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Introduction to Annual Report
by Foundation Director Ben Gaunt

The Jabulani Rural Health Foundation was founded in 2007. Our vision is to bring hope and positive change to the community around Zithulele Hospital by supporting the hospital and partnering with the community in its development and growth.

We are different to many other similar organisations in that within the vision set out above we don’t have a particular agenda or flagship project. We are not driven by externally imposed targets or the need to see something tangible for our labours.

While there are many projects which do have specific outcomes, our primary focus is on facilitating change. We are happy to be in the background, helping with the things large and small that make it possible for others to make a difference. That’s why one of our core values is working in partnership. If Zithulele Hospital becomes known as a beacon of hope and excellence, our community receives benefit – both directly from the health care they receive, but also indirectly from the greater number of opportunities that can be found in growing, developing communities. Likewise, if any of our NGO partners succeed in their efforts to make people’s lives better, we celebrate that achievement.

This annual report details the efforts we made during the 2010-2011 financial year to help make that positive change reality. As you read it, you will see that there wasn’t a lot that was particularly glamorous, but every contribution has made the overall contribution of Jabulani to the hospital and community extremely significant.

As always, we could not have done without the incredible group of people who make Jabulani what it is. From our volunteers, some of whom offer as much as a year of their time, to our growing number of enthusiastic employees, to the individuals and companies who support us financially – everyone is so appreciated. We particularly want to welcome John Young, our first South African General Manager (but still a volunteer), who we hope will provide us with a bit more continuity.

The financial statements and auditor’s report accompany this annual report. You will be able to see that we have enjoyed excellent support this year and have again spent the money that has been entrusted to us carefully. We have transparent financial policies and accounting systems in place to ensure this remains a hallmark of our work.

May God bless you

Dr Benjamin Gaunt
JRHF Vision

We aim to bring hope and positive change to the community around Zithulele Hospital by supporting the hospital and partnering with the community in its development and growth.

JRHF Mission

To reach our vision we will focus on the following areas:

1. Health care
   a. Supporting the development of Zithulele Hospital and its surrounding clinics
   b. Helping improve access to quality health care
   c. Specific health care projects, including care for those affected by HIV/AIDS
   d. Improving nutrition through education and support

2. Education
   a. Supporting early childhood development
   b. Promoting literacy
   c. Supporting schools

3. The Environment
   a. Focussing on conserving and improving the environment

4. Poverty relief through community upliftment
   a. Employ & train local people to work for JRHF, where possible
   b. Job skill development
   c. Supporting entrepreneurs

JRHF Core Values

1. Valuing people’s worth
   Treating all people with dignity, respect, compassion & fairness.

2. Making prayerful decisions
   Making decisions which are consistent with our beliefs and taken in a process that includes prayer and reflection.

3. Serving others with humility
   Being motivated by a desire to listen and serve rather than personal gain or glory.

4. Working in partnership
   Working together with the community, hospital, individuals and other organisations in a way that promotes empowerment rather than dependence.

5. Honesty
   Living with integrity and speaking the truth in a constructive manner.
Background

Jabulani Rural Health Foundation (JRHF) was founded in 2007 by four doctors working at Zithulele Hospital in one of the poorest areas of the rural Eastern Cape province of South Africa. The government funded hospital serves a population of around 139,000. Most community members live without basic facilities, such as running water and electricity. Many are unemployed and under-educated and about 12% are living with HIV/AIDS. This figure rises to about 25% for the highest risk group – pregnant women.

The JRHF supports the development of Zithulele Hospital and the community it serves through the development of community-based projects, focusing on health care support, care for those affected by HIV/AIDS, poverty relief, education and nutrition. The founder doctors are committed to staying in Zithulele long term to ensure that the Foundation makes a sustainable contribution to the community. With the help of donors, volunteers and community members they aim to make a tremendous difference in difficult circumstances.

The founders of JRHF, Dr Ben Gaunt, Dr Taryn Gaunt, Dr Karl le Roux and Dr Sally le Roux, continue to work at the hospital and with the JRHF in a supervisory capacity.
**Personnel**

**Patrons:**
- Archbishop Emeritus Desmond Tutu
- Leah Tutu

**Directors:**
- Dr Benjamin Gaunt
  - doctor at Zithulele Hospital since 2005
  - founding director since 30 March 2007
- Dr Karl le Roux
  - doctor at Zithulele Hospital since 2006
  - founding director since 30 March 2007
- Rev Joseph Ntlatywa
  - pastor of Uniting Reformed Church at Zithulele since 1990
  - director since 6 May 2008

