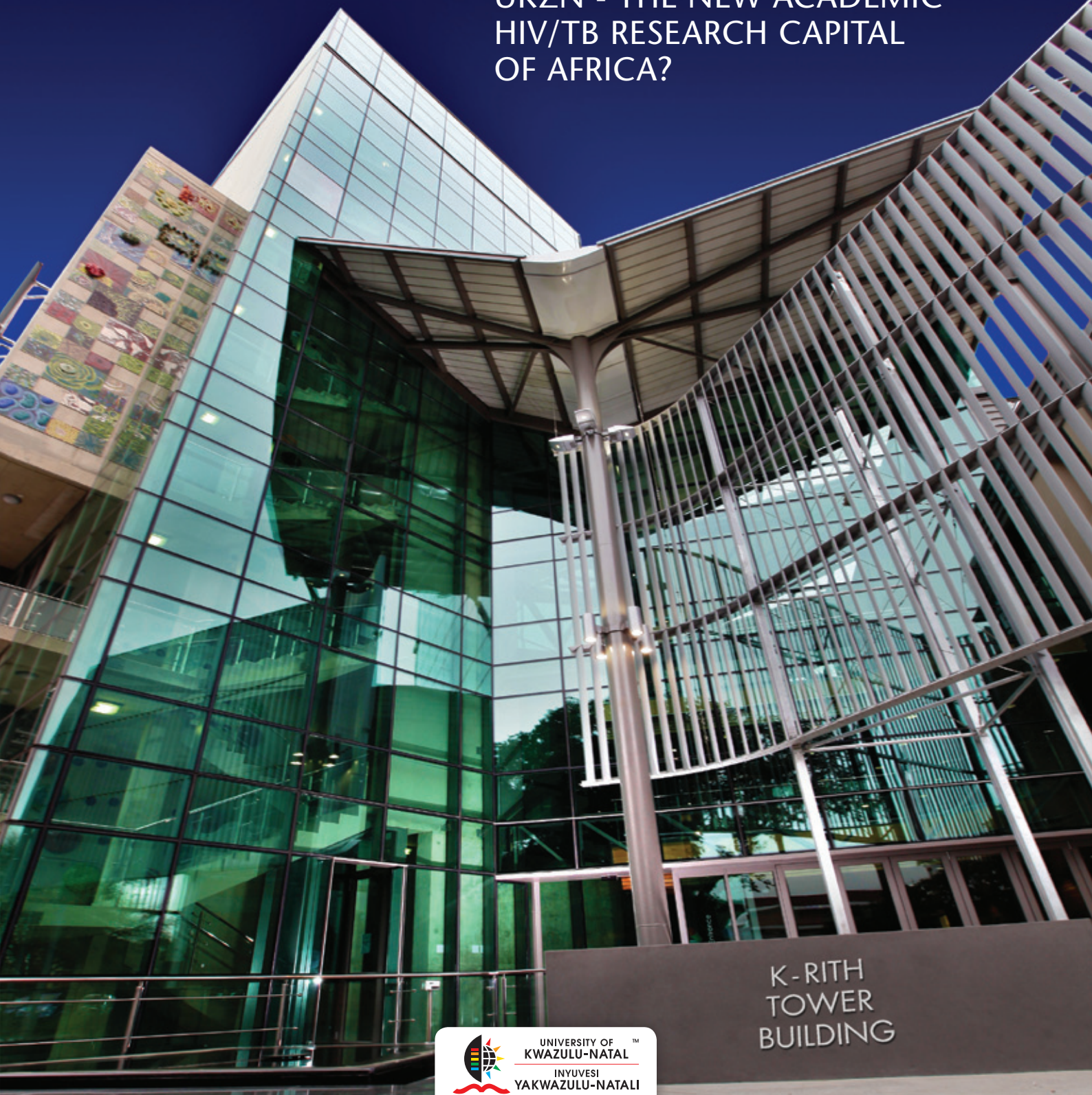


2012

UKZN TOUCH

A UNIVERSITY OF KWAZULU-NATAL ALUMNI MAGAZINE

UKZN - THE NEW ACADEMIC
HIV/TB RESEARCH CAPITAL
OF AFRICA?



UNIVERSITY OF
KWAZULU-NATAL

INYUVESI
YAKWAZULU-NATALI

INSPIRING GREATNESS

UKZNTOUCH • 2012

A UNIVERSITY OF KWAZULU-NATAL ALUMNI MAGAZINE



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Cover: The new global KwaZulu-Natal
Research Institute for Tuberculosis and
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Tuesday, October 9, 2012 at the Nelson R
Mandela School of Medicine campus.
Photograph: Rod MacLeod

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ACADEMICS NEED TO URGENTLY UPGRADE THEIR QUALIFICATIONS, SAYS UKZN VICE-CHANCELLOR

Unless urgent attention is given to improving the qualifications of academics at South African universities as well as the standard of governance at the institutions, the country can 'kiss goodbye' to a good schooling system, to the real advancement of innovation and science, to the knowledge society and to competitiveness both locally and globally.

BY: GREG DARDAGAN

This is according to the Vice-Chancellor of the University of KwaZulu-Natal (UKZN), Professor Malegapuru Makgoba, who says if he had the power – and the money - he would make it mandatory for all the country's universities to strive towards meeting international best standards and the first step would be for all academic staff to obtain PhDs.

Addressing a wide range of tertiary education issues during a special interview, Makgoba said a major concern for him, which had been identified by the National Research Foundation (NRF), was that only 34% of staff who teach and research at South African universities had doctorates. 'That's a serious indictment of our education system - it should be 70% if we want to match acceptable international standards.

'It really saddens me when this mediocrity

is defended in certain quarters because the situation is quite simply indefensible. There needs to be a very swift realisation that unless the university system is vibrant and has ambitions to be top-class we can kiss goodbye to a good schooling system because teachers are trained at university and the quality of their education is dependent on the quality of higher education.

'The country can also kiss goodbye to vibrant innovation and science because that depends on bright scholars and top class students emerging from universities. They are the ones who drive our knowledge, innovation, economic development and research priorities and they can only develop these from a high quality tertiary system.'

Makgoba said 49% of permanent academic staff at UKZN had PhDs but the good news was that 90% of the balance had either registered for a doctorate or had committed themselves to do so. This meant that within five to 10 years the university should be able to boast a 75% PhD status as proposed by the National Planning Commission.

UKZN
Vice-Chancellor,
Professor
Malegapuru
Makgoba.

UPGRADING QUALIFICATIONS

UKZN VICE-CHANCELLOR PROFESSOR MALEGAPURU MAKGOBA

There were, however, pockets of excellence at the University such as the College of Agriculture, Engineering and Science where 70% of academic staff had PhDs and the College of Humanities where the figure was 65%. 'These Colleges were on par with the best in the world and a jewel in our crown,' said Makgoba.

'Generally South African universities are characterised by poor staff qualifications, poor management of student and lecturer talent and poor governance. If we don't confront and solve these problems we'll kill education – it's a nightmare for me.'

Makgoba cited UCT as a role model – it had good governance, excellent management of talent and good resources.

UKZN also had excellent governance, good financial resources and was beginning to deal with the management of talent in a very strategic manner. 'We attract more than R500 million annually in research funding which gives an indication that we have a core of academics who are really excellent and at the cutting edge.'

Turning to the reorganisation and the college structure, which began at UKZN in 2004, he said the process was now bearing fruit.

'There were around 112 Schools or departments when we started to restructure in 2004. We reduced that to about 52, cut the 16 faculties down to eight and created four Colleges.

'In 2010 we asked an external panel to review the new model and they interviewed about 450 UKZN people and found general acceptance of the structure. They liked it but there were areas still too cumbersome and bureaucratic – more consolidation was needed.

'So the number of Schools was reduced to 19, faculties were removed altogether and the four Colleges continued,' said Makgoba. 'The magnitude to reorganise and consolidate 112 Schools to 19 Schools to enhance efficiency and governance, over a period of eight years, is a major shift in any organisation by any standard.'

At the end of August 2012 the Executive Management Committee assessed achievements and decided where the structure could be refined and improved.

The college reorganisation had enabled UKZN, says Makgoba, to break down old barriers with people working together while duplication, which occurred in the old system, was reduced. People generally began to talk about UKZN as a unified institution, which they could identify with. Research output improved as did research funding.

On the promotion of bilingualism – the use of English and isiZulu – at UKZN, Makgoba says steady progress is being made. Implementation had taken place over the past seven years and 2013 should see the introduction of isiZulu as a compulsory course for all full-time students although specifics still had to be confirmed.

'In KwaZulu-Natal 90% of the population uses isiZulu as their first language. It is the medium of ideas, culture and thought processes. People live in the language, share their pains and passions in it and write poetry in it. As a university we need to reflect that reality.'

Makgoba said he was happy with the University's ranking among the Top 500 in the world and third in Africa by the Academic Rankings of World Universities (ARWU). 'We are a study case of the ARWU because they are pleasantly surprised by the fact we are performing so well

as a newly merged and reorganised institution.

'I am also very proud of the fact that we are the only university in South Africa, performing so well, where more than half of the academic staff is Black.'

Another issue worrying him was that five South African universities were under administration primarily because their council members didn't appear to know their functions and roles. 'Four of the five have a strong technikon history and were handed university status by government decree.

'I don't believe they were properly prepared to become universities – it doesn't just happen overnight, it should be earned. Also I don't think they have been given the necessary support and have thus far failed to mature.'

Makgoba said he was excited about the opening of the KwaZulu-Natal Research Institute for Tuberculosis and HIV (K-RITH). 'This is a unique project between UKZN and the Howard Hughes Medical Institute in the United States. The institute will be involved in critical research into HIV/AIDS and TB, which could yield significant breakthroughs within a few years in the diagnosis, prevention and treatment of the killer diseases.

'I think K-RITH puts UKZN ahead of any other university in this area of study and research. We have world-renowned researchers coming to K-RITH, which has become a 'brain gain' institution.

'I was one of the drivers of the project – I am glad it has opened before the end of my tenure as Vice-Chancellor and will continue long after I leave in 2014.' **N**



MESSAGE FROM THE OFFICE OF THE EXECUTIVE DIRECTOR: CORPORATE RELATIONS DIVISION, MS NOMONDE MBADI

This edition of *UKZNTOUCH* focuses on health delivery and the complexities and diversity of the many challenges that face the health sector in South Africa.

It is widely accepted that our health sector is overburdened and the challenges are immense. More than ever before the training of our health professionals and the relevance of research in the health sciences are of critical importance and will contribute to the success of service delivery in the health sector.

UKZN is widely respected as one of the leading institutions on the African continent - in the academic training of health professionals and for its contribution to the national and global research agenda.

Understandably, the theme is vast and our writers reveal aspects of academic work that span rural medicine, telemedicine, the transformation of the health sciences and cutting-edge research in HIV/AIDS

and tuberculosis. It makes sense given that an estimated 38 percent of South Africa's population live in resource-constrained settings, health care professionals should be exposed to training in these areas. As part of the broader community outreach UKZN's medical curriculum now includes a telemedicine component and UKZN is using telehealth facilities to train doctors through video linked training seminars in nine different African countries.

Professor Richard Hift Dean of the School of Clinical Medicine, says in an interview, that 'academic achievement needs to be coupled with a research dynamic, one which stimulates academic debate and strives to answer the difficult questions facing those involved in health care, particularly at the primary health level'. Professor Sabiha Essack Dean of the School of Health Sciences emphasises the importance of entrenching Health Sciences research into education. Through our research, it is the University's mission to change lives and make a difference

and in this regard notable research that benefit communities continues to be undertaken both within South Africa and beyond. Liz Clarke spoke to Professor Anil Madaree, Head of Plastic and Reconstructive Surgery, who has, through Operation Smile, travelled with a volunteer team of health professionals to several regions in Africa, including Madagascar, Rwanda, Namibia, Swaziland and the Democratic Republic of Congo performing cleft lip surgery on more than 200 children during any one of these missions.

This year marks the completion of the KwaZulu-Natal Research Institute for Tuberculosis and HIV (K-RITH) – a multi-million research institute built on the Medical School campus which was officially opened on 9 October this year. This is indeed an historic investment in advancing medical science, building a critical mass of highly skilled medical scientists and more importantly, in improving the health of the poor and vulnerable people afflicted by HIV and TB co-infection in our society. We wish Professor Bill Bishai, Director of K-RITH and his team, every success in this innovative endeavour.

Our research section focuses on a cross section of studies in the sciences, conservation, humanities and public administration. News highlights provide a glimpse of the vibrant activities at the University. I hope that this edition will provide insight into our rigorous academic endeavour and the enormous strides that have been made over the year.

Warm regards

Nomonde

THERE'S NOTHING AVERAGE ABOUT OUR TRANSFORMATION AVERAGES

Since our merger in 2004, UKZN has been at the forefront of transformation for South African universities. We recognise that we have a responsibility to lead by example, and will continue to show that diversity is not a weakness but strength, as we inspire greatness.

STUDENT PROFILE

64% of **42 000 students** enrolled in 2012 are **African**.

62% of **graduates** in 2011 were **females**.

84% of **UKZN graduates** are employed within 6 months of graduation.

ACADEMIC LEADERSHIP

33% of **academic leadership** in 2011 was **female**, compared to 0% in 2004.

67% of **academic leadership** in 2011 was **Black**, compared to 38% in 2004.

RESEARCH PROFILE

81.3% of **UKZN staff** were **Research-active** in 2011, compared to 42% in 2004.



GLOBAL RANKINGS

UKZN is ranked within the **top 2.4 - 3%** of the World's Universities by the Academic Ranking of World Universities, the QS World University Rankings, and The Times Higher Education Ranking.

Academic Ranking of World Universities ranked UKZN **3rd in Africa** and **3rd in South Africa**.

The Times Higher Education Ranking placed UKZN '**within the top 400 for the first time**'.

While others claim that you cannot increase equity and quality at the same time, the figures prove that it can be done if you are determined enough. The key to this is the effective management of the tension between the two, which we have demonstrated to great effect through impressive improvements year on year. It is no coincidence that some of our indicators are seven years ahead of the national university system transformation indicators, implemented with aplomb even in the midst of a complex merger. So if we can achieve this, just imagine how we can inspire tomorrow's generations.



UNIVERSITY OF
KWAZULU-NATALTM
INYUVESI
YAKWAZULU-NATALI

**RANKED
IN THE TOP
3%
OF THE WORLD'S
UNIVERSITIES**

**81.3
%**

**84
%**

KNOWLEDGE PRODUCTION AND ACADEMIC STAFF PROFILE COMPARED TO NATIONAL UNIVERSITY SYSTEM (INCLUDING UKZN)

48% of UKZN's permanent academic staff hold a PhD as a minimum qualification.

47% of academic staff are female compared to the sector average of 44%.

UKZN's ratio of doctoral graduates to permanent academic staff is 0.12 compared to the national average of 0.09.

UKZN's ratio of research publications to permanent academic staff is 0.81 compared to the national average of 0.58.

The percentage of professors with doctorates in the national system in 2010 was 84%, UKZN was 87%.

The percentage of associate professors with doctorates in the national system in 2010 was 70%, UKZN was 78%.

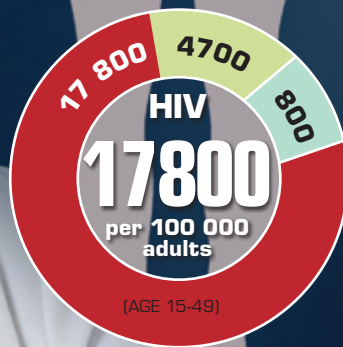
The percentage of senior lecturers with doctorates in the national system in 2010 was 41%, UKZN was 59%.

The percentage of lecturers with doctorates in the national system in 2010 was 12%, UKZN was 20%.

The percentage of junior lecturers with doctorates in the national system in 2010 was 5%, UKZN was 50%.

The percentage of White academic staff in the national university system in 2010 was 56%, UKZN is 33%.

INSPIRING GREATNESS



17 800	4700	800
SOUTH AFRICA	REGIONAL	GLOBAL

EXCELLENCE & RELEVANCE IN HEALTH SCIENCES



OUR SPECIAL FEATURE EXAMINES THE HEALTH SCIENCES, TURNING THE SPOTLIGHT ON:

- Clinical Medicine – The Road Ahead
- Transformation of Health Sciences
- Unlocking much-needed Skills
- Levelling the Playing Fields
- Health Service Over a Distance
- Unpacking Lifestyle Coping Mechanisms
- Changing Lives through Corrective Surgery
- Research and Health Delivery
- New Chapter in TB Science Begins in Durban
- Global Research Opens for Business in Durban
- A New Chapter in Microbiology Opens
- The Challenge of Antimicrobial Resistance
- UKZN's Sports Medicine Programme hits the Spot!
- Spoonful of Exercise Helps the Medicine go Down
- Dealing With Loss and Grief

BY: LIZ CLARKE

EXCELLENCE AND RELEVANCE

IN HEALTH SCIENCES

BY: LIZ CLARKE

In the arena of health sciences the University of KwaZulu-Natal has established itself as a global player focusing academic research energy on a number of critical health issues. None of these issues is as close to home as the co-infection of TB and HIV/AIDS, which continues to ravage vulnerable communities particularly in KwaZulu-Natal, leaving in its wake a humanitarian crisis, overwhelming in size and complexity.

Not surprisingly, as front-line partners in a number of collaborative initiatives, cutting edge research is a significant and intrinsic part of the medical endeavour at UKZN with major research facilities having established their headquarters on the campus of the Nelson R Mandela School of Medicine in central Durban.

Among the internationally funded facilities playing a crucial role in the realm of health science understanding is the Doris Duke Medical Research Institute with its commitment to expand research and training in HIV and AIDS. Very much part of this rich academic environment are UKZN's three HIV and AIDS training centres in Africa: the Africa Centre for Population Studies, CAPRISA and HEARD.

K-RITH is the latest global research centre to have been established at the Nelson R Mandela School of Medicine, its prime focus being the discovery and investigation of new diagnostic tools and therapies to control the TB pandemic sweeping Africa and the rest of the world. First and foremost in the minds of those who guide and oversee the work undertaken at these centres of academic excellence is to discover novel and sustainable solutions to controlling disease, a

long-term process that cuts across basic sciences, clinical sciences, epidemiology and involving economic and social impact and trends. In this vein, training and opportunity are a fundamental part of the mix. So too is the importance of ensuring that enough bright and industrious students are entering the field of health sciences.

The Nelson R Mandela School of Medicine is central to the promotion of knowledge building, providing a fertile environment for research and health professional training. Its situation, in close proximity to communities where rare and opportunistic infections are rampant, makes it even more strategic in the bid to improve health service delivery. One could argue that these challenges are nothing new. In a comparative sense there has always been a historic shortfall in health service delivery, personnel and resources, particularly in vulnerable communities. However, UKZN believes that in view of the burden of disease being experienced in the province it has a significant role to play in meeting the health-care needs of local communities.

According to a South African discussion paper on the country's proposed National Health Insurance Scheme, South Africa's doctor-to-patient ratio is currently standing at eight doctors for every 10 000 people. Compare this with the US, which has roughly one doctor for every 300 people.

Statistics emanating from the rural districts of KwaZulu-Natal provide a stark picture of what under-resourcing actually means. While these areas are home to 10 645 400 people there are only six doctors per 100 000.

UKZN is acutely aware of these needs, seeking excellence and relevance in medical studies as well as a number of related disciplines, including audiology and speech lan-

guage, pharmacy, physiotherapy, occupational therapy, sports science, dental therapy and oral health. Some will maintain that the steady evolution of health sciences lies in doubling the numbers of students involved in health science academia and increasing the incentivisation of students at matriculation level to opt for the health sciences. Others could be even more adventurous and suggest that a new category of primary health degrees over three years be introduced instead of the current five or six.

In the context of a growing demand for health professionals, both locally and internationally, UKZN maintains a constant review of the subjects taught at university level to ensure they remain relevant for the current health needs. One of the biggest challenges facing the country, which UKZN is acutely aware of, is the need to increase the number of doctors in training.

