

1000 from a 1000 CHALLENGE

Zithulele Hospital on the beautiful but poverty stricken Wild Coast of the Eastern Cape, has gone from backwater to a Beacon of Hope.

But in 2012 interested professionals will look elsewhere as there is nowhere to stay.

You can help contribute to the future health & education of our community.

R1000 from a 1000 people will help us build much needed accommodation.

Siphenathi learnt to walk again with the help of our therapists. Junior is alive because his mom got an emergency caesar and an experienced doctor was on hand to resuscitate him. Philiswa collects her life-saving medication at her local clinic thanks to our pharmacists. Andile can hear again because he got a hearing aid.

They come from far and wide seeking the help of the multi-disciplinary team at Zithulele Hospital, which has grown from only three doctors in 2005 to nearly 30 professionals by the end of 2011. Furthermore, four NGOs are now active in the community, further expanding access to health and education.

A positive cycle has been created through the increasing staff complement: each person who joins the team makes it less daunting for the next; a bigger team means more word-of-mouth advertising, encouraging other suitable people to join; more people lessen the workload to a manageable level, making working here a viable long-term option and allowing services to be expanded; and a bigger and more varied team (including specialist teachers and volunteers working for NGOs) creates a more balanced professional environment. However, despite enormous progress that the hospital and community has made, there is still significant room for improvement that can only be addressed through recruiting further professionals.

Regrettably, in 2012 we do not have the ability to accommodate professionals who are interested in being part of these improvements. Although accommodation has been expanded both through government building and NGO renovations, we have reached the point of having to turn people away as there is nowhere for them to live. Unfortunately, the Department of Health does not have sufficient budget to increase accommodation further. For those of us from urban or semi-urban areas, the obvious solution to the accommodation shortage would be renting a local room or house from a third party, but there are no such options in Zithulele.

The Jabulani Rural Health Foundation is a non-profit organisation that exists to support the work of Zithulele Hospital and development of the surrounding community. This community has provided land on which to build accommodation and on which the Foundation has already managed the renovation of a community centre and library. Building accommodation on this land will therefore not only contribute to further development of health and education in Zithulele by providing much-needed housing for professionals, but will be a source of sustainable funding for the community centre and library, as well as create a number of short-term jobs.

Help us from not turning away future Siphenthathis, Juniors, Philiswas and Andiles because we've had to turn away the professionals who could help them. You can help us secure the future of health and education in the Zithulele community. Will you?

Your R1 000 (or £80) will bring us closer to this goal. Please consider making a donation today. Tell your friends and family – spread the word and be a part of something big!

Donations don't need to be restricted to R1 000. You can donate more or less because any amount will help. As Jabulani is a registered NPO all SA donations are tax deductible (tax certificates provided). For more information about how to make a donation and the work of the Jabulani Rural Health Foundation visit www.jabulanifoundation.org and for more on Zithulele Hospital go to www.zithulele.org

When donating please use "1000" followed by "your name" as the reference. To donate now please visit www.jabulanifoundation.org

Thank you!



Rural E-Cape award winner: ‘My motivation – seeing medicine change lives’



Liz Gatley, Eastern Cape Rural Doctor of the Year.

Picture: Chris Bateman

Witnessing the change in AIDS patients, from death sentence to miraculous recovery in a single year as antiretroviral drug supply lines began flowing was the biggest motivator to continue doctoring in the deep rural former Transkei for Liz Gatley.

The Eastern Cape’s Rural Doctor of the Year admits that ‘overwhelm’ was her constant companion during her first (community service) year at Zithulele Hospital on the poverty-stricken but beautiful Wild Coast. This was in spite of having joined two experienced, dedicated husband and wife couples who had spent years building up a multi-disciplinary team that has since become the envy of rural peers country-wide. She bravely chose to stay with the posting even though a close friend she had applied with was posted to the city.

The overwhelm was not unknown to Gatley, who came from a 2007/2008 internship in the heavily AIDS-overcrowded medical wards of the Pietermaritzburg Hospital Complex. Here she witnessed dozens of patients dying monthly after six months or more of waiting in vain for antiretroviral drugs. ‘It was really depressing – I remember sitting in OPD at 3am and seeing the millionth person with HIV and

TB – you also forget that each person is an individual, so compassion fatigue quickly sets in,’ she says.

