

# Samahuru Clinic

## BONGI-NKOSI TSHUMA SIBANDA

Bongi-nkosi Tshuma Sibanda, Master's Degree in Development Studies (Lupane State University, Zimbabwe), is a Zimbabwean citizen, raised at Solusi College (now Solusi University). She attended both primary and secondary school there. Later she trained as a registered nurse and midwife at Maluti Hospital in Mapoteng, Lesotho. Sibanda and her husband are currently missionaries serving in the North-Eastern Angola Union, where she is the departmental director for Health Ministries/AAIM, Women's Ministries and Children's Ministries.

The Samahuru Clinic is a subsidiary medical institution of the West Zimbabwe Conference of Seventh-day Adventists.

## Overview

The Samahuru Clinic is located in the Samahuru area of Tsholotsho District in the Matebeleland North Province of Zimbabwe. It is situated about 80 kilometers from the Tsholotsho district center and about 200 kilometers west of Bulawayo, the second largest city in Zimbabwe. This clinic is also not very far from the Gwayi Conservancy within the Tsholotsho district area.

The Samahuru community has a population of 2,800 people. The area has no rivers or dams to provide water, and most of the people are unemployed. The clinic provides healthcare services to the community and its schools. The clinic is the latest addition to the Adventist presence in the area following the establishment of a primary school in the 1920s, and a secondary school in 1985. The secondary school has an enrollment of over 230 students, and it serves a community of people with limited financial resources!<sup>1</sup>

## Developments that Led to the Establishment of the Institution

Plans for the construction of the Samahuru Clinic began in 1995 as an initiative to complement the Adventist Church's holistic ministry in the Samahuru area. The Church had begun serving the area by establishing schools to meet the needs of the community. The nearest government health institution, the Pumula Clinic, is almost 30



Samahuru Clinic

Photo courtesy of Sikhumbuzo Dube.

kilometers away, and it offers rudimentary services while the Tsholotsho District Hospital and its Nurse Training School are almost 100 kilometers away. The Samahuru Clinic offers basic emergency healthcare services, HIV voluntary counseling and testing, maternal and child health services, and its dispensary has a limited stock of medicines.

According to Elder Wilmore Ncube, the former Zimbabwe Union Conference Education director, key individuals and groups of people who put in motion the plans for the establishment of the clinic included the West Zimbabwe Conference administrators, government district health officers, and community leaders such as Mr. Gumbo (1918 – 1992), who was a leader for both the community and the Church.<sup>2</sup> The West Zimbabwe Conference, in collaboration with the Samahuru community, began construction of the main clinic building around 1998/1999. The funds for the water project of the primary and secondary schools and for the clinic were raised through the Harvest Ingathering Offering appropriation donated by the West Zimbabwe Conference.<sup>3</sup> However, due to the unavailability of funds for the clinic infrastructure at that time, the idea remained only as plans recorded in the minutes.

Dr. Ichabot Tshabangu recalls the beginning of the construction work as follows:

The idea of establishing a health clinic at Samahuru started in the early 90s among the community [members] but was not formally presented to the Samahuru Secondary School board (Chaired by J. J. Mhlanga, WZC president) until January 1996. Part of the compelling reasons were that both Pumula and Sodaka clinics, seen as nearest, were approximately 20km away from Samahuru. Furthermore, the high school was beginning to accommodate a large number of students from far off places in quasi boarding set up. This necessitated improved quality healthcare of not just students (numbering over 700 both Primary and secondary) but also of the need to serve the surrounding village communities who had difficulties accessing Pumula and Sodaka health centres.<sup>4</sup>

Dr. Tshabangu narrates further:

Out of a leap of faith, in 1997, we started [operating] a health dispensary housed at the secondary school administration block. This was approved by the Tsholotsho District Hospital, and we had a memorandum of agreement that Tsholotsho District Hospital will supply us with all the necessary medications/ tablets for minor/basic treatments.<sup>5</sup>

After that, at the end of every month, a volunteer nurse (now a retired SRN), Mrs. G. Lubimbi would go to Tsholotsho to collect free medical supplies. It was believed that this small but effective health program would open the way for the establishment of a fully fledged health centre in Samahuru.

