



**SOUTH AFRICA  
PARTNERS**

# **2019 CHANGE MAKERS**



“  
**A winner is a dreamer  
who never gives up.”**

– NELSON MANDELA

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## DEAR FRIENDS,

Consistent with our long-term mission to partner with South Africans to capacitate their health and education sectors, we recently completed the process of incorporating an in-country organization in South Africa—Southern Africa Partners-SA.

The South Africa team has been in place for over a decade and has successfully led multiple initiatives to recruit and train community members from all provinces as part of the development and scale-up of our health programs. Most notably, the team was critical to the success of the Integrated Access to Care and Treatment (I ACT) program. With great success, they took a model of early intervention for HIV/AIDS care that was piloted by the Massachusetts Department of Health and “translated” it to the South African context. By 2015, the National Department of Health in South Africa had adopted the model as the standard of care for all nine provinces—a truly remarkable achievement.

The members of our South Africa team have established themselves as passionate changemakers, working towards the vision they’ve had for their communities and country as part of South Africa’s post-apartheid democracy. These changemakers are champions of social justice and have found ways to fulfill their commitment in various roles at South Africa Partners. Key leaders, Tony Diesel and Thembi Zungu and their team, have been critical in developing the strong in-country relationships with key stakeholders in government, partner non-profit organizations, and the private sector that have allowed South Africa Partners’ initiatives to grow and thrive.

We feel this is the right time to fully support a shift in the locus of control of the organization to South Africa. We want to ensure the transition provides ongoing success and sustainability for our work. We are looking to you as our network of loyal friends and supporters in the U.S. to assist in this important transition for South Africa Partners. Proceeds from our annual appeal will go towards establishing the key elements of the South Africa organization.

**Your dedication has been critical in helping us achieve remarkable impact in South Africa for over 20 years. Please consider making a meaningful contribution before the year-end to ensure that these changemakers are off to a strong start in continuing South Africa Partners’ legacy.**

  
Mitale Fletcher  
BOARD PRESIDENT

  
Leora Rajak  
PRESIDENT-ELECT

  
Judy Bigby  
EXECUTIVE DIRECTOR



**The team members  
featured here all  
have one thing  
in common.**

**They are passionate  
about creating a  
better South Africa.**



TONY DIESEL

# CREATING CHANGE FROM THE INSIDE OUT

I qualified as a registered nurse in 1985 and towards the end of the 80s, a few friends came back from the U.S. with HIV. This laid down a foundation for what would become my life's work.


After leading the Eastern Cape Province Region of Democratic Nursing Organization of South Africa (DENOSA) from 1991 to 2001, I moved to KwaZulu Natal. It was a time in which the country had a HIV denialist government and most South Africans did not have access to life saving medications. At the news of my own diagnosis, I had to consider myself lucky in that, as a working person, I was able to access treatment. The cost was too exorbitant for the majority of those faced with the same news. I saw the devastating effects of South Africa's appalling handling of the epidemic through my work at a HIV hospice where people had exhausted all their options and essentially came to die. The situation remained dire until 2003, when President Bush's PEPFAR program enabled access to treatment for patients. Access to treatment turned the hospice from a place of death and mourning to a place of rehabilitation and hope. In 2010 I joined South Africa Partners.



Thankfully, in the years that followed, further assistance from the U.S. allowed South Africa Partners to create and nationally scale the I ACT program for newly diagnosed patients. Similarly, the Strengthening Prevention Services in Correctional Facilities (STEPS) program has specifically addressed the high rates of infection in the country's prison systems and linked prisoners to care both during and after their incarceration.

The I ACT and STEPS programs have significantly contributed to the extraordinary efforts involved in reducing new HIV infection rates in South Africa.

We are proud South Africans and what we do is for the betterment of our fellow citizens, not just for funders. The team, partnerships, and networks we have built are not something that disappear when a funder's money leaves, but rather a force of nature that will continue to flourish, crossing borders into wherever the work is called for.



**“You have to change things from the inside out.”**



THUBELIHLE NGUBANE (THUBA)

## ELEVATING QUALITY AND IMPROVING LIVES

I had my beginnings in social work and developed a strong interest in community development. While working with Habitat for Humanity in South Africa as a community development officer, I felt that, while providing housing was one of the fundamental building blocks of a dignified life, the persistent root problems weren't being addressed in a way that helped to break the cycle of poverty. There were still young girls not going to school, young women falling pregnant too early, people contracting HIV and rampant domestic abuse and gender-based violence in these communities.