At Zithulele Hospital just one year later, the picture changed entirely, the local ARV clinic having become a place of hope, as had similar clinics nation-wide. Six months now represented the difference between a wasting AIDS patient slumped in a wheelchair and their walking again in close to robust health. ‘That’s very motivating ... One of the biggest motivators for me is seeing lives change – in fact it was one of that very clinic’s counsellors who persuaded me to stay at one difficult stage,’ says Gatley, whose postgraduate diploma in HIV – and compassion – have turned her into a much-loved stalwart at the adult and paediatric HIV clinics. She conducts the hospital’s monthly paediatric mortality audit and co-ordinates the weekly journal club for the doctors.

Crying with patients, in joy or sorrow

Senior colleague, Karl le Roux, Chairperson of the Rural Doctors Association of Southern African (RuDASA – which initiated the award), says that besides her excellent general clinical skills, going the ‘extra mile’ for patients, plus her ‘incredible memory

for them’, is what sets Gatley apart. Baking cakes on their birthdays, cooking boerewors for severe burn victims getting insufficient protein from the hospital kitchen, helping with transport money or bringing clothes for Christmas are among her many spontaneous gestures. ‘Her ability to see patients as people and treat them with dignity, often crying with them in joy and sorrow, demonstrates what is best about rural family medicine,’ reads her RuDASA award citation.

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Gatley is a University of Cape Town graduate like her mentors, the Gaunts, Ben (clinical manager) and Taryn (part-time child health services and elective student supervisor), and the Le Roux’s – Karl (integration of hospital and clinical antenatal care and HIV services) and Sally (part-time ARV provision and HIV care). This solid core of leaders, who have three children each, is supported by six other doctors (including Gatley), most of whom are not going anywhere soon – because of the leadership and supervision. Gatley says had she not done a first-year elective at Zithulele as a medical student, she may never have applied to do her community service there. Illustrating the morale-boosting effect of leadership commitment, she said one of the veteran theatre nurses confessed to her one night that the ‘lazy’ attitude of nurses changed when it dawned on them that the Gaunts were ‘here to stay’ (after a succession

Illustrating the morale-boosting effect of leadership commitment, she said one of the veteran theatre nurses confessed to her one night that the ‘lazy’ attitude of nurses changed when it dawned on them that the Gaunts were ‘here to stay’ (after a succession of short-lived predecessors). ‘She said that from that point onward they began to take Ben Gaunt’s exhortations seriously.’

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Another big plus for Gatley is the goodwill of her patients in spite of their having experienced the post-94 'winds of change' as little more than a breeze above their remote valleys. For her it's a constant delight, as is their help in expanding her 'medical Xhosa.' Asked the perennial question of what she'd do if she had a magic wand to wave at healthcare in her province, her

response was immediate: 'good management at all levels.' 'From good human resources, to quick and appropriate postings, correctly paid salaries, drug procurement, transport and ambulances ... Just good channels of communication so that you know exactly who to go to and who will handle problems. Because they're so absent, there are days here when I feel I should be doing anything but this job.'

You'd think a hospital that has halved its perinatal mortality rate in just six years and provides an unheard-of rural mix of services

ranging from dentistry, physiotherapy and dietetics to speech therapy and audiology, deserves a tiny sprinkle of fairy dust.

Gatley's future plans include specialising in family medicine and she's banking on at least one speck of fairy dust – the shift to create a programme with a year or two of specialist training in a rural setting, instead of only at a regional or tertiary hospital.

Chris Bateman

chrisb@hmpg.co.za.

Scholarship winner plans to boost clinical research



Winner of the Hamilton Naki Award, prospective University of Cape Town PhD student and paediatrician, Dr Rudzani Muloiwa, (centre) with Grootte Schuur's Chief Specialist and Head of Medicine at the Faculty of Health Sciences at UCT, Professor Bongani Mayosi (left) and Mr Derek Hanekom, Deputy Minister of Science and Technology.

Prospective University of Cape Town PhD student and paediatrician, Dr Rudzani Muloiwa, has won the prestigious Hamilton Naki Clinical Scholarship for outstanding academic researchers. His long term-plan is to grow academically so he can support other talented up-and-coming researchers, thus adding to South Africa's arsenal of weapons against childhood illnesses and improving healthcare, especially for children. Chosen by an independent selection committee drawn from the eight faculties of Health Sciences, a trustee of the Physicians Partnership Trust and a representative of sponsors Netcare, he is the fifth recipient of the annual award aimed at supporting medical specialists from disadvantaged backgrounds to pursue doctoral or post-doctoral research. Muloiwa obtained his MBChB from the University of KwaZulu-Natal and an MSc in Public Health from the London School of Hygiene and Tropical Medicine. There are just five black African clinical research scientists with a strong publication record in South Africa – part of an ageing, shrinking and grossly under-funded academic cadre that creates the ongoing knowledge so vital to handle our debilitating epidemics. (See article on p. 20.)

Chris Bateman