In 1998, probably impressed by the efforts already being made, the West Zimbabwe Conference approved funding for establishing the clinic. The Conference treasurer, Elder Burns Sibanda, worked tirelessly in his role as the project manager responsible for managing funds, contracts, and procuring of building materials and other

supplies, etc., while the headmaster, Dr. Tshabangu, was responsible for mobilizing the local communities and other resources as well as providing on-site supervision.

It is important to note that from the inception of the temporary clinic operations until early 2001, the Health Centre was governed by the Samahuru Secondary School Board. However, after the construction work started, in 1999, a separate committee was instituted to meet the demands of the new project. The project committee membership included *ex-officio* members from the secondary school board as follows:

Mr. Fini S Gumbo (PTA Chairman and School Board Member)

Mrs. J. Ngwenya (School Board Member)

Mrs. G. Lubimbi (Nurse, Health Dispensary)

Mr. I. Tshabangu (Headmaster & Project Supervisor)

Mr. Sibanda (Health Clinic Committee Chairman).

Regarding the construction work, Pastor Clifford Sibanda, the district pastor of that time, said:

What I remember is that Phineas Gumbo was the chairman of the building project. There was also Mrs. Sikhosana, Mrs. Lubimbi, Mr. Ndeti (Sgabade). Mr. Ichabot Tshabangu who was the secondary school head was also involved. This includes Mr. Maphosa. Molding bricks started around 1997. Villagers, church members, and school children mainly did it. They mainly depended on water holes. The school did not have a reliable borehole by then. One significant participant was Ichabot Tshabangu (now Dr. Ica Pressley Tshabangu), [and] Mduduzi Mbuyisa.<sup>6</sup>

The construction of the Samahuru Clinic building was done during the administration of Pastor J. J. Mhlanga (president), Pastor S.M. Moyo (executive secretary) and Elder B.M. Sibanda (treasurer) of the West Zimbabwe Conference. Its construction work was be-deviled by the national economic and political meltdown that characterized the post-independence era in Zimbabwe (1980-2017). Pastor Point Mukombe, Conference Health Ministries director, recalls that "Samahuru Clinic construction was completed in 2004 and was operational by 2006." He remembers the name of the first nurse in charge as Mr. Ndlovu, who continues to serve faithfully to this day.<sup>7</sup>

During the first decade of its existence, Samahuru Clinic shared in the sufferings of the region brought about by the fluctuating economic state that made it hard to estimate their operating costs. Nevertheless, in 2007, the Conference appropriated 45 million Zimbabwe dollars to the Samahuru Clinic.<sup>8</sup> The construction of staff housing for four and installation of equipment in the clinic were completed in 2009 by the government in the midst of the harsh economic meltdown in the country. To facilitate plans for the official opening of the clinic, the

Conference approved an appropriation of ZAR 60,000 on September 16, 2010, to finish the construction of an incinerator and the installation of piped water to the clinic and staff houses.<sup>9</sup> This happened during the administrative tenure of Pastor J. B. Sibanda (president) and Elder Makhosiwonke Moyo (chief financial officer) of the West Zimbabwe Conference.

## Historical Role of the Institution

Since Samahuru Clinic's official opening in October 2011<sup>10</sup>, the institution functions as a primary healthcare Centre that offers maternal and infant health care services in addition to general healthcare services. The clinic refers serious cases to Tsholotsho District Hospital. It has a rural service area covering a 20-kilometer radius. It is fulfilling its important roles in line with its mission. At the time of writing this article (2021), the staffing establishment consists of 4 nurses, 1 nurse's aide, 1 general helper, 1 environmental health technician, and 1 ward nutrition coordinator. The clinic has a daily patient attendance of 40 to 45 and is averaging 195 patients per week. The clinic staff who, though under the supervision of the local conference, receive their pay from the government.

Due to the continuing economic meltdown, the Centre faces challenges in the following areas:

Shortages of medicines, including medication for chronic illnesses (hypertensive, diabetic patients, etc.),

Absence of ambulance services within 90 kilometers radius from the Centre,

Inadequate wards to admit patients appropriate to their gender,

Incomplete construction of the mothers' shelter, and

Lack of electricity supply.