Figures contained in a presentation compiled by Dr Mark Sonderup and Dr Phophi Ramathuba of the South African Medical Association (SAMA) for example, show that currently there are an estimated 27 641 doctors practising in South Africa. About 23 410 South African-born doctors are believed to be practising in Australia, Canada, the US and New Zealand. A brain drain aside, solving the shortage of personnel engaged in the health sciences is going to require cool heads if health services are going to adequately respond to the increasing number of vulnerable people in need of care.

It is against this diverse and complex backdrop that UKZN's current 2012 publication *UKZN Touch* focuses on the people who are taking academic research and cutting-edge thinking to new heights, the scholars who are asking and answering the questions confronting the world.

It's not about talk – it's about making things happen! **N**

SOUTH AFRICA

Total Population

#Estimate

51 770 560

62%

Population living in urban areas

62%

SOUTH AFRICA

38%

REGIONAL

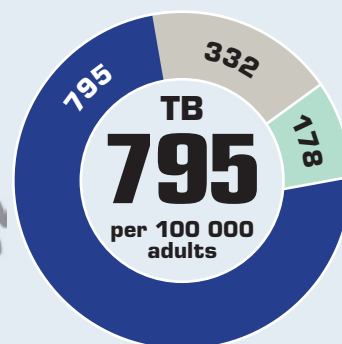
50%

GLOBAL

8

DOCTORS
PER 10 000 PEOPLE

PREVALENCE OF
TUBERCULOSIS
PER
100 000
PEOPLE



795

SOUTH AFRICA

332

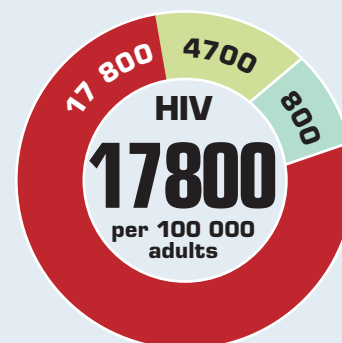
REGIONAL

178

GLOBAL

PREVALENCE OF
HIV* PER 100 000
ADULTS

(AGE 15-49)



17 800

SOUTH AFRICA

4700

REGIONAL

800

GLOBAL

OBESITY
(AGE 20+) 2008

42.8%

SOUTH AFRICA

11.1%

REGIONAL

FEMALE

23.2%

SOUTH AFRICA

5.3%

REGIONAL

MALE

23410 SA-BORN
DOCTORS

WORKING IN THE US, AUSTRALIA, CANADA,
and NEW ZEALAND



LIFE EXPECTANCY

54 yrs Male

52

66

55 yrs Female

56

71

SOUTH AFRICA

REGIONAL

GLOBAL





CLINICAL MEDICINE THE ROAD AHEAD

Where are we going and where do we want to be? These are the key questions that define a new vision for UKZN's School of Clinical Medicine. Professor Richard Hift, Dean of the School of Clinical Medicine, shares his views about the road ahead.

Modernising any structure requires a multi-disciplinary buy in. Professor Richard Hift believes that the time is right for UKZN to take the giant steps, which will place the institution in a lead position nationally and globally.

‘We have the confidence and the will to undertake this challenge,’ he says. ‘If it means moving away from the more traditional English speaking universities and evolving a new structure of teaching and research, that is the journey we need to take.’

What is critical, he believes, is adopting a sustainable vision that embraces quality medical training as well as relevant and ground-breaking research as its core tenets.

‘Our aim as leaders in the clinical medicine sector at UKZN is to

elevate the University to a higher international ranking. Currently we rank in the 400s as a research institution. We believe that we can take that to the 200 mark within a reasonably short period.’

Achieving these goals, says Hift, will require certain changes in mindset.

‘We have to ask whether a single degree which produces a highly competent doctor, is enough in this day and age. The modern view, world wide, is that, no, it's not enough. That academic achievement needs to be coupled with a research dynamic, one which stimulates academic debate and strives to answer the difficult questions facing those involved in health care, particularly at the primary health level.’

Hift believes that UKZN's vision will build up a ‘true research

CLINICAL MEDICINE

THE ROAD AHEAD



Professor Richard Hift, Dean of the School of Clinical Medicine.

imperative' by moving away from a departmental approach to an interdisciplinary and partnership model based on achieving optimum results.

'Change is not always easy or acceptable. It means getting rid of fiefdoms within the university, unnecessary bureaucracy, and streamlining the administrative process. But if we can achieve that in a spirit of goodwill, we will have achieved a major breakthrough.'

Putting that vision at grass-roots level, Hift takes the line that research endeavours need to be more focused.

'I go along with the view that it would be more productive to engage our research community in fewer and more specific topics. That way we can focus our energies on research that will have a greater impact. It will not only mean more collaboration and greater synergy

across various sectors, but will also enable us to evolve a strategy where we can think about what we don't want to do.'

As part of this collaborative endeavour, a first step, says Hift, will be to centralise the University's administrative process.

'It will make a lot more sense to have one central administrative hub, rather than each department running its own affairs. That way we can free up valuable staff to concentrate on their core skills. If we follow this path there is little doubt that the work done at this University

can have an even greater impact on HIV/TB research outcomes as well as non-communicable diseases like high blood pressure and diabetes.'

The diversity of students at UKZN from different cultures and backgrounds, including those from disadvantaged communities, presented unique opportunities to engage in meaningful research.

'Currently there is a PhD research project that tracks the thinking of undergraduate students that have a good understanding of diagnostics and the deductions involved, comparing their methodology with those who have a lesser understanding of the diagnostic process. These findings will help us in the design of our teaching programmes.'

One of the problems identified in the undergraduate and postgraduate learning process is the length of time that it takes to reach specialised levels of medicine.

'We are talking about 15 years and in this day and age that is far too long. We have to find ways to restructure this process. The fact that a masters degree will become a mandatory part of a registrar's specialisation studies will go a long way to underpinning a research-led academic career.'

One of the biggest dilemmas, Hift agrees, was the chronic shortage of doctors in the rural areas.

'In this regard, we will be noting those students who have a desire to follow a career as a rural doctor, and placing special emphasis on the particular skill, support and knowledge they will require.'

Hift believes the new King Edward VII training Hospital in Cato Manor, in tandem with the Inkosi Albert Luthuli Hospital, will provide top quality health care.

'We just have to ensure that the strata of hospitals providing health care to the community are elevated to a comparative level. It would be no good if we have a star at the top and decaying resources elsewhere.'

The digital age is with us and that means we have to become IT savvy.

'Where possible students are encouraged to use digital technology as much as possible, whether its on their laptops or iPads. But then we have to play our part ensuring that we have the WiFi zones and the networks that will improve connectivity.'

The road ahead is not going to be easy, says Hift. 'There will be obstacles. There will be people who will say that the old way is better. But we have a vision and we need to stick to it. Our goals are achievable and it is up to all of us to make our vision a reality.' **N**



*UKZN's Dean of
the School of Health
Sciences Professor
Sabiha Essack*

TRANSFORMATION OF THE HEALTH SCIENCES

Professor Sabiha Essack, Dean of the School of Health Sciences, talks about challenges faced in the transformation of the health sciences for the 21st century.



TRANSFORMATION

OF HEALTH SCIENCES

Processes and academic cultures that have been pursued for years, even over centuries, are not easily nudged into more contemporary directions.

UKZN is well-placed to introduce new strategies in the field of health sciences and become a vital cog in implementing the re-engineering of the primary health care-based health system in South Africa, but there are several challenges to be addressed.

No-one understands this better than UKZN's Dean of the School of Health Sciences, Professor Sabiha Essack, who believes that there is a need to explore new directions in health sciences education to bring about a more holistic delivery and utilisation of academic knowledge and research.

'I am convinced,' she said 'that if we don't entrench health sciences research into education and training and clinical needs, we will not optimise healthcare of the diverse health-seeking South African communities.'

A key component of this discussion, she says, is the Department of Science and Technology's commissioned status report of clinical research in South Africa.

The report suggested that there was currently no national plan to provide co-ordinated support for the education and development of clinical researchers, particularly from the public sector.

'It is quite clear that we have to come up with better and more practical strategies to address these critical issues.'

Earlier this year these same challenges were spelt out at the annual conference of the South

African Committee of Health Science Deans at UKZN's Westville campus.

In her role as Chairperson of the South African Committee of Health Science Deans, Essack reiterated the stance made by, among others, the World Health Organization and the World Bank and of the 'global imperative to expand the health workforce' in order to meet the Millennium Development Goals.

Among those presenting were Dr Peter Barron technical assistant, National Department of Health who said that unless there was a fundamental change in the way in which the health sector functioned South Africa was unlikely to meet the MDG health indicators for infant, under five and maternal mortality rates. Nor was it likely to achieve the MDG goal related to HIV and TB.

Strong education systems providing professionally regulated and quality assured training programmes were key to achieving the number of quality health workers needed to support a viable health system.

Vanessa Burch, Professor and Chairman of Clinical Medicine at the University of Cape Town underpinned this at the conference of Health Science Deans in Durban.

'In this new decade,' she said, 'we must recognise the central role of the clinical teaching platform and the need to significantly expand and diversify the platform to meet current health care and human resource mandates.'

'The priority,' said Burch, 'was to train more health professionals and produce "fit for purpose" practitioners.'

Says Essack: 'Nowhere is that imperative greater than here in KZN, the most populated province with

the highest HIV and AIDS burden.'

The broader discussion, believes Essack, surrounds the challenges faced by South African universities in training quality health professionals to meet the healthcare needs and alleviate the disease burden of the country using evidence-based practice relevant to the South African context.

'All health science educators are fully aware of the demands that have to be met on a national scale, for the implementation of a fully inclusive national health system, but it is how we do it that requires intense and pragmatic discussion across the board.'

Central to the discussion, says Essack, is the issue of a broader training platform and the optimal use of resources.

'Traditionally diploma students do their training outside of a traditional university environment, but we have to ask is that always practical. For example we are about to establish a new hospital on the UKZN campus where our health professionals will receive their training. Within this environment I believe we also need to train, under one roof, our mid-level workers in disciplines like Pharmacy, Physiotherapy and Occupational Therapy so that patients have the benefit of an overarching service.'

'It will require a rethink of our registration and accreditation process, but I think a workable compromise needs to be found if we are to achieve our goals.'

Essack says her mission within the health sciences ambit is to establish a comprehensive service and teaching environment underpinned by evidence-based practice and research respectively. **N**



UNLOCKING MUCH-NEEDED SKILLS

Recognising the potential of under-privileged learners to achieve academic success could be a way of unlocking much-needed skills. Professor Andrew Ross is the pioneer of a mentorship scheme promoting a new generation of health professionals

Ingwavuma is a forgotten pocket of land wedged at the far northerly end of KwaZulu-Natal. The geography and landscape are tough, resources are limited and life for the rural inhabitants is harsh in the extreme.

But desolate and spartan though the area may be, it is here that one of the most innovative and heart-warming projects in South Africa is unfolding, one that is slowly but surely giving dignity and hope to a deeply challenged community.

Professor Andrew Ross, former superintendent of the Mosvold Hospital at Ingwavuma who currently runs a student mentorship programme at the University of KwaZulu-Natal, explains the background of marginalized children often thought of as ‘no-hopers’ who have proved that difficult situations not only require a new way of thinking, but can be turned around.

‘Going back a bit, we realized that if something pretty dramatic didn’t happen in that part of KZN to improve health services, we would be facing a humanitarian tragedy,’ said Ross.

‘We needed new ways to address the chronic shortage of health care providers. We were well aware that trained staff are reluctant to go to such a deeply rural area, and even foreign doctors willing to come to these outreach hospitals are sometimes unable to obtain work permits.’

The answer, he believed, was to first identify local school-going children with potential to follow a career in health sciences and support them through their studies.

But that, admits Ross, was easier said than done.

UNLOCKING

MUCH-NEEDED SKILLS

Performance surveys showed that standards of teaching and education in those far-flung regions were low. Schools were for the most part dilapidated, overcrowded and lacking in resources and the matric pass rate was amongst the lowest in the country with few students able to achieve a basic level of success in science and maths.

In 1998 against this lack-lustre backdrop, Ross initiated a group, which calls itself the Friends of Mosvold Scholarship Scheme - now known as the Umthombo Youth Development Foundation.

‘We believed if we could harness potential locally we could address the chronic shortage of trained health professionals and promote the idea of local people bringing high quality health services to their own communities in Ingwavuma, Ubombo and Hlabisa.’

However, it wasn’t a high profile campaign launched with bells and whistles.

‘We first had to make sure that the project worked and was sustainable. It was a gamble because it hadn’t been done before in South Africa. Most of the children we identified would normally have no chance whatsoever of being accepted at a university.’

To get the ball rolling schools and the communities chose their best students, ‘usually the 25 percenters’, to attend day workshops at Mosvold where they were introduced to the workings of a hospital and the different disciplines.

‘From these initial groups we selected three matric students who had been accepted at university to study a health science course that we felt had the ability to succeed even though their marks were pretty shocking.’

‘Once we had overcome those hurdles the pressing issue was to find sustainable and long term funding. It was all well and good having a dream, but that dream required a lot of money to make it work.’

Initially it was doctors themselves who supported the project. A partnership was then forged between the local community, Department of Education, Department of Health, Medical Education for South African Blacks (MESAB) and private funders. Further funding has come from trust funds, international donors and businesses.

‘We had people who said we were mad.’ Ross smiles at these early recollections. ‘They said it would never work and that the scheme was doomed to failure, but when you believe in something you just have to carry on regardless.’

Mr Dumisani Gumede is one of the first graduates of the scheme, who proved that ‘amazing things’ could happen.

‘Dumisani, one of the first chosen students, spent the first three weeks of his university career in the ICU at King Edward VIII Hospital suffering from malaria,’ recalls Ross.

‘We suggested he wait a year to recover. He was adamant that he wanted to continue at university and said he wasn’t going to let go of the biggest chance in his life.’

Dumisani qualified as a physiotherapist and worked at Mosvold and Hlabisa Hospitals. He was responsible for establishing a therapy department at Hlabisa Hospital - where there was none.

He now works for the Umthombo Youth Development Foundation and is currently mentoring 182 students.

Said Dumisani: ‘I always say to my students – look at me. If I can do it so can you. We haven’t had the best school education, but that doesn’t mean we are failures. Give us the opportunity and we will show you what we can achieve.’

Ross said a key element of the scheme was to promote a sense of responsibility in the students they mentored.

‘It is not about being handed things on a plate. It’s about hard work, identifying weaknesses, whether it’s a lack of understanding or a gap in knowledge, and fixing those weaknesses. It’s about looking after one’s health, taking responsibility for one’s personal life, and passing.’

Last year, he said, the students involved in the scheme achieved a 90 percent pass rate.

A blueprint for similar initiatives? Ross believes it is the only way to go.

‘If potential is overlooked particularly in areas where education is poor, we are denying people the chance of becoming valued citizens. It certainly beats poverty and unemployment.’ 

The focus of the mentorship programme is an area, including Ingwavuma, Ubombo and Hlabisa, which forms a dusty and dry pocket of land on the borders of Swaziland and Mozambique.

The region has three “chronically understaffed” hospitals – Mosvold, Bethesda and Hlabisa – and one of the highest HIV prevalence rates in the world, accounting for 57 percent of deaths. It also has one of the highest numbers of AIDS orphans and child-headed households.

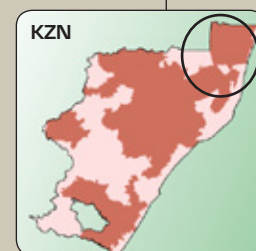
I Below: Professor Andrew Ross

THE SCHEME SO FAR

Over the last five years more than 800 local scholars have attended the hospital open days, 400 people have applied for financial support, and 55 young people have trained as Peer AIDS educators. Furthermore, 182 students are being supported at University/Technical College doing a wide variety of health science courses including Medicine, Physiotherapy, Pharmacy, Occupational Therapy, Optometry, Dental Therapy, Speech Therapy and 116 have graduated as health care professionals. This year the number of students involved in the programme rose to 182.



South Africa:
Energy Source
for lighting as an
economic indicator.
□ Electricity
■ Candle Power



Northern KwaZulu-Natal:
Mentorship
Programme
area of
operation
showing
candle power
as the primary
source of
lighting.

Source: statssa.gov.za





MEDI ACC



LEVELLING THE PLAYING FIELDS

The fact that 38 percent of the country's population live in rural areas where resources and medical facilities are limited presents a real challenge to those working in the field of rural health.

It was just over a year ago that the Department of Rural Health was established at UKZN – a first in the country. Dr Bernhard Gaede was tasked with setting up this fledgling facility and at the time admitted that there was a mountain of work to do ‘to try and level the playing fields’.

Twelve months on he says a salient part of the journey to bring critically needed health services to resource poor areas had already begun. However, upgrading services and facilities was only a part of the solution.

‘To establish sustainability and ongoing improvement in the health of rural communities, we need to have a far greater understanding of the environment and the health dynamics of these areas,’ said Gaede.

The key aim of the newly formed Department, he believes, was to work towards improving the health of rural communities through research, capacity building and advocacy.

‘It’s about a working partnership based on trust and good sense.’

But to achieve these long term goals, says Gaede, means starting on a process of transformative medicine.

‘Along the way and as part of an evolving and in many ways a unique learning process, we are having to make a host of strategic decisions. Some initiatives will work, some may not. It is very much a work in progress. But in the end we believe that currently under-served communities in rural areas will be benefactors.’

Gaede says its important to remember that transforming the way medicine and medical services are rolled out in South Africa is no longer only ‘the right thing to do’ but was a nationally endorsed imperative supported by the Health Professions Council of South Africa.

‘There is no ambiguity. Transformation is here to stay.’

‘As part of this broader health outreach, Medical School training

LEVELLING

THE PLAYING FIELDS



Dr Bernhard Gaede

in this country, including UKZN, now includes a telemedicine component as part of the learning curriculum, which will be examinable. Compulsory community service in rural medicine will also be extended from two weeks to seven weeks as part of the new curriculum.'

A critical part of the new strategies, he says, is to rethink the words "rural health". To most people, even those who live in this far away setting, it conjures up a sense of inferiority.

'It's sad but so true that families and communities who live in these out-of-the-way rural areas, accept that they will come off second best as far as their health needs go – just because of where they live and where they were born.'

Gaede is determined to be part of a new era that is trying to change those perceptions.

'There is no absolute definition of what rural health really is,' he said. 'It's a loose word that in most cases denotes services in far flung areas, where there is little or no infrastructure, often no sanitation or electricity. But then

we have to ask where does rural start and how should you describe it? And where do urban areas end – and what's in the middle?'

For this reason, he believes that a programme of "inclusive" action of training and outreach deserves appropriate funding.

Taking this vision forward, he explains, will be the expansion of training sites in KZN, where students will be able to study and interact with local communities. The first major step along this journey is the building of the new Murchison Hospital on the South Coast, near Port Shepstone.

'The community here is well served on a district health care level, with a number of established clinics and a small hospital. We are building on this foundation to enable undergraduate and post graduate students to continue their training in rural health and to interact with patients in a local setting.'

Gaede believes that introducing rural health into the medical training curriculum for the first time is "a positive step" in addressing shortfalls and skewed perceptions.

'Young doctors often have the perception that if they are transferred to facilities in the rural areas there are huge risks to their personal safety. It isn't the case at all, but we need awareness programmes to change that thought process.'

There is also the belief that an overwhelming burden of disease still exists in the outlying areas, including HIV and TB – 'not to mention depression and hopelessness.'

It might have been the case several years ago, says Gaede. 'But certainly in the case of HIV there have been huge strides. Patients can get their ARVs at a number of clinics. The medication is no longer an unknown factor that has to be viewed with suspicion. People are a lot more knowledgeable these days.'

He also believes that this 'decentralising' process where there is an integrated approach to primary health, TB and chronic diseases, is the right way to go.

