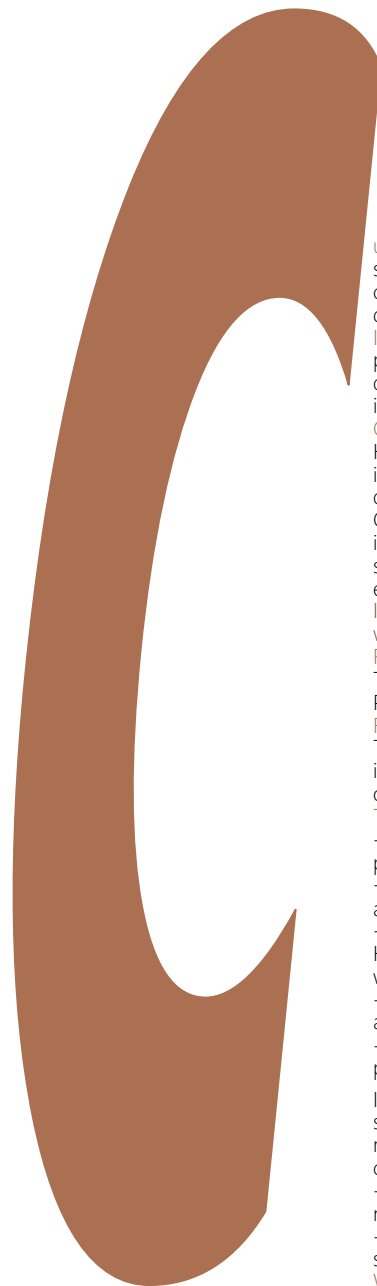
Additionally, our research assisted in the unification of psychosocial services (social workers) with healthcare services to enhance treatment adherence, viral load suppression, and disclosure. Finally, our research aided in creating a practical framework for decentralizing HIV services to households and communities.

If you may write or have written a book how could it improve the Nursing Curriculum?

Evidence-based practice: My book could provide nursing students with the latest research findings and best practices in HIV care, emphasizing the importance of patient navigation and psychosocial services integration.

“Research helps
advance nursing
practice by pointing
out areas that need
improvement”





“My manuscripts examined the effects of patient navigation on individuals who began HIV treatment on the day of their diagnosis”

Culturally sensitive care: By highlighting the needs of poverty-stricken individuals from rural areas, my book could promote culturally sensitive care and awareness among nursing students.

Interprofessional collaboration: My research on integrating psychosocial services with healthcare services could foster a deeper understanding of interprofessional collaboration and its benefits in patient care.

Community-based care: The book's focus on decentralizing HIV services to the community and household level could inform nursing students about innovative approaches to care delivery.

Case studies and practical applications: Including case studies or real-world examples in the book could help nursing students apply theoretical knowledge to practical situations, enhancing their critical thinking and problem-solving skills. **If you were to play a role in nursing guidelines or policies what would be your priority and why?**

Role: Developing Guidelines for Comprehensive HIV Care: Treatment Navigation, Decentralized Care, and Integrated Psychosocial Services

Focus:

Treatment Navigation: Ensure that guidelines emphasize the importance of treatment navigation for individuals initiated on HIV treatment on the same day as diagnosis.

This could include:

- Assigning a dedicated treatment navigator to support patients in navigating the healthcare system.
- Providing education and support to patients on treatment adherence, side effects, and viral load monitoring.
- **Decentralization of Care:** Promote the decentralization of HIV care through ward-based outreach teams (WBOTs), which could:
 - Bring care closer to patients' homes, reducing barriers to access.
 - Provide comprehensive care, including HIV treatment, psychosocial support, and health education.

Integration of Psychosocial Services: Integrate psychosocial services with healthcare services to address the social determinants of health and promote treatment adherence. This could include:

- Providing counseling, social work support, and peer navigation.
- Addressing issues such as poverty, food insecurity, and social isolation.

Why?

Improved treatment adherence: Treatment navigation, decentralized care, and integrated psychosocial services could enhance treatment adherence, viral load suppression, and overall health outcomes.