**Members:**
- Dr Taryn Gaunt (doctor at Zithulele Hospital since 2005)
- Dr Sally le Roux (doctor at Zithulele Hospital since 2006)
- Dr David Bishop (consultant anaesthetist; doctor at Zithulele Hospital in 2006)
- Dr Leesa Bishop (JRHF Financial Administrator; doctor at Zithulele Hospital in 2006)

**Volunteer Staff:**
- Mr John Young (General Manager since 1 January 2011)
- Ms Sarah al Azzeh (General Manager from 9 February – 31 December 2010)
- Mr Thomas Withington (since January 2010)
- Mrs Anita Raubenheimer (January 2010 – December 2010)
- Mrs Yolisa Duley (since February 2011)

**Salaried/Stipended Staff:**
- Mrs Athini Mbono (ARV counsellor since September 2008)
- Ms Asanda Jonga (ARV counsellor since August 2009)
- Mrs Thandeka Xhakaza (Preschool teacher since April 2009)
- Mrs Siphokazi Ndzingane (TB data manager since August 2009)
- Mrs Thandiwe Sidina (TB counsellor since August 2009)
- Mrs Nothandekile Valuvalu (Masikhule garden demonstrator since May 2008)
- Mrs Nonyaniso Mdaiswa (Preschool teacher assistant since April 2009)
- Ms Kayleigh McMillan (Project Trust – January to August 2010)
- Ms Samantha Greener (Project Trust – January to August 2010)
- Ms Gillian Paterson (Project Trust – since September 2010)
- Ms Katy Fair (Project Trust – since September 2010)
- Ms Ntombifuthi Mfumisi (Hospital translator since September 2010)
- Mrs Nonceba Ndesi (Therapy translator since September 2010)
- Mr Lumkile Ngqelakhe (Security guard since September 2010)
- Mr Gqibile Banjwa (Security guard since September 2010)
The Foundation is committed to providing employment to local people wherever possible and only draws in individuals from outside where the skills cannot be sourced locally.
Project Reports

HEALTH

HIV and AIDS Clinic support
A few years ago the only place anti-retrovirals (ARVs) were available in our area was Zithulele Hospital. For many people that meant that life-saving medication was quite simply inaccessible. The hospital responded to the challenge by initially sending a whole team including doctors, pharmacists and nurses to two of our clinics, but this was proving to be unsustainable and limiting the growth of the programme. In 2009 they received a donation of a dispensing programme which made the pre-packing of this medication possible, but the pharmacy lacked the manpower to run the undertaking alone. Jabulani stepped in to assist with one and later two volunteers from the UK Charity Project Trust. The programme has now grown to the point where at the end of February 2011 there are over 1000 people (51% of everyone on ARVs at Zithulele) collecting their treatment on a named, pre-packed basis at their local clinic. Jabulani also helps to fund the consumables required by the down-referral programme.

We have also continued to support the HIV/AIDS clinic at Zithulele Hospital directly by providing two counsellors. Our two staff, Athini and Asanda, are unanimously considered by the doctors to be the best and most reliable counsellors. The counselling they provide is augmented by the sale of alarm clocks at below cost price to patients initiating medication. These clocks allow them to take their medication at the correct time which is an extremely important aspect of ARV treatment.

On a less medical note, we took the opportunity to capitalise on the 2010 FIFA World Cup enthusiasm by hosting a soccer tournament at which we provided information about HIV and encouraged people to test. Nearly 1000 people attended the tournament of which 160 tested for HIV, many of them young men, the hardest to reach demographic group. Everyone who tested went into a lucky draw and 6 people won double tickets to a World Cup game in Port Elizabeth! The tournament was a great success and also helped raise the profile of Jabulani in the community.

TB Project
TB is the major cause of morbidity and mortality at Zithulele; it is the single biggest cause of death at the hospital. In the previous financial year Jabulani, with the support of a Dutch organisation called the Sonnevanck Foundation, initiated a new programme of support for the TB Point at the hospital. A data manager helps us to keep much closer track of our patients, while two counsellors, later reduced to one, add to the patients’ knowledge about their condition.

The programme saw impressive early success with the defaulter rate being reduced from nearly 30% to under 10% and much larger numbers of eligible patients initiating ARVs. Unfortunately, one of the key nurses had to take prolonged sick leave and some of our gains were lost. This highlights again the way in which we have structured our assistance to the hospital – we have not taken over projects, but rather come alongside staff to enable improvements.
**Discovery award**
In January 2010 Zithulele Hospital was awarded an Award by the Discovery Foundation. Discovery requires an NGO to be involved in the disbursement of funds and Jabulani willingly agreed to be the coordinator of all three projects covered by the award.