'I am hopeful that in KZN we are on the correct path,' said Gaede. 'In a few years time, we will see a huge difference in the way health services are delivered.' **N**

TELEHEALTH MEDICINE OVER A DISTANCE

Telehealth should really be called e-Health, says Professor Maurice Mars,
Professor of Telehealth at the Nelson R Mandela School of Medicine.





BY: NIKI MOORE

Telehealth refers to the use of information and communication technologies in the health sector and covers five areas - the clinical aspects of medicine, the administrative aspects of medicine, research, education and surveillance.

Every time a patient goes to a hospital, according to Professor Maurice Mars, they are practising telehealth. Patients give their personal details to reception and these are put into a computer. They give medical details to a doctor, which are put into a computer. They have tests, X-rays or consultations and the information is stored in computers.

Telehealth, therefore, is the study and implementation of systems to co-ordinate all this information so that duplicate work is prevented.

The information is valuable to doctors and patients as well as society at large. Having patient data centrally stored saves the patient several trips to hospital and saves

time for the doctor who has specialist information about his patient at his fingertips. The broad statistics attached to that information (such as the frequency, demographics or geographical spread of, for instance, a disease or condition) could help researchers to track and identify health needs countrywide.

‘I’m more interested in the actual medical services themselves,’ said Mars. ‘There is very little data on the developing world, and even less on sub-Saharan Africa. We spend only a few cents per person per year on telehealth, but even so we have to be careful with that small spend, as we need to make sure that the money being spent on telehealth is not being taken away from actual medicine or health services. It becomes a very delicate balancing act.

‘Everything we do is aimed at benefiting the poorest of the poor. We use the lowest levels of technology. We don’t use technology for its own sake. And the biggest lesson we have learned is that 60% of all ICT interventions fail because of human error.’

UKZN’s Medical School is using *Professor Maurice Mars, Professor of Telehealth at the Nelson R Mandela School of Medicine.*

telehealth facilities to train doctors, using video-conferencing to hold teaching seminars in nine different African countries for six hours a day. There are few sustained telehealth projects, but the few that are operational have shown huge benefits in time and cost saving.

‘There is a lot of misunderstanding and misconception around telehealth,’ said Mars. ‘So my job has evolved into being an advocate. I spend my time selling the concept on the one hand, and explaining the problems on the other hand. But the potential is huge.

‘For instance, there is a law that every child must have their hearing tested at school. That hasn’t happened. But through telehealth we can put the systems in place to make that happen.’ **N**

UNPACKING LIFESTYLE COPING MECHANISMS

Poverty, violence and life-threatening scenarios are a fact of life for many of South Africa's more vulnerable communities. A four-year research project aims to find answers as to why some young people cope better with difficult situations than others.



UNPACKING LIFESTYLE

COPING MECHANISMS

Eighteen-year-old KwaZulu-Natal teenager Ronald Solomons* has a background that no-one would wish on their worst enemy.

Abused by a family member, a frequent recipient of violent behavior involving drugs and alcohol and growing up in poverty, his upbringing should have been a recipe for academic and personal disaster.

And yet Solomons has weathered his stormy early life with remarkable resilience, finishing matric with acceptable grades and pursuing a diploma in jewellery design.

The question that needs to be asked is why did this teenager manage to survive and cope with extreme stress when someone else with far less negative pressures becomes dysfunctional and psychologically damaged resorting to drugs and alcohol as an escape mechanism.

It is exactly socially challenged backgrounds such as these which have become the *raison d'être* for an exciting research project – the first of its kind in Africa – that will straddle the lifestyles and risk coping mechanisms displayed by 400 volunteer families and caregivers in the greater Durban area.

At the helm of the study, which has involved a number of ethical and design methodology issues, are two leading academics, Dr Wendy Kliever, a Fulbright scholar

and Head of the Department of Psychology at Virginia Commonwealth University (VCU) and Professor Basil Pillay, Head of the Department of Behavioural Medicine at UKZN.

Known as Project CARE, the international collaborative initiative involving the study of families from lower income areas has already commenced.

Clarifying how the research project will proceed, Pillay said that families chosen for the initiative – from all race groups – would be interviewed by academic investigative teams on a regular basis over the next few years.

‘Data collection will be done via identical question and answer forms,’ he said. ‘The information will be collated, assessed and analysed on an ongoing basis. If for example, we find a definite pattern emerging, other research programmes may be required.’

That is the nature of this type of longitudinal research, says visiting Virginia Commonwealth University’s Dr Wendy Kliever. ‘It is truly a voyage of discovery. We might think we know the answers, but something might come up which is totally unexpected.’

Both researchers say the investigation is critical and could have an important bearing on the future of psychological services and therapy both nationally and internationally.

‘We need to ascertain whether a person’s biology has a bearing on their ability to manage risks within their environment,’ said Kliever. ‘More precisely we need to understand the protective mechanisms that exist in the human brain and how the neurological and hormonal structures that deal with stress, work, and how stress, whether physical or mental, affects the immune system.’

All these aspects, says Kliever, are part of the basic research functionality of the study and will include blood and saliva collection.

Adjunct to the investigation, a cognitive laboratory is being established at UKZN’s Department of Behavioural Medicine that will specifically look at neuropsychological and cognitive data relating to the study.

‘Key data we are looking for,’ said Pillay, ‘is how the brain comprehends risks and how it plans, judges and understands the issues involved. We will be looking at the neuropsychology of the brain in terms of coping with poverty, violence and family dysfunction.’

Pillay said Project CARE would provide a comprehensive understanding of the family, information that will help government and local authorities provide appropriate services within communities.

Pillay said research had already shown post-traumatic stress disorders were rarely diagnosed at family clinics.

‘And yet we know young people in South Africa are exposed to more violence than possibly anywhere else in the world. Is it they have learned to cope better, through a process of natural selection, or are we simply not diagnosing the condition correctly?’

Initial data suggests while genetics have a part to play in ongoing cycles of violence within certain communities, these genetic mechanisms can be reversed.

But only through good science and exact research will these questions ‘so fundamental to the development of meaningful services’ be resolved, say the two scientists. **N**

*name changed





FACTFILE CARE TEAM

Dr Wendy Kliewer and Professor Basil Pillay.

CARE - an acronym for Community Assessment of Risk and Resilience - is a pioneering study which will analyse risk and resilience among youth in Durban.

The first study of its kind in Africa, the project has received \$64 509 (R541 875) in seed funding from the Virginia Commonwealth University's Global Education Office and the College of Humanities and Sciences.

The project will follow two age-groups as well as their caregivers from low income families in the greater Durban municipality annually for four years. Equal numbers of families from across the various demographic groups will be included.

A Grade 7 age-group will be followed to analyse the adjustment of the learner from primary into middle high school education. Concurrently, a Grade 10 age-group will be followed to analyse the adjustment from high school into the post-matric years.

Over the four years, the learner as well as the care-giver will be interviewed and assessed on how the youth adjust to risk factors in the environment. Some of the issues analysed would include social competence, aggressive behaviour, academic competence and substance abuse.

The second aim is to establish whether risk behaviours as coping mechanisms for stress are attributed to physiological or

psychological factors among the youth. Lastly, the project aims to establish what factors promote resilience to stress amongst families of youth that thrive, despite coming from a similar socio-economic background.

Interviews with the youth and caregivers will be conducted in the home environment. Within a month after the interviews, physiological school-based tests will be done to establish whether there are any physiological changes in the body as a result of stress. Neuropsychological tests will also be conducted within the schools by clinical psychologists from UKZN.





CHANGING LIVES THROUGH CORRECTIVE SURGERY

Operation Smile changes lives through corrective surgery. A founding member of the humanitarian mission gives insight into the work being done in this field and the vital role a Durban hospital is playing.

In every sense of the word an 18-month-old toddler, simply known as Baby Josephine, is a miracle patient. Born with a facial deformity so severe that one could barely recognise that she had a human face, she was flown with her mother, from her rural home in Namibia to Inkosi Albert Luthuli Central Hospital in Durban late last year.

Her delighted mother has reported that her daughter had attended her first public outing with other children – and nobody noticed that she was any different from the other kids.

‘We are delighted, absolutely thrilled at her ongoing progress,’ said Professor Anil Madaree, chief specialist and Head of the Depart-

ment of Plastic and Reconstructive Surgery at Inkosi Albert Luthuli Central Hospital in Durban, Head of Plastic and Reconstructive Surgery at UKZN’s Nelson R Mandela School of Medicine and part of the Operation Smile volunteer mission.

‘Josephine had been born with part of her brain protruding from her forehead,’ explained Madaree. ‘The protrusion had distorted the nasal bridge area to the extent that her eye sockets were forced apart and her eyes focused in different directions. She required long and complex surgery to correct the deformity and then spent some time with us undergoing rehabilitation.

‘The fact that her scars have healed and she is now able to take her place in normal society is a gift in itself for all of us who worked with her.’

CHANGING LIVES

THROUGH CORRECTIVE SURGERY

Her deformity known as Encephalocele occurs rarely, at a rate of one per 5,000 babies worldwide.

Although the exact cause is unknown, Encephalocele occurs when the neural tube fails to close completely during foetal development and brain matter protrudes from the skull.

Needless to say dedication and compassion are the steadfast footprints of Operation Smile, an international voluntary organisation, whose aim is to change lives and bring hope.

Few understand the health impact and psychological stress of facial malformations better than Madaree, who has just returned from a humanitarian mission to Madagascar.

‘Seeing the relief and joy of families when their loved ones are given a new life free of a facial deformity is something that words can’t really describe,’ he said. ‘One mother who had brought her two-year-old child to the clinic, said it was the first time she had dared take off the child’s head covering in public – how tragic is that?’

The operation on this patient, he said, left her with the faintest of scars that would soon become less noticeable.

Medical Director of Operation Smile since 2006 when the organisation expanded its humanitarian services to South Africa, Madaree has been part of a voluntary team bringing hope and relief to thousands of patients in Africa, the Philippines and elsewhere.

Cleft lip (cheiloschisis), and cleft palate (palatoschisis) are types of abnormalities of the face that develop during the first 12 weeks of pregnancy when the development of the skull occurs. During this embryonic period, two separate plates of bone

and tissue are formed gradually moving towards each other and fusing at the mouth and nose to form the skull. If this fusion is incomplete the child will have a cleft (a gap) in the mouth/nose area.

In Africa approximately one in every 750 babies is born with a cleft lip or cleft palate. In some cases the cleft is so wide that it leaves a gaping hole.

‘And yet in as little as 45 minutes cleft lip surgery can change a child’s life forever,’ said Madaree. ‘You only have to look at a mother’s face, as our team did this week and see the tears of relief when a child’s deformity has been corrected, to realise the true worth of reconstructive surgery.’

‘I feel very privileged and humbled to be part of the Operation Smile organisation.’

Madaree explains that apart from the negative visual impact, children whose facial deformities are not corrected by reconstructive surgery can suffer major breathing problems.

‘They find drinking, eating and speaking very difficult and often these children are malnourished with a host of accompanying medical and psychological issues.’

In his mission “to change lives and bring hope”, Madaree has travelled with a volunteer team of health professionals to several regions in Africa, including Madagascar, Rwanda, Namibia, Swaziland, and the Democratic Republic of Congo, operating on as many as 200 plus children during any one of the missions.

‘What we did realise quite early on was that there were many severe facial deformities that required invasive and complex surgery. These cases can’t be addressed at a local hospital with limited equipment re-

sources and no intensive care units.’

The need for more specific surgery for patients with extreme facial abnormalities, he explains, prompted Operation Smile to expand its service mandate launching the World Care Programme, specifically to deal with these issues.

‘In many cases the parents and families of these grossly deformed children, whose features are often bloated and barely recognisable, are unaware that anything can be done.

‘They hide their children away in back rooms fearful of being victimised and shunned by their communities. For these children it would mean a life of isolation and utter misery.’

This would have most certainly been Baby Josephine’s fate if she had not been identified and flown to Durban where her surgery was performed for free.

‘All we ask is that the relevant government departments of the country where the patient comes from pay for the transport and any expenses incurred outside of the surgical procedure. The rest we take care of.’

The miracle and scope of this mission, he says, goes beyond the surgery and the dedicated teams involved with the procedure and intensive care.

‘It’s more about the overwhelming reaction after the patients’ dressings are removed. When the new faces are revealed for the first time there are tears and laughter, looks of wonderment, disbelief and pure joy. Priceless moments in anyone’s life.’

Although extreme deformities such as Josephine’s are rare, without exception corrective surgery is required. ‘But now through good networking we are able to identify patients in need of craniofacial sur-



Professor Anil Madaree with patients.

gery and transport them back to Inkosi Albert Luthuli Hospital for reconstructive surgery, aftercare and treatment.

‘Apart from cleft palates and cleft lips, malformation of the sinus area can also cause deformities that require invasive surgery,’ said Madaree. ‘This too cannot be done in a local hospital setting.’

To date the World Care Programme has provided cranial reconstruction surgery to 10 children from around Africa at Inkosi Albert Luthuli Hospital.

Currently Madaree serves as the President of the College of Medicine of South Africa and immediate past President of the International Society of Craniofacial Surgery. He is also a past President of Colleges of Plastic and Reconstructive Surgeons, Association of the Plastic and Reconstructive Surgeons of Southern Africa and the South African Burns Society. **N**

FACTFILE OPERATION SMILE

Operation Smile is entirely dependent on its volunteers. Every medical mission is made up of a team of qualified physicians, nurses, dentists, speech therapists and other medical and non-medical professionals. The ever-present goal is to help every child with a correctable facial deformity.

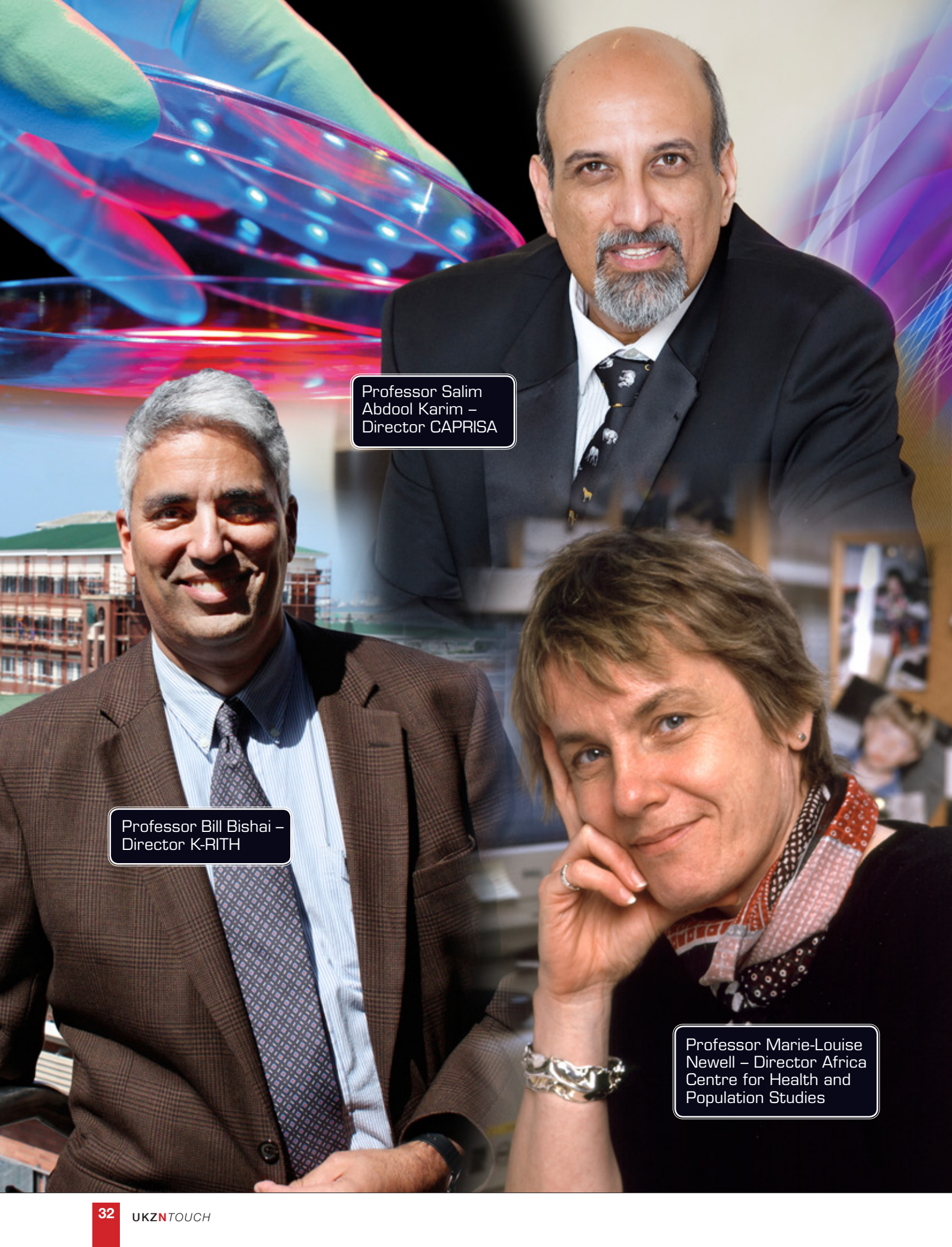
A cleft lip or cleft palate operation and follow up care under normal circumstances costs about R5 500.

Operation Smile South Africa (OSSA) was officially registered as a section 21 (non-profit) company in March 2006.

Operation Smile has treated over 1650 children since 2006.

Since 1982, more than 150 000 children and young adults have been treated by thousands of Operation Smile volunteers worldwide and thousands of healthcare professionals have been trained globally.

Operation Smile provides care for children in 60 countries worldwide. Nine resource countries raise funds and provide medical volunteers, while 42 programme countries receive education and training and conduct surgeries.



Professor Salim
Abdool Karim –
Director CAPRISA

Professor Bill Bishai –
Director K-RITH

Professor Marie-Louise
Newell – Director Africa
Centre for Health and
Population Studies



RESEARCH AND HEALTH DELIVERY

In an ever-advancing world, research outcomes in the health sciences have become the litmus test for optimum health delivery.

Nowhere is that evolving journey of investigation more dynamic or critical than at the University of KwaZulu-Natal, where ground-breaking research, conducted within the ambit of UKZN, is linked to two of the most devastating pandemic diseases ever to have confronted mankind – HIV and TB.

Often referred to as the academic research capital of South Africa, UKZN can proudly take its place as one of the country's foremost research nerve centres with five international research-based institutes and facilities linked to the University.

In their own unique way each is involved in a quest to gain new knowledge and find solutions to some of the planet's most vexing health questions.

Through the efforts of these nerve centres people who once had little

chance of survival are living longer and healthier lives. Things that weren't possible even 10 years ago are now possible thanks not only to the dedication of scientists but the willingness of volunteers who freely participate in this life-saving quest for knowledge.

The internationally-funded Africa Centre for Health and Population Studies is the most far-flung of the Research five operating in a sparse rural region of northern Zululand in KwaZulu-Natal.

Here for two decades, in an area near Hlabisa and Mtubatuba, science and community work together to find ways to a better life. Currently investigations are under way to see whether a more immediate programme of treatment (as opposed to current treatment guidelines) has any impact on the number of new cases identified in the surrounding area.

RESEARCH

AND HEALTH DELIVERY

Director of the facility, Professor Marie-Louise Newell from the Institute for Child Health at University College London, where she is Professor of Paediatric Epidemiology, believes that it is this sort of close engagement within a society that will ultimately lead to changes in behaviour.

The Centre now has a team of investigators that is particularly interested in tracing the origin of the epidemic, and, with similar tools and techniques, tracing the development of drug resistance in HIV infected people on treatment.

The Doris Duke Medical Research Institute on the campus of the Nelson R Mandela School of Medicine remains a critical com-

treatment. It has established itself as a designated UNAIDS Collaborating Centre for HIV Prevention Research with its main goal being to undertake globally relevant and locally responsive research which contribute to understanding HIV pathogenesis, prevention and epidemiology as well as the links between tuberculosis and AIDS care.

