



FACULTY OF HEALTH SCIENCES
UNIVERSITY OF THE FREE STATE

Impact Case Study

Societal impact through the
Faculty of Health Sciences Rural
Community Initiative (FHSRCI)



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UNIVERSITY OF THE
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UFS
HEALTH SCIENCES

Impact Case Study

Title of the Impact Case Study

Societal impact through the Faculty of Health Sciences Rural Community Initiative (FHSRCI)

Submitting University

University of the Free State

Summary of the impact:

Communities in the Xhariep district in the Free State, specifically in the rural towns of Trompsburg, Springfontein and Philippolis, are benefitting from the Faculty of Health Sciences Rural Community Initiative (FHSRCI) project since its inception in 2017/2018. Driven by the motto *Kopanong le Fodise/ Unite to Heal*, the FHSRCI endeavours to unite the community, healthcare students across all disciplines and healthcare professionals to enhance the health of our rural communities within the identified district. The project encompasses diverse initiatives such as the Youth Leadership and Youth Health screening Project, Home Visits, Lifestyle Groups, and the Mobile Health Clinic (refer to Figure 1). These initiatives aim to maximise societal impact by targeting various sub-groups within the communities. Specifically, the Youth Leadership Project engages high school learners, Home Visits focus on community members living with Diabetes Mellitus, Lifestyle Groups cater to the elderly, and the Mobile Health Clinic serves farm workers and their families.



Figure 1: Faculty of Health Sciences Rural Community Initiative (FHSRCI)

Underpinning academic work:

All the FHSRCI activities are academically underpinned by a focus on the development of critical competencies (or graduate attributes) among all healthcare students in the faculty, with an emphasis on teamwork, communication skills, critical and clinical reasoning as well as digital competence. Student groups that partake in the project include Medicine, Nursing, Physiotherapy, Occupational Therapy, Dietetics, Biokinetics and Optometry, resulting in approximately 300 students participating in the project annually.

In addition to undergraduate education, the work has been disseminated through conference presentations and published articles both nationally and abroad (references provided below).

- Joubert, A. & Reid, M. 2024. Development of a framework for community health workers to contribute to interprofessional learning teams. *African Journal of Health Professions Education* 16(3):3384. <https://doi.org/10.7196/AJHPE.2024.v16i3.384>
- Joubert, A. & Reid, M. 2023. Knowledge, skills, and training of community health workers to contribute to interprofessional education: a scoping review. *Journal of Interprofessional Care*. <https://doi.org/10.1080/13561820.2023.2176472>.
- Joubert, A. & Reid, M. 2023. Knowledge, skills, and training community health workers require to contribute to an interprofessional learning initiative. *International Journal of Africa Nursing Sciences* (18):100531. <https://doi.org/10.1016/j.ijans.2023.100531>.
- Botha, R., Bouwman, B., Coetzee, H., Moolman, A. & Venter, K. 2023. Bridging knowledge cultures in rural health education: The Trompsburg project at the South African (North) K4C Hub. In: *Bridging Knowledge Cultures* (Chapter 10), Brill Publisher: 180–206. https://doi.org/10.1163/9789004687769_010.
- Botha, R.W., Joubert, A., Morgan, H. & Wilmot, M. 2022. Relational experiences of community members participating in a rural health initiative with interprofessional students. *African Journal of Health Professions Education (AJHPE)*, 14(2): 49–54. <https://doi.org/10.7196/AJHPE.2022.v14i2.1531>.
- Joubert, A., Botha, R.W., Morgan, H., Wilmot, M. & Hagemester, D.T. 2019. Health Professions students' interprofessional experiences on a rural learning platform. *South African Journal of Higher Education*, 33(6):153–171. <https://doi.org/10.20853/33-6-2898>
- Botha, R.W. *A basic Optometry screening short course for interprofessional healthcare providers. Asia Pacific Medical Educators Conference (APMEC), Singapore, 2019.*
- Botha, R.W. *Pluroversitism through enriched reciprocity. South African Association of Health Education (SAAHE) conference, Durban, 2018.*

In 2022, the FHSRCI project was recognised and honoured in receiving an institutional Vice-Chancellor's award in the category for Long-term Flagship Projects.

Narrative description of the impact:

The description of the impact of the FHSRCI project will be portrayed according to each of the activities included in the broader project.

- Youth Leadership and Youth Health Screening Project

The Youth Leadership Programme (YLP) was initially formulated around the ideas of three local community members encouraging the participation of youth in sport and related activities.

Subsequently, weekly activities were facilitated by faculty personnel and students at the different schools within the various districts. Activities included participation in board games such as chess and marabaraba, contemporary sports such table tennis, soccer and netball as well as indigenous games such as *kgati* and *dibheke*. Through these regular interactions with learners, a need for a more structured health intervention was identified. Currently the YLP includes weekly general health screening sessions of high school learners at three high schools in Trompsburg and Springfontein. Approximately 300 learners are screened annually, with the highest referral rate to social work and/or psychology for mental health and/or psycho-social challenges. Through this project, the UFS believes that by prioritising the youth within this project, it will pave the way for building healthier communities in these areas for generations to come.



In addition to facilitating early referrals for youth and fostering healthier communities for the future, healthcare students are trained to understand and appreciate the significance of health screening, early detection, and the proper referral of community members within the organised healthcare system. This training further emphasises the optimal utilisation of the available healthcare referral system.

- Home Visits

Home visits are conducted for all community members in Trompsburg and Springfontein known with a diagnosis of Diabetes Mellitus, including those newly diagnosed with Diabetes Mellitus or those with pre-Diabetes Mellitus. Home visits include health screening and documenting basic vital signs, including blood glucose levels and blood pressure readings. Home-based patient education is provided by healthcare students with a focus on various topics related to Diabetes Mellitus, such as ulcers, eye/

vision problems, neuropathies, and others. Annually approximately 80-90 Diabetes Mellitus patients are screened in the communities.