At South Africa Partners, I've had an opportunity to tackle these problems because my work addresses a broad spectrum of issues. My specialization in Quality Assurance/Quality Improvement (QA/QI) has allowed me to become a leader in my field as it is an emerging practice in South Africa. I pride myself in teaching others and making QA/QI approachable for community partners. For instance, instead of standing in front of health managers to teach them about quantitative tools such as Excel, I walk them through the program step-by-step.



I'm also mindful that a one-size fits all approach will not go far in the South African context. For example, in a recent Cape Town survey project aimed at sex workers, I knew that the majority of the program beneficiaries were illiterate and adapted the survey to include picture-based smiley/sad faces in the answer form.

I'm inspired by an approach that goes beyond a program funder's mandated focus on metrics. I have a genuine interest in the personal stories of those I serve, and make sure to link them to other resources and community-based partners whenever possible. I hope to continue elevating the importance of analyzing, critiquing, and improving current processes of health care delivery in the country and aim to complete my Masters in Public Health to assist South Africa Partners to further connect the research and practice in South Africa.

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**I am inspired  
everyday to  
do more.”**

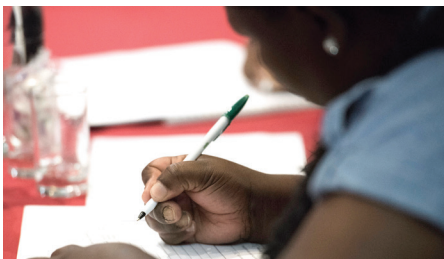


PHAKAMA FLORENCE MOYI (PHAKS)

# FROM THE COMMUNITY FOR THE COMMUNITY

My journey to South Africa Partners started 21 years ago when I was diagnosed with HIV. My diagnosis changed me. It was psychologically very difficult because I felt incredibly alone. There was no one there to talk to, and as a student at the time, I couldn't even plan ahead for a four year course because I did not know if I'd make it alive past year one.

Fortunately, I was inspired by the Treatment Action Campaign (TAC), a South African HIV/AIDS activist organization which was founded in 1998. I began working with TAC as treatment literacy practitioner to educate myself and others about access to HIV treatment and issues surrounding the availability, affordability and use of HIV treatments. Through TAC, I advocated for social justice and learned about the various aspects of the HIV epidemic in the country, particularly the psychosocial effects. People with HIV don't live openly, and since I have been through it, I know how they feel about being HIV positive. It helps them to know that others are going through the same thing.