Among CAPRISA's accomplishments in 2011, were: The publication of 44 peer-reviewed journal publications, several in high impact journals such as *The Lancet*, the *New England Journal of Medicine*, *Nature*, *AIDS* and the *Journal of Virology*.

CAPRISA's contribution has had an immense impact on policy and practice. The CAPRISA 003 re-

CAPRISA 004 tenofovir gel trial. The groundbreaking results of the trial demonstrated a 39% reduction in HIV-infection in women who used the gel before and after sex.

Going forward, as well as continuing its investigations into finding more effective TB and HIV prevention and treatment methods, CAPRISA will also be conducting operational research as part of the CAPRISA 008 trial. This research will look into the effectiveness and safety of tenofovir gel as an HIV prevention option, as well as assess the feasibility of providing the gel through family planning services.

KZN has the unenviable title of being the most-affected and infected region in the world when it comes to HIV and TB incidence and prevalence. The challenges are immense. To manage the crisis will require a significant increase in the number of approved health care workers and undergraduate students trained in the delivery of healthcare.

With this in mind an important goal of the University is to improve the quality of care for vulnerable communities living in the province.

Tasked with leading what is called the Enhancing Care Initiative (ECI), is UKZN's Professor Umesh Laloo. The Initiative formed in 1988 by the Harvard AIDS Institute, is currently involved in research and teaching in HIV and TB and facilitating diploma/masters programmes in clinical HIV management.

Pivotal segments of the ECI is the Medical Education Partnership Initiative (MEPI) and its ENTRÉE programme, which promotes strong links to research organisations within UKZN and the South African Departments of Health and Education. Innovations in education and improving regionally relevant, locally driven research in

Among CAPRISA's accomplishments in 2011 were: The publication of 44 peer-reviewed journal publications, several in high impact journals such as *The Lancet*, the *New England Journal of Medicine*, *Nature*, *AIDS* and the *Journal of Virology*.

ponent of the University of KwaZulu-Natal's commitment to expand research and training in AIDS. It is home to a number of key research projects including the Centre for the AIDS Programme of Research in South Africa (CAPRISA) with its many prestigious and ongoing international collaborations, and the bilateral HIV Pathogenesis Programme (HPP) between the Nelson R Mandela School of Medicine and Harvard Medical School.

CAPRISA's multi-institutional team, led by Professor Salim Abdool Karim, is embracing new arenas in its research on HIV epidemiology, pathogenesis, prevention and

sults, which showed significantly higher survival in HIV-TB co-infected patients receiving integrated ARV and TB treatment, have been adopted by the World Health Organization guidelines on the treatment of TB and HIV co-infection, the US government DHHS guidelines for treating HIV and TB co-infection and the South African guidelines for treatment of TB-HIV co-infected individuals.

During 2011, a number of awards were bestowed upon CAPRISA in recognition of its contribution and scientific achievements in TB/HIV treatment and, some more specifically for innovation of the

South Africa are very much part of this ongoing collaborative initiative.

While an AIDS vaccine remains elusive, UKZN is among the academic front-runners involved in a programme of detailed and focused research, which it is hoped may ultimately lead to a vaccine to control HIV/AIDS.

Professor Thumbi Ndung'u, Scientific Director of UKZN's HIV Pathogenesis Programme and Associate Professor in HIV/AIDS research, was awarded a R5 million US Howard Hughes Medical Institute (HHMI) International Early Career Scientist Award to delve even deeper into the workings of immune genes in an effort to find a vaccine.

This year a record number of students within his department received PhDs for their ongoing work in isolating and understanding a number of key genes involved in the control of HIV within the body.

The main focus of their research is how the body fights HIV infection and more specifically the workings of the body's immune proteins that can block or fight off HIV infection.

Ndungu's team unravelled the mechanism of one particular immune protein called HLA-B*81 and how it can protect against HIV by acting as a red flag that alerts the immune system to the presence of HIV, followed by incapacitation of the virus.

The next 'giant' step, he says, will be to understand additional protective mechanisms and how the virus compensates for the attacks being made on it by the immune system in individuals who eventually develop AIDS. Ultimately, says Ndung'u, researchers want to investigate whether it is possible to make a vaccine that mimics or improves the immune system's capabilities of

making the virus less virulent.

The newest member of UKZN's research family is the KwaZulu-Natal Research Institute for Tuberculosis and HIV (K-RITH) a unique collaboration between the University of KwaZulu-Natal and the US-based Howard Hughes Medical Institute.

The Institute's new global state-of-the-art high tech facility on the campus of the Nelson R Mandela School of Medicine is already at the heart of international TB research.

The statistics are frightening. Nearly two million people die each year from mycobacterium tuberculosis either because they are not properly diagnosed, do not take the right medications, or have drug-resistant strains that defy treatment.

The World Health Organization estimates that half a million new MDR-TB cases are emerging annually. And yet it is a potentially curable disease.

Few can argue that a research institute of this magnitude is needed, particularly as South Africa has more residents infected with HIV than any other nation in the world – an estimated 5.7 million and has one of the highest per capita rates of tuberculosis in the world.

It is against this unforgiving backdrop that Professor Bill Bishai, a renowned US infectious diseases specialist and scientist in the pathogenesis of tuberculosis, is leading a team of scientists whose single motivation is finding answers to questions that have so far baffled science.

'We still don't understand how people get TB, not exactly,' said Bishai.

'It's an airborne disease that doesn't respect national boundaries, and it's not something you can avoid getting with clear-cut health practices.

Some people are highly susceptible. Others are resistant despite massive exposure. We're not even sure if you can get TB a second time, after having once been cured. Furthermore, not every antibiotic can penetrate the candlewax-like coating that encases the organism or survive the onslaught of enzymes it secretes. Standard antibiotics like penicillin are in one word - useless.'

K-RITH's cross-Atlantic collaborations will link scientists and clinical researchers in KwaZulu-Natal with their colleagues around the world.

The goal, says Bishai, is for K-RITH to be directed and populated by outstanding South African scientists and their trainees.

In Durban the collaborative process will be taken to another level with the understanding that basic science – the research that underpins the development of new diagnostics, drugs, and vaccines – needs to occur in areas of high tuberculosis and HIV prevalence.

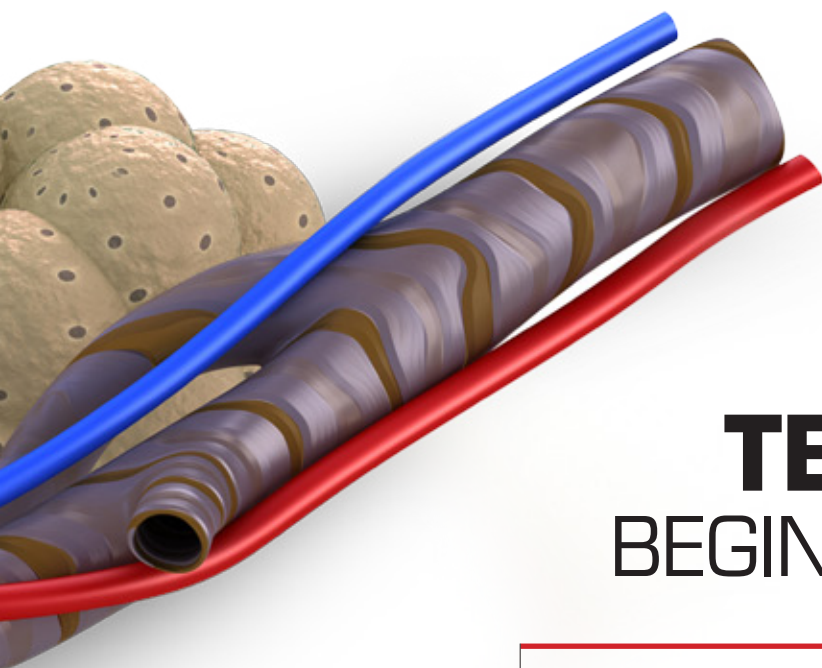
The new research centre houses five floors of research departments, including laboratories and an "air controlled" bio-safety level 3 facility.

The laboratories are among the most modern in the world, equipped with a multi-million rand array of high-tech machinery.

Once a bank of clinical data has been retrieved, K-RITH scientists like Bishai say it will enable them to understand more how the TB bacteria interacts with human cells.

This will be a 'critical step in the development of new drugs or vaccines to treat tuberculosis' and another milestone in UKZN's long voyage of discovery. **N**





NEW CHAPTER IN TB SCIENCE BEGINS IN DURBAN

Professor Bill Bishai, K-RITH's new Director, comments on the opening of a new chapter in TB science in the heart of Durban.

Former South African President Nelson Mandela once said that if we want to attack HIV then TB had to be part of the equation.

It is exactly this thinking that spawned the idea of a specialised facility where basic science into TB could be conducted in Africa.

That in essence sums up the heart-beat of the new KwaZulu-Natal Research Institute for Tuberculosis and HIV (K-RITH), in their new premises in the grounds of the University of KwaZulu-Natal's Medical School.

K-RITH's Director Professor Bill Bishai believes that within the walls of the new facility, a whole new chapter in TB science will be written.

'In many ways we will play a complementary role to the quality science that is already well established in KZN and South Africa.'

Bishai explained that the core role of K-RITH and its supportive body,

the Howard Hughes Medical Institute, was to find the tools to assist in the management of TB, HIV and the TB/HIV co-infection.

'In that respect we will not be involved in running clinical trials in South Africa, but rather concentrating on basic science. The laboratory bench is where we will mainly be working from.'

Bishai said the reason why they had opted for KZN as their collaborative base was that it was the region hardest hit by the TB epidemic in the country and the sub continent. And in terms of epidemiology the area was an immediate key source for biological sample collection.

It is this wealth of TB biology, he believes, that will underpin the essence of K-RITH's endeavours, enabling the discovery and innovation of new diagnostic tools.

'One of the biggest challenges is to broaden the understanding of the multidrug resistant (MDR) and extensively drug resistant (XDR)

Illustration: Alveoli – where TB begins. On inhalation, oxygen along with tuberculosis bacteria is transported through the terminal bronchioles (blackish-purple tubes) and into the alveoli or air sacks of the lungs. Small nodular lesions or tubercles (represented by white dots) in the lungs' air sacks are characteristic of tuberculosis.

NEW CHAPTER

IN TB SCIENCE BEGINS IN DURBAN



Professor Bill Bishai – Director of K-RITH

strains of TB,' said Bishai. 'In KZN there is a large population of people with these resistant strains which will greatly add to our knowledge.'

The province, he says, is also blessed with some well-studied cohorts of patients, thanks to the groundwork of scientists like Professors Salim and Quarraisha Abdool Karim, Bruce Walker and Umesh Laloo.

The setting up of a basic science institute like K-RITH, said Bishai, offered a unique opportunity to integrate with these HIV-orientated cohorts.

He said that capacity building with a particular emphasis on broadening and strengthening the sub-Saharan knowledge base

through a collaborative grants programme, would be one of the key aims of K-RITH.

'That programme is already up and running,' said Bishai. 'With the help of peer review experts across South Africa, the United States and Europe, 15 collaborative grants have already been awarded to a range of students who reside outside of Durban. Many of these grants have a strong HIV connection.'

Bishai said K-RITH had recognised that to ensure sustainable basic science required the building of a 'pipeline' to assist young science students to go all the way to professorships.

'Our mission is to train a future

generation of scientists who will be the next leaders in K-RITH. We are currently working with UKZN to develop, for example, a specialised PhD programme to strengthen the breadth of knowledge. This will involve a graduate training committee who will recommend modular sources and overseas studies to expand skills training.

Among the other innovative programmes envisaged for K-RITH is the setting up of technology hubs that would automatically link to those at Johns Hopkins, the University of Alabama, the Albert Einstein College of Medicine in the US as well as European hubs.

Bishai said on the European side the Max Planck Institute had made an agreement to finance a Max Planck grouping within K-RITH with automatic connections to the Institute in Berlin.

Outlining the human toll of TB worldwide, Bishai said that nearly two million people died each year from the disease either because they are not properly diagnosed, do not take the right medications, or have drug-resistant strains that defy treatment. He said the facts spoke for themselves.

The World Health Organization estimates that half a million new MDR-TB cases are emerging annually. A potentially curable disease, TB is transmitted through the air and infects about one-third of the world's population. It often remains latent, and causes no harm to 90 percent of those infected. However, more than nine million people each year develop active TB, which typically causes weight loss, night sweats, and lung damage. In extreme cases, more often than not when associated with HIV – it is fatal.

Bishai and his family moved from the US to Durban last year. **N**

GLOBAL RESEARCH OPENS FOR BUSINESS IN DURBAN

The new global KwaZulu-Natal Research Institute for Tuberculosis and HIV (K-RITH) was officially launched on Tuesday, October 9, 2012 at the Nelson R Mandela School of Medicine campus. The international facility is a joint collaborative partnership between UKZN and the US-based Howard Hughes Medical Institute.

The establishment of K-RITH as a major player in the global fight against TB and HIV has set a powerful and fundamental new precedent in terms of collaborative science.

In his welcoming address Professor Robert Tjian, President of the Howard Hughes Medical Institute (HHMI) emphasised the need to translate research into novel treatment for the “twin scourges” and new ways to manage the diseases.

‘It is fresh thinking that has led to the creation of this international research facility - the first of its kind outside the US and filled with extraordinary scientists’.

Tjian said that strong global collaborations were important in that they encouraged the curiosity of tomorrow’s scientists elevating the bar when it comes to fighting and contributing to the battle to save lives. He said it was his belief that K-RITH’s common vision would yield major medical discoveries in the years ahead.

‘I don’t think I am wrong in saying that this is just the beginning of a new age of hope.’

The opening of the new airy and attractive building, just seven years after the first ideas were mooted, was a joyous and proud occasion with celebrated storyteller, Geina Mhlope, bringing a unique blend of traditional magic to the event. Other crowd-pleasing interludes were a performance by the KZN Youth Wind Band, the rhythmic and harmonious Kholwa Brothers and the Wiggins Secondary School Choir.

On a more serious note, Mr Kurt Schmoke, Chairman of the HHMI Trustees and Vice-President of Howard University, praised the founding K-RITH scientists for fostering the idea of an international research facility built and operating at the heart of the epidemic, rather than in locations with limited disease burdens.

‘It will be within these walls that the next generation of African scientists will emerge.’ Schmoke said the knowledge emerging from K-RITH could have a profound effect on how diseases are treated around the world.

‘The Institute will also foster a new wave of academic studies in the very place where the epidemic occurs. It is our belief that the K-RITH investigators will gain control of

HIV and TB infection. Our hope is for a cure.’

Dr Zweli Mkhize, Premier of KwaZulu-Natal, said the epidemics of HIV and TB had had a major detrimental effect on the economy and wellbeing of the province and country, impacting on all sectors. ‘We are the ones at the centre of this raging pandemic and suffering the most. It really doesn’t matter how we view the figures or interpret the statistics, the bottom line is that we have to do something different in order to find quicker and easier ways of prevention and treatment.’

The National Minister of Health, Dr Aaron Motsoaledi, outlined figures that showed that TB prevalence in South Africa was 800 per 100 000 people. South Africa was also one of 22 countries in the world responsible for 80 percent of TB.

The TB burden, Motsoaledi said, had implication far beyond the borders of South Africa, which made partnerships and collaborations all the more critical.

The work to alleviate suffering had already begun with the availability of new diagnostic tools developed by the World Health Organization for TB.

‘On World TB Day earlier this year we were able to conduct 800 000 tests with a greatly improved turnaround time for results.’

Motsoaledi said K-RITH’s mission to invest in human capital development and train young local scientists was the correct route. ‘I am looking to K-RITH to advise me on how to accelerate our fight against TB.’

He said a hat-trick had been achieved in Durban with the opening of K-RITH, the German Chamber of Commerce honouring the achievement of UKZN Vice-Chancellor Professor Malegapuru Makgoba, and UKZN being named for the first time as one of the top 400 universities in the world in the Times Higher Education rankings.

Among the dignitaries who welcomed local, national and international guests to the opening ceremony were K-RITH’s new Director Bill Bishai, and Professor Makgoba, who outlined the history of the new building and those who had made possible a far-reaching dream.

The high point of the opening ceremony was the official unveiling of the K-RITH Tower Building. Pressing the start button were Motsoaledi, Makgoba, Tjian and Bishai. **N**

FACTFILE K-RITH

The K-RITH initiative has cost approximately 10 million US dollars. The highly modular building with nine university departments is the linking hub between three existing UKZN Medical School buildings. It is one of the most modern research buildings in the world with a fire-safety Level 3 certification. One of the interesting aesthetic elements is the incorporation of unique mosaic designs, based on molecular themes and undertaken by established and newly trained local artists.





From Left: President of the Howard Hughes Medical Institute (HHMI), Professor Robert Tjian; Mr Kurt Schmoke, Vice-President of Howard University and UKZN Vice-Chancellor, Professor Malegapuru Makgoba.



A NEW CHAPTER IN MICROBIOLOGY

Dr Koleka Mlisana, Head of Medical Microbiology at UKZN and the National Health Laboratory Services (NHLS), believes that exciting new technology, including automation and rapid diagnostics, is paving the way for greater interest in this microbiological field of health sciences.

If one looked at the learning environment surrounding microbiology, years ago, there might have been a perception that this branch of science had limited appeal for young students.

The thought of studying micro-organisms knowing that once the Gram stain is done, culture processes and susceptibility testing can take days to provide answers, may not be everyone's idea of an inviting learning challenge.

'But thanks to some amazing feats of modern science, this scenario is fast changing,' said Mlisana. 'We are in the era of rapid diagnostics and new technology which enables the microbiologist to play an even more vital and immediate role in the area of infectious disease investigation and management.'

The evolution has, says Mlisana, opened up a range of research and career opportunities, particularly in the diagnosis and management of the dual epidemic of TB and HIV, antimicrobial drug resistance, and the ever-growing list of infectious diseases. The research focus for the department includes evaluating various TB diagnostic and

susceptibility testing methods.

New horizons in health sciences are making that 'challenge' all the more appealing to 21st century academics in the digital age, says Mlisana.

'Whereas exhaustive methods of sequence alignment in microbiology are accurate, they are, as we know, very slow. On the other hand the new generation of automated biology, which uses robotic "brains" to streamline processes, is incredibly swift and emerging as we speak.'

The added advantage to automated microbiology is that it requires less staff, and so has the potential to address the shortage of skilled staff in the field of medical technology in South Africa, says Mlisana.

'We, in the National Health Laboratory Services (NHLS), are currently exploring the different automated systems in medical microbiology. We know that these automated processes have the potential to generate enormous amounts of data, which is exactly what is required to understand how biological systems work. In South Africa with its large disease burden, the research opportunities are almost endless.'



Dr Koleka Mlisana



A NEW CHAPTER

IN MICROBIOLOGY OPENS

In some ways that research endeavour, says Mlisana, has already begun.

‘The GeneXpert, a new diagnostic assay for tuberculosis can now identify a TB infected individual as well as susceptibility of that infection to Rifampicin within two hours instead of the conventional several weeks.’

In turn this emerging scenario as well as the general increasing awareness of medical research as a field, has prompted the establishment of a number of support and awareness initiatives at UKZN, specifically for women.

‘The challenge now,’ said Mlisana, ‘is to ensure that these initiatives are implemented at all levels.’

Mlisana believes there is a need for unorthodox innovation when it comes to the academic career path for the medically qualified doctors. ‘While we certainly need more PhDs within the medical fraternity, the obstacles to achieving this goal need to be considered and solutions explored.’

It takes a minimum of 12 years post matric to qualify as a discipline specialist, including internship and community service post MBChB.

‘If specialists are then to begin a PhD this would add a further four years to the study period. It’s finding a way to reduce this timeline, to make a PhD more doable – that’s where thinking out of the box, possibly including new strategies altogether, is the right way forward. This also calls for clear strategies to support such academics.’

The Medical Education Partnership Initiative (MEPI) training grant, awarded to UKZN’s Enhancing Care Initiative, of which Mlisana is a recipient, is an example of such support structures. ‘Part

of their mission is to build clinical and research capacity in Africa as a retention strategy for health science faculties at universities.’

