

Opening doors for African girl children : the story of Dr Lindiwe Sidali, South Africa's first Female African Cardiothoracic surgeon

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Dr Lindiwe Sidali has broken barriers by recently becoming South Africa's first African female cardiothoracic surgeon in the country, and one of only a few on the continent. In this candid interview with the KZN Department of Health's Corporate Communications unit, Dr Sidali talks about her amazing journey, from her days herding cattle as a young village girl and the challenges she had faced as a female doctor in a speciality where at some point she was the only female in training. She also shares her love for writing romance fiction stories and the miracles that she performs at Inkosi Albert Luthuli Central Hospital, where she received her training in Cardiothoracic Surgery. She has been a doctor for 10 years. Her qualifications are Doctor of Medicine – Cuba (equivalent to MBCHB); and Fellowship of Cardiothoracic Surgery (SA).

1. Congratulations on becoming the first African female cardiothoracic surgeon in the country! How would you sum up your journey thus far?

It has been an amazing journey, enlightening in a sense that I became aware that I was an African female in a speciality that is famously known for being a male dominated. And I learnt to embrace who I am and what I represent. It's been challenging but it's also been a great adventure, and I could not have done it without the support of the amazing people that I had by my side.

2. Please tell us about yourself.

I am 35 years old. I was born in a large family of 8. I am a small town girl, born in Dutywa, in the Eastern Cape. Later on moved to Wonderkop, in the North West, where my father used to work as a mineworker. I matriculated in Rakgatla High School in Wonderkop. I received a bursary from the North West Department of Health to study medicine in Cuba. Both my parents Mxolisi and Nowinile Sidali are strong feminists in a sense that they instilled in our values that as girls we were enough to stand on our own despite and against the odds and societal norms. All my siblings were treated equally. Everyone had to cook, clean, and look after cattle. The chores were the same and all of us were expected to perform at school to the best of our abilities. We were all taught about hard work.

3. What kind of patients would typically need to be seen by a cardiothoracic surgeon?

Typically, those patients who suffer from heart, lung, oesophagus, diaphragm and trachea conditions that cannot be treated completely with medicine or interventional strategies, and require surgery. Or patients where diagnosis need be made by taking a sample from inside the chest.

4. What sparked your interest in medicine, and particularly in heart-related matters?

I was encouraged by my family and my teachers. Between 2000- 2001, I decided volunteer at a Wonderkop clinic to see if I would like it. The nurses were wonderful in encouraging me to pursue medicine. That's how I actually heard about the Cuban scholarship programme, so I applied and got accepted. But what has kept my interest and made me stay in Medicine is the desire to serve my people, to want to help people and also to give back not only by treating patients but to be a positive role model for every African child. Cardiothoracic surgery happened by chance to me. I had always been interested in most surgical disciplines, and could not decide what to pursue. But then interesting enough, every time I was on call as a community service /medical officer, there was almost always a patient with a stabbed heart, or chest related trauma and after seeing a

heart beating on my hands, I knew that I didn't want to do anything else but cardiothoracic surgery.



Dr Lindiwe

Sidali with MEC Dhlomo and Dr Khaye Ngcobo, who is also a recently-qualified Cardiothoracic Surgeon



Dr Lindiwe Sidali

5. What would you say has helped you come this far as a person? What sacrifices did you have to make along the way?

I don't think of this journey as making a sacrifice. I take it as time spent very well focusing on my studies and advancing my career. However, there are a lot of people who have helped me come this far. My family have always been the cheerleaders of my life. My teachers, who expected the best out of me .My friends who supported and cheered me, and never put me under pressure to go along with everyone else. The department of Health, North West, for seeing potential in me and giving me the opportunity to study medicine in Cuba. The Cuban community for their warm welcome and the knowledge they imparted in me, not just in medicine, but they also taught me to be proud of who I am and where I come from. My mentors for guidance and advice. The KZN Department of Health for the support. And, last but not least, the Department of Cardiothoracic Surgery (UKZN) for the opportunity they gave me. They believed in me, and supported me throughout.

6. What do you wish South Africans could change about themselves to avoid heart-related ailments, and make your job easier?

I wish more people could embrace the notion of Healthy Lifestyle, which our Government is working so hard to promote. Eating healthily and exercising can prevent a lot of heart diseases. It would also help a great deal if people could present to a health care facility as soon as possible with any symptom. Regular screening and testing can help a great deal in this regard.

7. Why do you think it has taken this long for SA to have the first African female cardiothoracic surgeon in the country?

It's difficult to answer this question without sparking debate in other areas, but I suppose it's the same reason we still have not had a female president. Those same barriers need to be broken. It's only when people see that one female can do it that they can give a chance to other females. It is an uncharted territory for females, particularly African females because they are hardly ever given a chance. In my opinion, when women are given the same position as men, they are tested to a point of failure, where all intuitive directions will point one to believe that they cannot do it. So the odds for African women are systematically, probably unintentionally, designed to drive us to not fight for more or to quit.

8. What, in your view needs to change in order to open doors for other young people who wish to follow in your footsteps?

There is a rise of female doctors in surgical disciplines overall (these disciplines have been famously been known as "Boys club"). However, African females have been given the least opportunities compared to their counterparts. We need opportunities and exposure. But the most important thing that is needed to change the future for all African children is the eradication of poverty. And one of the ways to do that is through education. That is how you truly liberate a person. But education needs money, which is why education has to be free for those who are from disadvantaged backgrounds. We also need more positive role models for young women. African girls need to see a girl that looks like them making it in the world and in that way they can see that it can be done.

9. Please describe yourself in five words?

Aware. (I am aware of myself; who I am and what I stand for, which makes it easier for others to be aware of me.) Feminist, Decisive, A dreamer and Dauntless.

10. What would people be surprised to find out about you?

That I write romantic fiction stories, only for my friends. I write under a pseudo name (only my friends know it's me). I intend to share my writing with the world someday, but no one will ever know it's me. Now that I have finished my exam, besides working hard, I am planning to practice more of my hobbies

What three things would you change about South Africa if you had magical powers?

I would make education accessible and free to every disadvantaged child. I would distribute wealth equally to all South Africans to uplift the standard of living for all of them. I would stop all gender based violence, especially that which is targeted against women, and stop calling the

murder of women homicide, but call it femicide. I would advocate for very harsh sentences for all transgressors in order to make it a deterrent.

12. Now that you've achieved this amazing feat, what lies next in store for you?

This is just the beginning of a new dawn. I am excited to hit the ground running and sharpen my skills more, and to teach and transfer my skills. I also have to finish my MMED with UKZN and in the near future pursue Congenital Cardiac Surgery (congenital heart surgery is a sub-speciality /super speciality in cardiothoracic surgery that deals with structural problems of the heart that are present from birth. These structural defects can range from a small hole between the heart chambers to complex abnormalities such as abnormal spatial arrangement of great blood vessels

13. What are your words of wisdom to those who wish to follow in your footsteps?

Everything is life is possible, dream but create a plan of action in achieving those goals. Don't follow other people's path. Create a new one.