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UCT drug discovery pioneer named one of Africa's top 25 public health leaders



Professor Kelly Chibale.

Photo: Je'nine May/UCT.

The University of Cape Town's (UCT) Professor Kelly Chibale has been named among *Harvard Public Health Magazine's* top 25 public health leaders in Africa. These "[standout voices](#)" include scientists, public health advocates and policy experts. Professor Chibale holds the Neville Isdell Chair in African-centric Drug Discovery and Development and is the director of [H3D](#), UCT's drug discovery and development centre.

Commenting on the recognition Chibale shared: "It means a lot in terms of the good fruit of a team effort. It is always humbling for me to be personally recognised for work God, my creator, has called me to do. However, although it is a personal accolade for which I am

grateful, it is a team accolade. The team comprises all H3D staff and postdoctoral research fellows as well as our various research and funding partners – past and present. I am blessed to be the 'vuvuzela' of this team; I am privileged to lead. It also means a lot because the work of innovative drug discovery conducted at H3D is not typically acknowledged in the context of public health, which tends to be associated with the likes of hygiene, epidemiology, and disease prevention.

The main feature of the *Harvard Public Health Spring 2022* issue carries a subheading: "Africa's changing up public health. The world should take note". It refers to the continent's community-focused approach to public health. Chibale believes that African health sciences and community models have been disregarded for too long. According to him the role that African health sciences and communities have played in the COVID-19 pandemic has brought to the fore "out of Africa" innovation, capacity and infrastructure that are not currently acknowledged. There has also been good leadership at various levels on the African continent to coordinate responses to the pandemic, including leading advocacy efforts to keep public health in Africa high on the global health agenda.

For Chibale this focus means a lot for the Global South. "It means others in the Global South can learn from H3D's pioneering of a sustainable capacity-building, strengthening and skills development model that results in the creation of an absorptive capacity to attract, develop, nurture and retain skills on the African continent. We started with one platform and five postdoctoral scientists in chemistry at H3D outside my academic research group. Today we have an integrated platform across chemistry, biology and pharmacology with 76 staff and postdoctoral scientists. These are real direct jobs we have created.

"When I throw in my independent and separate academic group of PhD students and postdoctoral research fellows, we have more than 90 staff, postdoctoral scientists and research students making use of the H3D infrastructure we have created. This has been achieved through the development of a capacity-building model based on executing projects. These scale through sustained world-class excellence through networks of research and funding partnerships involving academia, industry, government, product development partners, and philanthropic organisations. This way all contributing partners share risks to share benefits. Africa needs partnerships to increase investments in science, skills development and infrastructure to provide sustainable and scalable health solutions."

In the greater scheme of things Chibale believes that COVID-19 has exposed vulnerabilities in African health systems and emphasised the need to bolster Africa's public health capacity and infrastructure, including its drug innovation capabilities. "We need to go beyond surveillance and genome sequencing by innovating in product development in the areas of vaccines and therapeutics. For Africa to improve health outcomes, there is a dire need to tap into local innovators and encourage them to fill in gaps and chart home-grown solutions. If properly harnessed, these innovations can leapfrog progress because of the relatively low costs. Now is the time for partnerships to increase investments in science, skills development and infrastructure to provide sustainable and scalable health solutions."

Looking forward Chibale is very excited about what the team is doing in the use of artificial intelligence and machine learning tools towards improving treatment outcomes in African patients through a combination of optimising dosages of medicines and stratifying patients for designed clinical trials."

Story by Helen Swingler, UCT News

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