The College of Health Sciences Women in Leadership Leverage (WILL), which Mlisana co-founded, crafts programmes and activities that enhance growth of women academics and researchers at UKZN. This important initiative is committed to supporting junior academics in realising their endeavours towards becoming successful academics and scientists.

WILL organises workshops and training sessions aimed at stimulating and encouraging women academics. Three distinct categories of workshops are hosted, namely:

- Skills Building/professional skills;
- Personal and professional growth and
- Inspirational/motivational development.

These, Mlisana explains, are aimed at producing successful and productive scientists with a balanced personal and community life.

‘Our project is fast gaining ground,’ she said. ‘Enhancing professional research skills and inviting senior academics to share their personal experiences, are just two of the ways that we have successfully used.’

This year WILL initiated an outreach programme inviting 12 grade 11 and 12 pupils from disadvantaged schools with a keen interest in a health science career to be mentored and guided through their chosen study programmes. **N**

Interesting Facts About GeneXpert

In 2010, the World Health Organization endorsed the use of the GeneXpert MTB/RIF as the first test to be performed to diagnose TB. In South Africa, the GeneXpert has been tested in facilities in the Western Cape, KwaZulu-Natal and Gauteng. More than 30 machines have been bought by the state and placed in different healthcare facilities. There is an urgent need to have the GeneXpert in all clinics in South Africa. Contrary to the tests that exist at the moment, GeneXpert, new technology used by the National Health Laboratory Services (NHLS), works on a molecular level to identify mycobacterium tuberculosis.

The GeneXpert MTB/RIF is a cartridge based fully automated diagnostic test that can identify Mycobacterium tuberculosis and detect its susceptibility to Rifampicin within two hours. It is not microscopy or culture based, but is a molecular technique that amplifies and detects targeted nucleic acid sequences of the TB mycobacterium. The GeneXpert is a small machine, about the size of a microwave oven that can fit easily on a small table. Developed in the United States, it is supported by the American National Institutes of Health.

How It Works

The GeneXpert can detect Mycobacterium tuberculosis in a sample of sputum. A person suspected of having TB needs to give a sputum sample, which the health care worker then places in a small tube. From the tube, the sample is fed into the machine, and then biochemical reactions are started to see if the sample contains the TB bacterium. The machine looks for the DNA specific to the TB bacterium. If there are TB bacteria in the sample, the machine will detect their DNA and automatically multiply it. This technique is called PCR (polymerase chain reaction).



THE CHALLENGE OF ANTIMICROBIAL RESISTANCE

Antimicrobial resistance is currently the greatest challenge to the effective treatment of infections globally. UKZN's Professor Sabiha Essack believes it is time for new containment strategies based on health systems context-specific evidence.

It is not unusual for health practitioners to initiate antibiotic treatment without determining the antibiotic sensitivity profile of the causative bacteria.

While some will argue that lengthy tests could delay the start of antibiotic treatment with negative consequences, the other side of the coin is that resistance to antibiotics poses problems of its own, adversely affecting both clinical and financial outcomes.

‘Antibiotic resistance can mean the failure of an individual patient to respond to therapy,’ said Essack.

‘In turn this could lead to more expensive and/or toxic alternative drugs having to be administered.’

Factored into this scenario are the social costs of higher morbidity and mortality rates, longer times spent in hospital, increased health care costs and the need for changes in empirical therapy.

Resistance, she explained, may emerge in numerous ways.

‘In developed countries there appears to be an overuse or indiscriminate use of antimicrobial therapies. In developing countries there tends to be an underuse and misuse of antimicrobial agents.’

Poor infection control, she believes, is at the heart of the problem with the risk factors for resistance being perpetuated and maintained in any given environment.

Population-specific drug pharmacokinetics (what the body does to the drug), and pharmacodynamics (what the drug does to the body) also play a critical role in the wider understanding of resistance.

In view of these challenges the World Health Organization, the US, UK and EU have initiated strategies for the containment of resistance, with surveillance a critical part of the planning.

Essack believes that surveillance in South Africa should be disease-based.

This would involve ‘establishing sensitivity profiles of common causative organisms’.

THE CHALLENGE

OF ANTIMICROBIAL RESISTANCE

The next stage, she says, is to ‘inform the development or amendment of standard treatment guidelines. Within this framework, a list of essential drugs can be incorporated into national drug policies in all developing countries, as done currently in South Africa’.

However, one would first have to establish the manner and extent of antimicrobial use (overuse, under-use, inadequate dosing) associated with resistance.

‘Only then can appropriate intervention take place in terms of rational and effective drug use, a reduction in use and dosing regimens based on population-specific pharmacokinetics and pharmacodynamics.’

There are several risk factors unique to South African communities that would need to be determined.

These include:

- Poverty
- HIV

- Duration of hospitalisation
- Location within the hospital
- Intensive Care stay
- Surgery wounds
- Previous and current antimicrobial therapy
- Mechanical ventilation
- Urinary catheterisation
- Nasogastric intubation
- Central venous and peripheral catheters
- Previous hospitalisation and transfer from another unit or hospital.

As part of a new treatment strategy ‘due vigilance would have to be exercised in patients exhibiting classical risk factors for the acquisition of or colonisation with resistant pathogens’.

Also what needs to be determined, she says, is the quality of hygiene and sanitation in communities and infection control in hospitals.

Armed with this knowledge, interventions could then be initiated to prevent/contain the spread of resistance.

Essack suggests that evidence-based treatment of infections guided by local susceptibility/resistance would ensure productive, economically viable individuals capable of fulfilling their social roles.

‘An efficient treatment regimen nationally would assure sustainable livelihoods in all populations (healthy and otherwise) as infections are the most frequently encountered health problem even in the absence of HIV/AIDS.’

Essack points out that the efficacious use of antibiotics will successfully combat several infections in the lifetime of an AIDS patient even in the presence of a compromised immune system.

‘South Africa has unique requirements in the antimicrobial resistance arena,’ she said. ‘These needs have to be addressed in the context of severe financial, human resources and technological challenges.’ **N**



SPORTS MEDICINE PROGRAMME HITS THE SPOT!

Exercise is Life is the mantra of UKZN's Masters in Sports Medicine programme which focuses on the medical applications of exercise physiology.

BY: GREG DARDAGAN

The two-year course, led by Professor Edith Peters-Futre, places a special focus on the rehabilitation of chronic lifestyle association disorders caused by inactive and sedentary lifestyles and incorrect eating habits resulting in a high incidence of medical problems, including hypertension and diabetes.

Exercise physiologist and former elite middle-distance athlete, NRF-rated Professor Peters-Futre, who trained under the highly respected Professor Tim Noakes at the University of Cape Town, has been involved in sports science and sports medicine education since the early 1980s. 'We designed the new two-year Masters in Sports Medicine during the UKZN merger and are now busy with our third intake of students into this new programme. We tailored the course, which consists of 50% course work and 50% research, to meet the specific objectives of exercise medicine rather than the previous more comprehensive three-year course which also included sports injuries,' said Peters-Futre.

The course applies the Exercise is Medicine theme of the American College of Sports Medicine which supports the value of an active lifestyle and the correct diet to counter chronic lifestyle-associated

disorders and assist with their rehabilitation.

Well-known sports medicine practitioners and academics who teach on the programme include Professor Andrew McKune, Dr Bruce Biccard, Dr Glen Hageman, Professor Johan van Heerden, Dr Mike Marshall and Dr Kevin Subban.

Peters-Futre said in 2011 a team of students and lecturers worked on a comprehensive field project at the Three Cranes Trail Run in Karkloof studying muscle damage, the aetiology of upper respiratory tract symptoms and changes in the hydration status of the multi-day trail runners. Previous field studies have focused on the Comrades Marathon, Dusi Canoe Marathon and Sani to Sea Mountain Bike Race, while numerous laboratory-based exercise physiology studies have also been completed.

Results from these research projects have been published in a variety of leading sports medicine journals, including the *British Journal of Sports Medicine*, the *Canadian Clinical Journal of Sports Medicine*, the *Australian Journal of Science and Medicine in Sport*, the *SA Journal of Medicine* and *SA Journal of Sports Medicine*.

Peters-Futre said the approach in structuring the new degree had been to provide health care professionals with the physiological background to manage the high prevalence of



Professor Edith Peters-Futre

chronic lifestyle disorders as well as supporting the needs of recreational and competitive sport participants.

The programme includes a focus on muscle physiology, exercise metabolism, endocrinology and cardio-respiratory physiology, exercise immunology, environmental physiology as well as sports nutrition and the use of drugs and ergogenic aids in the first year. During the second year the emphasis is on research methods and statistics and the research project. The programme is co-ordinated in the Division of Human Physiology and presented by this department in liaison with the Division of Biokinetics, Exercise and Leisure Sciences.

Lectures and training take place in the evenings to accommodate the professional commitments of students. A limited number of health care professionals who display particular commitment and dedication to sports medicine are accepted for each intake for the two-year course.

N



Dr Sonil Maharaj

SPOONFUL OF EXERCISE HELPS THE MEDICINE GO DOWN



Patients diagnosed with HIV have a lot to cope with despite anti-retrovirals having turned the diagnosis from a death sentence into little more than a lifestyle inconvenience. Patients need to take drugs regularly and keep to a specified diet, but there is another side effect to anti-retrovirals, which has been the subject of a breakthrough study at UKZN.

BY: NIKI MOORE

Patients on highly-active anti-retroviral therapy (HAART) spend less time doing vigorous activity because of a reduced aerobic capacity, says Dr Sonil Maharaj of the Department of Physiotherapy at UKZN.

‘This results in a poor quality of life. We have therefore done studies on a rehabilitation programme, which involves moderate walking and cycling in a home-based environment, which we found significantly improves the individuals’ quality of life. For employed people, this means less sick days off work, and for unemployed people it means a heightened sense of well-being.’

The study was carried out over a three-month period using three hospitals in KZN. Patients who came in for their antiretrovirals were asked to volunteer for the study, and then monitored. These patients were known to suffer depression, limitations in activity due to weakness and pain, and they tended to avoid physical activity fearing it would cause further injury or pain.

The patients, who started on a cycle of medium activity when they came to the hospital to collect their medication, represented a wide spectrum of the population, including men and women, urban and rural people, employed and unemployed. Many of the patients were unemployed because they felt too sick to work.

Exercises were carried out at the gymnasium at King Edward VIII Hospital, which is attached to the Nelson R Mandela School of Medicine. In order to ensure the patients could meet the exercise requirements, they were pre-tested and screened. They were then asked to complete 20 minutes of cycling on an exercise bike, followed by 20 minutes of walking on a treadmill. They were then given a series of exercises to do at home, such as walking, squatting and sit-ups, with instructions on how to monitor and record their vital signs.

Out of the initial 54 patients, 38 completed the study. The drop-out rate was much higher for women than for men, and the study was unable to determine if this meant that women felt better while taking ARVs and therefore did not need the

therapy, or whether they dropped out because of other social factors.

However, for those 38 who did complete the study, the results were positive. ‘The study showed that regular exercise at least three times a week led to a remarkably improved quality of life,’ said Maharaj. ‘There were no adverse effects we could see. The main problem was that as people started to feel better, they dropped out of the programme, which meant our study results were inconclusive. We need to do another study with a larger sample and comprehensive rehabilitation programme to get a more reliable result.’

However, the initial results have already been encouraging. Patients on ARVs who did regular exercise showed improvements in physical and mental wellbeing, with the number of sick days for the employed people decreasing and an increased willingness on the part of the unemployed to go out and look for work. **N**



Professor Petra
Brysiewicz

TRAUMA NURSING AND EMERGENCY CARE - DEALING WITH LOSS AND GRIEF

Anyone who has watched a hospital drama on television will be familiar with the scene: a critically ill or injured person is wheeled in and doctors and nurses have to make split-second and potentially life-saving decisions about diagnosis and treatment. All this while family members hover anxiously in the background.

BY: NIKI MOORE

This might be the stuff of television drama, but it does play out in real life in hospitals all over South Africa, almost every minute of every day. And doctors and nurses at the coalface of emergency care are not actors working from a script - they are everyday people who get stressed, get overwhelmed, battle to cope, experience failure when things go wrong and sometimes feel helpless in the face of frantically anxious relatives.

The relatively new field of emergency medicine and emergency nursing is aimed at better equipping health professionals to cope within the emergency care arena.

In South Africa we have particular problems with high interpersonal violence, road traffic collisions and similar types of incidents, says Professor Petra Brysiewicz, who is attached to the Discipline of Nursing, within the School of Nursing and Public Health at UKZN.

'This places enormous strain on our health professionals in emergency care, right from the paramedics in

the pre-hospital environment to the doctors and nurses in the emergency centres. Not only do staff need advanced technical skills, they need to make lightning fast decisions in a very unpredictable environment and also need the human skills to help the patient and loved ones deal with the trauma,' said Brysiewicz.

Television dramas provided an indication of what it was like in ER and it took a certain kind of person to work in that environment. But not everyone has that kind of personality, and some people really battled to cope with the demands.

'My particular field of study is the psychological aspect, the psychosocial consequences of trauma and injury. My research has been concentrated on things like psychological support for families, support for staff, the doctors and nurses.

'My PhD dealt with managing sudden death: patients in ER can die very suddenly, and that's an extremely stressful thing to have to deal with, not only for the families, but also for the staff,' she said.

'And a lot of medical staff see this on a daily basis. So if you haven't been trained to manage the families

of someone who is critically injured, or has died suddenly, you can make mistakes that intensify the trauma for both you and them. 'It's the little things that count, for instance, the way the doctor speaks to the family, eye-contact, the way news is delivered, the form in which belongings, for instance, are handed over to the bereaved.

'In my interviews with family members, a lot of them said that the staff were cold and uncaring, but they don't realise that for staff this is a coping mechanism, they have to distance themselves in order to be able to cope. And in South Africa, our case is quite unique. We have a multi-cultural, resource-poor, multi-lingual, multi-denominational society, so adding all these factors on top of the trauma and grief of sudden death is a huge challenge,' said Brysiewicz.

'At the moment there is nothing formalised in terms of support for emergency care. We will soon be introducing some interventions - and in many cases there are merely simple changes that need to take place. When dealing with the human connections around sudden death, trauma, injury and stress, it is small things that matter the most.' **N**

PHUMLA MNGANGA: CHAIR OF COUNCIL

Mrs Phumla Mnganga is the newly elected Chair of Council of the University of KwaZulu-Natal (UKZN). She is currently Managing Director of Lehumo Women's Investment Holdings and serves in a non-Executive capacity as the Chair of the Siyazisiza Trust and is also a Director of Crookes Brothers, Gold Circle and the SPAR Group. She spoke to Smita Maharaj about her background and views on UKZN.

Q What is your role as Chair of Council?

PM: My role is to lead the University Council which is the focal point for institutional governance. This entails ensuring a cohesive stakeholder leadership cadre which serves UKZN, embraces excellence in governance, and exercises oversight over the implementation of the University's vision, mission and strategy.

Q What is the motivation behind your work for the University?

PM: My parents were involved at Fort Hare University so my earliest memories are of being involved in a campus. Even growing up, my father used to head up a theological college so I spent my childhood in an environment where education was paramount and there was a strong intellectual tone. Having pursued a career in the private sector, I then asked myself what contribution I could make to society. It just seemed logical to go back to an environment I grew up in – a place where I was comfortable. And UKZN is that place!

Q As UKZN's first woman Chair of Council what advice do you have for women ?

PM: I think leadership and public profile are matters of choice and, whatever a woman

chooses, I believe that choice must be respected. There are highly skilled and powerful women who have for personal reasons made a choice to raise families and pursue other interests. Then there are women who have no option but to provide a strong foundation for their families. These women are successful too and must be admired.

In addition to the patriarchal structural and systemic reasons why women are generally under-represented in the higher echelons of corporate society, there is often the added challenge of being a wife and a mother. Sometimes women opt out of leadership activities because they need to focus more on their family or marriage. I respect that. But equally, women should feel empowered to make different choices and that's okay. Those who choose to take on public and leadership roles – and I know how challenging that is – I respect that too!

In a nutshell my advice to women is: Believe in yourself and in the choices you make.

Q What in your assessment are some of UKZN's major achievements?

PM: The University's achievements over a short period of eight years are remarkable. Substantial funding has been injected into developing world-

class facilities and teaching and learning venues. The University has a diverse student body and the launch of the Transformation Charter this year is a poignant reminder of universal values of human dignity, tolerance and opportunities for all – in particular the disadvantaged. The opening of the KwaZulu-Natal Research Institute for Tuberculosis and HIV (K-RITH) in October this year demonstrates an immense show of faith in the University. For the first time UKZN has been ranked in the Top 400 of the world universities by Times Higher Education and in the top three percent of the world's universities by the Academic Ranking of World Universities (ARWU). The University's commitment to advance research and research productivity is recognised and respected. Leadership plays a critical role in good governance and the NRF Lifetime Achievement Award and the first South African German Science Award made to Vice-Chancellor Professor Malegapuru Makgoba are testaments to that. These achievements collectively reflect the University's simultaneous pursuit of academic excellence and transformation.

Q Is the University a global player in Higher Education?

PM: UKZN is definitely an emerging global player. Apart from our ranking in two



Mrs Phumla Mnganga, Chair of Council and Board member of the UKZN Foundation.

respected university ranking systems, consider the following:

UKZN was the only South African University which participated in the UN Academic Impact Conference in New York in 2010 at which I was present. I was impressed and encouraged by the contribution made by our academics and the respect they commanded among the 400 universities that were present. At this conference UKZN was

made the host for the hub on Poverty and Education.

I have chaired the Senior Appointments Committee since 2008, and was encouraged by the quality of international and local applications that the committee received in response to advertisements for senior appointments. This means that UKZN is recognised and respected as an employer of choice in the Higher Education sector.

Q Describe some of the challenges facing the University and how these are being addressed?

PM: A major challenge is the consolidation of the College model and another is resource constraints. As UKZN continues to grow the challenge of resource constraints (especially financial resources) is inevitable, this results in the institution having to prioritise and make tough choices. I am confident that both challenges will be managed effectively by the leadership of the institution.

Q What in your opinion are the University's critical strengths?

PM: I believe the University's critical strengths are strong leadership, academic excellence, a commitment to transformation and social relevance.

Q What are your thoughts on the future of the University?

PM: This University is blessed with a very strong Council, a strong Executive and a strong stakeholder voice in the form of the Unions, the SRC, and Convocation. If all these sectors of leadership can work together to pursue our mission and vision, UKZN can only move from strength to strength. For me, it is exciting to be part of that movement and the leadership cadre that will take this University forward. On the subject of women again, I think there are some phenomenal women working at this University in various capacities. Even though the national statistics on women in Higher Education leadership are not encouraging, UKZN has made a real effort to allow women to occupy leadership roles. Again for me, this is very exciting! **N**

100 YEARS OF ACADEMIC EXCELLENCE

Born in an era of struggle politics and the fight for educational equality, the University of KwaZulu-Natal has a rich, diverse heritage stretching over the last century. Liz Clarke looks at a new coffee table book that celebrates the institution's vibrant, but often turbulent legacy of learning.

BY: LIZ CLARKE

It was in the 1950s that Thaven Naidoo then a 'proud 17-year-old Durban matriculant' with good marks, decided on a career in medicine.

Accepted as a student at the then University of Natal, the segregation laws of the time meant that he would have to study and live away from the main campus, in a former military encampment at Wentworth.

He records his first experience as a founding medical student like this:

'I stood awhile taking in the scene. Ahead was the police station and in the valley below a row of derelict buildings. This was the Wentworth campus of the University of Natal and my home for the next seven years.'

Each of the rooms, he recalls, was named after a war of the day.

'My room in Korea had seven beds and seven tables. It was difficult for more than one person to dress at a time. To overcome our boredom, custodians of the law would periodically drive down the hill and raid our dormitories.'

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Meals and transport were major issues, he recalls.

