

Discovery Foundation  
2023

CRAFTING

HOPE

*Shaping the future of healthcare  
in South Africa*





Discovery Foundation | Crafting Hope  
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# ABOUT THE DISCOVERY FOUNDATION

*Set up in 2006, the Discovery Foundation is an independent trust that aims to distribute R300 million in grants to train and support 600 medical specialists and institutions by 2026.*

The Discovery Foundation Awards honour and reward excellence in our country's healthcare sector. Award recipients receive grants in the form of scholarships, bursaries, research fellowships, and support for teaching and research institutions.

By supporting the training of specialists for rural areas and the development of academic medicine and research centres, the Discovery Foundation hopes to increase the number of sub-specialists available to adequately meet the country's healthcare needs.

# Dr *Chair* OF THE DISCOVERY FOUNDATION VINCENT MAPHAI



*It was in 2004 when the Discovery Foundation was established and its impact in just under two decades is inspiring. Now more than ever we have witnessed the significance of participating actively in a society dedicated to positive change and empowerment. Through the moving stories in this book, you will learn about the more than 40*

*remarkable doctors and healthcare professionals from all corners of South Africa who have one common goal – to improve access to quality healthcare for all South Africans. These individuals are actively making decisions to ensure that people in the most remote part of the country, receive quality specialised care.*

These esteemed recipients of the 2022/2023 Discovery Foundation Awards embody the essence of our country – a nation brimming with hope and optimism for the future. In the face of many challenges, these inspirational figures have displayed unwavering commitment to finding solutions and eradicating preventable loss of life through timely access to healthcare. In the heart of the Limpopo region for example, Dr Martin Choshi based at Kgapane Hospital recognised the rural hospital's persistent inability to retain doctors. Many rural hospitals share the same plight; medical skills are concentrated in urban areas and medical specialists are leaving rural areas where they are most needed. Dr Choshi implemented strategic measures such as ensuring doctors had adequate accommodation and well-equipped call rooms in the hospital. These seemingly minor adjustments have collectively led to a positive experience for doctors and have resulted in Kgapane Hospital retaining more doctors and improving the quality of patient care.

To address the multifaceted challenges faced by doctors and public institutions, the Discovery Foundation is committed to bolstering academic medicine through research, development and the training of predominantly black medical specialists in South Africa. The Foundation has invested more R300 million over a period of 17 years, with more than 380 awards granted to predominantly black medical specialists in the public sector from 2006 to 2021.

I take great pride in the Foundation's tireless efforts to promote diverse representation among medical specialists in our country.

*We wish to highlight the surgeons being awarded this year, including Dr Silindokuhle Sibiya who is a Colorectal Surgeon pursuing her fellowship and PhD in perianal warts at the University of KwaZulu-Natal, and Dr Ntuthuko Ntanzi, a Gastroenterology surgeon, currently pursuing his fellowship training at Inkosi Albert Luthuli Hospital, also in KZN. The two are receiving financial support as recipients of the academic award. We aim to continue to support more black specialists in all regions of South Africa.*

The Discovery Foundation Awards recipients are expected to service the public sector for at least two years after completing their training. It is worth noting, though, that over 60 percent of our alumni continue working in the public sector even after their contractual requirement has lapsed. This demonstrates their personal passion for improving healthcare in our country.

Our country is blessed with amazing individuals doing extraordinary work. Let us draw inspiration from these accounts, celebrate the best in the country and make our own difference.

*Vincent Maphai*

# RUTH LEWIN

*Discovery's Head*  
OF CORPORATE SUSTAINABILITY

*Over the past three years, the world has grappled with the far-reaching effects of the global pandemic. One of the worst affected areas is the healthcare sector, which bears the brunt of both the health crisis and its profound financial repercussions on our country.*



The economic and psychological impacts have been hard to ignore, affecting the mental health of our professionals, pushing many South Africans deeper into poverty, and consequently hindering their access to basic healthcare services. Within the pages of this year's Discovery Foundation book, you will gain insight into some of South Africa's exceptional doctors and how they've navigated this new reality, maintaining unwavering positivity despite the pandemic's financial toll. These unique stories shed light on how healthcare professionals are using Discovery Foundation grants to further their studies and spearhead initiatives aimed at enhancing patient care.

After being declared partially blind as a baby, Dr Kyle Kleinhans is an exceptional individual who triumphed over adversity and has forged a path to becoming a specialist physician. Now based at Clairwood Hospital in KwaZulu-Natal, he identified gaps in the referral system and opted to use technology as a remedy. Dr Kleinhans conducted a profile on patients with COVID-19 from the period of January to November 2020, resulting in a more precise and comprehensive compilation of patient history.

Not only will the information gathered assist other research efforts, but Dr Kleinhans believes the impact of digitising the hospital will also go far beyond an advanced referral system, where doctors will be able to view clinical characteristics of a patient, check the success of previous interventions used, and thereby improve current patient care.

We are extremely proud of the Discovery Foundation alumni, many of whom are board members of the Academy of Science of South Africa, which honours and recognises the country's most outstanding and celebrated scholars, such as Professor Salome Maswime, clinician, obstetrician and gynaecologist and global surgery lead at the University of Cape Town.

The Discovery Foundation has significantly contributed towards improving the capacity of state health resources. Between 2006 and 2023, the Discovery Foundation invested over R307 million to support academic medicine through research, development and training, with over 380 grants awarded to predominantly black medical specialists in the public sector. Aiming to train and support 600 medical specialists and institutions by 2026, the Foundation has approved 545 awards to date, with 141 awarded to institutions towards training.

It goes without saying that the Discovery Foundation is committed to building on the vision of increasing the number of specialists in the country, ensuring that numbers feature a demographic that is representative of the country across race and gender. Therefore, a big focus for us is the feminisation of the specialist sector, and the awardees selected represent this aim. The Discovery Foundation will continue to recruit medical specialists in its programme.

Reading the stories of these healthcare professionals is a reminder of how the Discovery Foundation's work continues to make a difference in our society, and we hope you will be inspired and filled with hope for what South Africa is capable of.

Congratulations to our esteemed recipients.

*Ruth*

# CONTENTS 2023

DISCOVERY FOUNDATION

# ACADEMIC FELLOWSHIP

AWARD



*Academic Fellowship*  
AWARD 2022

Dr

KGOMOTSO MATHABE

MATHABE

*Dr Kgomotso Minah Mathabe is turning her patients' inability to visit hospitals for early-onset prostate cancer diagnosis, into groundbreaking research.*

In 2011, Dr Kgomotso Minah Mathabe became the first woman to qualify as a urologist from the University of Witwatersrand, and the second black woman urologist in South Africa.

The 2021/2022 Discovery Foundation Academic Fellowship Award recipient is currently the Head of Department of Urology at the University of Pretoria, she is practising at Steve Biko Academic Hospital, but looks after a number of hospitals in the region. She manages a spectrum of urology patients but has a special interest in prostate cancer. Her research topic for her PhD is 'Associating prostate cancer progression with perineural invasion and neurogenesis.'

"We found that we had a very high rate of this Perineural Invasion (PNI), of about 54%, and it's not very commonly given much credence internationally. If you look at material from the global north, they don't pay much attention to PNI and that's because of deeper pockets and fewer constraints when it comes to funding. They see people

with early onset of the disease," explains Dr Mathabe. The prostate is found right under the urinary bladder, close to the tail end of the spinal cord. The distance from the prostate to spinal cord is less than 30cm. If prostate cancer spreads and reaches the spinal cord and compresses it, it will cause paralysis, and patients will spend the rest of their lives being unable to walk or control their bowels and bladder.

"This bothered me greatly. I was like, okay, we've got a 54% rate of this Perineural Invasion. We've got patients that come and see us in such an advanced state of the disease, surely there's got to be things that we can learn about this, figure out, and try to prevent," says Dr Mathabe.



# Dr PHAKAMANI MTHETHWA

*Why is the data on children from rural KwaZulu-Natal with a rare drug-resistant cancer so different from the rest of the world? And what does this mean for their survival?*

Motivated by a profound realisation, Dr Phakamani Mthethwa refused to watch children passively succumb to drug-resistant osteosarcomas. He challenged the status quo, contemplating the bottlenecks that impede the survival of children with cancer.

"I felt compelled to transcend the boundaries of surgery and chemotherapy. I needed to think innovatively and identify the bottlenecks preventing our children from overcoming this cancer."

Although rare, the number of children affected by this cancer is significant, with approximately 40 to 50 cases annually in the area. This substantial volume of cases underscores the urgent need for tailored solutions. Moreover, existing treatment protocols rely heavily on international data, lacking specificity for their local population.

Dr Mthethwa was awarded the Discovery Foundation Academic Fellowship Award for 2021/2022 and was the first to say, "Hold on, this is not what you think. Here it is quite different. Everyone was taken aback and wanted to see who was behind this research." Dr Mthethwa firmly believes that developing drugs formulated from their data can effectively combat the drug-resistant cancers prevalent in the region. This groundbreaking research has the potential to save countless lives and pave the way for a more targeted approach to paediatric bone cancer treatment.

Academic Fellowship  
AWARD 2022



# DR BAWINILE HADEBE

*Nuclear medicine is an exciting and ever-evolving field as new imaging techniques and discoveries continue to shape how Dr Bawinile Hadebe helps patients.*

*Academic Fellowship*  
AWARD 2023



Nuclear medicine is an exciting and ever-evolving field as new imaging techniques and discoveries continue to shape how Dr Bawinile Hadebe helps patients.

It was at Marianhill St. Francis College, a Catholic school in KwaZulu-Natal, during a Science Expo project on rheumatoid arthritis where Dr Hadebe discovered her potential as a doctor. Following her calling, she pursued a medical degree at the University of Cape Town. Although the distance from home made her question her decision initially, the experience turned out to be a fruitful one.

After spending six years in Cape Town, she moved to Johannesburg, where she began a two-year internship at Charlotte Maxeke Johannesburg General Hospital. However, her experience rotating in the surgical disciplines during this period left her disinterested in specialising in that particular domain.

The internal medicine rotation though, allowed her to interact with colleagues in the imaging disciplines. Then, like a serendipitous encounter, she fell in love with Nuclear Medicine. "It was such a warm and friendly environment, the doctors were helpful and compassionate. I thought that is where I belong."

Instead of merely focusing on the structure of organs, Nuclear Medicine delved into their functions, such as assessing kidney health and detecting obstructions. Additionally, the field provided an avenue for targeted therapies, particularly in the realm of prostate cancer.

Dr Hadebe explains that, unlike traditional chemotherapy, Nuclear Medicine allows for personalised treatments by utilising various imaging modalities and advanced technologies. Dr Hadebe finds immense excitement in the ever-evolving nature of her field as new imaging techniques and discoveries continue to shape patient management. She believes that with the Discovery Foundation Academic Fellowship Award for 2022/23 she can contribute critical findings in the field.

# DR XOLANI MBONGOZI

*Dr Xolani Mbongozi is on a quest to save pregnant women and babies from preeclampsia, which has a higher death rate in rural areas.*

*Academic Fellowship*  
AWARD 2023



Right from the undergraduate level, Dr Xolani Mbongozi battled with finances, he decided not to tell his aunt he owed the university R16, 000. He was on his own. He could not get his results. Fortunately, he got a bursary after losing about a month of schooling in his second year.

"I never told my parents that I had not been admitted. It was tough. But it was by the grace of God that I was back at school," he says.

More than a decade has passed since those tough university days, and now Dr Mbongozi faces different challenges, especially in the under-resourced areas where he works.

"We see people coming from deep rural areas having to travel three hours to get medical attention. It is disheartening."

He explains that a patient could wait for three hours for an ambulance, then travel for another three hours while bleeding before they are seen by a doctor.

"Six hours have basically been wasted. The patient comes to die in your hands. That is heartbreaking in areas like ours."

Dr Mbongozi, who has been awarded the Discovery Foundation Academic Fellowship Award for 2022/23 year, argues that bringing healthcare closer to the people and ensuring a seamless referral system would strengthen the healthcare system. However, even amid the challenges, Dr Mbongozi lauds his colleagues for working hard and doing their best under, at times, difficult circumstances.



*Academic fellowship*  
AWARD 2022

# Dr STUART MORE

*Dr More's PET/CT tracer has the potential to help diagnose and treat patients with tuberculosis (TB) and cancer.*

A clinical medical physician based at the University of Cape Town, Dr Stuart More is using TB as a model for his research into the management of diseases utilising molecular imaging with PET/CT scans. "Tuberculosis is one condition that I think we're still trying to find answers to, not only in South Africa but globally as well," he says. Although he is based in Cape Town, Dr More is pursuing his Specialisation in Nuclear Medicine through the University of Pretoria in Gauteng.

As the 2021/2022 Discovery Foundation Academic Fellowship Award recipient, Dr More has been able to use the grant to pursue his research. It will assist with diagnosis, response assessments, and to see if patients are getting better from the medicine. The research will also assist in tailoring medicine for patients as well as identifying those who might not show symptoms of TB but harbour the disease, so patients will not spread it unknowingly.

Dr More believes South Africa needs more clinician scientists to help the nation find its own solutions to healthcare problems. He says, "We'll be able to look at answers to clinical questions that will drive clinical care that's specific to us rather than other parts of the world."

# Dr LINDOKUHLE ANDHLE SIBIYA

*Academic Fellowship*  
AWARD 2023

*Why are children in South Africa suffering from preventable and treatable hearing loss? Dr Sibiyia is determined to see where exactly we're getting it wrong and how to change it.*





Chief Specialist and Head of Department of Otorhinolaryngology and Head and Neck at the University of KwaZulu-Natal (UKZN) as well as an ENT surgeon from Durban, Dr Lindokuhle Andile Sibiya, grew up in the township of Claremont until 1994 when her family relocated to the suburbs of Westville after the Apartheid Group Areas Act law was abolished.

Growing up, Dr Sibiya always had varied interests and felt lucky enough to be raised in a family that supported those interests. Her parents instilled in her a great confidence, she never questioned whether or not she would become successful, it was always about the journey to success. After high school she studied homeopathy for a year before going into clinical medicine. At the time she had not yet mapped out her career path, all she knew was that she wanted to use her hands and her talents to make a difference.

It was one of her lecturers who gave her insight into the possible frustrations she might face in homeopathy compared with traditional medicine. She followed the lecturer's advice and enrolled for medicine at the University of Cape Town (UCT). When it was time to choose a specialty she used her own wisdom and gut instincts.

"We were out in a rural community doing an outreach programme with a long queue of people in a community hall. I was doing the most basic thing of cleaning and examining ears. And I just had this moment of clarity," says Dr Sibiya. It was as if an inner knowing overcame her, experiencing the varied emotions of the people she met that day moved her. From the anxiety of the unknown to the elation of suddenly being able to hear better struck a chord in Dr Sibiya. From that moment, she began exploring what that discipline was and what it meant. At the end of that year she spent four weeks in Amsterdam doing her elective in otorhinolaryngology.

## HEARING AND HEEDING THE CALL TO DUTY

Dr Sibiya describes the otorhinolaryngology field, more commonly referred to as the ear, nose and throat and head and neck specialty, as a fascinating way to connect with others. "All the work that I do somehow connects with another discipline. And there's such beauty in that. So, if I'm working on the ear, I have to work with an audiologist and a speech therapists. If there's a growth in the ear or a tumour in the ear, we often work with neurosurgeons. If there is a problem on your tongue, your tongue is speech, your communication, but it's also feeding, swallowing and breathing," she says.

The 2022/2023 Discovery Foundation Academic Fellowship Award recipient also mentions that if there was ever a discipline, that should be the poster child for interdisciplinary communication and work, the ear, nose and throat, and head and neck discipline would be it. Doctors are constantly connecting all of these things in taking care of a patient.

Her area of interest is improving specialised access to care within her discipline. Dr Sibiya's probe into the topic began when she joined Ngwelezane Hospital, a rural hospital in KZN.

The hospital was not performing any ear surgeries at the time, and she proposed that the hospital create a waiting list. Within six months the hospital had over 100 patients on the waiting list. She had clearly identified a need for care, but there was still a barrier. "My PhD sits within the space of hearing health and paediatric hearing health. I found that even when children were brought in by their parents quite early to say, 'I'm worried my child can't really hear', a file would land on my desk and it would be a nine-year old, who's been in the system for six years. Somehow a mom reported when the child was three years old that 'I'm worried about my child,' but it's taken six years to get to an ENT surgeon," she says.