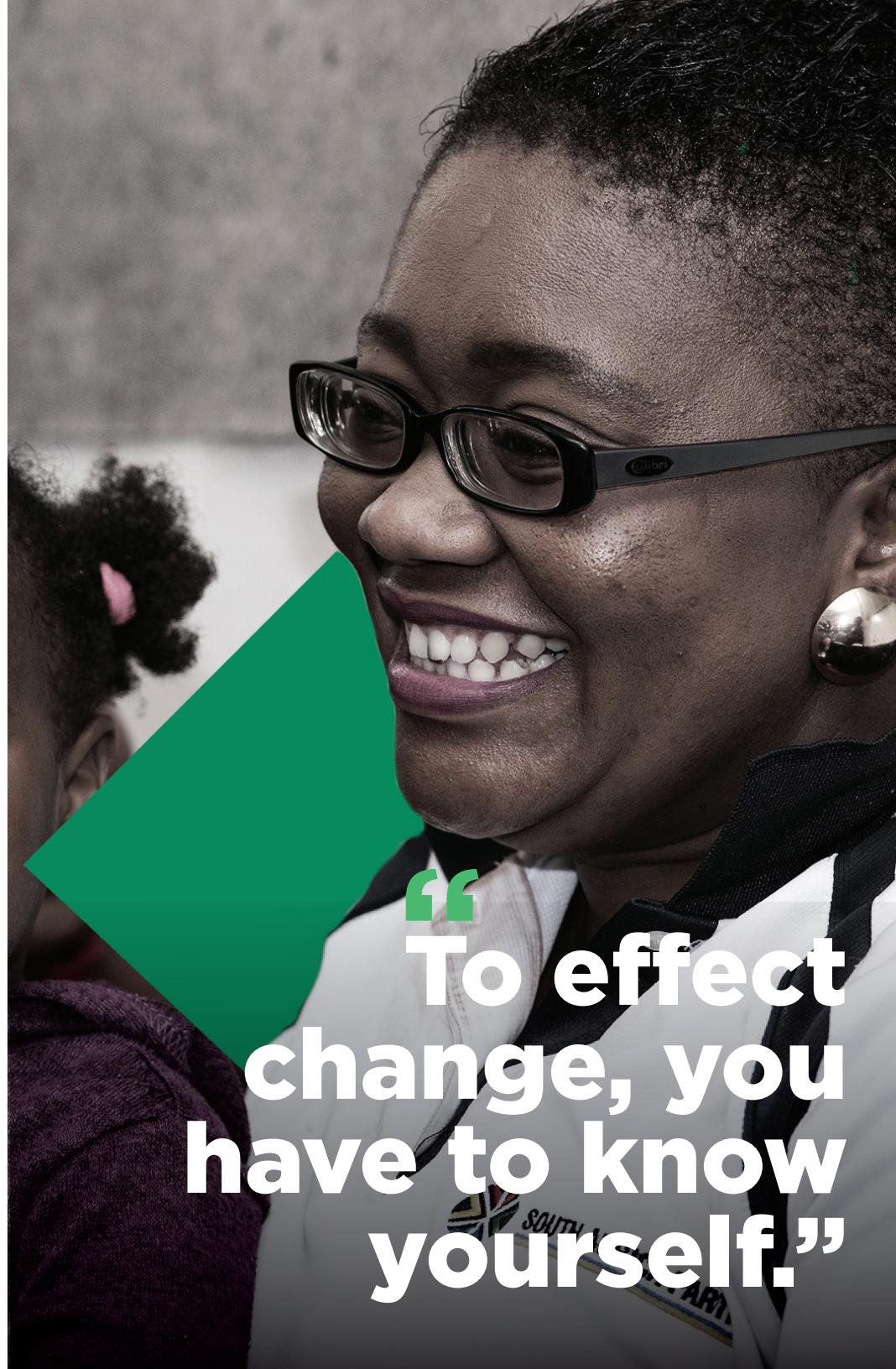


The awareness campaigns helped me gain confidence and I started support groups for patients to help each other.

At first the correctional services work (the STEPS program) was challenging, but the more you get to know the people inside, you learn that prisoners are complicated. It's important to learn about them individually. They need encouragement and help setting goals for what they envision for themselves after prison.

I like to take initiative and don't wait to be told what to do. In order to effect change, you have to know yourself, your personality, strengths and weaknesses. Some are change agents in the background, and may not always be in the spotlight.

**“To effect change, you have to know yourself.”**





MASIZOLE GONYELA (MASI)

## A VOICE FOR THE VOICELESS

When I became involved in advocacy work 16 years ago in the Eastern Cape, there was a lot of stigma around HIV/AIDS. I saw people dying around me. People were suffering. Clinics weren't providing ART. I couldn't sit back, so I started as a volunteer with the Treatment Action Campaign (TAC). I fervently articulated TAC's position on the state of health in the Eastern Cape, using TV and radio platforms to become a voice of the voiceless.

South Africa Partners became another platform to continue my lifelong work. I've worked tirelessly to bring change in the prison systems through STEPS. We need to remember that the incarcerated are our brothers and sisters. If we can create change in those facilities, they will ultimately bring change to the communities they return to.

An important change that I've noted is that even though stigma remains, there are safe spaces for those infected and affected by HIV/AIDS in South Africa. In the past, prison officials didn't understand why prisoners were being provided with health supplies and rehabilitation support.

For them, it was only about punishing people. They are now more under-

standing of issues related to sexuality, gender, sexual behaviors, stigma and discrimination, substance use, human rights, violence and abuse and HIV. I've worked to create an outreach campaign and testing program that targets new recruits that are training to become prison officials. This creates a cadre who understand their role in connecting prisoners to services they need during rehabilitation.

I'm particularly proud of the progress South Africa Partners has made within the Zondewater Prison in Gauteng. Over four years, 35 prisoners have become peer educators. We create sustainable programs that allow prisoners to become leaders in their communities when they return home. Peer educators have formed the Ubuntu Community Theatre which helps fellow inmates process issues in an expressive way that doesn't rely on formal teaching methods. These peer educators have become a key pillar of the health system within the Department of Correctional Services.

I hope to see the STEPS program expand to allow for better follow-up once the inmates have been released. We're discussing ways to build off the important work that takes place within the prison walls.

A close-up portrait of Masizole Gonyela, a Black man with short, dark, curly hair and a beard. He is looking directly at the camera with a calm expression. The background is a light, neutral color. A large blue geometric shape, resembling a stylized arrow or a corner, is visible behind him on the right side.

**“I’ve always felt this work was a calling.”**



THEMBI ZUNGU

## A NATURAL ROLE MODEL & ADVOCATE

I joined South Africa Partners in July 2004 and now lead the team as the Deputy Country Director.

After graduating with a Diploma in Nursing and Psychiatry in 1990, I specialized in clinical and critical nursing care, eventually obtaining a Master of Public Health. It was during my early nursing years that I was diagnosed with HIV, at a time when it was considered a death sentence. Scared, and wanting to spare my family of the emotional pain of seeing me die, I moved away from my home in KwaZulu Natal.