‘If you arrived late from lectures, the food would be cold and half eaten by the many stray cats. Buses were expensive and you could only sit on the back six seats. When lectures finished after the curfew, you could find yourself in the back of a black Maria (police van) spending the night in cells.’

This is one of the many true-life stories contained in a new glossy souvenir publication which charts the history of five campuses spanning the years 1910 – 2010 that today make up UKZN.

However, this is not so much a history textbook, but rather a mosaic of events that has shaped the growth of Higher Education in KZN.

Many of the images used have come from hitherto unpublished and unique archives and from a wide variety of local and international sources.

A brief turn of the pages soon tells you that the five merged university campuses, the Nelson R Mandela School of Medicine, Howard College, Pietermaritzburg, Durban Westville and Edgewood College, have one common denominator. Each of them has been embroiled in some form of the political protest that molded modern South Africa.

The 200-page book documents the academic agenda, political affiliation and cultural backgrounds of each of these campuses over the century. It also highlights the people that shaped that history and the success and failures of the struggles and conflicts that emerged along the way.

In his foreword UKZN’s Vice-Chancellor and Principal, Professor Malegapuru Makgoba states that the creation of the University in 2004 was the ‘natural outcome’ of these learning dynamics ‘in a new democratic dispensation.’

Among the struggle beacons that arose as a result of a ‘colonial-apartheid ethos’ were former students Steve Biko, whose Black Consciousness Movement had a profound impact on the country’s history and Alan Paton, whose classic *Cry The Beloved Country* will forever remind the world of racial intolerance.

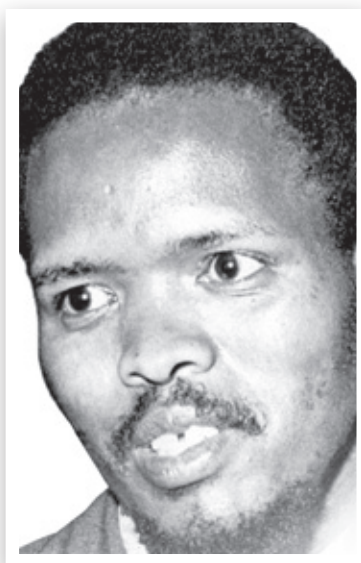
The merger process began in earnest in the early 1990s and was completed in 2010. The debates, conflicts and negotiations during this transformation process are highlighted from many aspects. So too are the roles of the Students Representative Councils and students bodies, who are at the heart of historical and contemporary change.

Governance in a new era brought a set of dynamics very different from the past.

‘The Higher Education system was still deeply affected by the legacy of the apartheid past,’ writes Makgoba.

‘It was a leadership that was unable to meet the challenges in the context of national transformation.’

Change was therefore vital.



Student leader Steve Biko, founder of South African Students’ Organisation.

It’s abundantly clear that it hasn’t been the easiest of journeys, underpinned, as it has been, by a colonial-apartheid past and the difficult realities that change and restructuring brings. Protests, internal wranglings, destabilising events were all part of the evolving process often overshadowing ground-breaking academic achievement and cutting edge research in a global context.

And there is still much to achieve, said Makgoba: ‘We still see voluntary segregation among black and white students in lecture theatres. Among staff at the Medical School there are tensions between staff of different race group over a perceived lack of transformation.’

Part of the transformation recorded in the publication, is the birth of the ‘college model,’ the first in South Africa. UKZN now has four col-

leges, 49 schools offering 2000 programmes.

It’s a far cry a century ago when archival records show how Higher Education in KZN progressed initially at a snail’s pace.

Looking back in time witnesses told of how at the Natal Education Commission of 1904, a university education was dismissed as not only non-essential but inappropriate. The ‘Natal Boy,’ the Commission suggested was ‘uninterested in Higher Education, lazy, devoid of perseverance and devoted to outdoor activities.’ Higher



The original Natal University College Building near the headmaster's house at Maritzburg College. It was later moved to the old laundry area, and eventually demolished.



Four South African writers in London, from left, Laurens van der Post, Alan Paton, Roy Campbell and Uys Krige. Paton was one of the early members of the NUC's Students' Representative Council.



Foundation stone laid by the Duke of Connaught, 1 December 1910.



The academic procession approaching Durban City Hall at the inauguration of the University of Natal, March 1949.



Professor Brenda Gourley and former President Nelson Mandela unveiling the new name plaque for the Nelson R Mandela School of Medicine in 2000.



Professor Kader Asmal with Zaba Ngubane, the designer of the UKZN logo.

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Unrest, UDW, May 1972.

education, it said, was the breeding ground for snobbery.

This mindset 'fortunately changed' and thanks to education visionaries in the province, one of the final acts of the outgoing colonial government was to publish the University College Act, which entrenched the right to an environment that supports Higher Education.

To understand the learning environment in KZN during the earlier years of the 20th century, one has to go back to a time in South Africa when racial segregation meant that students of colour could not study side by side with their white counterparts and were often subjected to inferior conditions in separate facilities.

While the Natal University campuses of Pietermaritzburg and Durban upheld the principles of liberalism, they sat awkwardly and discordantly with D.F Malan's Afrikaner nationalism and the laws of segregation based on race and colour.

The powder keg that emerged in the Higher Education learning sector was, in an historical sense, therefore inevitable.

Within these threads of anger, frustration and unease, we see the emergence of the university's Medical School (now the Nelson R Mandela School of Medicine) in the early part of the last century. The protagonists were missionary doctors who saw the need for more doctors in the region to treat African communities.

The School stuttered into existence in the 1950s with a handful of passionate and determined black students studying in cramped conditions in Wentworth. The School, later established on the present site in Umbilo Road, became the icon of political polarisation in South Africa sowing the seeds of open rebellion against the racial policies of the Nationalist government.

It is against this backdrop of struggle for independence, freedom of thought and a non-racial society - often

Right: Students arriving at the Salisbury Island Campus, 1964.



Below: The first PhD recipients at UDW awarded on 22 April 1978 were Dr A Barnabas, Doctor of Science (left) and Dr A Ramphal, Doctor of Education. They are congratulated by Director of Indian Education (extreme right), Mr GK Nair.



Salisbury Island main entrance.



Frank Waring, Minister of Indian Affairs (left), laying the foundation stone of the new campus, August 1969.



Left: Academic Staff Procession to the First Graduation Ceremony, 1964.

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Howard College, Durban, circa 1936.

against insurmountable odds - that the pervading thread in this Higher Education narrative unfolds.

Worse was to come. In January 1957, before any of the original students had graduated, the government's attempts to do away with the Medical School, resulted in 'a truly Homeric struggle' that last two years. While the University did not win the battle over segregation it did save the Medical School.

An equally tumultuous passage was encountered by the Indian community in KZN, whose higher education opportunities were severely hampered by the Nationalist government. Before 1960, very few Indian students enrolled at institutions of higher learning. The first were enrolled at the University College for Indians on Salisbury Island in the Durban Bay.

Like Wentworth, the first students were subjected to learning under very difficult circumstances in an old naval building that once housed Hungarian refugees after the Russian invasion. Getting to lectures required a boat trip undertaken in all types of weather.

'The August winds scared the wits out of us,' recalled one student.

Three years later the ferryboat sank in a heavy storm – fortunately with no students on board!

Eleven years later the College was granted university status and thus the University of Durban-Westville was established, on its present site.

Given prominence too is the Edgewood College of Education, which is now part of the UKZN higher learning family.

In recent years, the focus of Higher Education has been on research with the emphasis on global collaborations that benefit African communities. Among the investigative projects highlighted in this publication are those that seek answers to some of the greatest health and community issues facing the planet, including HIV and TB, climate change, food shortage, education, human rights, sanitation and poverty.

The aim, say the university leaders, is to establish within the next decade UKZN the Premier University of African Scholarship. **N**



Aerial view of Howard College Campus.



The historic signing ceremony in 1991, allowing Black students to study at Edgewood.



Aerial view of Westville Campus.



The signing of the agreement between the HHMI and UKZN on the 26th September 2008 in Washington DC. Seated: Professor Malegapuru Makgoba Vice-Chancellor of UKZN and Dr Jean Schroeder Senior Program Officer HHMI with Professor Tom Cech President of the HHMI and Dr Jack Dixon of the HHMI.



Pietermaritzburg Campus.

RESEARCH

POOR SOUTH AFRICANS' GAMBLING PATTERNS



For most South Africans, formalised gambling is a relatively new phenomenon. It only became legally accessible in 1996 with the introduction of the National Gambling Act. Since then the gambling industry has grown rapidly, expanding from its horse-racing base to include other activities such as the lottery, casino gambling, sport betting and scratch cards.

BY: VICKY CROOKES

Universally, the legalisation of gambling tends to be a controversial issue – and no more so than in South Africa which is home to a vast number of poor people. The often-posed question is: What is the prevalence of gambling in South Africa and, perhaps more importantly, what are the rates of problem or disordered gambling among poor South Africans?

This was the focus of a recent and significant study by UKZN Cognitive Scientist, Professor David Spurrett, former UKZN PhD student, Dr Andrew Dellis and collaborators from the University of Cape Town, the University of Houston and Georgia State University, who focused on the gambling activities of poor adults in KwaZulu-Natal who live outside urban areas.

Although many international stud-

ies reveal that lower socio-economic status is associated with increased rates of problem gambling, little systematic research has been conducted on gambling patterns among poor South Africans. And, it is of limited relevance to draw conclusions about gambling prevalence in South Africa based on research conducted in other developed countries.

All the countries where recent studies have established a close association between poverty and severity of gambling fall within the 'very high' category of the United Nations Human Development Index. South Africa is ranked much lower at 110th on this index. Poor South Africans differ significantly from the lower income subjects of most existing published research; they are poorer in financial terms, have worse health indicators and are less educated.

'No-one knew what to expect in South Africa; the only precedent was a large national study in 2010

which involved urban subjects and only a small number of poor people,' said Spurrett.

Spurrett's study, which was funded by the National Responsible Gambling Programme (NRGP) of South Africa, comprised two samples of poor South African adults, one set living in a rural and the other in a peri-urban community. Three hundred, predominately Zulu-speaking Black adults were selected using census data. They were equally split between communities and by gender and their average education and income were low. Only 20% of the subjects were in full-time employment.

'We sought to build a detailed profile of gambling activity and knowledge of gambling types among adult members of these communities. In order to investigate whether proximity to legal casinos was associated with differences in patterns of gambling activity or risk severity, the communities were selected for being



at varying distances from a major and relatively new casino complex,' said Spurrett.

The overall findings of the study are described by Spurrett as 'eye opening'. Probably most striking is that poor South Africans spend a significant amount of their income on gambling, which (with the exception of the lottery) is predominantly unlicensed (illegal) or informal.

The proximity of a licensed casino appeared to be largely irrelevant to the majority of gamblers in the sample. Most of them had never visited a casino and only nine out of the 300 subjects knew what roulette was. Only half had heard of slot machine gambling. Aside from the lottery, the preferred activities were cards and dice which took place in un-policed areas such as back streets and shebeens or taverns.

Overall results of the study revealed that over a third of the subjects gambled regularly and two thirds

had gambled at some time. Regular non-lottery gamblers reported spending about 25% of their mean personal income, or nearly 10% of mean household income on gambling. Together, moderate risk and problem gamblers accounted for nearly 18% of the sample which is higher than the rates in many other countries. They are also higher than the national rate for South Africa as determined by the recent national urban prevalence study.

Surprisingly, neither age, gender nor education was positively related to risk severity. In addition, the subjects in the study who were employed on a part-time basis were more likely to be problem and at risk gamblers. 'This pattern is different from that in other countries which found the highest rates of problem gambling among the unemployed. It is possible that unemployed South Africans simply could not afford to gamble enough to develop symptoms,' said Spurrett.

In taking this research forward, Spurrett suggests that 'further work in other middle and low-income environments would help determine whether gambling risk severity shows distinctive patterns associated with human development and poverty levels, since this would be relevant to the determination of optimal policies aimed at mitigation of harms arising from gambling'. **N**

Professor David Spurrett





Professor Johannes van Staden

BY: NIKI MOORE

South Africa has an enviable reputation for its biodiversity, but this world-famous plant and animal life treasure is under threat from the uncontrolled harvesting of wild plants for 'muti' (traditional medicine) by traditional healers.

Although natural medicine has been respected and revered for centuries, the concern is that the current rate at which wild plants are being gathered is unsustainable.

Professor Johannes van Staden, Director of the Research Centre for Plant Growth and Development attached to the School of Life Sciences at UKZN, is leading research to discover whether laboratories can replicate the compounds in traditional medicines and manufacture them for medical purposes. Additionally, part of the work involves creating plant cultures so that indigenous plants in danger of extinction can be reintroduced in the wild.

'We've had many successes with

PLANT AND ANIMAL TREASURES UNDER THREAT

Creating plant cultures could be the answer to sustainability

many plants,' said van Staden 'and lesser successes with others. Plants do not behave the same, and we have so many plants in Africa that it's an ongoing, never-ending task. We are growing some of the plants in the laboratory - so anyone wanting to farm with them commercially could do so - while others are being analysed for their medicinal qualities.

'Traditional healers have been working with plants for a very long time, and have used certain plants for certain things so they know how they work. For instance, if a plant is known to heal a wound, then we know there is a possibility that it contains an anti-microbial or anti-fungal product, and we try to find it. And so we try to identify the compound, and in this way we could discover a new antibiotic or something similar,' he said.

'What a lot of people don't realise is that the attributes of plants differ widely depending on the season, the time of day, and where this compound can be found - in the leaves, the stems, the roots, the bulbs, even in the bark.

'These compounds are not present in the same concentrations all year round, so there is constant change taking place in plants all the time.

For instance, algae changes between day and night, so there is no hard and fast rule, and that's what makes it so challenging'.

Van Staden has also been leading the world in studies into the properties of smoke - something most people would not even think about. There have been several breakthroughs which have made the scientific world sit up and take notice.

Smoke is enormously complicated, he says. 'There are more than 3 000 compounds in smoke from grassfires or veldfires (not to mention the harmful ones in cigarettes). The smoke that goes up in the air, those are volatile compounds, present in minute quantities.

'But we have discovered that these compounds have profound effects on the soil and what is in the soil, the seeds, and other plants like grasses and trees. They can stimulate them or inhibit them.

'There are some products in smoke that are not good, but there are others that are excellent. This is a fascinating field, but very new, and I don't think the ramifications have been thought through yet,' said van Staden. **N**

UKZN MARITIME DISCIPLINES UNDER ONE ROOF

Professor Trevor Jones



The University has embraced this development as one of its signature initiatives

BY: NIKI MOORE

The city of Durban boasts one of the biggest and most concentrated collections of port-related activities in the southern hemisphere. It therefore makes perfect sense that UKZN has decided to consolidate its maritime disciplines under one roof and add a few extra courses of study which will make the university a world leader in maritime and related studies.

‘The development is very good news for UKZN,’ said Professor Trevor Jones, academic co-ordinator for the Unit of Maritime Law and Maritime Studies - a cluster of disciplines which have been gathered together into one unit destined to be housed in its own building.

In order to create this special school for maritime studies, several existing programmes have been streamlined and shifted into new premises, a few previous courses have been resuscitated and an entirely new and unique course has been added.

The university has embraced this as one of its signature initiatives, says Jones.

‘And the city of Durban has realised the importance of the Maritime Cluster, so there are some quite nice developments under way at the moment. The Marine Studies programme has already been running through the School of Accounting,

Economics and Finance. There are two programmes at the moment, and a third about to be launched is a post-grad diploma in Maritime Studies which has at its core an analysis of maritime transport and international business transactions and shipping, and an introduction to international trade law,’ said Jones.

‘There are then a whole smorgasbord of maritime economics electives and international shipping practices. We’re making a diverse set of offerings available.

‘Maritime studies involve transporting goods by sea, the rules of that trade, bills of lading, rules that govern who is responsible when things go wrong, admiralty jurisdiction and navigation. Navigation is fun for students because it involves things like collisions!’

Jones said the Masters in Maritime Law course had been resuscitated. ‘We realised there was a need for a full Masters programme in Maritime Law and so we decided to offer it again. And then we are introducing something entirely new - an MComm in Customs and Excise and we think this is going to be a very significant programme. We are working closely with SA Revenue Services and we have a couple of customs experts whose professional services we are using quite intensively. We think there is going to be quite a serious demand for that, because there is no other university teaching customs and excise.’

It was hoped that the concentrated faculty of maritime law and maritime studies would attract interest from all over the world.

‘We are drawing quite heavily on inputs from practitioners using practical advice. It is being run with a mix of internal talent, with lecturers from the College and the School of Law, but very much supplemented by professionals.

‘If you consider around 85% of all international trade is conducted by sea, you will realise the implications of this new programme are huge. UKZN is aiming beyond South Africa’s boundaries - there is no other programme in Africa like this,’ added Jones. **N**



NEW UKZN UNIT GEARED TO REVOLUTIONISE THE MARITIME INDUSTRY

The Unit of Maritime Law and Maritime Studies, launched at the University and officially opened by UKZN’s Vice-Chancellor and Principal Professor Malegapuru Makgoba, is a strategic research initiative located in the College of Law and Management Studies. UKZN is the only University in South Africa to offer this amalgam of maritime offerings.

DELVING INTO THE WORKINGS OF IMMUNE GENES

UKZN SCIENTISTS SEARCH FOR VACCINE AGAINST HIV/AIDS

BY: LIZ CLARKE

One of the ultimate challenges of modern medicine is to find an effective vaccine to tackle HIV.

A difference in the rate of development of AIDS among HIV infected people has led KwaZulu-Natal investigators to identify a tiny subset of 'HIV controllers' which possess rare protective genes that incapacitate the virus. It is hoped these new discoveries may ultimately lead to a vaccine against HIV/AIDS.

Among these investigators is a young University of KwaZulu-Natal (UKZN) scientist, Professor Thumbi Ndung'u, who has been awarded a R5 million US Howard Hughes Medical Institute (HHMI) International Early Career Scientist Award over five years, to delve even deeper into the workings of immune genes in an effort to find a vaccine to fight HIV.

Ndung'u is the Scientific Director of UKZN's HIV Pathogenesis Programme in Durban and Associate Professor in HIV/AIDS research. Ndung'u said the award would enable researchers in KZN to study in greater detail the interaction of immune genes with HIV.

'We can begin to test whether we can use this knowledge to develop vaccines.'

The key focus of his research is how the body fights HIV infection and more specifically the workings of the body's immune proteins that can block or fight off HIV infection. Recently, Ndungu's team unraveled the mechanism of one particular immune protein called HLA-B*81 and how it can protect against HIV by acting as a red flag that alerts the



Professor Thumbi Ndung'u

immune system to the presence of HIV, followed by incapacitation of the virus.

'My passion is to help find some answers to a disease which has baffled scientists and caused so much death and destruction'.

The grant, says Ndung'u, will also enable him to support younger scientists to develop their academic careers. 'These opportunities are like gold. I am hopeful that right here in Durban, we can generate new knowledge and make a significant contribution to developing an effective vaccine against HIV/AIDS.' Figures from the AIDS Foundation of South Africa show that KwaZulu-Natal has the highest burden of HIV in the country – at 39.5 percent.

Ndung'u said UKZN scientists had played a key role in the discovery that certain Human Leukocyte Antigen (HLA) molecules could partially protect against HIV and were now engaged in new research to understand the exact mechanisms.

'Trying to understand why some people control HIV without an-

tiretroviral drugs has been an incredible journey involving many scientists and students. We are only now beginning to understand that some immune genes are able to target the invading virus, forcing it to change so that it won't be recognised. During this process the virus is 'crippled' or becomes less fit and less virulent thus protecting the infected individual from developing AIDS. Now we need to understand the exact mechanisms involved.'

The next 'giant' step, he says, will be to understand additional protective mechanisms and how the virus compensates for the attacks being made on it by the immune system in individuals who eventually develop AIDS. Ultimately, says Ndung'u, researchers want to investigate whether it is possible to make a vaccine that mimics or improves the immune system's capabilities of making the virus less virulent. 'Can we make a vaccine that is effective and safe using this strategy? Can we identify other immune mechanisms to complement and make this strategy "virusproof"? These are the million dollar questions we want to answer.'