Dr Sibiya's PhD focuses on optimising outcomes for children with hearing loss, how to achieve early diagnosis, and early intervention through referrals and assessments of patients. She has observed that even when some patients visit a hospital in time, the current system is failing. Dr Sibiya is excited at the possibilities for her department as well as other specialisations, that will benefit from identifying where referral pathways and systems can ensure patients receive early care.



"In South Africa, it's estimated that 70% to 80% of hearing loss in children is either preventable or treatable."



“In South Africa, it’s estimated that 70% to 80% of hearing loss in children is either preventable or treatable. And that’s profound. If you look at sensory disorders in children, hearing loss is more common than blindness,” says Dr Sibiyi. She goes on to say that children who are born deaf or children who have early hearing loss have about a 50% higher dropout rate in school, and the occurrence of anxiety and depression is three times higher among those with a hearing loss.

The knock-on impact on society and individuals is also something to consider. Someone who dropped out of school is less likely to participate in the economy and a parent of a person with a disability might have to be at home full time. That person is also no longer able to contribute fully to their own growth, development and economic participation. These statistics present a clear case for why improving ear, nose and throat specialised care for children is paramount.





Dr  
ROLAND  
VAN  
RENSBURG

Academic fellowship  
AWARD 2023

**SYNERGISTIC COLLABORATIONS IN CLINICAL PHARMACOLOGY**

*Exploring the complexities of the dolutegravir and metformin combination in patients living with HIV, Dr Roland van Rensburg unravels the implications for 1.2 million people in South Africa.*

Even as a young child, Dr Roland van Rensburg wanted to invent things. Engineering was his first option. But he came across pharmaceutical inventions and began realising the impact medicine development could have not just on the individual level but also on a massive population.

He went into medicine with the aim of practising pharmacology, which allowed him to make individual differences in patients and on a much larger scale.

"I love the lab aspects, the analytical aspects, but what really gets me going is sitting in front of the patient and having a conversation with them about finding out what really matters to them," says Dr van Rensburg.

While doing his community service, Dr van Rensburg started his research project and took up a diploma in HIV management and that helped set the pace for the rest of his career.

"I saw the massive burden HIV has on our people, my people. I realised that, as South Africans, we must come together and find those questions and address them in a meaningful way for us."

For a long time, many high-income countries conducted research on lower and middle-income populations, the benefits were born by the higher-income countries. Now the study is for the people, by the people and he takes this in his stride.

## FROM THEORY TO ACTION

Arguably one of the newest specialities in South Africa, clinical pharmacology has only been around for less than two decades. It is still fighting for its place in medicine in the country. But passion-driven doctors like Dr van Rensburg, who believe in collaboration across all sectors to take medicine forward, are making inroads.

“Clinical pharmacology is not theoretical. It’s not us sitting around the table discussing mechanisms of action and receptor binding. It is the patient sitting in front of you in the clinic. How you utilise your pharmacology knowledge to clinically make a difference and rational drug selection is a big thing to focus on. How can I get the optimal rational selection of all the options available for the specific patient?” asks Dr van Rensburg.

Dr van Rensburg has vast exposure to internal medicine, psychiatry, paediatrics ICU, and oncology – all under the clinical pharmacology specialisation he took on a project on HIV-related adverse effects.

He recounts that in 2017, there was an increase in reports about a strange and rare side effect of one of the main antiretroviral (ARV) medicines. People would become delirious and start shaking uncontrollably. The hypothesis at that stage was that the concentrations of the medicine in people’s bodies were well beyond what they should be.

Dr van Rensburg focused on the underlying genetics of people with the syndrome. He found that all had defective enzymes responsible for breaking down the antiretroviral medicine.

This game-changing research in the HIV community not only identified what happens to patients on the specific ARV medicine, but also saw them recovering once they changed over to another ARV.

He says, “The gratitude of the families when they got answers to what was causing the family members to go completely delirious was amazing to see.”

The research was published in the *Clinical Infectious Diseases* journal, which then saw Dr van Rensburg recognised with several accolades between 2021 and 2022, including at the All Africa Congress of Pharmacology and the Annual South African Society for Basic and Clinical Pharmacology Congress.



### THERE IS HUGE INTEREST IN THIS TYPE OF RESEARCH

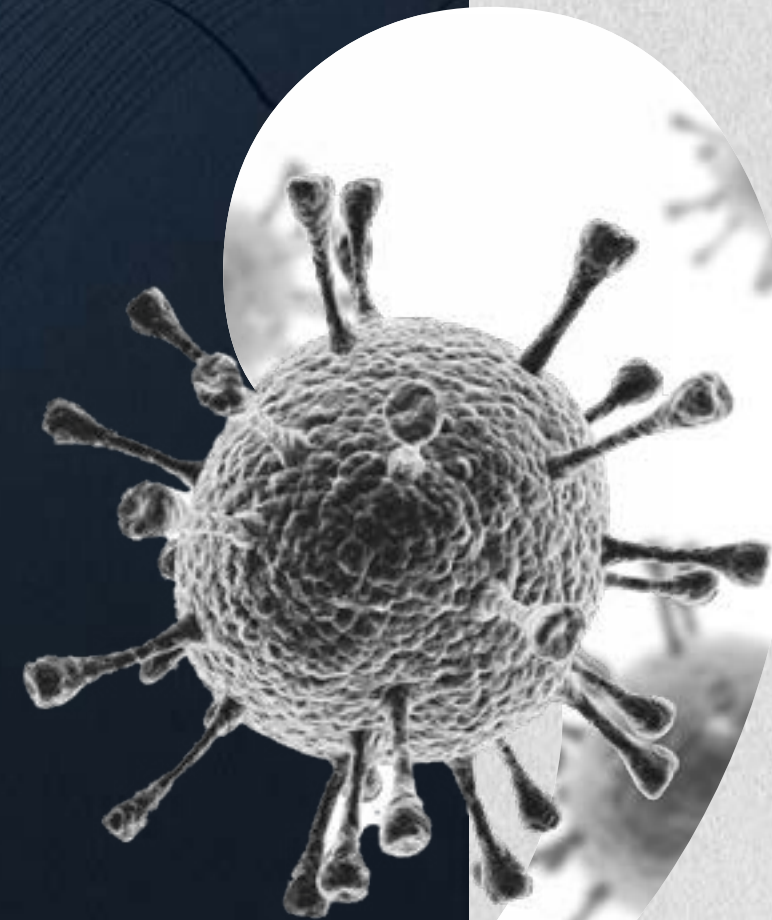
Clinical pharmacology has excellent working relationships with most other disciplines, creating a synergistic collaboration where one plus one can equal three. It collaborates with many other disciplines, from psychiatry to oncology. As part of Stellenbosch University's Clinical Pharmacology division, Dr van Rensburg is currently involved in clinical trials of infectious diseases.

"We can get so much more done together than with division. And this is probably best shown in the HIV research, where South Africa has been leading."

Since the advent of highly effective antiretroviral therapy (ART), we've significantly reduced communicable diseases. However, non-communicable conditions have increased in patients living with HIV. His current research focuses on why this happens to people taking their ARVs and with suppressed viral loads.

The second part of his research, partly funded by the Discovery Foundations Academic Fellowship for 2022/23, focuses on how one of South Africa's first-line ARTs, dolutegravir, changes the exposure in the body when the patient takes a common medicine to treat diabetes, called Metformin. Dr van Rensburg is determining the magnitude of the interaction between these two medicines in people with HIV in South Africa. He estimates that about 1.2 million South Africans will be taking these two drugs together. And yet, we still don't know the magnitude of that interaction.

Sitting with his patients one cold and rainy evening, it dawned on him after a 12-hour pharmacokinetic study that his patients, whom he has walked a long road with, were why he pursued this passion in medicine. "I know their children's stories. I know their family stories. I know what they fear about this study, and I've had the opportunity to address that, alleviate those fears, and give them information that will empower them going forward," says Dr van Rensburg.



"We can get so much more done together than with division. And this is probably best shown in the HIV research, where South Africa has been leading."

# DISCOVERY FOUNDATION SUB- SPECIALIST

# AWARD

*Sub-specialist*  
AWARD 2022

# DR KITSO-LESEDI MRUBATA

## BRIDGING THE GAP IN PAEDIATRIC PULMONOLOGY

*Aiming for equitable healthcare resources for all, regardless of economic circumstances. Dr Kitso-Lesedi Mrubata navigates through the lack of resources to give her young patients world-class treatment.*

Aiming for equitable healthcare resources for all, regardless of economic circumstances. Dr Kitso-Lesedi Mrubata navigates through the lack of resources to give her young patients world-class treatment.

"I don't want to have to compromise care based on resources. I want to be able to offer patients, regardless of their economic circumstances, the care they deserve and need, especially children."

Dr Kitso-Lesedi Mrubata's specialisation is pulmonology in paediatrics, but there are challenges in the sector that make her job difficult at times. The biggest challenge is when she feels she can't offer patients the world-class treatment they have been trained to provide, Sub-Specialist training because of a lack of resources. She recalls how the hospital ran out of Salbutamol drug in one recent case with a young patient suffering from a status asthmaticus (severe asthma).

"The pharmacist and the hospital tried, but they just didn't have enough."

Begging the question, how quickly could they have stabilised the patient if they had the drug in the required quantities?

The reality is that there aren't enough ICU beds, and this requires Dr Mrubata and her colleagues to find other means of keeping the patients alive, even if those means are not ideal.

Dr Mrubata, who was awarded the Discovery Foundation Sub-Specialist Award in 2021/22, envisions a healthcare sector where a patient can seamlessly move from the private sector to the public and be able to find the same or similar level of resources.

# DR HALEEMA ADDAE

## IT'S ABOUT PERSPECTIVE

*There is a lot more than simply being cancer-free, and Dr Haleema Addae is finding out what happens to women after surviving cervical cancer.*

*Sub-specialist*  
AWARD 2022

Sexual health after surviving cervical cancer is not discussed enough in the public health sector. Both cervical and vulval cancer are cancers that affect young women. Locally-advanced cancer is treated with radiation that can have some long-term side effects. These often affect young women's psychosexual health. This area needs more exploration and Dr Haleema Addae wants that to change one patient at a time. Currently based in Cape Town, Dr Addae believes that there is a lot more than simply being cancer-free. The women need guidance on how to have that life.





"Currently, Dr Addae is doing her PhD focusing on cervical cancer and what happens to women after surviving cancer. She lauds the Discovery Foundation Grant for Sub-Specialist training 2022/2023 for allowing her to play a role in changing women's lives."

Having grown up in the Eastern Cape's Butterworth and Mafikeng in the North West and then Johannesburg, her life's journey has always been geared towards a relentless pursuit of growth in medicine.

Currently, Dr Addae is doing her PhD focusing on cervical cancer and what happens to women after surviving cancer. She lauds the Discovery Foundation Grant for Sub-Specialist training 2022/2023 for allowing her to play a role in changing women's lives.

She believes that there is a lot more than simply being cancer free. The women need guidance on how to have that life.

Dr Addae has always been pragmatic in her engagement with the public sector, understanding that there are fewer resources, yet more people for which the sector has to provide.

After completing her undergraduate training at the University of Cape Town, she worked as an intern at Baragwanath Hospital, where she was stretched and learned how to be resourceful.

Her resilience, she recounts, was sparked by a trip to Tanzania in her fifth year of medicine. The difficult conditions under which patient care was being provided in the university hospital in Dar es Salaam gave her the much-needed perspective.

"It is sad that although South Africa has had a national screening programme for cervical cancer in place for more than 20 years, there are still patients presenting with advanced cancer and who have never had a pap smear. This is yet another illustration of how far we have to go as a nation. There still needs to be more energy and emphasis put into preventative measures."

"Even though our circumstances aren't perfect, they could be much worse."

After her internship, she went on to do her community service and medical officer training in Peddie and East London in the Eastern Cape.

Her area of interest is in cervical cancer specifically.

Since high school, Dr Addae has wanted to be a gynaecologist so going to specialise was just the next step. She then went back to UCT to do her specialisation training.

She has seen so much gratitude from the patients. It's the small things for Dr Addae, "I enjoy the job because every day patients make it worth it. They say thank you. And you can see genuine gratitude."

"I hope that we can work towards dramatically reducing the number of patients suffering from diseases that can be prevented. And for those who unfortunately do get cancer, I hope there will be enough qualified sub-specialists that can help them in a timely manner."





# Dr **RAEESA** **MAHOMED**

*South Africa only has 40 to 50 paediatric cardiologists, and Dr Raeesa Mahomed is determined to be one of them.*

"South Africa has between 40 and 50 paediatric cardiologists, and I will be one of this small group, which means that when I've done my training, there's one more centre in the country, that will have someone with my skills, to identify and treat these patients," says 32 year old Dr Raeesa Mahomed.

*Sub-specialist*  
AWARD 2023





**D**r Mahomed is a second-year fellow in paediatric cardiology at Chris Hani Baragwanath Hospital in Soweto, Johannesburg. The young doctor speaks enthusiastically about the importance of increasing the number of specialists in hospitals around the country, a one-of-a-kind initiative being spearheaded by the Discovery Foundation. Dr Mahomed is one of more than 40 doctors receiving a 2022/2023 Discovery Foundation Award. She is a recipient of the Discovery Foundation Sub-Specialist Award.

Chris Hani Baragwanath Hospital, the largest hospital in Africa and third-largest hospital in the world, is a teaching hospital for the University of the Witwatersrand Medical School, along with Charlotte Maxeke Johannesburg Academic Hospital, Helen Joseph Hospital and the Rahima Moosa Mother and Child Hospital in the Gauteng region. "It's a huge institution, and it covers a vast majority of patients," says Dr Mahomed. "We're so lucky to have such a huge Training Center in South Africa, where people from all over the world come to train. And that's just because we actually have the knowledge, and our professors have the skills to teach us," adds the paediatric cardiologist.

### DESTINY AND THE STRUGGLE FOR FUNDING

More than 30 years before Dr Mahomed made Chris Hani Baragwanath Hospital her second home, her parents' love story began in the same corridors she walks today. Her dad was a doctor and inspired her and her oldest sister to become doctors as well. "I always enjoyed seeing my dad interact with patients. We actually used to use one of our rooms in the home as his surgery when I was very young. So we used to see patients come in at all hours of the day and I would often go sit with my dad in his surgery as well," says Dr Mahomed.

After the initial seed of becoming a doctor was planted, Dr Mahomed enrolled at the University of Witwatersrand to study medicine. "When we did second-year medicine, we did the anatomy, and when I saw the actual heart, the beauty of it, the amazing secrets inside; it's so intricate, and it's so amazing. I knew I needed to do something with the heart," says Dr Mahomed.

She knew she wanted to pursue cardiology from the time she was in training for paediatrics but she faced the crushing reality of not having funding. A familiar plight for doctors all over South Africa, very few have the luxury of training to become specialists full-time without receiving an income or training part-time, a massive challenge, especially for a paediatric cardiologist fellow like Dr Mahomed. "I tried getting funding because it's my passion, something I knew I wanted to do. I didn't compromise and go into another specialty or just work in private," says the young doctor from Johannesburg.

"So I started my training without funding, just so that I could start my training. I just kept reapplying, and then I was lucky enough this year to be awarded the Discovery funding," adds Dr Mahomed enthusiastically.

### CREATING A BUBBLE OF POSITIVITY

Dr Mahomed lives by a principle of "never falling short of your best". Changing the world seems like such an ideal goal and yet when we all do our best, that energy will replicate itself and ultimately spread. "If you can make a bubble of positivity with yourself and your close colleagues, and push it into your department you'll function to your best"

# Dr WENDY MAIMELA

*Sub-specialist*  
AWARD 2023



## PEEKING INTO LITTLE HEARTS

*The profound impact of patient and parent interactions on health outcomes.*

Dr Wendy Maimela is the first to be awarded the Discovery Foundation Sub-specialist award in the field of cardiology at Chris Hani Baragwanath Hospital. She will use the grant to better understand the world of masses in the hearts of little children.

Going back a decade, Dr Maimela will identify the causes, associations and the complications of masses in children's hearts who were seen at the paediatric cardiology unit at Chris Hani Baragwanath Hospital in Soweto. She mentions that some of her biggest breakthroughs and surreal moments come from her interactions with her little patients and their caregivers.

"You assume that you are simply performing your duties and yet these parents look to you with so much gratitude and awe for helping their child. Sometimes it feels so surreal," says Dr Maimela, speaking fondly of her interactions with the caregivers of her patients.