· **Lifestyle Groups**

Elderly community members, of which most have been diagnosed with chronic diseases (such as high blood pressure, Diabetes Mellitus, etc.) take ownership of their health through our Lifestyle Groups hosted in Trompsburg and Springfontein. The groups follow a patient-driven approach, ensuring that the patient voice is heard, whilst educating students on the importance of patient autonomy, patient-driven healthcare management, and non-technical skills such as active listening. Students actively engage in supporting community members through conducting healthcare screenings and documenting vital signs to monitor chronic conditions. Additionally, students play a crucial role in facilitating Lifestyle Group activities in both towns through engagement in health dialogues. The topics for these dialogues are selected by the community members, empowering them to address issues that matter most to their health. Subsequently, student groups prepare presentations based on these topics for the group gatherings in the following week. This approach ensures that the sessions are tailored to the community's needs and preferences. Annually, approximately 250 attendances are recorded at Lifestyle Group sessions, with members having the flexibility to attend multiple sessions, thereby contributing to a comprehensive impact assessment.

A token shop has also been established at the Trompsburg UFS training platform. The aim of the token shop is to encourage elderly community members to participate in the available health promotion activities and to actively engaging in managing their health. When community members

attend a session as part of the Lifestyle Groups, they earn a token, which they can redeem at the token shop during the end-of-year celebration function. The shop is sustained through donations from

students and staff. Additionally, a vegetable garden has been established by the FHSRCI Residence Head to give back to the community members, particularly in these groups.



- **Mobile Health Clinic**

The Mobile Health Clinic, integral to the overarching FHSRCI project, is dedicated to serving the truly marginalised farming community. Farm workers and their families face significant barriers in accessing healthcare facilities like clinics and are frequently overlooked in healthcare outreach efforts. For this reason, the UFS has, in collaboration with the Free State Department of Health (FSDoH) and three regional agricultural unions launched a mobile healthcare service. The mobile healthcare service aims to: 1. Provide an innovative mobile healthcare service for farming communities; 2. Cultivate an inclusive teaching and learning platform for healthcare students, exposing them to innovative ways of reaching communities and 3. Equip healthcare students with essential competencies for re-imagining rural healthcare for the future.

The mobile clinic provides health services around the towns of Trompsburg, Springfontein and Philippolis on a weekly rotation, visiting each area once a month. Farmers receive a schedule of where the clinic will be; and then transport farming community members from their farms to the site. Since the inception of the project, approximately 4000 farm workers and their families have received healthcare services through the Mobile Health Clinic. Additional, to the basic healthcare service, chronic medication is also distributed to the farm workers and their families, as prescribed, to enhance compliance with chronic medication use and ensure better health management of their chronic health conditions.



Evidence and sources to corroborate the impact:

See testimonial attesting to the societal impact of the FHSRCI project from a local medical doctor.

To whom it may concern

I am a general practitioner working in Trompsburg/ Springfontein/ Jagersfontein and Bethulie for the past 25 years in private as well as state clinics. During this time, I was fortunate to experience the establishment of an outreach program to Trompsburg and Springfontein community by the University of the Free State. The impact these outreaches have on the community is noteworthy and impressive. As I am working in other communities that do not receive these services, I can testify to the difference these outreaches make in Trompsburg and Springfontein.

The impact on the diabetic patients with the lifestyle workshops and constant follow up with home visits, is a service the DOH and doctors are not able to support these patients in this regard. The difference in measurable outcomes like HBA1c values provides proof of this impact.

The screening of learners with the leadership programs, especially regarding mental health, has helped us to identify and seek help for previously forgotten learners. The impact of these programs we are also seeing in our learners excel post matric.

The help with exercise programs by the physio department at the local old age home has also made a lot of elderly people smile- they can't wait for the next visit from the students. The optometry outreach has also a huge impact on so many persons who struggles to go to National hospital to get optometry services.

As the Fetal alcohol spectrum disorder prevalence is 18% in Trompsburg, as reported by a recent study done by the Foundation of alcohol related research (FARR), it confirms the huge challenge this community face. The IPE program helps these families with insight and care for these affected children. And the school programs help in educating learners of the dangers of alcohol during pregnancy.

A lot of patients have also been identified during home visits with conditions that needed more urgent care, that would not have been picked up if it wasn't for these programs. The burden on the public health system is tremendous and sometimes I feel near the point of failing, but the help these outreach program brings in helping to maintain and sustain the public health system cannot be emphasized enough. I would like to thank the UFS and the local supervisor me M Wilmot of great work they do. I also feel that the contribution to students to experience first-hand the challenges people in the rural areas have to be brilliant and lifechanging to them as well. I hope this program can continue and would even suggest it to spread its wings to include more rural towns.

Any other information considered relevant:

The UFS takes pride in the innovative structure of FHSRCI, which aims to improve healthcare across all stages of life in communities. By establishing the community as an equal partner, they are empowered to express their preferences for holistic, socially just, and informed care. The community has been an invaluable source of knowledge, shaping values, ethics, moral practices, responsibility, civic engagement, teamwork, understanding, practical skills, shared leadership, participation, and engagement in the project.

In addition to the aforementioned impact, the UFS prioritises interprofessional education (IPE) and community-based education (CBE). This focus ensures that our healthcare graduates are well-prepared to work independently in the South African healthcare sector as interns or community service healthcare practitioners upon completion of their studies. Exposure to diverse healthcare settings and approaches, such as those provided by FHSRCI, equips healthcare graduates to effectively serve as agents of change within communities, generating significant and sustainable societal impact.

**Signed off by on behalf
of the University**

Date