Ndung'u praised research colleagues and clinic staff for assisting his team with the work of identifying patients who had different rates of disease progression. From this group they have been able to identify individuals who control HIV on their own without the help of antiretroviral drugs. Harnessing this knowledge for the good of society, he says, and finding a vaccine that will mimic these protective responses, will be a major challenge.

'But we are ready for the long haul, and we have some gifted, creative and devoted young people determined to make a mark in this field,' he said. **N**

WHAT ROCKS TELL US ABOUT OUR PAST

Rock reader Dr Marlina Elburg at work in her office.

READ ANY GOOD ROCKS LATELY?

BY: GREG DARDAGAN

U KZN lecturer and researcher in geochemistry, Dr Marlina Elburg, spends a large part of her working day reading rocks!

She says it's the only way to get information on events, which happened on earth between 500 million and 1100 million years ago.

Elburg - born and educated in Holland - is currently reading her way through 350kg of rocks brought back from an Antarctic expedition.

The expedition was carried out by an international group consisting of four scientists, including Elburg, and two students.

Following the six-week-long stay at Sør Rondane Mountains funded by the German Federal Institute of Geosciences and Natural Resources, the group believes they are a step closer to reconstructing the geological events which led to the formation of the Gondwana super-continent!

Gondwana consisted of what we today know as Africa, Antarctica, Australia, South America and India. Africa and Antarctica sepa-

rated about 180 million years ago.

Reading rocks involves peering at specimens through microscopes to discover properties from which a variety of findings and deductions can be made about the formation of continents on earth.

Elburg says it is sometimes difficult to discover a rock's identity by looking at it in a field study because it has often been subjected to changes in temperature and pressure which, for example, can cause sandstone and granite specimens to resemble each other.

'To determine whether a specimen started out as granite or sandstone we take samples and study them in our laboratories. We look through microscopes at the minerals that are present, analyze them for their chemical composition and determine their age,' said Elburg.

'To some extent the success of an expedition to the Antarctic can be measured by the number of days spent in the field - we managed 27 during our expedition. Between the different members we took about 1 200kg of samples of which about 350kg are at UKZN.

'One of our discoveries was a

kilometre-wide shear zone, which is an area where rocks have been deformed because of elevated temperatures and which also seems to be a major crystal boundary where two distinct areas became juxtaposed. The rocks in the north of the shear zone are completely different from those in the south.

'Whether this is the "suture" where Africa and Antarctica collided around 500ma, and thereby formed Gondwana, still needs support from the laboratory.

'However, we think we have become a step closer to reconstructing the geological events which led to the formation of the Gondwana super-continent,' said Elburg.

She said carrying out fieldwork in Antarctica was difficult because of the weather conditions - temperatures went as low as -20C while they were there and mobility was often a problem.

'The few small drawbacks were far outweighed by the experience of being on Antarctica. The experience was unforgettable especially when I was taken by helicopter to the top of the highest mountain, Widerøefjellet, and enjoyed a 360 degree view of the area,' said Elburg. **N**

VIOLENT PROTEST – WHERE HAVE WE GONE WRONG?

How do we put a stop to violent and often bloody protests like the ones which rocked the country this year? A senior UKZN academic believes it is time for a practical and down-to-earth rethink about accountability, negotiation and community involvement.

BY: LIZ CLARKE

How have we gone so far wrong and how can we come up with workable solutions?

Those are questions that Betty Mubangizi, an Associate Professor in the School of Management, Information Technology and Governance at UKZN, says must be answered, not next year, but now.

In a presentation to the KwaZulu-Natal Speakers' Forum in Durban, Mubangizi stressed that encouraging public consultations and enhancing relationships between leaders and communities 'was a critical part' of addressing potentially dangerous situations.

'It is at the grass root level that things start to go horribly wrong,' she said.

'Families, particularly wives and mothers, are the first to become embroiled in conflict pressures – whether it's their menfolk bitter and angry about working conditions or the lack of service delivery which is making lives unbearable. This is the sort of tinderbox environment that becomes the stepping stone for violent outburst.

'Throwing bricks, stoning cars, burning tyres, wielding pangas even resorting to more serious acts, are symptomatic that whatever is happening comes – not at the beginning, not even in the middle, but at

the very end of the frustration line.' What is needed, she believes, are interventions that address issues at the beginning stage when angry voices are heard.

'That's the time you need people to listen, when negotiated solutions – in most cases a compromise – have to be found and agreed upon.'

Although Mubangizi focused her Durban presentation on the poor results recorded in the country's 'Operation Clean Audit', she says that protests, big and small, are all part of the same problem.

'An honest rethink at the highest levels of leadership would be the first step in encouraging communities and workers to set aside violence and come together to achieve sustainable outcomes.'

On the service delivery side, currently only 13 municipalities out of 283 municipalities (5%) in South Africa received a 'clean' audit in the 2010-2011 tax year.

'If the national government's project to ensure that all municipalities in South Africa receive clean audits by 2014, a leadership buy-in that identifies and addresses problems at an early stage is absolutely essential,' she said.

'It is clear from the violent and tragic happenings of this year that there is no time to waste,' said Mubangizi.

'We can name and blame all we

like, but it won't change the facts and it won't change the increasingly negative attitude that the rest of the world has about us. Wouldn't it be better to devote our energies to coming up with sound management programmes and building capacity to entrench accountability.'

The 'end game', she says is improving the lives of ordinary people, many of them living in peri urban and rural environments.

'They need to have confidence that the promises from leaders to improve their lives are not just pipe dreams, but an attainable reality.'

Widespread protests are indicative, she says, of a failure to negotiate or understand a situation, properly.

'It's almost as though by sticking your head into the sand like an ostrich, the problems will go away, when of course they will only get worse, sometimes, as we have seen, with disastrous consequences.'

But herein lies one of the fundamental issues – 'the responsibility of communities or workers themselves to select and make accountable those who they have voted into office.

'That is where awareness and education comes in,' said Mubangizi.

'We don't need conflict analysts to tell us that if lines of communication are weak and people feel marginalised, the possibility of

spontaneous often violent protest, fuelled by anger and frustration are highly probable. We have seen it all too often.'

The negativity resulting from such upheaval is sometimes devastating.

'Not only are people hurt, sometimes killed, but the message that South Africa is in the grip of social unrest goes viral and before you know it the country is in the headlines for the wrong reasons. Violent protest where streets are blocked and missiles thrown, for example, don't engender any public sympathy, even though the reasons for protest action may be legitimate.'

In an academic sense, it is 'precise and sound research', that she believes can provide the working platform to find solutions.

Part of the solution, she says, is to unbundle some of the myths and non-truths that all too frequently describe the challenges of community participation in issues concerning out-of-the-way township communities.

'Certainly one of those misguided ideas is the belief that without email or other digital applications, communication in these resource-poor settings is poor. Not true. Anyone who has grown up, as I have, in a rural area, will know that communication is swift and widespread. The smallest incident, the news of someone returning home, a family get together, will be observed, recorded and communicated within minutes.'

The other non-truth, she says, is that in the case of service delivery poorly resourced municipalities lack the skills needed to obtain a clean audit.

'Yet metropolitan municipalities, considered to be well-resourced and able to attract skilled personnel, are struggling equally to achieve clean audits.'



Associate Professor Betty Mubangizi

Civil action, she believes, is not something that should be dismissed or denigrated.

'We need to have robust public comment as part of our constitutional right. It is the way that it is managed that we have to look out for – to understand what are the 'invited spaces' where formalised protest can take place and 'invented spaces' where bottled up emotions can wreck havoc like they did at the Lonmin mine.'

It is within the invited space scenario (an example being community participation in Integrated Development Planning) where the leadership structures need the most strengthening, says Mubangizi.

'And that begins with ordinary people, family members, teenagers, workers, and grandparents, knowing how to optimise their vote, choosing the ward councillor, Union leaders, who best identify with their overall needs, not necessarily the ones who promise the most.'

Stringent vetting of potential councillors is a critical area, she says. 'Not only must would-be councillors have a sound knowledge of local labour and service delivery issues, but they must be prepared to listen, talk and act – for that you need the

proper oversight, a guardian layer of government that assesses performance on an ongoing basis.'

The next step, she says, is to ensure that communication channels between leaders and the people are always open and that prompt and immediate formalised interventions are made when and where necessary.

The negotiating phase has to be part of the structure, she says. 'This has to be an equal partnership between community representatives and leaders. Inevitably there will be a compromise. That's why it has to be an evolving process of education and awareness to reach that stage of mature governance.'

Strengthening human resources in municipalities – improving their internal systems and governance structures and promoting good leadership for oversight purposes are the cornerstones of change, she says.

'So far we have failed to achieve those benchmarks. What we need now is to see research and studies on good governance in the public and private sector translated into action.' **N**

UKZN'S BOLD INITIATIVE TAKES ROOT

Rudi Kimmie

Graduates who are self-motivated, civic minded, skilled, ethical and empowered should be the heart of the teaching and learning enterprise.

The pursuit of this goal is what makes institutions of higher learning socially relevant and hence the imperative that they proactively position themselves at the forefront of development and innovation.

It is for this reason that the Business Organisational and Leadership Development (BOLD) initiative was conceptualised and established at the University of KwaZulu-Natal under the leadership of Mr Rudi Kimmie (UNITE) and Professor Deresh Ramjugernath (Chemical Engineering).

In light of the gloomy prospects of high unemployment and pervasive social decline facing graduates, BOLD is more than a skills development project. It is an embracing concept which promotes holistic personal and enterprise development. It talks to current socio-economic challenges facing South Africa through centralising ethical awareness and social outreach as core activities, yet also advances entrepreneurship training.



Representatives of UKZN's BOLD initiative with the National Youth Development Agency (from left) Professor Deresh Ramjugernath (UKZN), Mr Tony Ngwenya (NYDA), Mr Kenneth Mbili (NYDA) and Mr Rudi Kimmie (UKZN).

What sets the vision of BOLD apart from the many entrepreneurship courses available is that it also aspires to develop strategic leadership and organisational skills.

BOLD intends to strengthen UKZN's role as a socially responsive institution.

For additional information contact Mr Rudi Kimmie at kimmier@ukzn.ac.za or Professor Deresh Ramjugernath at ramjuger@ukzn.ac.za

UKZN Tops in Mathematics Research

Ashay Nathoo

It's official. Internationally respected business data provider, Thomson Reuters, rates UKZN as the top South African university in the field of mathematics.

UKZN was followed by the University of Cape Town, Wits, the University of Pretoria and Stellenbosch University. UKZN also compares favourably with international universities.

The Thomson Reuters study used relative discipline impact in ranking universities. Instead of using the total number of publications produced, it assesses the impact of the publications under review against the impact of all publications in the disciplines.

Professor Kesh Govinder, Dean and Head of the School of Mathematics, Statistics and Computer Science at UKZN, said 'Rather than directly comparing the disciplines against each other, the study took into account the impact of research in a



Members of the Management Committee of the School of Mathematics, Statistics and Computer Science with Professor Rob Slotow, Deputy Vice-Chancellor: College of Agriculture, Engineering and Science (left).

discipline against the expected impact of the discipline itself.'

In addition to being the top mathematics discipline in the country, mathematics was also the top discipline at UKZN.

The Coolest Building in Town

Sally Frost

Minister of Science and Technology, Mrs Naledi Pandor, officially opened UKZN's Intensive Tuition for Engineers Programme (UNITE) new green home, and applauded UNITE for providing learners from disadvantaged backgrounds with an alternative access programme into Engineering.

UNITE's Deputy Director, Mr Rudi Kimmie, who described the new facility as "the coolest building in town", said the R20 million architectural gem would provide a permanent home to the UNITE programme and provide a 'green' hub for university, industry and community-related activities.

Kimmie used the analogy of a three-legged potjie pot to explain the project's recipe for success, namely that the legs represented funding from the government; the necessary support from UKZN's planning committee; and a cash injection of close to R200 million from various sponsors.

Deputy Vice-Chancellor and Head of the College of Agriculture, Engineering and Science, Professor Rob Slotow, described the building as 'a magnificent edifice and flagship home for sustainable green engineering at UKZN'.



From left: Professor Rob Slotow, Minister Naledi Pandor, Professor Christina Trois and Professor Malegapuru Makgoba at the Official Opening of the UNITE School of Engineering Building.

With leader Noel Powell at the helm, UNITE is renowned for pioneering interactive teaching methods in its one-year intensive, introductory engineering programme.

UKZN's Dean and Head of the School of Engineering, Professor Christina Trois, said the new facility signalled a new beginning for the School of Engineering.

Architect of the new UNITE building, Paul Phillips of Walker Smith Architects and a former graduate of UKZN, said the new energy efficient building's main feature was its embodiment of green principles.

GRADUATION CEREMONIES AT UKZN

Smita Maharaj

The University of KwaZulu-Natal awarded 8 832 undergraduate and postgraduate degrees at 20 Graduation ceremonies on the Westville and Pietermaritzburg campuses in April 2012.

An impressive 5 439 (62 percent) of the graduates were women while 520 were international students. A total of 153 doctoral degrees were conferred.



Fifty-eight percent of the 371 graduates awarded their degrees *cum laude* and *summa cum laude* were women, while 72 graduates with disabilities earned degrees.

In addition, the University awarded honorary degrees to six leading South Africans for their outstanding contributions in the scientific, arts, human rights, social sciences, political, and academic sectors. The University decided that through their innovation, resilience, altruism and intellect in their respective fields, the recipients had changed the lives of people both in South Africa and globally.

Honorary degrees were conferred on Yvonne Chaka Chaka Mhinga, the late Lawrence Anthony, Virginia Gcabashe, Hugh Chittenden, Mahmood Mamdani and Zuleikha Mayat.

Eminent guest speakers at ceremonies included Public Protector, Advocate Thulisile Madonsela and leading researcher and academic, Professor Tinyiko Maluleke.

Two leading academics - Professor Bice Martincigh and Dr Nyna Amin - received the University's Distinguished Teachers' Award for teaching excellence. This prestigious award recognises innovative and outstanding teaching commitment.

Meanwhile, prestigious University Fellowships were awarded to three highly respected academics in the College of Agriculture, Engineering and Science - Professor Sreekanth Jonnalagadda, Professor Peter Dankelmann and Professor Gerald Ortmann.

Call Goes Out For Academic Research

Thandiwe Jumo

Public Protector Thulisile Madonsela called for academic research into the role of the public protector and the meaning of good governance at the 10th Annual Victoria and Griffiths Mxenge Memorial Lecture at the University of KwaZulu-Natal (UKZN) in Durban.



Madonsela defined the role of the public protector as helping to ensure that there was proper planning, budgeting, prioritisation and good governance in the affairs of the state in South Africa.

'If I had my way I would have academics research this entity as we need their view. I believe UKZN has the ability to do this. We should look no further than your rich history of respect for human rights and pull out all stops to see to it that all South Africans enjoy the full protection of the law,' said Madonsela.

The annual lecture commemorates the significant role Griffiths and Victoria Mxenge – who were both lawyers – played in the liberation struggle.

Dean and Head of the School of Law at UKZN, Professor Managay Reddi, hailed the lecture as the annual highlight in the University's law calendar and commended Madonsela's role in protecting the rights of South African citizens.

Madonsela highlighted the sacrifices the Mxenges made for the freedom and rights South Africans enjoyed today.



Oxford Post for Rhodes Scholarship Winner

Phumelele Mavaneni

Former SIFE President at UKZN, Ms Qhelile Nyathi, has been awarded the prestigious Rhodes Scholarship allowing her to study towards her Masters degree at the University of Oxford in England for two years.

Nyathi will study two Masters programmes - African Studies and Financial Economics – as she believes they will facilitate her development as a relevant actuarial scientist with a good understanding of African finances and economics within investment banking.

African Studies is an interdisciplinary module that covers history, economics and politics of African states while Financial Economics is affiliated to the actuarial profession and falls under the SAID Business School at Oxford where she will receive exemptions from an actuarial sciences board.

Nyathi applied for the Scholarship through the Zimbabwe Constituency where she went through a rigorous two-day interview process. 'The scholarship looked for individuals who are excelling academically and have a broad outlook on life and understand what's happening on the local and international fronts be it politics, economics, agriculture or socially inclined events.

Nyathi believes one of the reasons she was selected is because of her involvement in SIFE UKZN. 'They were very interested in the work I did in SIFE as well as the expertise and experience I gained through it,' she explained.

Artistic Endeavour with Olympic Games Flavour

Vicky Crookes

Twelve artists from UKZN's Centre for Visual Arts (CVA), participated in a print swap with the Inky Cuttlefish Studios in London and the William Morris Gallery in Waltham Forest - a UK Borough which hosted the 2012 Olympic Games.

Three prints from each artist were sent to Britain for display at five exhibitions and festivals linked to the London Olympics.

The print theme was Godiva Awakes, inspired by the story of Lady Godiva who rode naked on her horse through the streets of Coventry to protest her husband's taxation on his tenants.

In exchange for the UKZN-produced prints, artists from the Inky Cuttlefish Studios sent the CVA a selection of their prints on the same theme. These, together with the UKZN prints, were exhibited at the CVA's Pietermaritzburg-based Jack Heath Gallery.

CVA Lecturer, Faye Spencer initiated the print swap to showcase the enthusiasm for 2D visual arts practice at the CVA and it was made possible by a former UKZN CVA student who has an art studio in Britain.

US DELEGATION VISITS MCCORD HOSPITAL

Emma-Louise Mackie

Achievements in HIV treatment and management highlighted

A delegation from Washington, DC visited the PEPFAR-funded Sinikithemba Centre at McCord Hospital in Durban to see for themselves the remarkable advancements made in the treatment and management of HIV and AIDS in South Africa over the past 10 years.

The group included Mr Donald Gips, United States Ambassador to South Africa, as well as US Senators Mr Tom Harkin, Mr Tom Udall and Mr Roger Wicker.

Director of K-RITH at the University of KwaZulu-Natal, Professor Bill

Bishai, accompanied the Senators on their tour and explained some of the challenges. Bishai reminded them of the words of former President Nelson

Mandela: 'We cannot win the battle against AIDS if we do not also fight TB. TB is too often a death sentence for people with AIDS.'

The Senators learned that surprisingly little was known about the disease combination. New diagnostics tools, more effective treatments, and

advancements in vaccine research were desperately needed to devise more successful ways to combat and manage TB and the high prevalence of TB/ HIV co-infection.

K-RITH is tackling these problems through a unique

collaboration between the Howard Hughes Medical Institute in Maryland, USA and the University of KwaZulu-Natal.



US Ambassador, Mr Donald Gips (far left); US Senators and other delegates at the entrance of McCord Hospital in Durban.

SIFE-UKZN TEAM National Winners

Sithembile Shabangu

Giving new meaning to community outreach

Dedication to improving the quality of life of deserving members of the community has brought accolades for the Students In Free Enterprise (SIFE) UKZN team.

The team were crowned winners of the 2012 national competition and represented South Africa at the SIFE World Cup in Washington in September.

Praised for their 'development and implementation of outstanding sustainable community outreach projects in their surrounding communities' the team identified a number of definable goals.

These included the application of business and economic concepts through an entrepreneurial approach, improving the quality of life taking into account economic, social and environmental factors.

Said SIFE President, Mr Thembaethu Mkhize: 'The team is ecstatic. We really wanted to make UKZN and the country proud.'

FOLLOWING A LONG TRADITION

Sithembile Shabangu

"Family tradition" convinced Mandela Rhodes Scholar John Flanagan of Zimbabwe that UKZN was the right place of learning for him to complete his Masters Degree in Agriculture.

Flanagan said he was following in his family's footsteps. His father, two cousins and two uncles had all completed their BSc degrees at UKZN, while his sister had studied psychology.

'So I guess apart from being a good university, UKZN is in the family,' said Flanagan.