"It's not all about having treated a particular condition. Sometimes it is as basic as lending an ear," she says. Working in the public sector has always been quite a humbling and challenging experience for Dr Maimela, especially as an under-resourced environment, from staff to equipment.

# Dr SILINDOKUHLÉ SIBIYA

*Dr Sibiya believes in compassionate patient care and transforming lives through surgery.*

*Sub-specialist*  
AWARD 2023



A passionate and dedicated surgeon, Dr Silindokuhle Sibiya traces her love for medicine to her grandmother's compassionate nature. Growing up in Pietermaritzburg, she witnessed her grandmother's tireless efforts to support others in her community, inspiring Dr Sibiya to follow in her footsteps.

"My grandmother even drove taxis for staff as a side hustle before we knew there were side hustles. If you are raised by someone so strong, you feel like you have to be something too."

Dr Sibiya's close relationship with her father, coupled with her grandmother's relentless pursuit of education and independence as a young widow, instilled a deep sense of determination in her. Her mother, a teacher, turned chartered accountant, further reinforced the belief that women could conquer any field or space they chose.

She attended the University of KwaZulu-Natal's Nelson R. Mandela School of Medicine, before moving to Mbalenhle Clinic for in-service training. In 2014, Dr Sibiya joined general surgery and then became a registrar. Currently, she is at Dr Pixley Ka Isaka Seme Memorial Hospital as a consultant in general surgery and is pursuing her fellowship.

"It was during my internship at Prince Mshiyeni Hospital that I fell in love with surgery. I didn't want to go to uMlazi because there was too much trauma. But I joined general surgery, and I met Dr Babongile Zulu. She became my mentor. She was quite a disciplined lady who wanted people to be at work on time and treat people with care," explains Dr Sibiya.

It was Dr Zulu who sparked her love for surgery, reminding Dr Sibiyi of her purpose of making a meaningful difference in people's lives. Dr Sibiyi's dedication to her patients is unwavering; often engaging with them personally, with some patients even sharing photos of their wounds.

Recently, she was part of a transformative 12-hour plastic surgery session that offered a patient a chance at recovery. She says, "The fact that we are making those strides in the public sector and giving patients a chance like we would in the private sector, I want to be a part of that, a part of giving people the best care."

She also recounts how recently another patient no longer wanted surgery, complaining that her gynaecologist had been treating her for about a year.

Dr Sibiyi wanted to tell her to go home if she didn't want the surgery. But something inside her said she couldn't give up on the patient. The patient underwent the operation and she pulled through.

"I saw her recently, and she was so happy and motivated. She brought me ujeqe nobhontshisi (steamed bread with sugar beans) in Rama margarine containers. That meant so much to me," says Dr Sibiyi, warmly.

These moments help us to make it through the challenges. "You want to do more, but you can't. You want to do an investigation, but you can't. You want to order something for a patient, but it takes too long or is unavailable. This creates frustration for the patient as well."





### THE WARTS SPECIALIST

However, she lauds her colleagues across the province who will try to make a plan. Besides the resource constraints, Dr Sibiya advocates for patient respect and education. She believes that instilling these in healthcare will go a long way.

Dr Sibiya says, "You would be so shocked that a cancer patient doesn't know they have cancer. We need to treat patients as individuals and give them their dignity. Tell them what is wrong with them in a language they understand."

This treatment will encourage patients to be more involved in their healthcare to ensure we have a healthy population. "Our patients present late at end-state disease. We need to change that through education, empathy and communication."

Currently pursuing her fellowship in Colorectal Surgery with a PhD interest in peri anal warts, Dr Sibiya aims to destigmatise the condition and raise awareness among patients and healthcare professionals. This, she says, has been made possible by the Discovery Foundation Sub-Specialist Award for 2022/23. She explains that women can have pap smears to pick up cervical cancer. She is investigating how similar tests can be created for and conducted for men.

"I also want to see how we can destigmatise warts because there is the stigma among males that if you have warts, it's because you are homosexual. This is not true. I want to start at the part where we can prevent this at a primary healthcare level." adding that she wants to do all this in two years and become a "warts specialist".

Dr Sibiya is passionate about her work and laughs at her nickname, Dr Warts.

"My colleagues tease me. They sometimes say they will call me for a patient who has been shot through the wart."



**Dr** THUTHUKA  
NTUTHUKO COSMOS  
**NTANZI**

*Sub-specialist*  
AWARD 2023

*Providing surgical gastroenterology subspecialty care to the people of KwaZulu-Natal.*

**D**r Ntuthuko Thuthuko Cosmos Ntanzi was born at the exact hospital he now works in, King Edward Hospital, in Durban, KwaZulu-Natal (KZN). Similarly to most black children born in the 1980s, Dr Ntanzi was raised by his maternal grandparents in Lovu, south of Durban, up until he relocated to Umlazi where his father raised him. After completing high school, he applied to university and was accepted at both the University of Cape Town (UCT) to study law, and Wits University to study medicine. Faced with the daunting life-changing decision, he chose medicine, a decision he is now very proud of.

“As a medical doctor, we make an impact in people’s lives every day, and it’s a very fulfilling career. It’s very rewarding when you see patients do better, and you see the outcomes of your medical interventions,” says the 39-year old doctor.



## AN EXCITING FUTURE AHEAD

Dr Ntanzu is a general surgeon and one of the remarkable doctors chosen to be a Discovery Foundation Sub-Specialist Award recipient for 2022/2023.

He has been at King Edward Hospital for five years and is thrilled to be moving to Inkosi Albert Luthuli Hospital to commence his fellowship training in gastroenterology and surgical gastroenterology. As a general surgeon, he has seen the growing need for sub-specialists in this field. Currently the increased demand creates a lot of delays for patients in both the public and private sector. "I've always had an interest in sub-specialising and training, and upskilling myself as a general surgeon, becoming a better surgeon and refining my surgical skills," he says. Dr Ntanzu's primary goal is to gain experience so that he can not only further refine his skills but provide a better service to the people of KZN.

"Gastroenterology has to do with diseases of the Gastrointestinal Tract (GIT). Usually we divide it into upper GIT and lower GIT which include your oesophagus, stomach, pancreas, your liver, and small bowel, and then from the colon all the way down, that's your lower GIT," he says.

Dr Ntanzu is excited at the opportunity to move into his new training position at Inkosi Albert Luthuli Hospital and start his sub-specialisation in surgical gastroenterology. "There's a lot of interest amongst general surgeons to sub-specialise into Hepatobiliary (HPB) and upper GI, but I think the opportunities for training are just not there. This is why I am grateful for the opportunity that Discovery has given me to sub-specialise, because without this opportunity, it becomes very difficult to leave a general surgery post and go train into a sub-specialty," he says. In South Africa, all training for doctors is state driven and a majority of doctors are unable to self-fund in order to pursue sub-specialties. Dr Ntanzu adds that there aren't enough people in surgical gastroenterology to serve the population that we currently have in the KZN region.





## CENTRALISED HEALTHCARE SERVICES

South African medical schools are producing a large number of doctors annually. The challenge lies in retaining doctors, particularly in rural areas. Which is why the Discovery Foundation Awards are so significant, as they create opportunities and support doctors in rural areas, to provide better quality healthcare. When asked about the number of black surgeons in South Africa, Dr Ntanzi says, "The registrar training numbers have declined from the time when I started as a registrar, we used to have quite a lot of registrars in training."

"But if you compare the number of black registrars compared to other races, there's definitely more black registrars in our region," adds Dr Ntanzi. He says there's a high interest in doctors to become general surgeons.

Studies have shown that medical skills are concentrated in urban areas and medical specialists are leaving rural areas where they are most needed.

With that in mind, Dr Ntanzi still believes there is a way for people in rural areas to access quality healthcare and sub-specialist services. "I do believe there are tertiary hospitals that are centred in rural areas that provide specialty services and I also believe in centralised services for sub-specialty care," he says.

"If patients are coming from a rural setting, if they are referred appropriately and timeously, then they can make it in time to central referral areas where they can access sub-specialty care in these central areas without any delays," says Dr Ntanzi

# HEALTHCARE FOR RURAL AND UNDERSERVED AREAS

Individual Awards  
Institutional Awards  
Distinguished Visitor Awards

# DR SISANDA SIQITHI

*Dr Sisanda Siqithi shares her findings on the association of antiretroviral treatment (ART) on birth outcomes, focusing on low birthweight and prematurity.*

*Rural Individual*  
AWARD 2022



**W**hen Dr Sisanda Siqithi was a young girl, she wanted to be a fashion designer, a creative at heart, she spent hours creating sketches of designs. When she told her father about her dream, he told her, “You’re going to study medicine at Walter Sisulu University and you’re going to work at that ‘Mandela’ hospital.” At the time, Nelson Mandela Academic Hospital was still being built in Mthatha, Eastern Cape. With that one stern sentence Dr Siqithi’s fate was sealed. The start of her career may have been decided for her but Dr Siqithi insists that it is her love for paediatrics that has kept her going.

As a student Dr Siqithi’s passion for paediatrics grew, with the encouragement from the late Professor Zandisile Michael Nazo, Dr Siqithi enrolled for a four year programme to become a Paediatric registrar. Dr Siqithi is a 2021/2022 recipient of a Discovery Foundation Healthcare for rural and underserved areas - Individual Award. The Foundation granted her funding to support her research into the association of antiretroviral (ARV) drugs on neonates in the Eastern Cape. “When the mothers have taken ARVs during pregnancy, will there be an effect on the babies? So we were looking at their weight, are they going to be at low birth-weight or are they going to be premature?”

“We realised that there isn’t much that the ARVs are doing, it was the viral loads. We realised that high viral loads in the mothers resulted in small babies, as well as premature babies,” adds Dr Siqithi. The research marked the importance of making sure mothers are virally suppressed so that they can give birth to babies who are not too small for their gestational age. The research was conducted from the Department of Health’s database of mother and child pairs in the region.

## GROUNDBREAKING NEONATAL RESEARCH

Dr Siqithi believes her research will not only be impactful to mothers who are HIV-positive, but it will affect the state of healthcare nationally. She stresses how it is in our best interest to ensure that ARVs are administered correctly and viral loads are monitored, so that mothers don’t give birth to premature and low-birth babies. “If they are too small or stay in the hospital for too long, the cost of care becomes expensive to manage. So if the mothers are taken care of, everyone will benefit from the improved quality of care.” says Dr Siqithi.

“They should monitor the mothers so that they have a low viral load and a high CD4 count, such that they give birth to normal babies,” she adds.

Dr Siqithi also believes doctors should be proactive when dealing with mothers who are HIV-positive. She advises the Prevention of Mother-to-Child Transmissions (PMTCT) policymakers to provide medicine in order to prevent mother-to-child transmission, or enhance their existing programmes to decrease the number of babies born with HIV.

"Financially, I had a knock, and I think the Discovery Foundation really helped me as a single mom," Dr Siqithi.

While working on her research, she learned a lot about time management, "I'm in a clinical space and patients need to be seen, and I still need to continue working and push myself," she says. The financial burden was another challenge, one she finds hard to talk about. Dr Siqithi says she knows that people often think doctors are financially secure, but that isn't always the case.

This project was Dr Siqithi's first big project, she was scared and nervous about her inability to answer her own research question. With the support of her supervisor Dr Vincent Adeniyi, she overcame her imposter syndrome and surprised herself with what she was capable of. "I didn't know how to start, and my supervisor helped me," she says. Dr Siqithi now describes the journey as a 'learning curve' and less of a challenge, and admits she learned a lot about herself as well. Looking back, this has been a career highlight. She is proud of herself for presenting her research at a national conference in Johannesburg in March 2023.





# Dr JAYAKRISHNAN RADHAKRISHNAN

*Dr Jayakrishnan Radhakrishnan explores the management of chest trauma in patients from rural hospitals.*

*Rural Individual*  
AWARD 2022

South Africa has high incidences of interpersonal violence which is defined as the intentional use of physical force or power against another individual, by an individual or a small group of individuals. Due to its high prevalence, chest trauma is frequently encountered in South Africa. As a general surgeon, Dr Jayakrishnan Radhakrishnan often sees patients with injuries from violent crimes. Rather than focusing on what he cannot control, he focuses his attention on researching the management of these cases in a rural hospital.



"I hope that my study will shed light on the incidence of chest trauma in our region, the value of investigative modalities deployed, pitfalls in the management, and ways of addressing the same."

Currently, the Department Head of General Surgery at Cecilia Makiwane Hospital, Dr Radhakrishnan is the recipient of the Discovery Foundation Healthcare for rural and underserved areas - Individual Award for 2021 / 2022. He is also a senior lecturer for the Department of Surgery at Walter Sisulu University, both institutions in East London, in the Eastern Cape.

He is seeking interventions for ways in which patients can receive the best care after being referred to Cecilia Makiwane Hospital from nearby district hospitals. "I hope that my study will shed light on the incidence of chest trauma in our region, the value of investigative modalities deployed, pitfalls in the management, and ways of addressing the same," says Dr Radhakrishnan.

"It would help us develop guidelines for cost-effective early detection and management of interventions to be developed for our circumstances. This undertaking wouldn't have been possible without the support received from Discovery," adds Dr Radhakrishnan.

Working in environments filled with trauma and encountering patients in high-stress situations, Dr Radhakrishnan observed the lack of knowledge and doctors battling to deliver services due to this. He soon rendered the Primary Trauma Care course to guide doctors on working with trauma patients. "I also hope to make some conclusions on the use of CT scans in evaluating penetrating and blunt trauma to the chest which is important against the background of limited resources," says Dr Radhakrishnan.



He hopes the funding will help him in analysing how the hospital communicates, the way in which management operates and areas of improvement. Dr Radhakrishnan firmly believes in collaborating with other organisations and community members, to offer medical care to disadvantaged communities in the Eastern Cape region. "We have associated with an NGO that is offering surgery for breast cancer patients in our institution. It is called Project Flamingo under the leadership of Dr L Roodt, a surgeon from the Western Cape. It provides funding gathered through the public for running an extra theatre every month, which helps us to offer surgery for an extra five patients on average," he says. "Similarly an association between the Eastern Cape Department of Health and the Primary Trauma Care Foundation, based in the United Kingdom, has helped me offer the trauma course for many doctors from the Eastern Cape," adds Dr Radhakrishnan.

He remains enthusiastic about the future of this country, and the funding received from the Discovery Foundation for the support and training of doctors further fuels his vision for the future. "I also hope that there will be more collaboration between public and private entities in the corporate medical sector to provide and improve medical intervention for the needy," explains Dr Radhakrishnan.





Everyone who enjoys success encounters challenges. And while people in the medical field encounter different sets of challenges, they also get to physically see the benefits of their hard work. Dr Radhakrishnan credits his passion for delivering services in a challenging environment, as well as his love for general surgery for keeping him motivated. "My family supports me in all that I do, and it wouldn't have been possible if my family wasn't strongly behind me. They also faced challenges from the nature of work that I had to do," says Dr Radhakrishnan.

# DR KESIA MATEE



## FIGHTING FOR LITTLE LIVERS

*Liver failure has been linked to metabolic liver disease, immune system dysregulation, and infections. Dr Kesia Matee focuses on children with liver disease.*

Dr Kesia Matee describes herself as a village girl from Mount Fletcher, who attended a Catholic school. One of seven children, and with both parents as teachers, she thought she would gravitate towards that vocation.

However, as a child, her bouts with healthcare facilities steered her towards medicine. Dr Matee had allergies and was forever in doctor's rooms. While sitting in waiting rooms, she marvelled at the doctors, how they dressed, their knowledge, and how they treated her. In retrospect, she realised that her first visit to a paediatrician solidified her choice between medicine and teaching.

She works in the paediatric department as a final-year registrar at Frere and Cecilia Makiwane hospitals.

"I love kids. I try daily to work towards their wellbeing, growth and development. I want to have a positive impact on how our future leaders are going to be. They are the leaders of tomorrow," says Dr Matee.

Her current research, made possible by the Discovery Foundation Rural Individual Award 2021/2022, attests to this.

She focuses on children with liver disease or Paediatric Acute Liver Failure (PALF) over five years. The condition can attack once healthy children, and cause their health to deteriorate rapidly. Though this sector lacks knowledge, liver failure has been linked to metabolic liver disease, immune system dysregulation, drugs or medicine, and infections.

