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Making Ourselves Irrelevant: How a Rutgers–Ghana Partnership Is Building Sustainable Surgical Care



Last month, we sat down with Drs. Harsh Sule and Ziad Sifri to learn more about their longstanding partnership with colleagues in Ghana and how it has evolved over the last two decades.

What began as a surgical outreach effort has grown into a broader collaboration focused on education, mentorship and building sustainable local capacity. In our conversation, Sule and Sifri shared what they've learned about partnership, the importance of listening to local needs, and why the ultimate goal is to help build a system that can thrive without outside support. This effort has been powered by nearly 300 volunteers over the years, including Rutgers faculty, residents and medical students who have contributed their time and expertise because they believe in the mission and in the relationships that have grown from it.

[Read the full story on our website](#) to learn more about the partnership, the people behind it and its vision for the future.



Congratulations to our principal faculty, Tara Friebe-Klingner, who recently received a Notice of Award from the National Institutes of Health (NIH) for her project, "*Implementing breast cancer early detection measures in primary healthcare facilities in Botswana*"!

Project summary: Breast cancer is the most common cancer with over 2.3 million new cases and 660,000 deaths in 2022. Botswana, a low-resource country in sub-Saharan Africa, has a high burden of breast cancer mortality that can be attributed, in part, to late-stage diagnosis and barriers in accessing care. Cancer mortality can be decreased through implementation of prevention, screening, and early detection evidence-based interventions (EBIs). The US National Comprehensive Cancer Network Framework recommends clinical breast exam (CBE) as the EBI for basic resource settings where population-based asymptomatic screening mammography is often not available. Botswana's Ministry of Health has outlined guidelines for breast cancer screening and early detection, but there are currently no national programs, and the guidelines have not been translated into clinical practice. Thus, to combat the high mortality of breast cancer in Botswana, this K01 proposes to implement a breast cancer detection intervention in primary health care facilities. This work will identify scalable strategies to improve timely breast cancer detection and access to care in the United States. This proposal will be guided by the four phases of the Integrative Systems Praxis for Implementation Research (INSPIRE) methodology to understand important contextual factors specific to Botswana.



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