Fortunately, I was trained in HIV care and met colleagues who made me feel comfortable enough to disclose my diagnosis, encouraging me to become part of a clinical trial for antiretroviral treatment (ART). I saw that I was surrounded by people I could support. I became a role model through my own actions and advocated on behalf of others.

I have spent the last 15 years with South Africa Partners, overseeing national programs, advocating, growing partnerships across the country, and turning conference resolutions into impactful programs.

I was honored to be part of the team that visited Massachusetts to take a model of early intervention for HIV/AIDS care piloted by the Massachusetts Department of Health and “translated” it to the South African context.

I’ve been dedicated to the health and social well-being of communities in South Africa as a nurse, advocate, peer and role model, and am now focused on working closely with the health department, effecting change from the top down. I push for decision makers to adopt the public health view that takes into account the whole person – as a patient, a mother, a sister, an employee and a community member. My vision is for an AIDS-free South Africa where young girls are empowered to combat gender-based violence, where every young child understands their value, and where quality education is available to all.

If there are issues, you cannot keep quiet, because you do not know why you have been put there at that time and place. It is a gift to you, an opportunity to create change.

A close-up portrait of Thembi Zungu, a Black woman with short, dark, curly hair. She is looking directly at the camera with a slight smile. The background is a soft, out-of-focus grey. Large yellow geometric shapes, resembling triangles, are positioned behind her head and shoulders, adding a graphic element to the portrait.

**“It is a gift to you, an opportunity to create change.”**



SITHEMBISO DERRICK MSOMI (STHE)

## DRIVING CHANGE FOR BETTER SYSTEMS

I have worked in the social development field for over 17 years, building capacity and skills in various organizations in the Southern Africa region. I have a great passion for bringing change and impact to ordinary people's lives and South Africa Partners is one of the organizations that allows me to contribute a great deal in this regard. The mission and vision fit well with my desire to create change in South Africa, and the organizational values, professional working environment and vibrant team make going to work every day a pleasure. We've worked together to create a culture that encourages team work, creativity and innovative thinking.

At South Africa Partners, I've been working as the National Program Manager for the LinkCARE program since 2015. In that time, I've worked with the team to successfully scale up a National Adherence program for Chronic Diseases across the Department of Health structures

in five provinces in South Africa. Under my leadership, the National Adherence Guidelines for Chronic Diseases (TB, HIV and NCDs) was adopted as a national standard within the Department of Health structures. This will, as it continues to scale up, benefit many people that access the public health sector services in South Africa by guiding health personnel on the basic package of care required by people living with chronic conditions, including HIV.

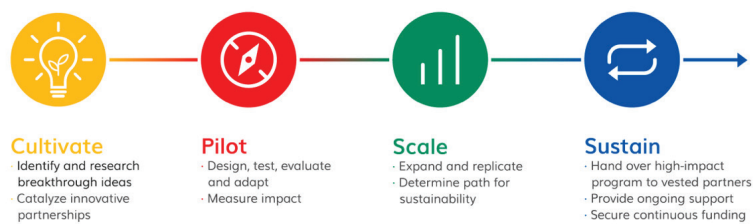
South Africa Partners has solidified its place among leaders in the development field in South Africa. It is a growing organization with a lot of potential to expand beyond our borders into other regions of Southern Africa. Given my previous experience in working with neighboring countries, I look forward to being a valuable contributor to the organization's future growth.

A close-up portrait of Sithembiso Derrick Msomi, a Black man with a short haircut, smiling warmly at the camera. He is wearing a dark red sweater over a light-colored collared shirt. The background is a textured, light-colored wall. A large red arrow graphic points from the top left towards the bottom right, partially overlapping the portrait.

**“I achieve what I set out to accomplish.”**

# CONTINUING THE PUSH TOWARD INNOVATION

Moving the locus of control to South Africa will provide more opportunities for identifying innovative solutions to system level issues in health and education. Our approach to developing programs and strategies has always been about working in partnership, including with communities that are likely to benefit from the programs. We will continue to use our model approach —cultivate, pilot, scale, and sustain to develop impactful solutions to health and education.



We will continue our work to test the feasibility of implementing the [Community Early Childhood Development Network model](#) we have developed in partnership with Masibumbane Development Organisation in additional communities.

We will also continue to develop initiatives to create public spaces to promote early learning opportunities for young children using the “talking is teaching approach” we developed with Sifunda Ngokuthetha.

To support these changemakers or to learn more about our programs, please visit [www.sapartners.org](http://www.sapartners.org)





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