*Rural Individual*  
AWARD 2022

*Rural Individual*  
AWARD 2022



Dr

MAMPHO JUNHLA

MOCHAOA

**BREAKING STEREOTYPES IN A MISSION  
TO ERADICATE MALNUTRITION**

*Overcoming resource limitations  
to improve healthcare outcomes in  
deep rural South Africa.*

It is a country-wide failure that babies are still dying of severe acute malnutrition.

Amid many other health challenges facing the community of Okhahlamba subdistrict in the area, Dr Mampho Mochaoa, who works at the Emmaus Hospital in the rural area of the Drakensberg in KZN, has prioritised this preventable casualty. According to Dr Mochaoa, there were 70 children under the age of five admitted to her paediatric ward with severe acute malnutrition (SAM) in 2022, with five of these babies dying due to complications associated with this diagnosis, she says: "This should be alarming for every South African."

After taking the longer route to get into medicine, Dr Mochaoa found her calling to make a difference in the most remote areas in South Africa.

Growing up in Matatielle in the Eastern Cape, along the Maluti Mountains, her mother believed that education was a powerful tool, and Dr Mochaoa left her home quite early to live with her aunt, a matron at Madadeni Hospital in Newcastle.

"My mother was also a nurse, but a staff nurse. So, there was a little bit of an influence from the family to go into medicine. You could hear the talk at the dinner table about what was happening at the clinic and the patient interaction," she says. By the time she finished matric, she wanted to get into medicine. But her marks were not great. She then applied for a BSC in Dietetics at the University of Cape Town. Dr Mochaoa worked for a year and then decided to go back to medical school to get her degree in medicine, finally.

For Dr Mochaoa, it was better late than never, "I was among those who they called mature students. I don't regret having to go the very long route. I love what I am doing, particularly in rural medicine."

## A HEALTHCARE MINDSHIFT

She was exposed to rural medicine while in university after joining a Christian fellowship group that took them to the remotest areas. "I admired those doctors. However, they were mostly white doctors from outside the country."

Here she asked herself why black South African doctors were not coming to such areas. This gave her pause and drove her path to become an expert in primary healthcare in rural areas.

After finishing her specialisation in 2019, she moved to a district hospital in Estcourt through the decentralised programme. She had to look for areas with good schools for her children. On arrival at Estcourt Hospital, Dr Mochaoa was tasked with heading the paediatric unit. Though under-resourced, together with her team, they significantly decreased preventable infant and neonatal mortality rates by the end of 2020. This was one of her biggest achievements and a reminder of why she had chosen medicine.



"This should be alarming for every South African. We still have babies dying of malnutrition."

She then moved to Emmaus Hospital as a consultant, which is in an even more rural area in the Drakensberg Mountains.

"When I arrived at the hospital, it was not smooth sailing because of the prevailing culture, especially when you want to bring a certain level of excellence and standard of care for patients," says Dr Mochaoa, who has been awarded a Discovery Foundation Healthcare for Rural and Underserved areas - Individual Award for 2021/22. She argues that there is a certain level of thinking that rural care equates to inferior care. And she wants to shift that mindset. "Everyone in South Africa deserves a high level of quality healthcare. Of course, there will be challenges with resources, from medical treatment or advancing academia in an institution. That is where foundations like Discovery come in handy."

The grant will propel her work in piloting a programme aimed at eradicating severe acute malnutrition in the sub-district of Okhahlamba. This will be through implementing the sustainable Community Orientated Primary Health Care Model, which involves communities in finding solutions. Though many South Africans would be shocked that babies still die of severe acute malnutrition, it happens so often, especially in under-resourced areas.

Dr Mochaoa sees the daily difficulties of working in rural medicine and how it discourages doctors, making them want to leave. "They may feel like the department is not trying enough to fill the posts or provide resources."

She says, "We are going to the community to make them part and parcel of finding the solutions. We are now training, capacitating, supporting and monitoring the community healthcare providers. With this pilot, we hope to halve the SAM admissions and deaths by the end of 2023. We aim to have no baby deaths from malnutrition by 2024. Of course, this is an ambitious goal but it is doable."

The training is multidisciplinary, because Dr Machaoa argues it is impossible to divorce the socio-economic situation of the community from the health issues they are facing. So, in addressing these issues, the model will bring in social services and other partners to support the community in ending severe acute malnutrition.

*Rural Individual*  
AWARD 2022

# Dr **EZILE** NINISE

*After fighting for his life in intensive care, Dr Ezile Ninise now works at the same rural hospital that saved him.*

For two weeks, Dr Ezile Ninise fought for his life in the Intensive Care Unit (ICU) at the Nelson Mandela Academic Hospital in Mthatha. After a terrible accident, he had a traumatic brain injury and fractured forearms. This is the same hospital he works at in the public sector. His stay at the hospital only solidified his passion for his work to help people, especially those who need him most.

The turn of events was serendipitous. He was nearing the completion of his research on the burden of ICU in rural areas of Mthatha, where approximately 4 million people were being served. One prominent issue that emerged was the high rate of rejections, which happened when patients were either critically ill or when the hospital faced resource limitations, hindering their ability to accommodate them.

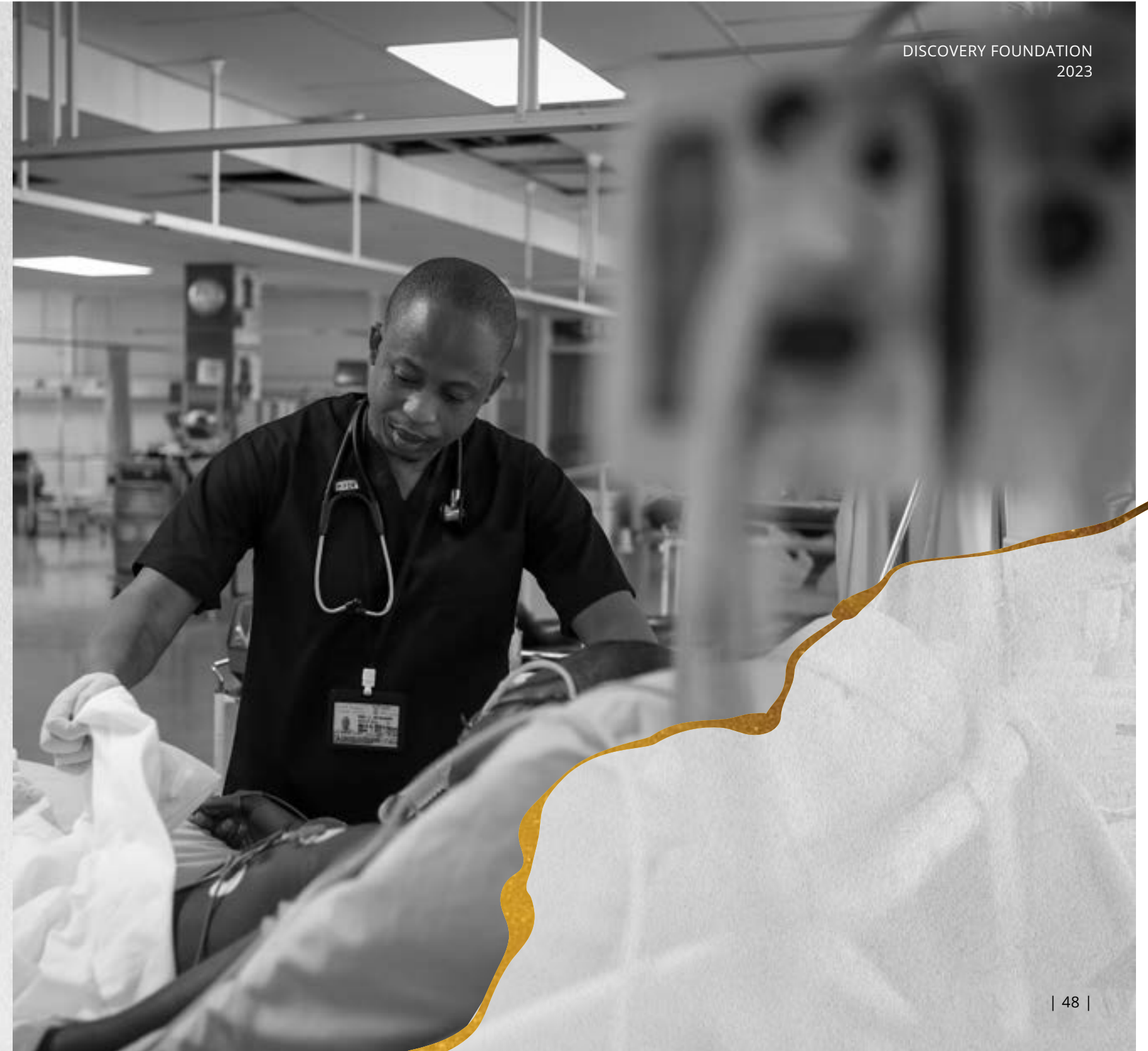
“This is when I saw the importance of the work my colleagues and I are doing. I saw the difference we are making in this region of the former Transkei. This is where people are disadvantaged, with a lot of illnesses, and transportation challenges impacting on them getting proper healthcare,” says Dr Ninise.

During his two-week stay in the ICU, he saw the difference he and his team were making, and it spurred him to want to do more. For two months, he had to undergo physiotherapy, and he was worried about his career, because in anaesthesia, he uses his hands quite often. His colleagues and head of department were supportive and pushed him to apply himself towards recovery. He has regained his confidence and is fully functioning, grateful to his colleagues for another chance to help and save people.

But medicine was not his first calling. Born in Mount Ayliff, then moving to Mthatha, Dr Ninise was raised by a parent who was serious about education. He remembers her words of encouragement, wanting a better life for her children. Coming from an extremely disadvantaged background, between rural areas and townships, Dr Ninise had no other choice but to excel.

He was a diligent student, and the teachers in his high school years nurtured this. He studied medicine at Walter Sisulu University and says, “To be honest, I didn’t want to do medicine. I wanted to get into chemical engineering, but my brother sat me down and showed me that many people we knew had done general engineering and were at home without jobs. I then decided to do medicine.”

He is currently a specialist doing his post-graduate training and is a registrar in the anaesthetic department. Before returning to Mthatha, he worked at Prince Mshiyeni regional hospital in eThekweni.





### TACKLING THE RURAL ICU BURDEN

Over the years, he has noticed several issues that need to be addressed in the public sector. He talks about how they can only admit six patients at a time in their own ICU.

"We have had to make means to try and admit sometimes more than those six patients. We try to get resources from other wards and recruit nurses from the private sector. Also, what we have found is staff fatigue," says Dr Ninise.

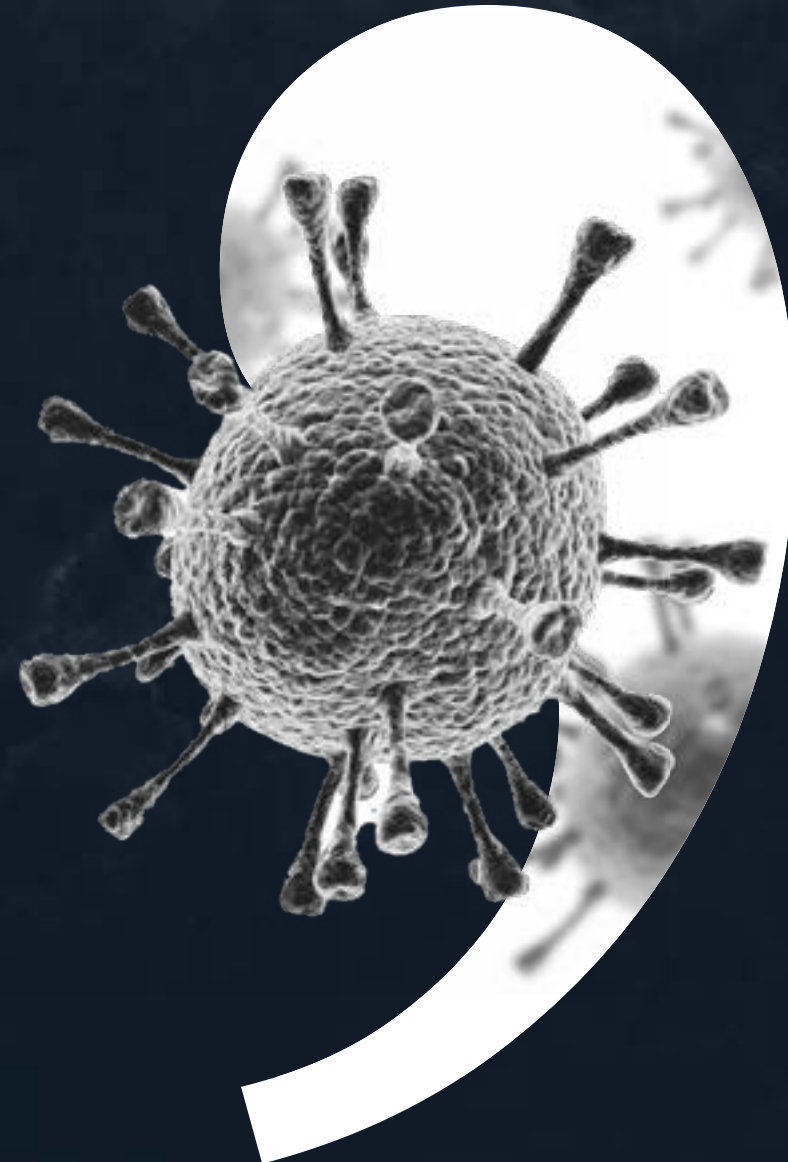
He explains that this comes about because of short-staffing and no time to relax or reflect. Also, there are resource constraints, including shortages of IV lines and cannulas.

"These are issues beyond our control. But we are comforted by the difference we make and patient feedback. I don't have solutions because some of it is beyond what we can do. What we can do is to ensure we continue motivating our staff, building a conducive

working environment and supporting each other."

He is devoted to the principles of Batho Pele and his research attests to that. Dr Ninise's study, made possible by the 2021/22 Discovery Foundation Healthcare for Rural and Underserved Areas - Individual Award, primarily focused on patients that desperately required ICU care but couldn't receive it due to resource and staffing constraints.

However, the preliminary research findings indicated that the rejection rate of patients fell within international standards. Even when patients were rejected from the ICU, the doctors ensured that their care in regular wards was intensified. This approach was implemented due to the research findings and the issues it brought to light. Dr Ninise says, "We focused on the rates of the rejections and the impact it has had. We are measuring the mortality of those patients' due to being rejected from the ICU. We want to use it for further capacitation for resources and staff".



"He was nearing the completion of his research on the burden of ICU in rural areas of Mthatha, where approximately four million people were being served"

# DR NAYHA GAUTAM

*Rural Individual*  
AWARD 2023

*Worldwide, about 90% of children's cases of Wilms tumours are resolved. But this is not the case in the Eastern Cape. Dr Nayha Gautam is investigating why and how to change this.*

Even though her journey in medicine began when she developed a keen interest in paediatric surgery during her rotations at Red Cross Hospital in Cape Town, Dr Nayha Gautam has found that the simplicity of life is more important than the chase of the big city. Driven by her desire to specialise in this field, she decided to return to her hometown in the Eastern Cape and join the well-established paediatric surgery department in East London.

Amid the challenges of being a mother and a full-time doctor, Dr Gautam has dedicated herself to making a difference in the lives of children. What has kept her going is the incredible support system she found in her close-knit community. Despite the lack of resources and funding, the people around her have rallied to provide the necessary support, recognising the importance of quality healthcare for their children.



Dr Gautam's current focus is childhood cancer, specifically Wilms tumour or nephroblastoma. It's quite an untouched field, especially considering the scant research on children in the Eastern Cape, which is unfortunate as a significant portion of young children under the age of 15 live in the province.

"The tumour usually affects the age groups of one to three. There's this huge population in South Africa that we haven't really accounted for in terms of what treatment they're receiving. And remember, the Eastern Cape is still a mainly rural area. A lot of the kids that we see typically travel 200 or 300 kilometres or even more just to get access to specialised services."

There are only two facilities in the province with specialised oncology services for paediatric surgeons that can operate on tumours and provide post-operative care. Dr Gautam's research, made possible by the Discovery Foundation Healthcare for Rural and underserved Areas - Individual Award for 2022/23 year, looks into all the children who have undergone surgery or who have been diagnosed with nephroblastoma.