A wonderful “Clinical Resource Centre” has been created out of the old laboratory space. The clinical staff use it as a meeting and training room. It has a data projector and a computer and the walls are adorned with photographs illustrating some of the hospital’s past. It also serves as a tea room and medical library.

The Award also funded new student accommodation. Zithulele is an increasingly popular place for students to come and do electives during their training, with placements booked up many months in advance. The Discovery Award allowed an expansion of available beds, so up to four students are now able to be inspired at a time. Jabulani decided to augment the funds that had been made available and enlarge the accommodation so as to provide four additional beds for short term volunteers. The building is to be opened in April 2011 and is eagerly awaited.

The third component of the Award is funding to allow clinical staff to pursue ongoing professional development by attending a conference or course. This will take place during the 2011 calendar year and is much anticipated by the clinical staff who usually have to fund such training themselves.

**General hospital support**
There are many other ways in which Jabulani supports the hospital. Many of them are seemingly small, but make a big difference to the quality of care the hospital can provide – and the sanity of the staff providing it. Knowing that there is an organisation that can help make a plan when faced with a seemingly intransigent problem is remarkably helpful in preserving a positive attitude long term. The good news is that this year there have been fewer examples of Jabulani having to stand in the gap – we do not want to encourage a hand-out mentality in the hospital. We far prefer being proactive about improving things; there are many examples of this too.

Some of the multiple ways in which we have supported the hospital include funding:

- Production of a hospital promotional DVD (a shortened version is available at [www.zithulele.org](http://www.zithulele.org)) which has been extremely popular and useful when promoting the hospital at universities around the country.
- Translators for the doctors working in the out-patients’ department. (This improves the quality of the consultation and simultaneously releases the nurses to do nursing jobs.)
- A personal assistant for the Clinical Manager, to allow him to do less petty admin and be more strategic in his use of time.
- A computer for the therapy department.
- Items for use by the occupational therapists in their therapy sessions with patients.
- Paper on which clinical stationery is photocopied (and sometimes funding the toner too).
- Equipment and an important textbook for the pharmacy
- Advertising for clinical staff (when the hospital had run out of funds, but weren’t allowed to appoint without an advert)
Nutrition
The Masikhule project, a community nutrition garden funded by Stichting Zithulele (an organisation based in the Netherlands which was founded by the second doctor to work at Zithulele), continues under the supervision of Nothandekile ValuValu. It struggled a bit during a particularly dry spell where most local water sources dried up, but the summer rains came at last in October and it was revived. Nothandekile has also continued to come weekly to the hospital’s paediatric ward to educate the women of the admitted children about how to garden in a nutritious way.

Rehabilitation Hut
As part of the work conducted by Rumdel Cape (see community centre below) we also negotiated for them to construct a Rehabilitation Hut on the Hospital grounds. This hut is meant to more closely simulate conditions at a patient’s home, allowing the therapy team to help them adapt to situations such as they will find once they’re discharged. The hut is encircled by a track of varying surface finishes to help wheelchair users learn to negotiate different terrains. It also features a raised garden, more suitable for tending by wheelchair users. In addition to hands-on therapy the hut is also used as the venue for a variety of groups run by the therapists – from depression support groups to groups for moms with children with cerebral palsy.

Waiting mothers’ accommodation
The waiting mothers’ accommodation was built during the previous financial year. Its purpose is to provide a place for women near the end of their pregnancies to stay so they can be close to medical care when they go into labour. The hospital has taken over the running of this project, as intended, and it continues to grow in popularity. We hope it will contribute not only to a reduction in perinatal death, but improve overall care and save households much needed money. (Emergency transport to the hospital, usually by private vehicle can cost as much as 100% of monthly household income!)

EDUCATION

Pre-school
The Zithulele Pre-school reopened its doors in April 2009, following renovation and equipping by Jabulani. We continue to be closely involved in the day to day running of the school.

Pre-school provides a valuable opportunity for early childhood development – something that is often overlooked given the required emphasis on subsistence. Our teacher, Thandeka Xhakaza, has a fantastic way with children and is ably assisted in her task by a number of volunteers.

