

Umthombo Youth Development Foundation
2025/6 Annual Report



SEEKING TO ADDRESS A PROBLEM

The problem

South Africa continues to face a shortage of qualified healthcare staff at rural hospitals, where communities carry a high burden of disease. Since 2017, however, posts for new graduates in rural hospitals have become scarce due to financial constraints within the KwaZulu-Natal Department of Health. This has limited opportunities for our graduates to serve in the very communities they were trained to support.

At the same time, rural youth remain among the most marginalised in the country. Many are **Neither in Education, Employment or Training (NEET)**.

How the Umthombo Youth Development Foundation addresses this problem

The Umthombo Youth Development Foundation (UYDF) invests in rural-origin health science students. By providing financial support, compulsory academic and social mentoring support, and structured hospital work exposure, these students are assisted to succeed at university and qualify as healthcare professionals—90% or more graduate.

While rural hospital posts are currently limited, our graduates secure employment in the urban public health sector or the private health sector. In doing so, they lift themselves and their families out of poverty, contribute to the economy as taxpayers, and – when working in the public sector – serve South Africa’s most vulnerable populations.

Thus, UYDF’s work addresses two critical challenges simultaneously: the lack of opportunities for rural youth and the national need for more qualified healthcare professionals.

Why rural youth?

Since rural youth are the most disadvantaged, we seek to provide opportunities for them to successfully study a health science qualification and enter employment, thereby lifting themselves and their families out of poverty.

Once qualified, these graduates are more likely to remain committed to serving disadvantaged communities – whether in rural or urban settings – because they understand the language, culture, and lived realities of South Africa’s most marginalised populations.

How we support rural youth to succeed in their studies

Rural students face many challenges at university as they are poorly prepared, both academically and socially. Challenges include poor command of English (the medium of instruction), lack of digital literacy, the fast pace of the academic programme, poor social skills – including lack of confidence – lack of support from family, pressures from family for financial support, and their unrealistic expectations of the university experience, to mention but a few.

To address these challenges and increase the students’ chances of success, **we provide academic and social mentoring support to all our students, situated across sixteen university campuses**. All students are allocated a mentor, who they are required to meet with monthly. The mentor assists students with finding solutions to their academic and social challenges—the mentor cannot solve their problems, but helps them strategise how best to address the issues. The mentor then holds the student accountable to implement the agreed strategies and reflect on their effectiveness. Importantly, the mentoring support is compulsory for all students, and starts at the beginning of the academic year, and continues throughout their university journey.

In addition to the monthly mentor meeting, all students are required to complete **4 weeks per annum of work exposure at their local hospital**. This allows them to complement their theory with practice and improve their competency.

The final component of the mentoring support is the attendance, by students, of **annual lifeskills workshops** which aim to assist them to manage themselves well, discuss current issues that youth face, gain the necessary soft skills needed in the workplace, and become financially literate, among others.

The mentoring support is complemented with **comprehensive financial support**, the majority of which is provided by the National Student Financial Aid Scheme (NSFAS), to which we provide top-up funding. This ensures that students have all the resources (books, food, accommodation and equipment) needed to focus exclusively on their studies.



- 1) Provide opportunities for rural youth to qualify as healthcare professionals
- 2) To address the shortages of healthcare professionals, especially those willing to work in rural areas



Learners from rural schools are selected and supported to study a health science degree

They are mentored and funded to increase their chances of qualifying as healthcare professionals. On graduation, they enter the public health sector.

2025 RESULTS

94%

PASS RATE

98%

PROGRESSION RATE



207 STUDENTS
SUPPORTED



194 PASSED
ALL SUBJECTS



8 PROMOTED
CARRYING 1 FAILED SUBJECT

2026



supporting

220
students

GRADUATES 666 



272
DOCTORS



13
DENTISTS

23

OCCUPATIONAL
THERAPISTS

7



PSYCHOLOGISTS



45
NURSES

two

CLINICAL ASSOCIATE

40

PHYSIOTHERAPISTS

ORTHOTICS & PROSTHETICS

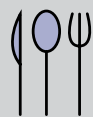
2

6

SPEECH
THERAPISTS

2

EMERGENCY MEDICAL RESCUE



19

DIETITIANS



99

PHARMACISTS



BIOMEDICAL
TECHNOLOGISTS

19

13

DENTAL
THERAPISTS

45



RADIOGRAPHERS

19



AUDIOLOGISTS

13

SOCIAL
WORKERS

25



OPTOMETRISTS

ENVIRONMENTAL
HEALTH

1

NUTRITIONIST



54%

of graduates are female

49%

of doctors are female



IMPACT



More rural-origin health workers, improved staffing, better health outcomes

Financially independent young professionals, increased number of taxpayers, rural poverty **positively** impacted