"Ninety percent of kids' cases worldwide are resolved. It's almost a good tumour to have because the drugs are so sophisticated, and there's an early diagnosis, but in the Eastern Cape, it's quite different. And it's not just a tertiary hospital problem we are trying to solve. We need funding, and we need resources at all levels," explains Dr Gautam.





The grant will be instrumental in supporting her research and establishing a robust cancer registry in the Eastern Cape. She hopes her findings and the registry's data will improve outcomes for children with tumours and inform policy decisions. But she is not alone, Dr Gautam is supported by the Eyabantwana – For the Children Trust, which also raises funding from the community to ensure that they have the required instruments, resources and products for surgical care for the children. The Paediatric Surgical Service operates at Frere Hospital in East London and at Cecilia Makiwane Hospital in Mdantsane and provides surgical care for newborns and infants with complex congenital problems, children with cancer; children with burns and others who have been injured, and many other surgical conditions in older children.

“One of our biggest funding drives was to buy laparoscopic equipment to provide minimally invasive surgery for children, which has now become the cornerstone of our work. These are not provided by the government. And that's the beauty of people wanting to come together as a community and raise the funds to make surgery at a global international level in a place considered a rural province.”

Dr Gautam is aware of the challenges in the system and around it. She recounts cases of children who have travelled long distances, sometimes hundreds of kilometres, to receive specialised care in East London. The impact of poverty, lack of access to basic amenities like running water, and the prevalence of diseases like HIV and TB further complicate the treatment and healing process. However, she also shares compelling stories that have reinforced her conviction that she is in the right profession.

“The service we provide in that area has a huge impact on a child's life. And I miss that. Here in Cape Town, there are more resources and people like me who can help the children. But back home, I can make much more of an impact. I am needed there more,” she says.

Dr Gautam believes that a successful healthcare system should prioritise the well-being of all healthcare workers, including nurses, porters, and support staff. She emphasises the need for appreciation and engagement with these individuals, as they are crucial in keeping the system running smoothly.

# Dr **KYLE** KLEINHANS

*Declared partially blind as an infant, Dr Kyle Kleinhans overcame adversity to become a specialist Physician.*

Thirty-year old specialist Physician Dr Kyle Kleinhans found value during an unpredictable time at the height of a global pandemic, he saw gaps in the referral system used at Clairwood Hospital, which prompted him to find a solution using technology.

The 2022/2023 Discovery Foundation Healthcare for Rural and Underserved Areas - Individual Award recipient installed an electronic-based referral system using an electronic platform called the Vula Application. He conducted a clinical profile of patients with COVID-19 referred to Clairwood Hospital January to November 2020.

"It actually showed us that in the previous referral systems of telephone calls and paper based systems, patients were getting overlooked, and certain pertinent information in the actual management of patients was missing," says Dr Kleinhans.

"Now when we go back and look at the electronic referral system, we see there's a lot of information that we can gather from these referrals. We can look at clinical characteristics of patients, check the interventions that were done, and if they were successful or not, by just having all of this information on an electronic database," adds Dr Kleinhans.



*Rural Individual*  
AWARD 2023

*Rural Individual*  
AWARD 2023



Dr

MARCEL PIERRE

LOUBSER

*Will more information about long-acting reversible contraceptives affect the neonatal mortality rate in Witzenberg, Western Cape?*

When Dr Marcel Pierre Loubser decided to take some time off after high school to explore the world, he had no idea what lay ahead. A chance meeting with volunteer doctors while visiting South America changed the trajectory of his life. The passion and love these doctors had for serving underprivileged communities inspired Dr Loubser to do the same. The journey to becoming a doctor however, wasn't as clear-cut. Dr Loubser had been out of high school for four years and couldn't get into the medical programme. He decided to study engineering for a year so he could qualify to study medicine.

For his community service, Dr Loubser was placed at Ceres District Hospital, a rural hospital in the Witzenberg area, about two hours drive from Cape Town. With the inspiration from the doctors in South America still fresh in his mind and heart, Dr Loubser longed to serve a community in need. "I kind of fell in love with the idea of being a good doctor in a place where people don't have access to good doctors," he says.

Now, as a third-year registrar specialising in family medicine, Dr Loubser spends a lot of time in the labour ward and high-risk obstetrics clinic. "I developed this passion for maternal and child healthcare, and having good outcomes for our mothers and newborn babies," he says. "The more time I spent in this hospital, I saw how few women really use contraceptives properly and know about various methods of contraception," adds Dr Loubser.

His observations led him to research the knowledge, attitudes and general practices of adult women in the Witzenberg area regarding long-acting reversible contraception. Dr Loubser is gathering information by handing out questionnaires to community members visiting the clinic. "It's really simple questions regarding their knowledge about it, how they feel about contraception and what they are currently practising when it comes to contraception," says Dr Loubser. He stresses how important it is for the process to be voluntary and for patients to feel comfortable sharing this information. "I'm using research assistants who are not doctors or nurses. I didn't want this strange balance of power. I wanted to use someone from the area who is a local, that's on the same level as the patient, so they can actually have the freedom to say no," adds the 2022/2023 Discovery Foundation Healthcare for Rural and Underserved Areas - Individual Award recipient.





At a deeper level of Dr Loubser's research, is the motivation to decrease unwanted pregnancies and the maternal and neonatal mortality rate of our country. The neonatal mortality rate is defined as the number of deaths during the first 28 days of life per 1,000 live births in a given year. "The trend that I've been seeing is that unfortunately, a lot of the neonatal or antenatal deaths are from mothers who weren't planning the pregnancies, or who already on their fourth or fifth pregnancies. A lot of the time, they chose inadequate methods of contraception," says Dr Loubser.

"It might be a woman who has just lost a baby and now uses an injectable that's been working for three months. I really want to see why that is, and is there something that we can offer them to break this perpetual cycle of being fixated on a three-month injection to prevent pregnancy," adds Dr Loubser.

There are many areas to measure the success of a healthcare sector, it could be its effectiveness or population served. A strong vision that Dr Loubser wants to successfully help craft is around the delivery of the best healthcare services to women, especially around fertility. "Unplanned pregnancies are at the higher and lower spectrums of the ages, so unplanned or unwanted pregnancies are more common in older females and younger girls. And so we know complication rates in pregnancies are higher for those two age ranges as well," says Dr Loubser.

"If we can effectively prevent pregnancies in women that don't want to get pregnant, then for me, that would be a success. Having someone being in control of their future, preventing poor outcomes, and preventing morbidity and mortality. If we can make a difference in few people's lives, that's already a success, it doesn't necessarily have to change the whole district," adds Dr Loubser.





# Dr SIVUYILE LUHANA

*With the aim of strengthening primary healthcare with screening and detecting conditions earlier, Dr Sivuyile Luhana is on his way to improving the entire system.*

*Rural Individual*  
AWARD 2023

"The screening tool itself is not limited to cardiovascular diseases. It is called an integrated health screening tool looking at communicable and non-communicable diseases. This is taking a holistic approach to the patient," says Dr Luhana.

At Clairwood Hospital, Dr Sivuyile Luhana is part of a team that is piloting a screening tool to improve screening processes in primary healthcare centres thanks to the Discovery Foundation grant for Rural Individual for 2022/23 year.

With the data gathered, he wants to characterise the cardiovascular risk profile of patients looking at diabetes, hypertension, and obesity, including central obesity. He has also added HIV to the risk factors because of the high association with cardiovascular diseases, especially in that region.

"The core part is the piloting of the tool in areas where nurses are at the front line because doctors sort of know their way around these illnesses. We feel that if this screening tool works, we can begin to achieve controlling diseases in general."

Screening is the foundation of healthcare. But that is not where he wants to stop. He is also considering how to get into specialising in allergology and immunology.

Dr Luhana says, "I aim to strengthen primary healthcare in terms of screening and picking up these conditions. That's how we can improve the entire system."

*Rural Individual*  
AWARD 2023

# Dr **KHWENA** **MALATSI**

*According to Dr Khwena Malatsi, the healthcare system is like a leaking faucet, but he is shifting the focus to proactively fixing it.*

Seeing children die because they could not get an ambulance in time to transport them to a tertiary hospital was debilitating for Dr Khwena Malatsi. He saw significant challenges in the healthcare system while undergoing community service in Bekenburg near Mokopane in Limpopo. His three years in the area led him to public health medicine.

Dr Malatsi explains, "I've had many of those experiences where patients died in my hands. It wasn't because I didn't know what to do, but at that level, all I could do I had already done. But because of system failures and breakdowns, you cannot give the best care you can to this little one. That inspired me to do more."

From watching his mother wake up early every morning to her wise words when he started at Sefako Makgatho University, Dr Malatsi was always going to be in the healthcare system. His mother was a nurse for a very long time, "I loved her dedication to serving rural communities as a professional nurse. If you are working in a clinic, you have limited resources, but you are saving quite a large number of people."



He always loved her dedication. He used to ask her how she coped with such early mornings. She told him that it's all part of serving people.

“When I got accepted to study medicine, she always told me to treat people with respect. Oftentimes the title of a doctor gets to people's heads. The respect that comes with it is no longer earned, it's demanded. One thing I always took to heart was to treat people with respect. And also, the dedication of serving people.”

Currently, a third-year registrar in Limpopo, Dr Malatsi's focus is now less on seeing and treating patients but on how to improve the healthcare system.

Public health medicine is a particularly young discipline, especially in rural areas. The healthcare system is curative, but a different approach, such as disease prevention, health promotion and prolonging life, is a vision he lives by and wants to inculcate into the system.

He compares the current approach to a leaking faucet. The primary focus in healthcare services is about mopping the floor. However, the problem is with the tap, and there isn't enough focus on why the faucet leaks. “Being reactionary is one major challenge in the health care sector. We are not going to the root of the problem. For me, the greatest challenge is the shift in the perception of the healthcare system. We need to think more broadly about how we can close the tap. It's a paradigm shift,” explains Dr Malatsi.



"If you can do something, do it, regardless of whether you feel excited about it when you wake up in the morning or not. It is important to instill in yourself a sense of discipline to fulfil the duty."

Dr Malatsi, who has been awarded the Discovery Foundation Healthcare for Rural and Underserved Areas - Individual Award for 2022/23, remembers one of his professors asking him if medicine is his calling. He told his professor he didn't see it as a burning passion, but as a sense of duty and responsibility.

"If you can do something, do it, regardless of whether you feel excited about it when you wake up in the morning or not. It is important to instill in yourself a sense of discipline to fulfil the duty. Passion is self-fulfilling. For me, what I aim to achieve has nothing to do with feeling and being excited about it. It's about duty."

His duty, with the aid of his supervisor, has him focused now on the porous data on lifestyle diseases, specifically strokes, in rural areas. Most research and data is produced in high-income countries or urban areas in low to middle-income countries.

"These funds (Discovery Foundation grant) will go a long way in helping to add to the quality of information available for decision-making, policy drafting and implementation towards addressing these non-communicable diseases."

Between Dr Malatsi and his supervisor, they look at the profile and type of stroke in the rural setting of Limpopo. "Of course it is impossible to close the tap on every disease right now because of the socioeconomic context. But the right approach would be moving our focus from being reactive to proactive. There is ample data showing that different approaches, including health education, can improve the system."

*Rural Individual*  
AWARD 2023

# Dr SNOTHILE MALINGA

*Dr Snothile Malinga believes her research on integrated screening practices will have long-term positive results for patients, healthcare needs and outcomes.*

As the Discovery Foundation Healthcare for Rural and Underserved Areas - Individual Award 2023 recipient, Dr Malinga will be using her funding to research the screening practices at Gateway Clinic. The clinic is situated within Clairwood Hospital, where Dr Malinga is a second-year registrar. Gateway Clinic is the first point of contact for most patients, only when patients have complications or need a doctor's intervention do they get referred to Clairwood Hospital.

The title of Dr Malinga's project is *Evaluation of an Integrated Screening Approach and Development of a Tool for Integrated Screening from Lessons Learnt: A Primary Healthcare Integrated Approach*. The aim is to determine the gaps in the available guidelines for screening for non-communicable diseases, and to provide evidence that supports integrated provision of care. Dr Malinga has observed the need to improve on screenings done at clinics. "If we can't nip it in the bud when patients come in, whether they are complaining of that thing or not, we should be screening for all non-communicable diseases," says Dr Malinga passionately.

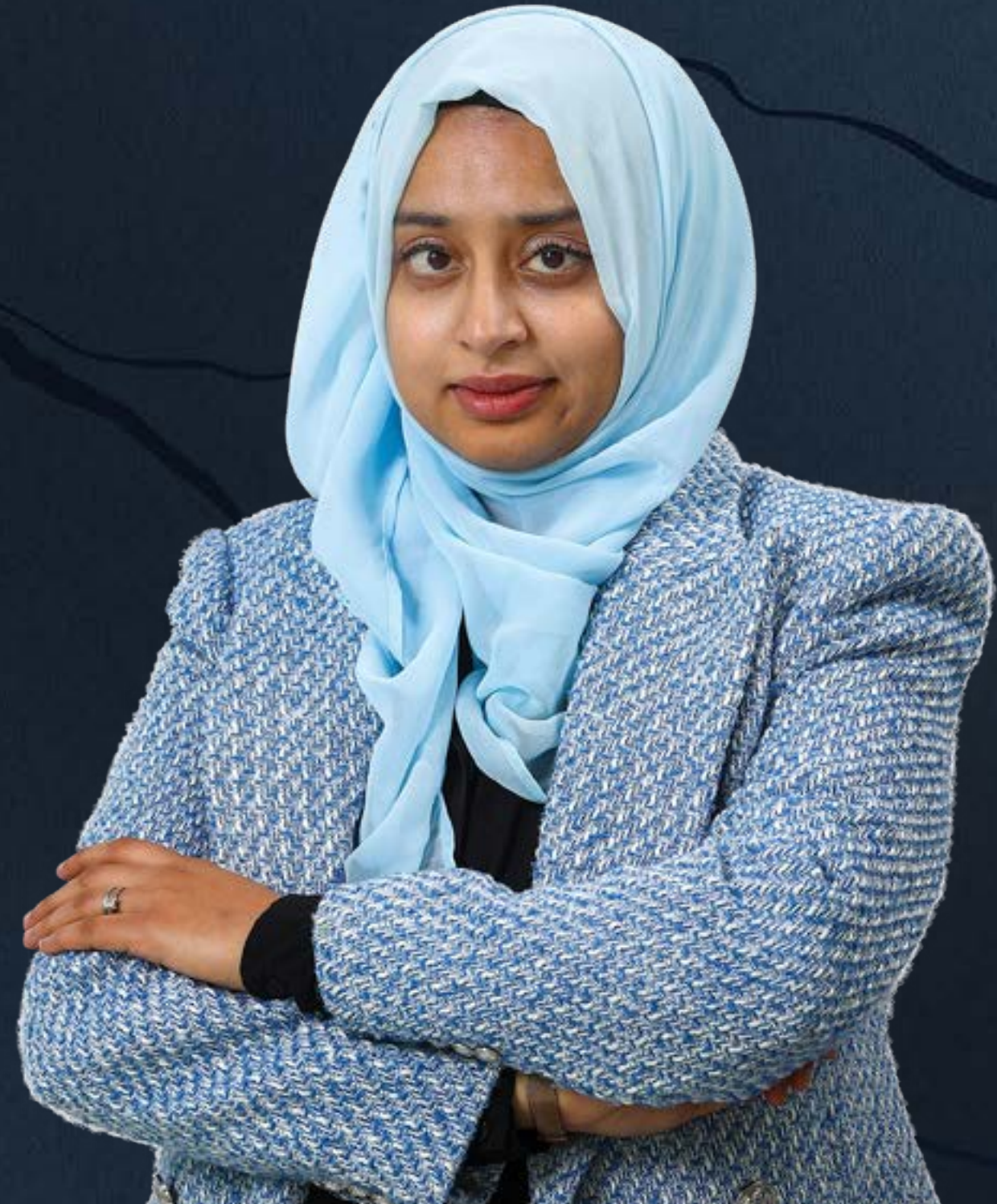
"If you have a patient who is overweight, doesn't have hypertension, doesn't have diabetes, but they are at risk of developing that in future, that's when you should intervene," adds Dr Malinga. The young doctor is advocating for an integrated approach to medicine and believes in "bringing internal medicine to the community," to avoid more adverse measures in the future.