Increased access to care: Decentralizing care through WBOTs could increase access to care, particularly for individuals in rural or hard-to-reach areas.

Holistic care: Integrating psychosocial services with healthcare services would promote holistic care that addresses the physical, emotional, and social needs of individuals living with HIV

Potential Policy Recommendations:

Develop guidelines for treatment navigation: Establish standards for treatment navigation, including the role of treatment navigators, patient education, and support.

Implement decentralized care models: Promote the implementation of WBOTs and other decentralized care models to increase access to care and improve treatment outcomes.

Integrate psychosocial services: Ensure that guidelines emphasize the importance of integrating psychosocial services with healthcare services, including counseling, social work support, and peer navigation.

Monitor and evaluate: Develop metrics to monitor and evaluate the effectiveness of these interventions, informing continuous quality improvement.

“Our research aided in creating a practical framework for decentralizing HIV services to households and communities”





Wendy Dixon-Jewitt

The Nurses' Protection Specialist

Wendy Dixon-Jewitt, MA Leadership (Healthcare Specialty),
RN, Educator, Author

Wendy is the founder of Brainstorm Soft Skill Solutions and creator of *Universal Precautions for Emotional and Behavioral Dysregulation*©.

Known for her sharp wit, clinical insight, and no-BS approach to emotional safety, Wendy has spent decades working in some of the toughest corners of healthcare: justice systems, mental health, long-term care, frontline management, and faculty roles.

She's the creator of the Broken to Badass Nurse Empowerment Pathway©—a step-by-step framework designed to help nurses navigate abuse, reset resilience, and lead with strength and skill.

Wendy lives in Saskatchewan, Canada, and continues to teach, write, and speak internationally on topics of nurse safety, empowerment, and emotional regulation in high-pressure environments.



“I learned a Master's in Leadership with a healthcare specialty and focused my thesis on respectful care for verbally abusive patients”

What is your specialty?

I teach Soft Skills for Hard Situations. I specialize in verbal de-escalation, behavioral limit setting and psychological self protection. My mission is to help nurses stay safer and saner at work by turning their soft skills into superpowers. I teach nurses how to protect their mental well-being, respond effectively to verbal abuse, and set boundaries with skill.

What is your role in nursing?

I'm a nurse, educator, author, and founder of Brainstorm Soft Skill Solutions; I develop training programs, speak at conferences, and work with individual nurses and healthcare organizations to introduce them to the concept of Universal Precautions for Emotional and Behavioral Dysregulation©. I am all about sharing evidence based secrets to keep them safe from psychological harm.

What motivated you to pursue your specialty?

Healthcare is a violent industry, and nurses are on the front lines without the training they need to navigate verbal abuse and psychological harm. I know this firsthand—I've been the nurse who froze, who fled, who their cool and regretted not knowing what to say.

I've worked in corrections, long-term care, acute care, frontline management and as a faculty of nursing. I've fostered high-needs youth. I've seen what happens when systems fail—and how soft skills can save the day. My motivation? No nurse should feel powerless on the job. Ever.

How did you reach the level of being a Nurse Specialist?

Experience. Hard-won and battle-tested. I earned a Master's in Leadership with a healthcare specialty and focused my thesis on respectful care for verbally abusive patients.

I built my specialty in the trenches: working in justice systems, leading teams, and learning from every meltdown, blowup, and breakthrough. I took my lived experience, combined it with research, and turned it into training that actually works.

How do you differ from a General Nurse?

I don't just provide care—I teach nurses how to protect themselves while they care for others. My focus is on the non-physical injuries that rarely get talked about: verbal abuse, burnout, moral injury.

While general nurses are trained in clinical care, I equip them with psychological armor. My specialty lives at the intersection of communication, crisis response, and compassion. I help nurses stand their ground without losing their cool.

What other opportunities can you explore as a Specialist?

This work opens doors: consulting, leadership development, speaking, authorship, even independent practice. I've built a program—The Broken to Badass Nurse Empowerment Pathway—that helps nurses move from feeling burned out and shut down to feeling back in control.

As a specialist in this area I can train others, shape policy, and advocate for system-wide change. There is room to lead, innovate, and heal not just patients—but the nursing profession itself.