The Samahuru Clinic is an important part of the community that has provided more than just physical healing. It has also functioned as a center for community peace dialogue. Samahuru is both a drought- and malaria-prone area. The following statement helps to present the seriousness of the situation in the area:

Water remains a precious resource that is vital to peace and development. Tsholotsho is a semi-arid region that receives minimal rainfall, and this greatly affects water reservoirs such as boreholes and dams, which end up drying up before rainy season. In most cases, people end up competing or sharing water sources with livestock as water sources fast dry up. The few functional boreholes in the various wards are old and not always reliable through the dry spells. When they do break down due to overuse and demand, community members have to contribute money for the repair. Given the harsh economic environment that has seen rural communities being the most affected, some community members fail to make contributions towards the repair of the boreholes.

When this happens, most community members accuse those who would have failed to pay contributions as having contributed to the breakdown of the borehole. In some cases, defaulters are even threatened that they will be denied access to water. This has thus created conflict around water sources.<sup>11</sup>

The Isolezwe Peace Club that operates in Tsholotsho Ward 1 has utilized the Samahuru Clinic as a center where it carries out its conflict mapping exercises to help minimize and finally resolve the conflicts created by the shortages of water in the area.<sup>12</sup> The Clinic is also key in addressing the prevalence of malaria and other diseases in the area. These challenges faced by the Clinic as well as the community are addressed through multi-sectoral efforts and engagements. The Seventh-day Adventist Church institutions, the community, and the local government are working together to find solutions as well as to mobilize funds.

## Future Outlook

The Clinic continues to be a beam of light in the Samahuru community. The assistant sister in charge of Samahuru Clinic, Sister Sibusisiwe Sithole, listed the future plans of the clinic to include the following:<sup>13</sup>

To equip the Clinic with solar power.

To equip the Clinic with strong WIFI to improve its communication network.

To have an ambulance service that will help during emergencies.

To improve the water reticulation.

The clinic management's vision is to:

Develop the clinic into a hospital that will admit patients.

Build two wards for female and male patients.

Have a resident medical doctor who will attend to complicated cases.

## List of Administrators

J. J. Mhlanga (1989-2000); H. Mafu (2000-2004); R. Sithole (2004-2005); J. B. Sibanda (2005-2015); Q. Mathonsi (2016); S. Ndlovu (2017); T. Nkanyezi (2018-Present)

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## SOURCES

Sen 1982, Dreze and Sen 1990, Dasgupta 1993, Deaton 1997, *Heal Zimbabwe Publications*, Wednesday, June 8, 2016.

Sithole, Sibusisiwe. *The Zimbabwean: A Voice for the Voiceless*, June 6, 2016.

West Zimbabwe Conference of Seventh-day Adventists (Bulawayo, Zimbabwe), Minutes of the West Zimbabwe Conference Executive Committee meetings of September 29, 1999; April 17, 2007; September 16, 2010; October 9, 2011.

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## NOTES

1. See for example Sen 1982, Dreze and Sen 1990, Dasgupta 1993, Deaton 1997, *Heal Zimbabwe Publications*, Wednesday, June 8, 2016.
2. Wilmore Ncube, interview by author, Bulawayo, Zimbabwe, May 13, 2019.
3. West Zimbabwe Conference of Seventh-day Adventists (Bulawayo, Zimbabwe), Minutes of the West Zimbabwe Conference Executive Committee Meeting of September 29, 1999.
4. Dr. I. Tshabangu, interview by Dr. Clifford Sibanda, Bulawayo, Zimbabwe, September 13, 2019.
5. Ibid.
6. Clifford Sibanda, interview by author, Bulawayo, Zimbabwe, September 13, 2019.
7. Point Mukombe, interview by Dr. Clifford Sibanda, September 10, 2019.
8. West Zimbabwe Conference of Seventh-day Adventists (Bulawayo, Zimbabwe). Minutes of the West Zimbabwe Conference executive committee meeting of April 17, 2007.
9. West Zimbabwe Conference of Seventh-day Adventists (Bulawayo, Zimbabwe). Minutes of the West Zimbabwe Conference executive committee meeting of September 16, 2010.
10. West Zimbabwe Conference of Seventh-day Adventists (Bulawayo, Zimbabwe). Minutes of the West Zimbabwe Conference executive committee meeting of October 9, 2011.
11. Sibusisiwe Sithole. *The Zimbabwean: A Voice for the Voiceless*, June 6, 2016.
12. Ibid.
13. Sibusisiwe Sithole, interview by Pastor Nceku M. Msimanga, Bulawayo, Zimbabwe, March 27, 2021.

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