During this year a particular highlight was attending a valuable workshop run by the Bulungula Incubator, a neighbouring NGO. Jabulani also facilitated the training of a total of 20 new teachers by the Education, Training and Development Practices – Sector Education and Training Authority (ETDP-SETA). This took place in our own pre-school over the course of ten months. Each of the trainees was provided with a stipend by the training authority, so for a year we have had a total of ten other pre-schools also benefitting from having a paid teacher on site!
Our vision is that ultimately we can extend our network of fully supported pre-schools to cover these extra schools too. The community are also extremely keen for us to extend the local school to Grade R and we are considering this request.

We currently do not have the resources to meet these needs, but are pleased to report that Yolisa Duley, a PhD student at UCT with many years of early childhood development experience, has joined us in February for an initial period of ten months. We look forward to her sharing her knowledge and expanding the quality of the opportunity we offer our children.

**Axium Education**

We introduced the NGO Axium Education in our previous report. Their vision is to grow talent and opportunity in our rural community by supporting maths, science and English education. More about them is available on their website [www.axiumeducation.org](http://www.axiumeducation.org). We are proud to be associated with them and have assisted with accommodation for their founders (see below) as well as by providing transport for volunteers when needed.

**COMMUNITY**

**Community Centre**

Right at the heart of Zithulele Village lies a piece of prime land that until this year had the ruins of a community centre and various other structures that fell into disuse nearly 20 years ago. The community and headman formally gave Jabulani the right in 2007 to use this land in a way that benefits the community. Our vision is that in time this land will become a vibrant place of meeting and activities as various activities with a community focus are housed here.

After a reasonably long period of negotiation, Rumdel Cape, the contractors responsible for tarring the road to Zithulele Hospital, agreed to help us renovate three structures into a new community centre, library and offices for the Foundation as well as clear the other structures and alien plant invaders from the rest of the land. This took place from August to October 2010. The value of the work was estimated at about R400 000, which was paid for directly and in kind by Rumdel and therefore not reflected on our books. Unfortunately, the process to obtain electricity supply to the site has taken much longer than expected and will only happen in the 2011-12 year.

A community committee, consisting of representatives of political and traditional leadership as well as the different sectors of society (including women, the youth, disabled and churches) has been elected and meets monthly to discuss aspects such as who may use the community centre and under what conditions.

**Microfinance**

Although Jabulani does not as yet have the capacity to provide microfinance loans or small business training on a large scale, we decided to make a start when opportunities present themselves. We are particularly
keen to support people with initiative, given that one of our core values is to promote empowerment and not dependence. One such entrepreneur came to our attention during the year. James makes a steady but small income making leather products and selling them. Keen to expand his business he approached Jabulani for advice. After a period of engagement and a number of training sessions we felt a loan was the logical next step. With our assistance he has managed to expand his product range and capacity. He has been faithful in repaying the monthly amounts he owes and has increased his own income. This model augurs well for the future.

ENVIRONMENT
As noted in last year’s annual report Jabulani has been excited to partner with Roger Galloway and a variety of environmentally related projects which form his passion. As we noted previously, the aim of these projects is to encourage the community to see their assets for what they are. It is easy to look at what the community does not have and forget the resources that they do have in terms of their land, the environment and their community. The judicious development of these assets could be another key to developing the community as a whole.

A step in this direction was the report Drawing Out Local Perspectives - A View of Natural Resource Value and Management, which was compiled by two volunteers who spent four months living in the community at the Mbolompo Homestay. Jabulani supported the printing and translation of the posters which were used to disseminate the findings back to the local community. The full report is available online at http://www.wildwildcoast.com/research---natural-resources.html

There remains much work to be done in terms of conceptualising how our input in this area can be more deliberate, as well as more measurable. Efforts such as these are important too for addressing the subtleties of how a community sees itself and its future. Unfortunately finding a funder who will agree in an era when hard figures are the gold standard of success and funders are less trusting with their money, is a challenge.

ACCOMMODATION
Accommodation remains a massive challenge in Zithulele. There is no accommodation in the community that is suitable for staff who are used to water, sanitation and electricity. Meanwhile the clinical team at the hospital continues to grow, and the number of NGO staff has dramatically increased too. We are almost at the point where further expansion for these teams will be limited by the absence of accommodation.

As a result Jabulani has become increasingly involved over the years in the renovation of a variety of different structures that help accommodate both the hospital staff and NGO volunteers.

The renovation of the “Old Clinic” began in the 2009-10 financial year and extended into this year. It is the original clinic which was built in 1956 by the missionaries when they began the medical work here at Zithulele, but now comprises two accommodation units which house medical staff.
Another building, the second half of the “Volunteer Accommodation” which was renovated in 2009-10, was also renovated and now houses the couple who head up Axium Education, described above.