How do you contribute towards nursing research?

My research lives in the real world. I bridge academic theory with frontline practice. My master's work focused on respectful care for verbally abusive patients—an often-ignored topic in nursing research.

Through my writing, teaching, and workshops, I gather and share real data from real nurses. I champion research that's not just published—

“I've fostered high-needs youth”



"Through my writing, teaching, and workshops, I gather and share real data from real nurses"

"I lean on my trusted leadership team and professional networks, including the Singapore Nurses Association and Sigma Theta Tau"



Lilian Yew

Shaping the Future of Nursing Leadership: **Transforming Healthcare Through Vision and Innovation**

In the dynamic world of healthcare, where expertise, resilience, and compassion define excellence, Chief Nurse Lilian Yew Siew Mee stands as a transformational leader, elevating nursing standards at Raffles Hospital, Singapore and beyond. With over three decades of experience, she has revolutionized patient care, spearheaded nursing development, and set new benchmarks for excellence across Asia.

Her leadership is guided by mentorship, advocacy, and strategic foresight, ensuring that nurses are empowered, engaged, and equipped to navigate the complexities of modern healthcare. "Nursing leadership is not about managing people—it is about inspiring transformation." Says Lilian.

Through her trailblazing efforts, Lilian has cultivated a thriving workforce, ensuring nursing professionals are not just practitioners, but leaders in healthcare innovation.

A Legacy Built on Leadership & Professional Excellence Ms. Lilian Yew Siew Mee, Chief Nurse and Accredited Provider Programme Director at Raffles Hospital, Singapore has played a pivotal role in advancing nursing education, leadership, and patient care standards.

She currently oversees more than 300 nursing professionals, ensuring structured mentorship, skill development, and clinical excellence across the hospital system. Her approach to leadership extends beyond policies and procedures—it is rooted in values that inspire lasting change.

Starting her journey in 1992, she transitioned into ICU nursing by 1997, where she developed a deep understanding of high-stakes patient care and critical care management.

Over the years, she has led Raffles Hospital, Singapore to achieve American Nurses Credentialing Centre (ANCC) Accreditation Provider With Distinction in 2020 and 2022, reinforcing its reputation as a leader in nursing continuing professional development leading to nursing excellence.

Under her leadership, Raffles Hospital, Singapore became the first private hospital in Asia to attain the ANCC NCPD Premier Award in both 2022 and 2024, demonstrating her ability to drive nursing innovation at an international level.

Beyond institutional achievements, Lilian is dedicated to mentorship and education, guiding nurses in American International Hospital, Vietnam through JCI re-accreditation efforts and expanding nursing leadership across borders.

She was the first nurse leader in Singapore to receive the Skills Future Fellowship Award (2024) and was honored as a Top 10 finalist for the Aster Guardians Global Nursing Award (2023).

Her commitment to professional development extends to her role as Vice President of the Singapore Nurses Association and Board Member of Upsilon Eta Chapter, Sigma Theta Tau, where she continues to shape the future of nursing leadership worldwide.

How many staff members are you responsible for?

I currently oversee more than 300 nursing professionals at Raffles Hospital, Singapore. My role involves not only operational oversight but also nurturing leadership, clinical excellence, and continuous professional development. She ensures that each nurse is supported through structured training, clear career pathways, and a culture of excellence.

What virtues do you endorse among your staff members?

Lilian embeds the RAFFLES Nursing Professional Practice Model into the hospital's culture. This model is more than a framework—it's a set of lived values:

- Responsibility – Advocating for patients with integrity
- Accountability – Upholding transparency and professionalism
- Flexibility – Adapting to change with innovation
- Fortitude – Leading with resilience and strength
- Leadership – Inspiring others to drive meaningful change
- Empowerment – Encouraging autonomy and growth
- Stewardship – Taking ownership of patient-centered care and policy influence

The Raffles Nursing PPM prioritizes patient-centric care as its core principle, shaped by collaborative teamwork within the organization. The model serves not only as a framework for delivering healthcare but also as a commitment to being a trusted partner in our patient's healthcare journey.