# Dr NABEELA ADAM

*In a male-dominated speciality, Dr Nabeela Adam is disrupting the orthopaedic profession while also being a beacon of hope for young women of colour in the space.*

*Rural Individual*  
AWARD 2023

East London is not a heavy research area, nor does it publish much data. Dr Nabeela Adam wanted to be part of the new cohort to change this. Her research is focused on time intervals of femur fractures as one of the most commonly fractured bones that causes significant morbidity issues for patients. She would like this research to be presented at the South African Orthopaedic Congress later in 2023.



During her rotations and internship at Tygerberg Hospital in Cape Town, Dr Adam developed a fondness for surgery. However, she soon realised the toll it took on the surgeons themselves. She recalls stories of colleagues experiencing physical and mental health issues due to the demanding nature of the field.

These incidents, including one colleague contracting tuberculosis of the spine, also known as Pott's Disease, and another developing severe gastric ulcers, left a lasting impact on Dr Adam.

Passionate about bones, she found her niche in orthopaedics and got the opportunity to work with a team of orthopaedic surgeons who made the experience enjoyable and fulfilling. "During my internship, I had a really nice team of registrars and they often made fun of me, asking if I was trying to outdo them. I ended up coming to work extra early so I could finish my intern work early so that I could go and help in the theatre. I truly enjoyed the two months there," she says. The prospect of restoring bones and the satisfaction derived from the process further solidified her interest in orthopaedics.



"A registered orthopaedic surgeon currently practising in East London, Dr Adam initially considered studying accounting, until she ultimately settled on medicine because of its varied nature coupled with the gratification of helping others."

However, it became rather apparent that the discipline can be hugely challenging. Dr Adam highlighted the challenges she faced as the only female orthopaedic surgeon in the department. She remembers feeling side-lined and not receiving the same opportunities as her male colleagues. After a gruelling two years where opportunities for her to operate were minimal, it was a conversation with an intern that made Dr Adam realise she had to fight for her rightful place in the operating theatre.

A significant moment of encouragement came when an intern from the previous year expressed gratitude for Dr Adam's help after they were involved in a car accident. This encounter happened just as Dr Adam was contemplating

quitting, providing the intern with a glimmer of hope and reaffirming the impact one could have on someone else's life.

"I told the intern that I was literally praying to God last night. I was praying and telling God I was ready to quit and do anything else besides this," laments Dr Adam. The intern made her understand that she was the only person in that section who was a woman and non-white. Through her presence, the interns could see that it was possible to make it in the orthopaedic field.

Dr Adam spoke of how that moment made her realise her journey was far bigger than her. Representation is so important. Even though it was highlighted by the interns, she realised how her journey can help others who want to help people.

"I'm helping people in ways I can't even fathom." Dr Adam continues to dedicate herself to her passion, now being one of this year's recipients of a Discovery Foundation Rural Individual Award."



# DR CHRISTOFF BELL

*Rural Individual*  
AWARD 2022

*Butterfly Palliative Home, caring for  
children with life limiting conditions.*

**D**r Christoff Bell (38), a General Practitioner at Mosvold Hospital in northern KwaZulu-Natal, along with his wife, Tarryn Bell, a social worker, are the owners and directors of Butterfly Palliative Home in Ingwavuma, KwaZulu-Natal (KZN). Butterfly Palliative Home, established in 2017 is a hospice facility for children with life, limiting conditions.

At the core of their children's home facility is fulfilling their life's calling for caring for children. Their love for children led them to working with local daycare centres and preschools. Prior to opening Butterfly Palliative Home, the Bell established Izandla ze Africa, a non-profit organisation at Mseleni Hospital, also in KZN. While completing his community service at Mseleni Hospital, Dr Bell saw the need to uplift and support the community.



Mseleni Hospital had a children's home attached to it and the husband and wife team started looking after a child with down syndrome who was living there. "She actually had a congenital heart condition," Dr Bell adds, "My brother also has down syndrome, so we've got a bit of an affinity for children with down syndrome".

They cared for their child for six months until her passing. Many years later, Dr Bell and his wife would adopt a son who also had down syndrome and autism spectrum disorder. "With that adoption process, our name somehow got on some kind of register, which said we're interested in adopting children with down syndrome," says Dr Bell. He and Tarryn kept receiving communication about the growing number of children who needed care. They decided to take one child who was found abandoned in the bushes in Soweto, Johannesburg. It wasn't much longer until they agreed to take care of two more children from Port Elizabeth.



"Even ordinary people can be used to do extraordinary things in a sense. And that, for me, only happens through faith."



The adoption of their son, along with caring for the abandoned child, and the widening gap in care for children with life-limiting conditions inspired the birth of Butterfly Palliative Home. "The idea behind Butterfly Palliative Home is to prevent these children from lying for years in a government hospital, and so we provide a home setting where they can still be loved and cared for, but where we can also cater for the medical needs," says Dr Bell.

The Bells employ 32 people to help them, as the number of children being cared for at Butterfly Palliative Home has grown over the years. Unfortunately, Dr Bell's demanding job as a general practitioner at Mosvold Hospital means he cannot spend as much time as he would like with the children. He credits his wife for keeping him sane and taking care of the day-to-day running of the facility.

"She raises the funds because we don't get any grants or government funding, so it's all self-raised to fund the project," explains Dr Bell, who's also the house doctor at Butterfly Palliative Home.

As the recipient of the Discovery Foundation Healthcare for Rural and Underserved Areas - Individual Award 2022/2023, Dr Bell has used the grant to expand Butterfly Palliative Home by moving to a new location. "I needed more time to get the whole new facility up to scratch in terms of protocols on how to manage the children, and training the staff to help them care adequately because we also had to employ quite a lot of new staff." Dr Bell was able to take three months away from Mosvold Hospital and dedicate the extra time to Butterfly Palliative Home. In that time, the Hospice Association of South Africa assessed the home and officially registered it as a hospice facility.

# DR MARISA CROUS

*As a proactive coordinator, Dr Marisa Crous aims to bridge the gaps between different systems and stakeholders, playing a crucial role in advocating for wellness broadly.*

*Rural Individual*  
AWARD 2023



As a proactive coordinator, Dr Marisa Crous aims to bridge the gaps between different systems and stakeholders, playing a crucial role in advocating for wellness broadly.

Dr Marisa Crous encountered a patient who experienced a miscarriage in a Gugulethu hospital in Cape Town which motivated her towards family medicine during her internship.

I wish every woman could have a doctor and nurse attend to them as soon as possible and get the feeling that they were cared for. That experience sparked the whole study I am working on."



She started specialising the day after she started her community service.

As one of this year's recipients of the Discovery Foundation Healthcare for Rural and Underserved Areas - Individual Award 2022/2023, her research is currently focused on the experiences of women who have suffered miscarriages in the Witzenberg area. Through interviews with participants, Dr Crous seeks to gain insights into the healthcare needs of these women in a rural setting. Her research aims to shed light on areas where improvements can be made in the district healthcare system, focusing on providing adequate follow-up care and information to patients.

"I have found that the participants were quite disappointed in the care that they received. And we probably could have done more in terms of follow-ups and giving them information about their health and what to expect in the future. Many of them had burning questions and didn't know where to go. They found the interview to be a therapeutic session."

Dr Crous is also a driving force of a community forum in Nduli, a township in Ceres.

# DR TSHIRURUVELA FRENZAR

*Dr Tshirurvhela Frenzar has dedicated her efforts to understanding the alarming prevalence of advanced cervical cancer among HIV-positive women.*

A recipient of the Discovery Foundation Healthcare for Rural and Underserved Areas - Individual Award 2022/2023, Dr Tshirurvhela Frenzar, has been focusing on understanding the issue of advanced cervical cancer among HIV-positive women.

Having previously worked in HIV facilities, she conducted pap smears for patients but noticed a reluctance among many to undergo the test. Unfortunately, by the time the test was eventually conducted, advanced stages of cervical cancer were often detected.

"That touched me. It pushed me to ask why we still have such a high number of women who have advanced cervical cancer. This is one of the most curable cancers in the world. I want to find the reasons why," says Dr Frenzar.

This realisation compelled Dr Frenzar to investigate the underlying reasons behind the high incidence of advanced cervical cancer, despite the availability of established protocols for early detection.

She emphasises the importance of understanding patients' perspectives, recognising that existing research often overlooks their experiences. Dr Frenzar aims to identify the barriers preventing early detection, such as the discomfort of undressing in front of young children or male doctors, perceived pain during the procedure, and concerns about receiving test results.

Collecting data through interviews, she aims to address these beliefs and perspectives.

*Rural Individual*  
AWARD 2023

*Rural Individual*  
AWARD 2023

# Dr WENDY MENE

*Dr Wendy Mene is on a mission to reduce mortality due to TB treatment through early detection and better intervention.*

In the challenging landscape of rural healthcare, poverty becomes a pervasive force that affects every aspect of patient care. Dr Wendy Mene understands this reality all too well. She explains how a patient needing a crucial scan can be hindered by a lack of resources. "When they are given an appointment two weeks later, they can't make it and would rather push it back until grant payment day," explains Dr Mene.

It is a harsh reality that forces patients to downplay their symptoms, delaying their access to vital medical attention. Dr Mene recognises that the lack of knowledge and the pervasive grip of poverty pose formidable challenges in the rural areas of the Eastern Cape. However, she believes that these challenges can be overcome by focusing on solutions rather than magnifying the obstacles.

With 70% of people relying on public health facilities, the stark disparity between public and private sectors becomes apparent, where a brain scan can be obtained within hours in the private sector but may take weeks in the public sector.

The registrar at the Nelson Mandela Academic Hospital emphasises the need to prioritise bridging this divide, not necessarily closing it completely, but certainly taking the first steps toward narrowing the gap.

Her path into medicine was cultivated after hearing how her mother would have to travel more than an hour to get help for an epileptic seizure, "I remember hearing that as a child and I knew it didn't sound right. I wanted to be part of the system to fix that services were so far from people."

This story still resonates with her. After she qualified from Walter Sisulu University, she interned in Durban. She loved the city and could envision herself starting a life there. But she had to remind herself why she got into medicine. It was about bringing resources closer to the people.

"After two years in Durban, I decided to return to the Eastern Cape and I decided to stay there because the people here need my help more than those in big cities. There are enough hands there. This grounds me."





"Patients get so much confidence if you properly explain the process and the treatment. We take it for granted, especially in the public sector, that our patients won't understand the technical terms."

Recently she was reminded again of where she is needed most when a woman arrived at the emergency department after being referred from another hospital. While in conversation with the patient, Dr Mene diligently gathered her medical history and delved into her symptoms.

To her surprise, the patient exclaimed, "Yes, doc! That's exactly what I've been experiencing." Grateful to Dr Mene's understanding nature, the patient continually requested her presence throughout the treatment.

This experience reinforced to Dr Mene the vital importance of truly listening to and empathising with patients. She believes that by effectively communicating the treatment process in a way that patients can understand, they gain confidence and actively participate in their own healing journey.

"Patients get so much confidence if you properly explain the process and the treatment. We take it for granted, especially in the public sector, that our patients won't understand the technical terms. But there are always words that can be used to explain the complexities of a patient's treatment."

But it's not always easy.

Dr Mene argues that poverty in rural areas shows up everywhere. And due to socio-economic circumstances, patients begin downplaying their symptoms.

"By the time they come to you, they are far along. You ask them why they didn't come sooner, and they'll tell you that they didn't have the money or that they didn't think the symptoms were serious. These are the practicalities of practising in rural areas."

For Dr Mene, the lack of knowledge and poverty and everything linked to it will have to be the biggest challenges in the area.

"But if you take these challenges and focus solely on them, they become bigger than they truly are. So it's better to find the solutions to the problems. It makes it easier."

She lives by those words.

Having been awarded the Discovery Foundation Healthcare for Rural and Underserved Areas – Individual Award 2021/2022, she is searching for an effective and feasible way to address a significant side effect of TB treatment on the liver.

Currently, the standard practice in South Africa relies on clinical monitoring, with investigations into liver health initiated only when patients report symptoms like yellow eyes and stomach pains.

However, by that point, the liver may already be significantly affected. Driven by a desire to reduce the high mortality rate associated with this issue, Dr Mene's study aims to explore the feasibility and effectiveness of implementing routine liver functioning tests for individuals undergoing TB treatment.

Dr Mene seeks to make early detection and intervention practices in these settings by focusing on area-specific solutions and policies.





# DR PETER MILLIGAN

*Dr Peter Milligan wants to create accessible mental healthcare in the public sector.*

Looking back, the wisdom of time clearly marks Psychiatry as a fated career for Dr Peter Milligan, but as a teenager Dr Milligan was unsure about the direction he wanted to take. Until one day in matric, his father suggested visiting a rural hospital where his friend worked. He spent a few life-changing days in a remote rural district hospital in the Free State and the visit sparked a fire within him, "I was very impressed and influenced by the commitment of the doctors there," says Dr Milligan.

From that day on, he knew rural medicine was what he wanted to do. That decision made everything fall into place. As soon as he set his heart on medicine, deciding on a specialty came naturally, "My youngest brother has a learning disability and autism. Growing up in a family with a brother with special needs was probably the most profound driver of me moving in that direction," he says.

Dr Milligan goes on to add, "As a medical student what I loved about psychiatry is that it's the only discipline where you get into real depth with your patient. There's a depth of contact in psychiatry that you really don't get in other disciplines."

After spending his first 15 years working in the Eastern Cape before specialising in psychiatry, Dr Milligan always wanted to work in rural medicine. The decision to go into public health was an easy one. "I've always felt that the needs are primarily within the public sector. I still believe that."

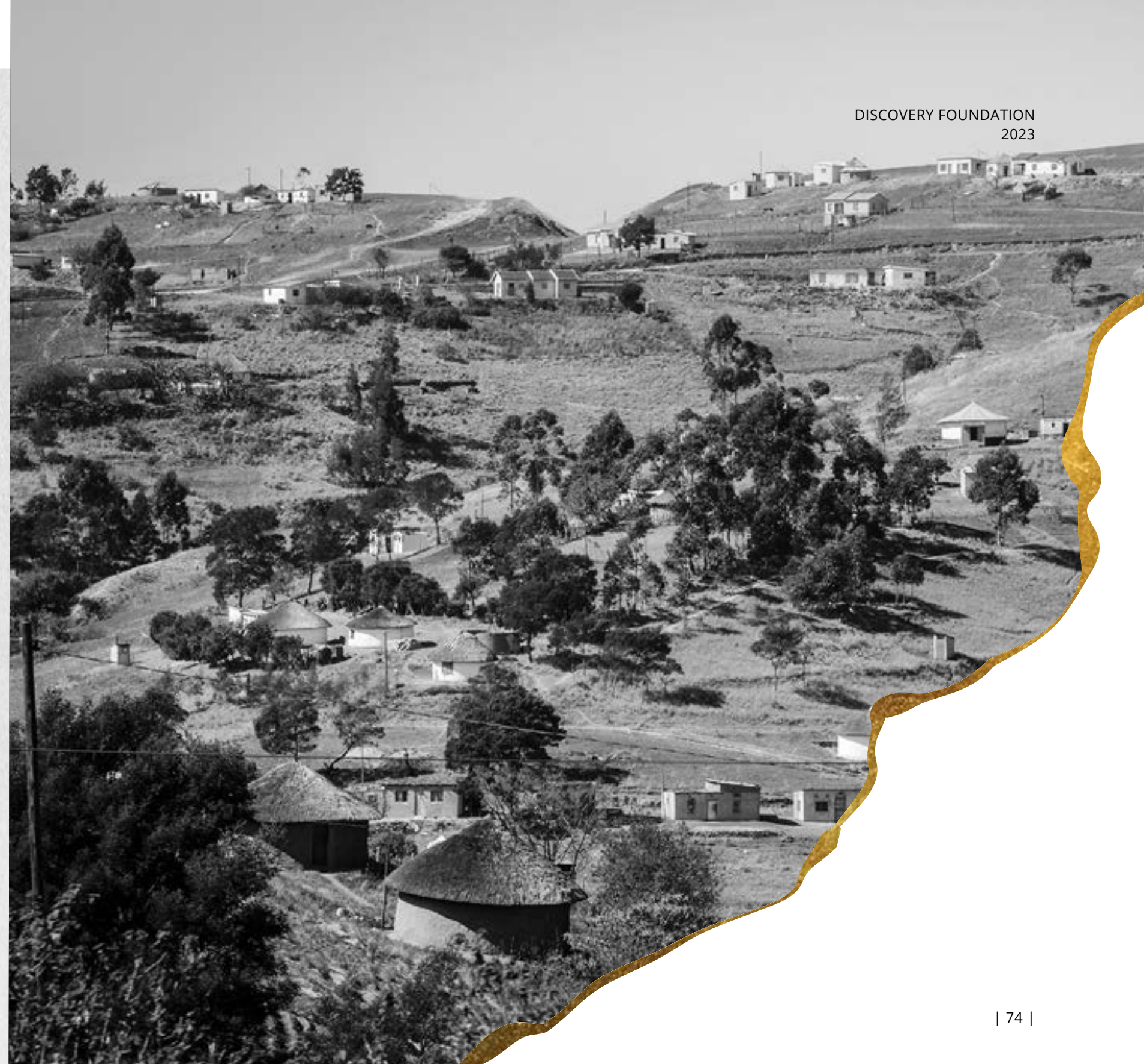
As a young man, Dr Milligan quickly realised his purpose would be better served in the public sector. Millions of South Africans use public health services and a number of them don't have access to mental health services, which is what Dr Milligan aims to change.