The “Volunteer Accommodation” also received minor further work.

An entirely new structure, the new student accommodation with an extra wing to house volunteers, has been described under Discovery Award above.

All of these building projects were overseen by Jabulani. We also manage the leases on these buildings, many of which are situated on land belonging to the local Uniting Reformed Church which started the mission back in 1956. The church receives the rental income and is financially responsible for maintenance and upkeep. This arrangement is a win-win situation in that the church derives some income from its buildings but Jabulani and the hospital benefit because there is suitable accommodation made available for professional staff coming from outside.

Further accommodation is already sorely needed, but we do not at this point have funds to pursue this.

**VEHICLE**
The Jabulani vehicle (a Citi Golf) continues to help us “make things happen.” It has helped ensure a reliable supply of antiretroviral medication to the clinics when the hospital does not have transport as well as in numerous other instances when staff have needed mobility in order to better serve the community. A minor accident had its excess covered by the funds we set aside every month for this eventuality. It is ensured for third party, fire and theft – an arrangement we deem the best use of resources under current circumstances.

**Future Plans**

We look forward to a number of things in the coming year. Specifically, we anticipate:

- Continued assistance to the hospital to ensure expanding access to the ARV programme by down-referring to more clinics;
- Further improvements and possible expansion at Zithulele Pre-School;
- The official opening of the Community Hall for the Community;
- Stocking and then officially opening a full community library;
- Properly setting up an office for Jabulani volunteers and staff as the team is growing;
- Continuing to manage and seek ways to expand accommodation options for hospital staff and NGO workers and volunteers.

We look forward to improving our links within the community and involving them increasingly in our projects, to achieve a greater level of community ownership and ensure project sustainability.
We will continue to produce a quarterly newsletter and regularly update the website:
www.jabulanifoundation.org.

Thank you!

The life-blood of our work is our ‘Friends of the Foundation’, who donate monthly. In addition, a number of individuals and companies have donated to us this year – more people than ever before. We trust that you will be as proud as we are to see what a difference your generosity has made in our community.

James Alison  
Mike Bennett  
Biddeford Bridge Rotary Club  
David and Leesa Bishop *  
Gerrard and Sally Boulle *  
Carly Boyle  
Edel Boyle  
CAFGYE  
Hazel Campbell  
Jono and Ruth Centurier-Harris *  
Simon and Becky Chappel  
Laurie and Rita Chiappiani  
Ainslie and Jennie Chinimberi *  
Cirtech Electronics  
Gareth Claase  
P Dales  
Alan John McNeill Dalgleish  
Gregor Dalgleish  
James Dalgleish  
John and Alex Davidge  
Ian Deary  
Discovery Foundation  
Enerweb  
Marlie Enright *  
Thelma Espay  
Robert Ettchells *  
Calum Fisher *  
Timothy Freeth and Lindiwe Mavuso *  
Karen Galloway *  
Andrew Gartshore  
Ben and Taryn Gaunt *  
Megan Giljam *  
Alan Glaze  
Peter and Kim Grant  
Duncan and Kirsti Gutsche  
Heidmar UK Limited  
Kirsty Horne  
Investec  
IQuad  
James and Ros Irlam *  
Alistair Kane  
Sally Knox  
Elizabeth Kupferman  
Joff and Megan Lacey  
Land Resources International  
Susan Lawlor  
Michiel and Cecile le Roux  
Pieter and Ingrid le Roux  
Wendy Lewin  
Hilary Lilande  
Brian and Monique Macallan  
Sherida Mallinson  
Johann and Helen Maree *  
Vicki Mason  
Jill Masterson *  
Julia McMillan  
Rhona Mears  
Charlie Miller  
Sam and Ann Moore *  
Shannon Morgan *  
Jonathan Oscroft  
Peter Oscroft  
Craig and Michelle Paxton  
Pincus Matz Attorneys  
Sarah Porter  
Susan Purchase *  
Ed Raubenheimer  
FP Reeves  
P I Robertson  
Mark Rollinson  
Rondebosch United Church  
Chris and Selina Salisbury *  
Marcel Schutgens *  
Richard and Robin Sherry *  
Sonnevanck Foundation  
St Peters Church Sharnbrook  
Stichting Zithulele  
Taylor Family Trust  
Desmond Tutu (via Carnival House)  
UCT’s Primary Health Care Directorate  
Graham Whyte  
Mathias and Mandy Wessels *  
Hugh and Anna Wiley  
Chris and Lynne Wise *  
Joanna Wrate  
Rob and Brenda Young  
* Denotes Friend