It aims to promote nursing excellence by setting standards and guiding principles that enhance patient care and overall healthcare outcomes. The emphasis on stewardship reflects a responsible and proactive approach to managing patient health, integrating teamwork, and professional dedication to achieving the highest standards of quality patient care.

I have embedded the RAFFLES Nursing Professional Practice Model into hospital culture, ensuring nurses uphold the highest standards of excellence. By embedding the RAFFLES model into daily practice, I ensure that nursing excellence is not just a goal—it is a continuous journey toward innovation, leadership, and professional growth.

What causes your day to be hectic?

My role as Chief Nurse is fast-paced, unpredictable, and filled with high-impact decisions. My day is filled with high-stakes leadership responsibilities, including: Managing patient emergencies, ensuring swift and strategic interventions. Addressing staffing shortages, optimizing nurse-patient ratios.

Executing hospital-wide nursing initiatives, improving patient care outcomes. Overseeing compliance audits and accreditation reviews, reinforcing global standards. These tasks require quick thinking, strategic planning, and constant coordination with multidisciplinary teams.

When do you knock off?

Despite my demanding schedule, I remain deeply committed to leadership engagement. Although my work officially concludes in the evening, leadership responsibilities frequently extend beyond official hours, with strategic planning and crisis management being carried over into personal time.

How often do you take your workload home with you?

I often take my workload home with me because I see leadership as a continuous, 24/7 responsibility. Whether I'm preparing for accreditation, mentoring colleagues across borders, or refining hospital-wide initiatives, I carry the mission with me beyond the hospital walls.

I frequently reflect on challenges, plan for upcoming projects, and support my team even outside of work hours. My ability to stay composed under pressure, implement structured workflows, and lead with discipline helps ensure that we consistently deliver excellence in patient care and nursing leadership.

How do you ensure that your meetings with your team bring forth effective results?

I ensure that meetings with her team are structured, results-driven, and solution-oriented.

My approach includes:

- Setting clear objectives, ensuring focused discussions.
- Encouraging collaborative dialogue, balancing engagement with efficiency.
- Driving accountability, ensuring strategic decisions lead to tangible improvements.

How do you deal with misunderstandings between your team members?

I address them promptly and respectfully. I create a safe space for open dialogue, ensuring all voices are heard and solutions are built on mutual understanding. It is important to use emotional intelligence to resolve conflicts. I listen actively, facilitates open communication, and ensures that all parties feel heard. My goal is to restore trust and maintain a collaborative environment.

What emotional intelligence strategies do you usually apply if need be?

I apply several emotional intelligence strategies when needed. Empathy, self-awareness, and active listening are central to how I engage with others. I strive to understand the emotions behind words and actions, which helps me respond thoughtfully and constructively.

I also emphasize empathetic leadership, practicing active listening and taking decisive action when necessary. This approach allows me to resolve misunderstandings quickly, maintain strong professional relationships, and foster a collaborative work environment.

What is your coaching approach?

My coaching philosophy is rooted in mentorship, empowerment, and professional development.

I believe in guiding nurses toward:

Skill refinement, ensuring professionals evolve in their careers. Leadership readiness, fostering confidence in decision-making. Continuous learning, reinforcing nursing innovation and adaptation. I strongly believe in empowering nurses to grow into confident, capable leaders.

What tone of voice do you use when you are feeling vexed?

Even in high-pressure situations or moments of frustration, I maintain a calm, composed, and respectful tone. I believe in modeling the behavior I expect from others, especially when tensions are high. I consult with my team for insights and apply structured delegation to keep workflows running smoothly, ensuring that decisions are made thoughtfully and collaboratively.

How do you handle your deadlines?

With discipline and structure. I prioritize tasks, delegate effectively, and stay focused on outcomes. Deadlines are opportunities to deliver excellence.

Who do you run to when you are faced with work-related pressures?

I lean on my trusted leadership team and professional networks, including the Singapore Nurses Association and Sigma Theta Tau. Their support and insights are invaluable.

What is this exclusive personality you, subconsciously, influence your subordinates with?