Ms. Andiswa Zondo, Pharmacy Cum Laude



Dr. Nontobeko Ntshangase, Medicine Cum Laude

COST OF SUPPORT

Our work is truly transformational as young people come from financially poor families that are unable to support their children's aspirations to study, but through our financial, academic and social mentoring support, and their hard work, they will, in all likelihood, qualify as healthcare professionals. Through our support, 90% of our students graduate, versus the 78% national average graduation rate for health science students.

On graduation, they will go into well-paid employment and assist their siblings to access better education, whilst financially assisting their parents/guardians—lifting them out of poverty. In this way, deep-rooted generational poverty is being broken, and in a relatively short time too—4 to 5 years post graduation.

The cost of this transformational support is broken down below, and amounts to **R54,000 per student per year**.

Top-up allowances			R28,000
FOOD  R12,000	BOOKS & MINOR EQUIPMENT  R3,000	ACCOMMODATION  R13,000	
Mentoring support			R26,000
ACADEMIC & SOCIAL MENTORING SUPPORT  R20,000	LIFESKILLS WORKSHOPS  R2,200	HOLIDAY WORK  R3,800	
Organisational costs			R2,000
FINANCIAL RECORDING  	OFFICE SUPPORT  	MENTAL HEALTH  	
Total			R56,000

For further details, contact:

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Watch an inspiring video of our work
 Visit our YouTube channel



STATEMENT OF COMPREHENSIVE INCOME

Annual Financial Statements for the year ended 28 February 2026

	Note(s)	2026 R	2025 R
Revenue			
Donations and grants received		8,203,196	7,161,983
Other income			
Fair value gains		1,542,786	1,246,181
Operating expenses			
Accounting fees		(61,853)	(64,953)
Auditors' remuneration		(26,600)	(25,000)
Bank charges		(170,188)	(170,790)
Computer expenses		(631)	(3,283)
Conferences and workshops		(225,016)	(158,624)
Depreciation		(7,338)	(5,769)
Employee costs		(2,080,299)	(2,002,036)
Fundraising expenses		(249)	(17,531)
Lease rentals on operating lease		(103,030)	(98,653)
Legal expenses		(5,491)	–
Printing and stationery		(24,105)	(23,612)
Staff welfare		(19,165)	(10,582)
Student expenses		(5,576,332)	(5,791,334)
Student mentoring expenses		(877,973)	(846,523)
Subscriptions		(38,630)	(38,730)
Telephone and fax		(28,121)	(28,378)
Training		(5,913)	–
Travel – local		(20,918)	(23,428)
		(9,271,852)	(9,309,228)
Operating surplus/(deficit)		474,130	(901,064)
Investment income	9	745,215	844,166
Finance costs	10	(4)	–
		745,215	844,166
Surplus/(deficit) for the year		1,219,341	(56,898)
Other comprehensive income		–	–
Total comprehensive income/(loss) for the year		1,219,341	(56,898)

Throughput of students by degree length for the 2008 to 2015 cohorts n=388		
Length of degree	Lowest throughput	Highest throughput
3-year degree	50% (2011 cohort)	100% (5 cohorts)
4-year degree	75% (2010 cohort)	100% (2009 cohort)
Medical degree	81% (2014 cohort)	100% (2008 & 2009)

Time to Completion of 2008 to 2015 cohorts n=327				
Length of degree	Minimum time	Plus 1 year	Plus 2 years	Plus 3 years
3-year degree	75%	20%	5%	
Percent Complete		95%	100%	
4-year degree	58%	28%	9%	4%
Percent Complete		86%	95%	99%
Medical Degree	76%	19%	3%	1%
Percent Complete		95%	98%	99%

Reference: <https://doi.org/10.7196/AJHPE.2024.v16i2.1140>

Lindelwa Ntuli, *Audiology*
 Zethembiso Sibisi, *Clinical Medical Practise*
 Nkosikhona Xulu, *Dental Therapy*
 Kwazikwakhe Zungu, *Dental Therapy*
 Bhekani Mshengu, *Medicine*
 Kholeka Sithole, *Medicine*
 Mngqobi Shange, *Medicine*
 Nokwanda Mvelase, *Medicine*
 Nolusizo Mbuyisa, *Medicine*
 Nonhlanhla Mazibuko, *Medicine*
 Nontobeko Ntshangase, *Medicine—Cum Laude*
 Nqobani Mngomezulu, *Medicine*
 Phumelele Malumpa, *Medicine*
 Sandisiwe Nala, *Medicine*