Dr Peter Milligan, a specialist psychiatrist and Head of Psychiatry at Ngwelezana Hospital in Empangeni KZN, has been at Ngwelezana for five years now. As an experienced medical professional, he has spent 39 years working in public health.

Ngwelezana Hospital is a large regional hospital that supports 16 rural district hospitals. Dr Milligan has identified a big need for people in northern KwaZulu-Natal. "We only have two psychiatrists for a region of more than two million people. We have no psychiatric hospital, our nearest psychiatric hospital is at Madadeni which is in another region, about three to four hours away," says Dr Milligan. It's a four-hour drive each way to some of these district hospitals.

Unfortunately, there's a low level of mental health skills in these hospitals, which is why Dr Milligan applied for the Discovery Foundation grant. Dr Milligan is the recipient of the Discovery Foundation Healthcare for Rural and Underserved Areas - Institutional Award 2022/2023. The funding from the Discovery Foundation will support training and capacity development, particularly for medical staff working at these 16 hospitals.

The Discovery grant is supporting outreach programmes aimed at teaching and training staff at the nearby 16 district rural hospitals that refer patients to Ngwelezana Hospital. This hospital trains medical staff towards a Diploma in Mental Health as well as online consultation.





The challenges faced by the medical staff at Ngwelezana Hospital have resulted in doctors with high stress levels. That was particularly true during the COVID-19 pandemic when the number of patients referred to Ngwelezana Hospital increased overnight.

The strife brought on by COVID-19 was one of the hardest periods Dr Milligan has been through as a medical practitioner. Ngwelezana Hospital was the referral hospital for all severely ill COVID-19 patients in the region. The large increase in patients meant instant added pressure on the medical staff.

Dr Milligan developed a programme called 'Taking Care' to support health workers facing high levels of stress and burnout. Dr Milligan describes it as caring for the carers'. The programme is a preventative measure to decrease stress and anxiety and to prevent medical staff from experiencing burnout and leaving the hospital.

When you identify gaps in a system you also have the responsibility to come up with solutions. Many would be overwhelmed at the responsibility Dr Milligan is faced with, yet he remains excited about the opportunity to apply his strategic vision towards integrating mental healthcare into the primary health care system.

"One of my jobs in visiting these district hospitals is finding a champion, finding one doctor with an interest in mental health and then we work alongside them, train them and try to support them as much as we can," says Dr Milligan.

"What has kept me going for the past 39 years is a simple philosophy that you make the most of what you have," concludes Dr Milligan.

# Dr MARTIN CHOSHI

*From herding cattle to dreaming of a teaching hospital in the villages of Limpopo, Dr Martin Choshi has focused his efforts on creating an environment that will allow doctors to want to stay in rural medicine.*

*Institutional*  
AWARD 2022

**G**rowing up in a small village outside Polokwane in Limpopo, Dr Martin Choshi always wanted to be close to his community so he could be of service.

He has spent most of his medical career in the same area where he grew up, helping patients, upgrading the local hospital, motivating the youth and steering several into the medical field.

He is passionate about his work, patient care and ensuring his staff at Kgapane Hospital have an environment where they can thrive and, in turn, offer the best service to patients.

But his journey has not always been this clear and focused.



Dr Choshi grew up in a small village outside of Polokwane herding cattle. His mother was a domestic worker, and his father was a taxi driver. It was a tough childhood, but it was a life he would not trade.

"When I am home, I sometimes still herd cattle. Growing up, I was more inclined towards nature and spent much time in the bushes, herding cows and exploring the outdoors," he says.

Coming from a family of six siblings, with one older brother and four younger sisters, Dr Choshi unfortunately lost his father while he was studying at medical school, leaving him to be raised by his mother and making him the breadwinner from his stipend while in medical school in Cuba.

"When I was in grade six, my friends and I discussed our future aspirations. I can't recall where it came from, but I said I wanted to be a doctor because doctors earned R99,000. I don't know where I picked that up. If it wasn't a doctor, I wanted to be a vet. As long as it was a doctor," he explains his decision to enter the medical fraternity as a funny story.

However, by the time he was meant to go to university, he couldn't. Dr Choshi spent the year being a handyman, doing plumbing, electrical work, landscaping, and spending time fixing cars with his father on weekends.

In 2004, Dr Choshi received an opportunity to study medical science at the University of Limpopo. His dreams of studying medicine were initially met with scepticism from his family. He recalls, "I was given a form to apply for a scholarship to study medicine in Cuba. When I told my father about it, he didn't take it seriously, thinking it was just a joke. So I signed the forms myself and was selected for the scholarship."



"I received offers from good companies and private hospitals. I didn't take them because my passion is still in public health. I still believe that I need to plough back into the community."



And then in 2015, after their internships and community service, he and four other doctors decided to remain at Kgapane Hospital in Limpopo to focus on improving patient care.

"I saw a need to join management. I was on a lot of committees at the hospital, which meant I did not specialise because things didn't go well for me. I ended up as the senior clinical manager," he says.

However, before then, there were several challenges in the hospital relating to poor outcomes in maternal care, maternal morbidity and mortality, and they had few doctors on staff. When he started in the position, his task was clear: recruit more doctors, improve maternal outcomes and take more doctors for training.

He says, "I received offers from good companies and private hospitals. I didn't take them because my passion is still in public health. I still believe that the government has given me something for free. And I need to plough back into the community. Hence, my passion for academics and improving the healthcare of my people under constrained environments. You need to soldier on".

Dr Choshi noticed that for him to improve the intake of doctors or retain them in his hospital, he needed to ensure they had adequate accommodation. And a back room would not cut it. He had to have call rooms that were close to the hospital and also focus on the doctors' professional development.

He wanted to retain more doctors to get higher quality for his patients. His drive is to improve the patient-doctor ratio and to build the environment for that to happen.

His aspiration of a resource centre, that - that was funded by the Discovery Foundation Healthcare for Rural and Underserved Areas - Institutional Award 2021/2022 went from a dream to a reality.

"Just recently, one of my doctors was graduating with a diploma, and we have another two writing in June this year. You can see that the resource centre has benefited my doctors and the Kgapane Hospital area as a whole."

The results are evident. Dr Choshi said that his number of doctors has increased. He runs 20 clinics, one CHC and five mobile clinics. In his area, the rural communities would only see a doctor once every two weeks. This equated to about 50 patients a month. Now the clinics are seeing about 3000 patients.

"With more resources, we could visit the clinics at least twice weekly. If you provide services to them, then you will improve the health outcomes of our people in rural areas."

# DR RENE KRAUSE

*Meet the Western Cape's  
Interdisciplinary Palliative  
Care and Medicine champion,  
Dr Rene Krause.*

*Rural Institutional*  
AWARD 2022



A life-threatening illness is, at times, unavoidable, when you or a family member may be affected, facing the most vulnerable moments of your life.

In that time of despair you'll need the care and support of someone like 49-year old Dr Rene Krause from Cape Town, Western Cape. Dr Krause describes herself as a "palliative care champion", caring for those who are unable to get care. Her work can be mistaken for end-of-life care, but Interdisciplinary Palliative Care and Medicine (IPCM) is a comprehensive approach to healthcare for patients with a life-threatening illness. "It's the way we look after patients with a life-threatening illness from the time they are diagnosed. So it's an approach using a biopsychosocial and spiritual approach. So basically looking after the patient physically, really looking at the pain and the symptoms they might experience. Looking at them emotionally, looking at the family, and what is going on around them with the family," says Dr Krause.

"And then finally, when we're looking at it spiritually, it's also ensuring that we are looking at what really gives them meaning at this difficult time of their lives," adds Dr Krause.

As the recipient of the Discovery Foundation Healthcare for Rural and Underserved Areas - Institutional Award 2022/2023, Dr Krause is working on multiple projects targeting the most vulnerable and underserved areas in the Western Cape. One of them is Heideveld Manenberg, which many have been described as a 'gangster area.' "It's an area where there's not a lot of access to ambulances. And we have a big clinic there with an emergency care unit. Working with the University of Cape Town (UCT), we've used education as a model of bringing students and infrastructure into the clinic. And, therefore, building on interprofessional care with the students, and then further access for palliative care for the patients," she explains.

Educating students at UCT where Dr Krause is based, is what gives her the most joy. Changing the current state of care in our institutions has to be approached with a long-term view and retaining skills and creating better understanding is one of the many ways we can begin to provide quality health-care for South Africans of all ages. As a lecturer for the IPCM division at UCT, Dr Krause has a hands-on approach to imparting knowledge. "We've got lovely feedback from students and how it impacted them to see the delivery of palliative care in a primary care setting and in an emergency care setting and that it changes the mindset and the culture of care," says Dr Krause.

Dr Krause and the Interdisciplinary Palliative Care and Medicine division are working alongside the Department of Health to ensure palliative care is integrated into the South African health setting. "We've done community engagement, education, community healthcare worker support. And we've created interdisciplinary teams with social workers in the primary healthcare clinic with the funding, to support the most vulnerable patients in the communities. It's an ongoing process," says Dr Krause.

Through these projects, Dr Krause has been able to demonstrate the importance of collaboration to provide the best care. She has engaged in transdisciplinary and multidisciplinary engagement. "I was able to work with emergency medicine, family medicine, palliative medicine, social work, we're able to work together to enable this. And palliative care as such, is a discipline where we work with social workers, nurses, administrators, spiritual carers, a wide variety of people," says the 49-year old doctor.

New nursing sisters were recently employed in palliative care across the Western Cape. "The Discovery grant has really enabled us to demonstrate the impact of getting palliative care in the primary care setting, as well as the Department of Health," says Dr Krause. These new nursing sisters will enable IPCM to see the impact of an integrated approach to palliative care, from small towns to urban areas. The patients will have access to proper pain control, symptom control and biopsychosocial support when they are most vulnerable.



*Rural Institutional*  
AWARD 2022

# Dr JANIE T STANFORD

*Increasing access to  
palliative care through  
community involvement.*



Growing up Dr Janet Stanford was inspired by her mom, a nurse who often volunteered in her small-town community in Kokstad, KwaZulu-Natal (KZN). Every year, Dr Stanford's high school would select one hospital within South Africa to visit, and when she was in Standard 8 (Grade 10) her school went to a missionary hospital, Charles Johnston Memorial Hospital in Nquthu, north of KZN. "I was very inspired by the work done at that hospital," she says. This led her to pursue a career in medicine. "What pushed me into palliative medicine was that I was working in the municipal clinics in Knysna as the clinic doctor when the AIDS epidemic came, and there were no antiretrovirals in the public sector. So I decided to do the Masters in medicine to help people with their symptoms even if they couldn't get their antiretrovirals," adds Dr Stanford. After completing her masters, she started working at Knysna Sedgefield Hospice in January 2006 as the resident palliative doctor. She was also the Chief Executive Officer until two years ago, when she decided to step down as CEO, concentrating on the clinical side of the hospice.

The pandemic in 2020 reminded Dr Stanford of the same frustrations she faced during the AIDS pandemic in the 1990s to early 2000s, when patients did not have access to medicine. "We were suffering from moral injury all the time and our lay counsellors who were having to tell people their diagnosis couldn't give them hope really," she says.

It was a challenging time for Dr Stanford but it also served as a reminder of why palliative care is a vital part of healthcare. During the pandemic, Dr Stanford and her team had to make difficult decisions due to COVID-19 regulations, limited resources and other factors outside of their control. "A lot of our volunteers are quite elderly, we have way more volunteers than we have staff. Those elderly people were vulnerable to getting COVID-19 if they worked in the shops, or if they put on a golf day or something. They were all quite nervous, and some of them weren't comfortable doing their volunteering work, and our income stream suffered quite significantly over that period as well," she says.

In the midst of all these challenges, Dr Stanford and her team still found a way to do something positive for the community. They assisted the Knysna Hospital with at-home COVID-19 vaccinations for people who couldn't visit the hospital because they were taking care of homebound patients.

Knysna Sedgefield Hospice offers a homecare programme for patients living with a chronic condition or patients who have been diagnosed with a serious illness that has not reached an advanced stage. The hospice doesn't have an in-patient programme, and Dr Stanford, along with a nurse and social worker, visit patients and offer a home-based care plan. "We try to get the patient and family to participate in creating a care plan to look after the patient with the faculty members as the primary carers and our hospice staff as the support team for whatever needs to happen," she says. "Maybe getting disability grants, or making plans for children who will be orphaned when the parent dies, or managing how to get their medicine from the clinic or hospital," adds Dr Stanford.

Dr Stanford and the Knysna Sedgefield Hospice are the recipients of the Discovery Foundation Healthcare for Rural and Underserved Areas - Institutional Award 2021/2022. Through the funding received, the hospice was able to conduct a five-day training course for 60 healthcare professionals in Oudtshoorn, Mossel Bay, George and Knysna in the Western Cape region, to increase access to palliative care.

"We trained a multidisciplinary team of healthcare professionals such as doctors, nurses, social workers, pharmacists, admin people, occupational and physiotherapists," explains Dr Stanford. The training included knowledge on self-care, psychosocial, virtual care and physical care of the patient and family. The healthcare professionals also learned about networking and looking at specific problems that can be resolved quickly.

"In Oudtshoorn, we found out it was taking three days for clinic patients to get morphine once the doctor had visited. We helped them to work around that so that the patient can get morphine quicker," says Dr Stanford. They also helped put together a palliative care team for Mossel Bay. The funding from the Discovery Foundation also helped them establish an ongoing palliative care mentorship programme. "That's been very helpful, to be able to sort of find out the ongoing challenges with establishing good palliative care in different regions and help them along the way," says Dr Stanford.



"A lot of our volunteers are quite elderly, we have way more volunteers than we have staff."

# MARYKE BEZUIDENHOUT

*Maryke Bezuidenhout aims to drive improvements in the quality and coverage of care in mental health and neurorehabilitation services in rural KwaZulu-Natal.*

Describing herself as someone who prefers parameters over rules, thrives in chaos, and is comfortable with the unknown, Maryke Bezuidenhout grew up in capital cities in Europe and always loved animals and dreamt of becoming a veterinarian. Life had other plans though, as she relocated back to South Africa when she was in Standard 8 (Grade 9) and later became a physiotherapist. After spending every varsity vacation hitchhiking around southern Africa on a shoestring budget, observing the sheer scale of inequality and injustice,

Maryke committed herself towards initiating change. After 21 years of living and working in the deep rural heartlands of Manguzi, KwaZulu-Natal, Maryke feels at peace in this tranquil environment.

The 43-year old shares her home with two horses, two cats and a few chickens. She explains how children and marriage were never part of her plans, "I chose not to marry and I also chose not to have kids."

*Rural Institutional*  
AWARD 2023





"We are trying to ensure that all these patients are appropriately screened for co-morbidities and additional health and social needs, and referred to the correct level of care and health professionals via a triage system on a six-month to annual basis."

As the Discovery Foundation Healthcare for Rural and Underserved Areas - Institutional Awards 2022/2023 recipient, Maryke is being recognised for her work as a committee member for Manguzi Skills Development Initiative (MSDI).

MSDI is a non-profit organisation that supports the healthcare services within the Manguzi Hospital health catchment area. MSDI was started in 2010 in response to a growing need for support for healthcare professionals at Manguzi Hospital in the area of continuous professional development. Initially, it reimbursed healthcare professionals for courses attended in line with their unit's skills development plan. The organisation also organised district-wide training weekends, often partnering with the HIV Clinicians Society and other similar organisations.