I believe the influence I have on my team stems from a blend of resilience, humility, and vision. Subconsciously, I aim to inspire confidence, foster trust, and cultivate a culture where collaboration and excellence are the norm. I've seen this reflected in my team's dedication and the positive, high-performing environment we've built together. As a lifelong advocate for nursing education and leadership development, I often share three core lessons with my subordinates:

1. Leadership Begins with Self-Development

Great leadership starts with investing in your own growth. I believe nurses must continuously pursue education, sharpen their clinical skills, and strengthen interpersonal abilities to lead with impact.

2. Empower Others Through Knowledge Sharing

True leadership thrives on mentorship and collaboration. I strive to uplift others, encourage engagement, and ensure that knowledge flows freely across teams to build a thriving, supportive professional community.

3. Adaptability is Key in Healthcare Evolution

Healthcare is constantly evolving. I encourage nurses to embrace innovation, stay flexible, and proactively seek ways to enhance both patient care and leadership practices.

What anticipated impartation do you make towards your staff members?

I aim to leave a lasting impact that goes beyond daily responsibilities. My anticipated impartation to my staff is threefold:

- Elevate professional standards in nursing leadership – I want every nurse to see themselves as a leader, capable of influencing change and setting benchmarks in care and professionalism.
- Strengthen patient care through innovation and knowledge – I encourage continuous learning and the integration of evidence-based practices to ensure our patients receive the highest quality care.
- Expand nursing influence beyond borders – I believe in fostering global collaboration, sharing knowledge across cultures, and building a nursing community that transcends geographical boundaries. Beyond my title, my goal is to shape the future of nursing leadership with vision, strategy, and unwavering commitment.

“Although my work officially concludes in the evening, leadership responsibilities frequently extend beyond official hours”

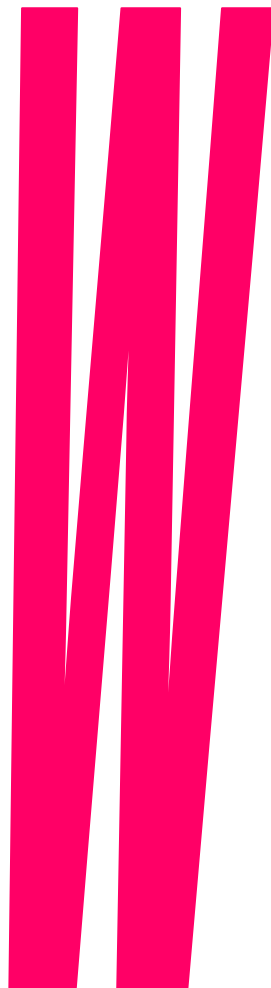


"I try to celebrate my womanhood with my looks and express it my style"



Lerato

Looking Elegant and Fabulous



Who is Lerato Moeketsi?

Lerato is a passionate midwife and an aspiring leader in the nursing industry. She is a Registered Nurse who holds a BCur Degree from the University of Pretoria and is currently pursuing a Postgraduate Diploma in Midwifery at Sefako Makgatho University.

She is also a tech-enthusiast and is passionate about using digital tools to improve the healthcare system. In her spare time she loves to create content on her page @millennial_midwife_ where she shares content on midwifery related subjects and her own journey in the profession.

She also enjoys volunteering her skills in the community serving with organisations such as Nurses With Purpose. She aims to be a NursePreneur, providing women and children with safe, equitable and respectful care.

Are you into fashion, modelling, advertising, makeup art or photography?

I've been growing in makeup expertise and currently I'm trying to focus more on content creation. I've always loved fashion, since I was a child.

What makes you so photogenic?

I believe everyone is photogenic. The most important thing is a beautiful smile and the confidence in God.

What inspires your stylish looks?

I love being a woman and working with women. I try to celebrate my womanhood through my looks and express it in my own style.

What are your goals for your trendy looks?

To show up as the best version of myself which includes looking my best.

What is your secret about your elegance?

I learnt a lot about style from my grandmother. She taught me the classics such as good fabrics, appropriate jewellery etc.

"I love feminine
and African inspired
looks."