GRADUATES 2025

Sbonakaliso Ndwandwe, *Medicine*
 Sihle Mogorosi, *Medicine*
 Simphiwe Shandu, *Medicine*
 Siphelele Nsibande, *Medicine*
 Siphoshelembe, *Medicine*
 Thabiso Ngwenya, *Medicine*
 Uluthando Dube, *Medicine*
 Zamokhule Masango, *Medicine*

Mluleki Mbatha, *Occupational Therapy*
 Nontando Khoza, *Occupational Therapy*
 Thandiwe Masuku, *Occupational Therapy*
 Thobeka Mathenjwa, *Optometry*
 Nompilo Mavuso, *Optometry*
 Amanda Ngwenya, *Pharmacy*
 Andiswa Zondo, *Pharmacy—Cum Laude*
 Bongekile Kubheka, *Pharmacy*
 Khulekani Ntuli, *Pharmacy*
 Luvolvethu Zulu, *Pharmacy*
 Samukelisiwe Mbatha, *Pharmacy*
 Thandolwethu Sibiya, *Pharmacy*
 Luyanda Bimbrish, *Radiography*
 Nomfihlakalo Ndlazi, *Radiography*

OUR TEAM



Dr. Gavin MacGregor
Director



Ms. Nevilla van Dyk (outgoing)
Financial Administrator



Ms. Cebile Zungu
Student Coordinator



Ms Sindi Msimango
Financial Administrator

TRUSTEES



Prof. Andrew Ross



Mr. Mfowethu Zungu



Dr. Thembelihle Hlophe



Dr. Lungile Hobe-Nxumalo



Ms. Sandra Wilson

MENTORS



Dr. Lumbidzani Nxumalo



Ms. Nabeela Sujee



Mr. Ntandoyakhe Nxumalo



Dr. Nokuthula Tlalajoe



Ms. Liako Makhaola



Dr. Jethro Nkomo



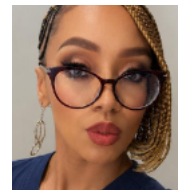
Ms. Kaylene Booth



Ms. Zandile Shezi



Mr. France Nxumalo



Ms. Vanessa Mphahlele



Ms. Sibongile Madi



Prof. Muthilisi Siwela

FUNDING ORGANISATIONS

Bidvest Corporate Services (Pty) Ltd
Discovery Fund
Firstrand Empowerment Foundation
Fulton Trust
Konica Minolta

Lily and Ernst Hausmann Bursary Trust
Norman Wevell Trust
Rachel duToit Charitable Trust
RB Hagart Trust

RES Foundation
Robert Niven Trust
Robin Hamilton Trust
Zululand Air Mission Transport (ZUMAT)

Individual donors

Brian Whittaker, Glenys Ross,
Mary Burton, Prof Andrew Ross,
Ronald and Gill Ingle,
Dr Toby Waterhouse, Wendy Clarke,
Dr Zandi Rosochacki

Graduates: Dr NP Cele, Ms B Dlamini,
Dr I Dlamini, Dr M Dlamini, Dr NN Dlamini,
Mr S Dlamini, Dr S Khumalo, Dr M Mabika,
Dr N Mangeni, Ms V Masinga,
Dr M Mathenjwa, Ms V Mathenjwa,

Dr N Mbatha-Biyela, Dr NC Mbokazi,
Dr M Mkhize, NN Mkombo,
Ms T Mpotshane, Ms N Mpungose,
Dr N Nxele, Ms T Sobazile, Dr Z Thwala,
Dr B Xaba, Dr M Xulu, Ms S Zulu.

Registration Details

The Umthombo Youth Development Foundation—

- is a registered Trust—IT 1856/95
- is a Non Profit Organisation (010-021 NPO)
- is a Public Benefit Organisation (PBO) (18/11/13/4296)
- has tax exemption on the basis of 10 (1) (cB)(i)(bb) of the Income Tax Act
- has 18A Tax exemption status

Auditors

R.I. Kennedy & Associates
Chartered Accountants (South Africa)
Registered Auditors
2 Wilford Court
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Durban 4001
South Africa

Contact Details

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Hlengiwe Myeni
Medical student



Samukelisiwe Mbatha
Pharmacy student



Mdumiseni Mdletshe
Medical student



Siphesihle Ngobese
Physiotherapy student