In 2014, the committee decided that in order to have a greater impact on healthcare services, it needed to narrow its focus. This was because of the relatively high attrition rate of professionals in a rural area, as well as MSDI being unable to control how knowledge from the sponsored courses in the various hospital sections was implemented. It selected two severely neglected areas of care, namely mental health and neurorehabilitation, and worked closely with the managers in charge of these services to develop long term strategies and identify key resource and skills gaps that needed addressing.

In order to build in a measure of sustainability to each service, MSDI also extended its support to include healthcare workers and community based disability organisations in the healthcare area. Its aim is to drive improvements in quality and coverage of care in mental health and neurorehabilitation services through supporting skills development of healthcare workers and community support workers as well as addressing key resource gaps. "MSDI focuses on neurorehabilitation and mental healthcare services because these services are utilised by a particular subset of the population that is particularly vulnerable. These subgroups struggle to access healthcare and struggle to remain in healthcare for a number of reasons," says Maryke.

The patients that she and her team care for have multiple comorbidities and quite complex health needs that require a lot of input from a variety of professionals across various platforms in a coordinated fashion. As a result of their disabilities, they will require ongoing input from various health professionals throughout their lifetime, sometimes intensely, and in other times, infrequently. However, because of the numerous barriers they face in accessing appropriate care of acceptable quality, a more proactive approach to monitoring coverage and quality care is required, and service deliveries need to be rethought.

“As a result of how undergraduate training works with healthcare professionals, a lot of our junior therapists, doctors, and nursing staff don't have the skills, knowledge and contextual exposure to actually manage these patients effectively or to work within the multidisciplinary team, and very few national guidelines exist,” explains Maryke.



MSDI has made superb strides with the Manguzi rehabilitation team in expanding coverage of care, retention in care and provision of assistive devices to patients with cerebral palsy, and spinal cord injuries. Through decentralising rehab services largely to home level, partnering with local disability organisations, and integrating disability and rehab services into existing primary healthcare structures.

Yet much more can be done.

The rehabilitation manager says, "At the moment, these clients are seen primarily by the rehabilitation team at homestead level, and receive very few sporadic reviews by other health professionals. What we are trying to do is to ensure that all these patients are appropriately screened for co-morbidities and additional health and social needs, and referred to the correct level of care and health professionals via a triage system on a six-monthly to annual basis - while at the same time not wasting a patient's money through multiple separate uncoordinated or unnecessary visits and not overloading the existing health professionals especially at the PHC (public healthcare) clinic level by referring in everyone rather than just those who actually require it."



*Rural Institutional*  
AWARD 2023

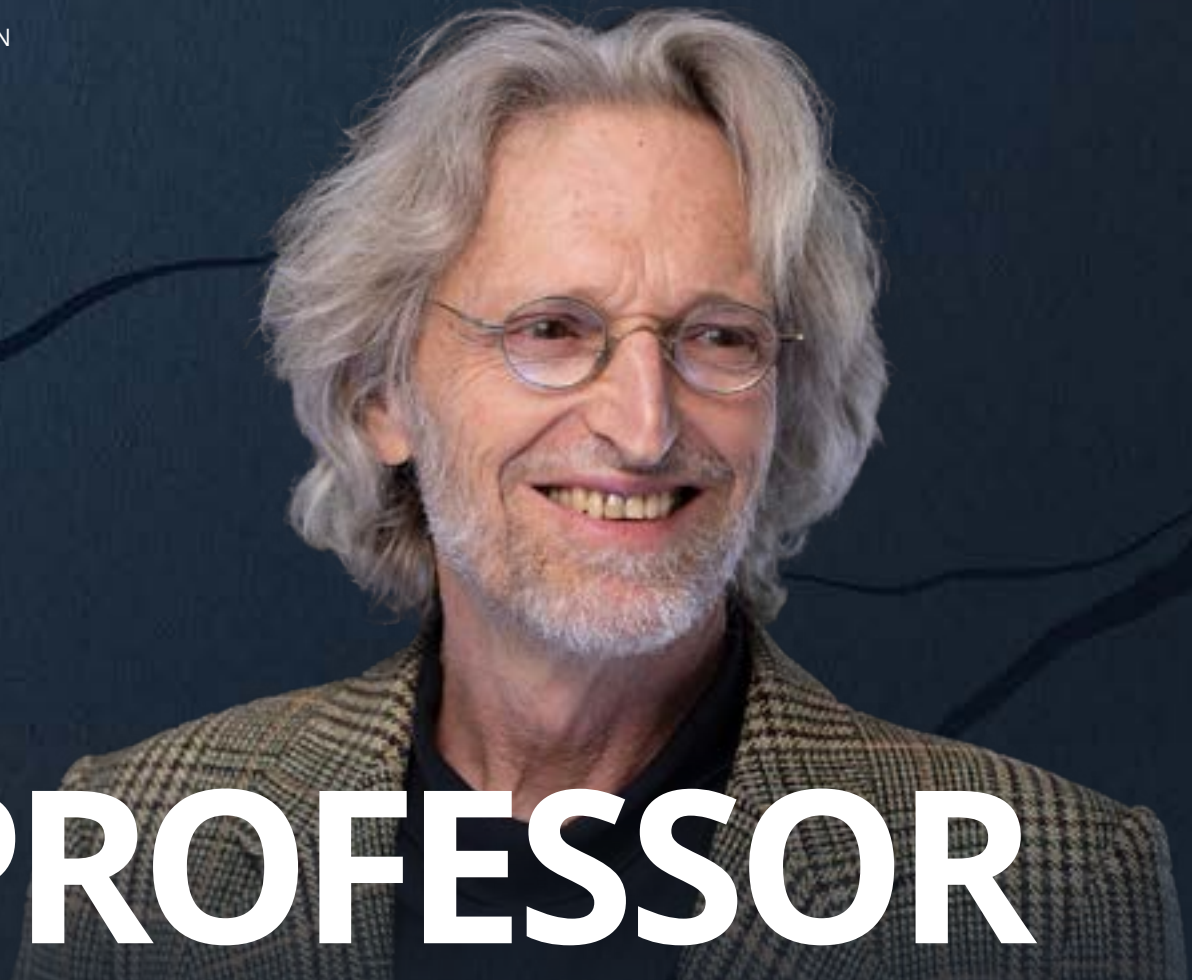
# Dr GILLIAN DOUGLAS

*Dr Douglas plans to make mental health services more accessible in rural KwaZulu-Natal.*

When Dr Gillian Douglas arrived at Ngwelezana Tertiary Hospital five years ago, the hospital had only two psychologists and there were a further two psychologists in the surrounding 16 district hospitals. That's four psychologists serving three million people in northern KwaZulu-Natal.

Dr Douglas is the Head of Psychology at Ngwelezana Hospital and one of the recipients of the Discovery Foundation Healthcare for Rural and Underserved Areas - Institutional Award 2022/2023. She has identified areas of need and one of them is equipping staff with mental health skills. "We're living in a community with a high incidence of gender-based violence, of sexual trauma and poverty. All those things have an impact on people's mental health."

"So we try being holistic: how can we learn to recognise mental health problems early, and identify where people are having a lot of stress? How can we equip the staff working directly with mental health, and the staff at a primary care level with mental health skills so that they can understand, intervene, and transmit and teach the broader community," says Dr Douglas.



# PROFESSOR

# GERT MARINCOWITZ

*Rural Institutional*  
AWARD 2023

*In transforming healthcare delivery Dr Gert Marincowitz is dedicated to patient-centred care.*

Recognising the importance of caring over curing, Dr Gert Marincowitz has championed palliative care as a means of making a significant difference in the lives of those who may have lost hope for a cure. His philosophy embodies the belief that healthcare should focus on compassion and support, even when a complete cure may not be possible.

In addition to his accomplishments in primary care and community engagement, Dr Marincowitz has been involved in the post-graduate training of family physicians, contributing to the development of specialised healthcare professionals who are well-equipped to provide comprehensive primary care services. His commitment to education and mentorship ensures that future generations of healthcare practitioners share his passion for patient-centred care.

“Healthcare is improved by people with passion and dedication.”

Dr Marincowitz has been awarded the Discovery Foundation Healthcare for Rural and underserved Areas - Institutional Award 2022/2023. The grant will be used to train palliative care teams in each hospital, empowering them to provide compassionate end-of-life care and coordinate palliative care services within their hospital catchment areas. By building capacity and expertise in palliative care, Dr Marincowitz aims to establish a sustainable network of support for patients and their families during challenging times.

When reflecting on his proudest moments in the healthcare field, Dr Marincowitz humbly emphasises the small successes of daily life and the achievements of his postgraduate students.

For him, the true measure of pride lies in the impact he has made on individual lives and the knowledge that he has inspired and nurtured the next generation of healthcare professionals.



Rural Institutional  
AWARD 2023

# Dr JENNI NASH

*Transforming healthcare delivery  
with cost-saving benefits of  
district hospital treatment.*



From teaching nurses and international interns to streamlining a bloated yet ineffective healthcare system, Dr Jenny Nash is on a journey of revolutionising the sector: one district hospital at a time.

By analysing various institutions' workloads and patient needs, she seeks to optimise their organisational structure and equip them accordingly. This approach ensures that doctors and healthcare facilities can effectively serve their communities.

Dr Nash has been awarded the Discovery Foundation Healthcare for Rural and Underserved Areas - Institutional Award 2022/2023. This grant, which will serve to support Butterworth Hospital as a pilot project with such things as consumables, will enable Dr Nash and her team to demonstrate the effectiveness of their concept while focusing on sustainable models tailored to the specific needs of each hospital, informed by patient data and available resources.

Dr Nash's journey in healthcare began with a childhood shaped by her parents' teaching profession and their commitment to fostering unity across racial lines in South Africa.

She says, "That had an impact on me as a kid. It got me to recognise what was happening in South Africa. We had many people staying with us from all nationalities and backgrounds."

# DR VHUTSHILO NETSHITUNI

*Dr Netshituni spreads  
the word about the  
early warning signs  
of childhood cancer.*

*Rural Institutional*  
AWARD 2023



As soon as Dr Vhutshilo Netshituni starts talking about her work, her face lights up. She first received the Discovery Foundation Institutional award in 2019, and has once again been selected as a recipient for the Discovery Foundation Healthcare for Rural and Underserved Areas - Institutional Award 2022/2023.

In 2017, she joined Polokwane Hospital, formerly known as Pietersburg Hospital, in the Limpopo region, becoming head of the province's only paediatric oncology department. After joining the department, she quickly recognised the lack of knowledge surrounding childhood cancers.

Some members of the community believed that cancer only affects adults and that children were being referred late to the oncology unit, which prompted her to establish an awareness campaign. Dr Netshituni used the initial grant from the Discovery Foundation to establish a campaign educating and training nurses in the surrounding district hospitals.

The campaign was a resounding success. Dr Netshituni adds, "We have done well with the nurses but we decided to reapply again so that we can get funding to go out again. Now we target the doctors so that all the doctors are aware of the early warning signs".



Rural Institutional  
AWARD 2023

# Dr MANDY WESSELS

*Dr Mandy Wessels leads  
a life-saving programme  
for children.*

Hailing from Johannesburg, Dr Mandy Wessels developed a strong interest in paediatrics during her childhood. She vividly remembers her remarkable childhood general practitioner who went above and beyond, making house calls and providing care at any hour. Inspired by this experience, she set her heart on becoming a paediatrician at nine. Despite his attempts to dissuade her from medical school, she remained steadfast in her determination.

Currently a paediatric specialist serving at Queen Nandi Regional Hospital, Dr Wessels leads a dedicated team focused on saving the lives of children. She has been awarded the Discovery Foundation Healthcare for Rural and Underserved Areas – Institutional Award 2022/2023, to assist in rolling out the new software for the Child Healthcare Problem Identification Programme. The rollout of the software has been long-awaited and sorely needed.

As the programme chairperson, Dr Wessels oversees auditing child deaths in healthcare facilities nationwide. By gathering data through a standardised form and entering it into a database, the programme enables comprehensive analysis and provision of recommendations through the Ministerial Committees. However, the system needed a software upgrade. Dr Wessels and her team are excited that the rollout is finally happening thanks to the Discovery Foundation grant.

One of the significant strengths of the programme lies in its ability to assess the quality of care provided to children within healthcare facilities. It also identifies modifiable factors at various entry points in the system, such as caregivers, clinical personnel, or administrators.



“The findings vary. Generally, we find that administratively the biggest thing that comes up is the lack of ICU high-care beds, especially during seasonal peaks. At the level of the home, many patients still go to traditional healers first. It delays them getting the definitive care,” explains Dr Wessels.

Others are poverty-related, where children do not have enough of the quantity and quality of food.

Despite the challenges inherent in any job, Dr Wessels remains deeply passionate about her work, “I love the children; I love the parents. I love the relationships that you form and the healthcare workers. They are incredibly inspiring people who keep showing up and doing their best amid the resources they have and may not have.”

Even during difficult times, such as her community service years in a small hospital in the Eastern Cape, she persevered and ultimately found her calling in paediatrics. Although her current role in management has distanced her from clinical work, she continues to share inspiring moments with her team.

“We’ve had a tough season with viruses. I’ve had fantastic days when children go home. Even in some of the cases when things don’t go well, the relationships you form and getting the parents to the point of acceptance is rewarding in a different kind of way. What keeps me coming back is watching babies go home when you think they wouldn’t make it,” explains Dr Wessels.



From a managerial perspective, Dr Wessels has undertaken various projects to improve children's care quality. For example, she spearheaded the installation of an outdoor and indoor playground at the mother-and-child hospital. While the COVID-19 pandemic initially prevented its use, she later collaborated with Reach for a Dream to provide an early childhood development intern who engages with the children in the ward. Witnessing the children now enjoying the playground and the revitalised garden brings her immense satisfaction.

However, there have been challenges along the way, including staff losses and frozen posts. Because Queen Nandi Regional Hospital is located on the outskirts, attracting new healthcare professionals can be difficult due to lifestyle considerations.

Nevertheless, Dr Wessels praises her committed team, whom she refers to as dedicated soldiers, as they consistently give their best despite the difficulties. To foster a supportive work environment, she organises bonding sessions with her team, allowing them to connect personally.

Maintaining a work-life balance has also been a struggle for Dr Wessels. A few years back, the demanding schedule and staff shortages at one stage compelled her to work 15-18-night duties in a month. She and her boss don't believe in leaving gaps in the roster. However, through partnerships and teamwork, this changed. Dr Wessels comments, "That was quite hard on my family and kids. But again, I was very supported by my team. I would find flowers on Mother's Day because I was here."

In her managerial role, there has been an increase in audits and paperwork, often leaving limited time for practical implementation. Dr Wessels strives to deliver better services despite time constraints and higher expectations. Her skills in managing people, understanding budgets, and handling procurement were acquired through her studies in a subspecialty called child health and community paediatrics at the University of Cape Town. These skills were not part of the traditional medical curriculum.

Her journey in the medical field has taken her from Johannesburg to different hospitals across South Africa, honing her expertise and nurturing her passion for paediatric care. Dr Wessels' unwavering dedication to improving child healthcare and commitment to quality improvement initiatives serve as an inspiration to her colleagues and a beacon of hope for the children she serves.

# DR LEBOGANG PHAHLADIRA

*Dr Lebogang Phahladira's pioneering work sheds light on innovative approaches to schizophrenia treatment and care.*

*Distinguished Visitor*  
AWARD 2022

Dr Phahladira and the team at Stellenbosch are trying to find more answers to close the gaps in schizophrenia treatment in the global south and low-to-middle income countries. He wants to ensure nations can find the data and create solutions that are not copied and pasted from Europe.

He says, "Africans have to take charge and part of it, is that we need to contribute with good-quality science to help us solve our problems. Research is much more than the individual. It's about how we contribute to Africa's development."

The research, partly funded by the Discovery Foundation Healthcare for rural and underserved areas - Distinguished Visitor Award for 2021 / 2023, has shown that the type of medicine given to patients is important. He argues that there must be a shift from oral medicine to injections that can be given every two weeks or monthly because patients with schizophrenia don't know they are ill. They can't be expected to take the medicine, if they don't believe they are ill.

"We have shown that in some of the patients, you do not need to be using high doses of medicine, even if they are very ill. We use low doses of medicine that are better tolerated, so they can function better with fewer side effects. We have also shown that once the medicine is an important cornerstone of treating patients, we must do smaller things to support them and their families."