“Before I became a nurse, I wanted to be a fashion designer”



How often do you exercise or go to the gym?

It used to be weekly but it's been difficult with full time studies.

What do you hope to accomplish with your elegant photographs?

I hope to reach more people with my content and inspire other nurses.

Would you model any kind of clothing at all?

Absolutely. I love feminine and African inspired looks.

What is your go-to outfit?

A dress and pretty heels. One always looks put together in a dress.

Do you like shopping for new clothes?

Yes, absolutely.

Do you read fashion magazines? Why?

I've always loved fashion. Before I became a nurse, I wanted to be a fashion designer, always sewing for my dolls as a child. Fashion magazines inspire me.

What is your most valuable piece of jewellery?

A necklace I got from my friend.

Have you ever made your own clothes?

Yes, growing up. I'd knit or crochet scarfs, hats, bags etc

What's your favourite piece of clothing?

Dresses. Comfortable and elegant all at once.

What are some of the strangest fashions you have seen?

Torn jeans and tops.

What colours do you think look good on you?

I have a warm skin tone so warm colours like orange, red, sage green, dusty pink are some of my favourites

What kind of clothes are in fashion now?

I see baggy jeans have made a comeback. It seems we're also moving back to a more modest style.

Do you ever go out without makeup? What does it feel like?

Yes. It's important to give your skin a break. It's great coz then I can see if my skincare routine is working well. It's been good so far.

Is nursing your corridor or your destiny? Why?

Definitely destiny. I've always wanted to be in the profession and I have many goals I aim to achieve.

Where do you see yourself in ten years from now?

As a successful NursePreneur.

If you were to connect your trendy looks and nursing to create your wealth, what would you do?

I'd create a clothing line for women so they can feel elegant at all stages of life: young, old, pregnant, breastfeeding etc.





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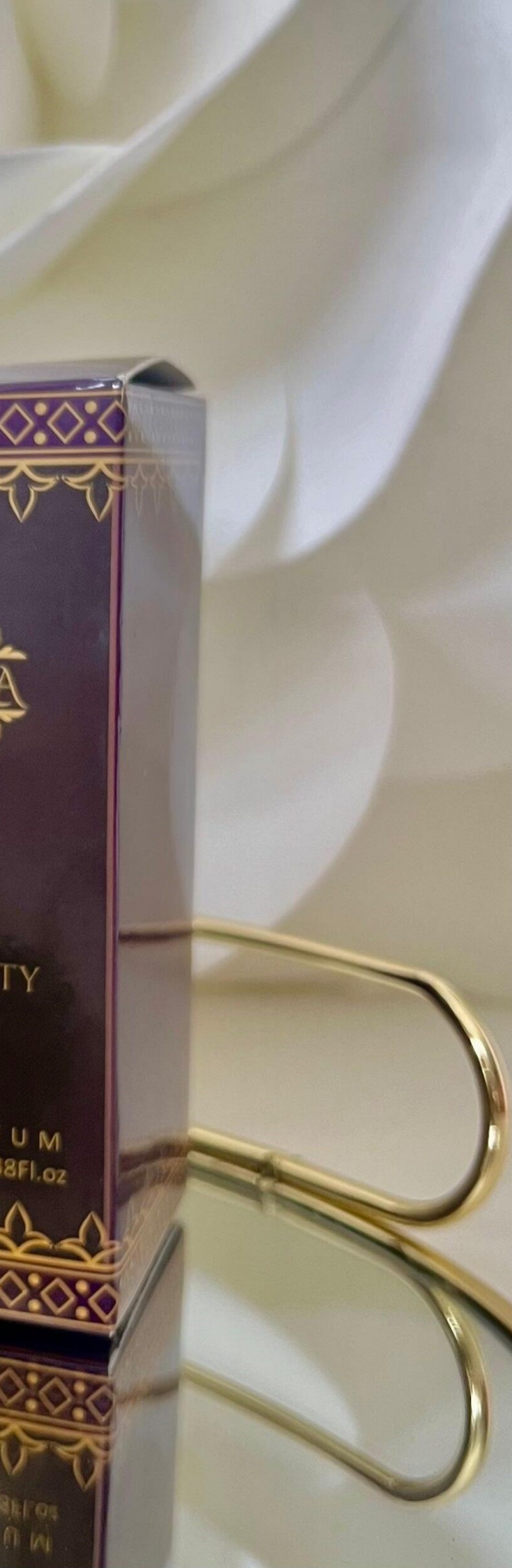


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By combining the key features of a coffee & cocktail bar, restaurant & entertainment venue, News Cafe is a trendsetting & benchmarking brand within the industry.

THE VIBE

Striking store designs, award winning mixology & culturally progressive music encompass the renowned News Cafe vibe.

OUR STORY

Established in 1995 under the Fournews umbrella, News Cafe first opened its doors in Hatfield in 1995 & has since evolved into a multinational brand. Three decades later, we continue to lead the way in food, cocktails & social culture.

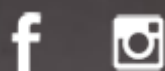
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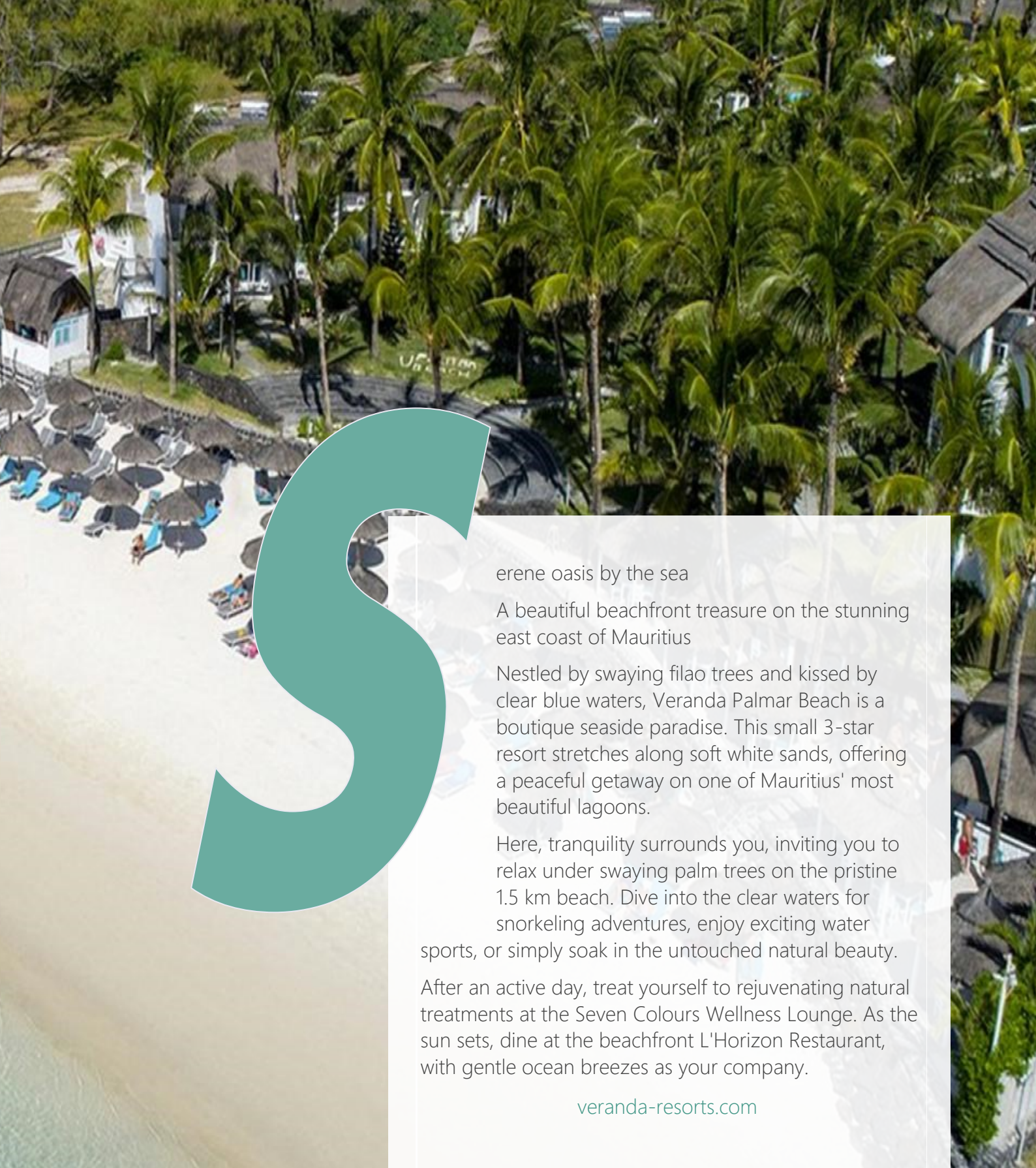




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Five Fun Ways To Celebrate Your Own Culture This Heritage Day



Article by www.bambanani.biz

South Africa is a unique country that blends so many cultures. There is something so important about helping your child connect to their own culture as a way to help them feel grounded and to instill pride. In this month's blog, we bring you five fun ways to celebrate your own heritage and connect with your history and your child.

1. Create a family photo book

We are getting a little lazy when it comes to family photos, using Facebook or Instagram as our personal photo albums or keeping the photos stored on the cloud. And what about all those older family photos that pre-date this new technology? There is something really important about preserving photos in hardcopies, whether it is to keep them as future heirlooms when tech formatting inevitably changes, or having the simple experience of sitting around a book of photos and sharing "remember whens" with your family. Starting this Heritage month, work together on compiling a beautiful photo book that not only compiles key current family photos but also contextualizes them within the greater family lineage. This is a wonderful year-long project that can serve to teach your kids about where they came from while preserving the past and all its glory.

2. Create a family recipe book

Food bonds people across generations. Gather old family recipes, reach out to loved ones and relatives locally and overseas and even investigate traditional recipes from your own heritage. Now combine them into a beautiful family cookbook. Work on it with your kids, testing the recipes, decorating the pages and writing up the stories about the person who shared the recipe. This is a beautiful way to bring culture alive through taste and togetherness.

Create an updated family tree

Work with your child on a family tree diagram that you can then decorate with craft details and photos. Make sure to include cultural elements like flags, traditional outfits, special occasions and icons to denote your family's origins and to teach them about where you all come from. To make it fun, add in little stories of the people you are including, like sayings or inside jokes, and you can even add your pets in there. This artistic activity will bring together the current family story with the artefacts that bond them to those earlier beginnings.

4. Start a new tradition

Rituals bond families in important ways. Not only does it punctuate a very busy lifestyle but it also serves an important bonding function in joining the family together. Consider starting a new ritual as a family where you repeat the same activity consistently over time. This can be something linked to your religion or culture, but it can also be something fun that the family likes to do together like taking a hike together on the same Sunday, at the same place, year on year. You could make homemade gifts for each other on a special holiday celebration, or you can start a family movie night once a month. This can grow to be something everyone looks forward to and your kids remember later in life when they have kids of their own.

5. Embrace song

Music and song is a unique way to transport you directly into your culture's heritage. But let's face it is not always easy to find opportunities to sing and dance together. Especially when all your child wants to listen to is the new Taylor Swift album. But here is an idea: download traditional music onto your phone and play it in the car while on school runs and between extra-mural activities. Even with this music softly on in the background, your child will begin to associate these sounds with being with you. Which will, in time, help them connect to where they came from.

The bottom line

While it is so important to connect your child to their wider cultural context, the best place to start is by connecting them to their own. This can have a long-term lens where you focus on the past, or it can have a more immediate view by focusing on creating connections and rituals in the present. This is an important focus for families to feel connected to each other, their ancestors and the various places they call home. Happy Heritage Day everyone!

"Happy
Heritage Day
everyone!"

To All The Nursing Stars
Who Are Celebrating
Their Birthday between
August, September and
October





B

est wishes to all our great nurses who prioritize helping patients see brightness on dark days. Your optimistic approach to your work is worthy of emulation. Keep being the best and make sure you have a wonderful birthday.!"

THE NURSING STARS **MAGAZINE**

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