The Mandela Rhodes Scholarship is awarded partly on academic performance, but to a greater extent on character, including leadership

abilities, a love for people, reconciliation, entrepreneurship and education. The idea is to invest in people who will invest in other people and nations in the future.

Flanagan will examine the economic effects of legalising the sale of rhino horn during his Masters studies at UKZN.

Flanagan won a Gift of the Givers scholarship for his BSc studies, graduating *cum laude*.

Talking about his experiences on the Pietermaritzburg campus, he said: 'It's been great - thanks to an excellent church family at NCF and amazing friends on campus'.



Mandela Rhodes Scholar John Flanagan.

SIX UKZN WOMEN SCIENTISTS SCOOP NATIONAL DST AWARDS

Honoured for outstanding contributions to the advancement of science

Six UKZN women scientists received national awards in various categories at the prestigious annual Department of Science and Technology's Women in Science Awards (WISA). The awards were made to the women by the Minister of Science and Technology, Naledi Pandor, for outstanding contributions towards advancing science and building the knowledge base in their respective disciplines. The awards are made annually to recognise and reward the achievements of South African women scientists. 'WISA winners are profiled as role models for younger scientists and researchers,' said Minister Pandor.

Awards were made to:

Professor Relebohile Moletsane – winner of the Distinguished Women Scientists: Social Sciences and Humanities.



Professor Relebohile Moletsane received her primary and secondary education in rural schools in the Eastern Cape and an undergraduate degree at the University of Fort Hare. Her PhD is from Indiana University, Bloomington, Indiana, USA and was obtained in 1996.

She is currently a Professor and JL Dube Chair in Rural Education in the School of Education. She has extensive experience in teaching and research in the areas of curriculum studies and gender and education, HIV and AIDS education and girlhood studies in southern African contexts.

Her methodological interests include the use of participatory visual methodologies in doing research and development work with marginalized groups.

Professor Sarojini Nadar – winner of the Distinguished Young Women Scientists: Social Sciences and Humanities.



Professor Sarojini Nadar completed her PhD at the University of KwaZulu-Natal in 2003 at the age of 27. She was recently appointed as UKZN's College of Humanities' Dean of Research, and she is an Associate Professor in the Gender and Religion Programme in the School of Religion, Philosophy and Classics.

Professor Nadar has researched and published widely in the field of feminist biblical hermeneutics, with a special focus on HIV and AIDS; gender-based violence; masculinity and sexuality. She also has a special interest in studying and developing theories of feminism in Africa.

Dr Sengeziwe Sibeko – first runner-up Development of Rural Women: Emerging Researchers.



Dr Sengeziwe Sibeko is a Specialist Obstetrician and Gynaecologist who obtained medical qualifications at UKZN and Colleges of Medicine of South Africa. She received the prestigious Columbia University Southern African Fogarty AIDS international training and research programme fellowship and completed her Master of Science in epidemiology degree at Columbia University, New York, in 2009.

She is an Oxford Nuffield Medical Fellow based at the Weatherall Institute of Molecular Medicine, John Radcliffe Hospital at the University of Oxford in the United Kingdom where she is registered for a PhD in HIV mucosal immunology of the female reproductive tract.



**Dr Joyce Chitja – second runner-up
Development of Rural Women: Emerging
Researchers.**



Dr Joyce Chitja holds a PhD in Food Security, an MSoc Sci in Community Resource Management and a BSc Agric in Horticultural Science. She is currently a lecturer in the School for Agricultural, Earth and Environmental Sciences at UKZN, a council member of the Agricultural Research Council and board member of the Agricultural Development Agency in KwaZulu-Natal. Her research areas include food security in relation to smallholder farmer market access and value chains; water-use security, rural livelihoods and vulnerability; gender and agriculture; organic farming production, land use security and reform.

**Ms Prudy Mashika Manoko Seepe –
Fellowship for Doctoral Studies.**



Ms Prudy Mashika Manoko Seepe is a PhD student in the Discipline of Occupational and Environmental Health

in the Traditional Medicine Laboratory at the College of Health Sciences.

She received her Masters degree in Medical Biochemistry at the Centre of Excellence for Tuberculosis Research at the University of Stellenbosch. Her research interest is in African traditional medicine and its possible efficacy against KwaZulu-Natal tuberculosis strains, through good and strong relations built with local herbalists known to have expertise in treating or managing tuberculosis using herbs.

**Ms Bongiwe Goodness Ndlovu –
Fellowship for Doctoral Studies**



Ms Bongiwe Goodness Ndlovu received her Master of Medical Science (MMedSc) degree in paediatrics at the University of KwaZulu-Natal this year. She is currently enrolled for a PhD in Medical Virology in the HIV Pathogenesis Programme at the Doris Duke Medical Research Institute, Nelson R Mandela School of Medicine.

A developmental lecturer in the School of Laboratory Medicine and Medical Sciences at the University, Ndlovu's research is on stopping HIV spread among South African adults and mother-infant pairs using both innate and adaptive immune mechanisms.

Loo Scoops Sixth Place at World Fair

Sally Frost

Bill Gates deemed it was time for a new toilet. UKZN complied and their revolutionary system was placed sixth at the Reinvent the Toilet Fair in the United States.

Professor Chris Buckley and his team from the School of Engineering's Pollution Research Group, who designed the new toilet, were at the fair in Seattle hosted by the Bill & Melinda Gates Foundation.

On display was state-of-the-art toilet technology from around the world. The challenge presented to the teams of international competing engineers had been to develop a super toilet which operates on a shoestring budget and does not need electricity, running water or a sewage system. Bonus points were presented if the design captured energy or recycled waste into something useful in the process.

A team from the California Institute of Technology (Caltech) won the top prize of US\$100,000 (R800 000) for a solar-powered toilet, which produces hydrogen and electricity. Loughborough University in the United Kingdom was second for their toilet, which uses energy from faeces to decompose the waste and recover clean water. Third prize went to chemical engineers from the University of Toronto for a toilet which sanitizes waste within 24 hours by dehydration and smoldering.

Buckley explained that UKZN's toilet was designed to burn waste solids while re-routing urine to a storage tank where it would be decontaminated, purified and repurposed for flushing and hand-washing. In contrast to prototype high-tech commodes, traditional toilets have not changed much since the 18th century. The amount of water required to flush them and their reliance on being linked to an expensive sewage system are luxuries many communities in the developing world cannot afford.

Buckley said about 2.5 billion people worldwide lacked clean, safe toilets - a problem which contributes to the death of nearly 1.5 million children annually. The Bill & Melinda Gates Foundation has invested US\$150 million (R1,2 billion) into improving global sanitation over the past two years. The next step will be to take the top-performing technologies at the Reinvent the Toilet Fair and start making larger scale pilots. 'It is time for sanitation innovation,' said Buckley.

International Hospital Design Competition to Benefit UKZN

Lunga Memela

An international competition to find a winning design for UKZN's new medical teaching hospital has been launched by the National Minister of Health, Dr Aaron Motsoaledi.

Fully sponsored by the International Academy for Design and Health (IADH), Motsoaledi said the competition would save government between R300 and R500 million in design fees for hospitals around the country.

Addressing a gathering on the Howard College campus he said South Africa had during the past 20 years produced an average of 1 200 medical doctors every year 'regardless of the demand and regardless of the quadruple burden of disease'.

Motsoaledi said the country needed world-class teaching hospitals in order to meet the Department of Health (DoH) target of producing at least 3 600 medical doctors annually.



International design competition for world-class academic hospitals announced.

Construction of the new learning hospital using the winning design from the competition is expected to begin on vacant land adjoining the Howard College campus in 2014. All UKZN health sciences disciplines and King Edward VIII Central Hospital will be integrated on the new premises.

ENGLISH-ISIZULU WRITING COMPETITION

Sithembile Shabangu

Promoting bilingualism and the use of isiZulu

More than 350 entries were received for the English-IsiZulu Writing Competition hosted by the University of KwaZulu-Natal in partnership with Independent Newspapers. Novice and experienced writers were invited to submit short stories, essays, reflections, poetry or pieces with a visual component (e.g. cartoon strips, illustrations or photo essays).

Deputy Vice-Chancellor: Teaching and Learning, Professor Renuka Vithal, said the purpose of the competition was to promote bilingualism and in particular the use of isiZulu as envisaged in the University Language Policy and Plan. The project's aim is to create literature in isiZulu, and to promote a culture of reading and writing in African Languages among young people.

'In a world where English dominates and is still often seen as the language of 'learnedness', initiatives such as these create an awareness that this is not necessarily the case and that one can communicate something meaningful in any of our indigenous languages,' said Vithal.

She said that the project also created a space for people to express themselves creatively in their mother tongue even when that mother tongue was not English.

'For English first language users, it creates the space to experiment and play and become more comfortable in using another language,' said Vithal. 'It also reflects how young people of today engage and move effortlessly between language.'

About 70% of the entries were poems. Vithal said that most of the pieces submitted were written in isiZulu and a few in English and isiZulu combined. A few of the entries were disqualified because they were written in English only.



From left: UKZN's Director of Communications, Ms Smita Maharaj; Mercury Editor; Mr Philani Mgwaba and Deputy Vice-Chancellor: Teaching and Learning at UKZN, Professor Renuka Vithal.

Processes have been put in place to ensure successful implementation of bilingualism and the development of African languages at UKZN. 'An active University Language Board is tasked with implementing the University Language Policy and Plan,' she said.

In addition a Language Planning and Development Department had been created in the DVC Teaching and Learning Portfolio. A range of projects promoting different aspects of the Language Plan are being funded to the value of more than R3 million across the academic and support sectors, Vithal explained.

The winners of the competition will be announced towards the end of 2012 and a selection of pieces will be published in a book by UKZN Press to be launched at the 2013 'Time of the Writer' Festival. Selected pieces will also be published in titles in the Independent Newspapers Group. Winners in the three different categories will each receive R10 000 in cash. All authors of winning pieces will receive two free copies of the UKZN Press book. UKZN Press will contribute any royalties accrued from the book towards a scholarship for a UKZN undergraduate student majoring in isiZulu studies.

UKZN Golf Day Brings Hope To Students

Sithembile Shabangu

Eight UKZN students from disadvantaged backgrounds were each awarded a bursary worth R10 000 at UKZN's 9th Annual Golf Day held at the Royal Durban Golf Club.

128 golfers teed-off in aid of raising funds for student bursaries. Funding generated from the Golf Day is for students from previously disadvantaged backgrounds who have excelled academically.

Each student will have R10 000 deposited into their student account to use towards their studies.



Five of the eight students who each received a R10 000 bursary at UKZN's golf day. From left are Mr Mohammed Moola, Ms Sajal Pillai, Ms Nozipho Zulu, Mr Mthokozisi Nkosi and Ms Sibusisiwe Nkosi.

Participants included local businessmen, staff, students, alumni, donors, friends of the University and the local golfing fraternity who turned up in their numbers to have a fun day and to contribute towards the worthy cause.

UKZN Registrar, Professor Jane Meyerowitz, told the participants: 'Your participation here today supports a really good cause.'

Since its inception the annual event has raised R900 000 and provided 90 students with much needed funding to complete their studies. The main sponsor for the event this year – and for the past three years – was Standard Bank pledging R50 000.

'Nothing gives me more joy than seeing the excitement on the faces of the students when they are informed that they have been chosen to receive a bursary. I would like to congratulate the students and wish them well in their future studies,' said Ms Shakila Thakurpersad, Tournament Organiser.

'Next year will be our 10th year and the tournament will be held at the Wild Coast Sun on 30 August 2013. We are hoping to celebrate in style by giving away more bursaries to deserving students,' said Thakurpersad.

UKZN Professor Honoured For Contribution To Music Research

Melissa Mungroo



Emeritus Professor of Music at the University of KwaZulu-Natal, Professor Beverly Parker was commended for her years of service to the former Musicological Society and to the SA Society for Music Research (SASRIM) at the society's recent music research conference at the Tshwane University of Technology.

Chairman of SASRIM, Professor Zelda Potgieter, praised Parker's work in the society's journal *SAMUS*, which she edited from 1993 to 2005, and her work as Co-ordinator of the SASRIM programme committee for the last four years.

COMPUTER SCIENCE STUDENT WINS NATIONAL AWARD



Ashay Nathoo

Ms Annaliza Moodley, who completed her honours in Computer Science at UKZN last year, received the award for the best fourth year honours student at the conference and prize giving ceremony of the Operations Research Society of South Africa (ORSSA).

Moodley was nominated for the award by her Supervisor, Dr Aderemi Adewumi, who received the prize on her behalf.

Moodley's project, which focused on financial portfolio selection with heuristic optimization, had earlier been accepted and presented by Adewumi at the IEEE International Conference on Computational Intelligence for Financial Engineering and

Economics (CIFER 2012) in New York.

CIFER is the major collaboration between the professional engineering and financial communities and one of the leading forums for new technologies and applications in the intersection of computational intelligence and financial engineering and economics.

In addition to the recognition and prestige the award holds, Moodley was given a cash prize for her achievements. It was the first time since the merger that a UKZN student has won the prestigious annual award which places the University's name in the ORSSA Hall of Fame. She was also the first computer science student to scoop the award.

Thato Tsautse

Durban Chamber of Commerce President

LIZ CLARKE



When it comes to talk of squandered opportunities Thato Tsautse, the first woman President of the Durban Chamber of Commerce, doesn't mince her words.

'We have a wonderful city full of potential. The problem is that not enough people realise it.'

Tsautse, one of UKZN's distinguished alumni with a BProc, LLB and an LLM to her name, says that her role as president of the Durban Chamber of Commerce, is not something she takes lightly.

'Call me passionate about my city. Call me intolerant of people who can't see the wood for the trees. Tell me I go where angels fear to tread. I'll go along with all that.'

We're at the crossroads, she says. 'We have to make the right long-term decisions now. If we don't, history is going to come down hard on us!'

Tsautse, 43, mother of a teenage son, has done all the groundwork needed to get to the top echelons of public life.

A 'true-blooded township girl from Chesterville' she studied at UKZN before taking over, amongst other high-profile roles, the acting port legal advisor post for the Port of Durban quickly expanding her knowledge of the maritime arena.

While immersed in this field Tsautse won a Maritime Law Association Scholarship to train with the law firm Holland and Knight in New York, where she was placed in the Maritime Law and Maritime Structured Finance department.

Why is it, Tsautse asks, that young local people entering the work arena, would rather go to Johannesburg than stay here. Why are they paid less or offered less money here? It shouldn't be like that.'

Part of the answer to all these issues, she believes, is the need for the Chamber to spread its wings and revolutionise the way it does business.

'Big business tends to stick to its ivory tower exclusivity instead of looking at opportunities, say in the townships like Umlazi and KwaMashu. If we could set

'It's time to celebrate Durban - our city. That means taking off the blinkers and having the will to succeed'

Maritime matters are still very close to her heart - 'South Africa has 3000 nautical kilometres of coastline with the Port of Durban at its core - that's reason enough to celebrate our potential to become one of the world's greatest export-driven maritime nations, even if we are not there yet.'

Currently, Tsautse is the CEO of the South African Association of Ship Operators and Agents (SAASOA), and the Chair of the Durban Port Liaison Committee and Maritime Promotion Council.

'My vision for the Chamber is to see it as a vibrant networking hub that interacts with key players in commerce and industry, promoting employment opportunities across the board, harnessing local skills - and making things happen.'

It means, she believes, taking the blinkers off and marginalising negativity.

'Without changes in perception, how can we ever hope for a positive outcome? We have to ask ourselves some pretty tough questions.

'There is no reason why we should not be on par with some of the big cities of the world - Durban is, after all, the gateway to Africa. Singapore is the same size and yet it is driven by a will to succeed.'

up township commerce and business hubs in an innovative fashion, it would be an incredible way of providing much-needed skills and employment opportunities.'

Achieving these goals, she says, is also about addressing workplace issues in a more sensitive and holistic manner.

'It is about assisting people to achieve their best, understanding the reasons for things like absenteeism and providing counseling for those who need it.'

'Out of 6 000 KZN businesses, only 2 600 have employment assistance programmes. It's simply not good enough.'

Thinking collectively, rather than individuals, Tsautse believes, is the way to 'unlock doors that have been shut tight for too long.'

She's particularly excited by the prospect of the new dug-out port south of Durban.

'Let's embrace the idea. It will be the turning point for the city. I can't wait to see this long-term vision become a reality.'

Vanashree Singh

Fashion guru,
consultant and
activist

LIZ CLARKE



Vanashree Singh, fashion guru and project and events consultant and passionate activist for children's rights, believes that her background in academia at UKZN where she graduated with a BCom and a postgraduate diploma in Management Accounting and Finance, has given her an edge when it comes to making a difference.

A day doesn't go by when Durban-based Singh doesn't have a checklist as long as her arm.

Wife of film producer, Anant Singh and mother of two school-going children, Singh devotes most of her working day – 'between family commitments' - to initiatives that support the not-for-profit NGO, Save the Children KwaZulu-Natal (SCKZN).

'For me, the care and support of vulnerable children in this country is a responsibility that cannot be ignored. So much has to be done. The future of a country depends on a healthy and nurtured younger generation. Whatever I can do to achieve a better outcome for children, that's what I want to do. That's where I want to be.'

The goals that she and her team of dedicated staff and volunteers have set themselves are ambitious, but as she puts it: 'You have to try and achieve the impossible. Mandela has taught us that.'

Part of that 'impossible' journey has been to persuade the umbrella body Save the Children International to support the formation of Save the Children South Africa which will be a member organisation of the International Grouping.'

'Achieving that status has been an important milestone for us,' said Singh, who is currently Chairman of the KZN branch and also a Board Member of the newly formed Save the Children South Africa.

'It allows our staff and volunteers to evolve a plan of action that suits our own particular needs. The impact of the dual pandemic of poverty and HIV has resulted in major uniquely defining social issues such as the growing number of child-headed households, which we needed to embrace.'

Training and learnership programmes are key components of the 'way forward' she said. 'With our overseas and local funding we are able to train between 300 and 400 mainly women a year in the field of how to manage an Early Childhood Development Service, child care and support.'

One has to start, she points out, with the premise that young children from birth upwards require focused input for them to achieve their developmental goals.

'But for mother/carer and child to benefit, it has to begin with sound knowledge and grounded ethics.'

The modules that make up the training are:

- An Introductory Course on Managing an Early Childhood Development Service (ECD);
- An ETDP SETA SAQA Accredited Course on 'Managing an ECD Service';
- In addition SCKZN annually trains approximately 600 cooks and gardeners at ECD Centers on the nutritional needs of young children and sustainable food gardening.

'We assist and encourage all ECD Services to meet the minimum

requirements for registration with the Department of Social Development,' explains Singh.

It is estimated, she says, that 92 percent of children aged 0-4 in KZN, currently attend unregistered ECD centres.

'The sadness is that the wider communities, including the responsible authorities, often do not recognise the extent of the wonderful and inspirational work done by these community and home-based centres. The people who run them are the unsung heroes – doing so much to ensure that children get the best chance possible in life, often against difficult odds.'

Another key programme of SCKZN is to support 200 orphaned and vulnerable children during a time when their natural parents are unable to provide for them, and until the State assumes that responsibility. This support includes a monthly food voucher, schooling, health and social needs. To this end SCKZN has launched a Sponsor A Child Programme to help the neediest of children.

'I think many people want to help but don't know how,' said Vanashree. 'Our mission is to facilitate and sustain this link. It is starting to work, but we need a lot more awareness and participation.'

Closer to home, Singh takes a keen and active interest in the world of film production.

'Anant is working on the film adaptation of Mandela's *Long Walk To Freedom* which is due for release next year. It has been an incredible project and I have learnt so much about Mandela, his philosophies, his understanding of human frailty and human needs.'

Being part of a high-profile family, especially one that is closely associated with the international movie world, inevitably means a great deal of travel, entertaining and attending glamorous red-carpet functions.

'But at the end of the day, it is the ordinary things of life that count,' she says. 'It's about team-work. It's about ensuring that your children grow up with the right values. It's about respecting the independence and distinctive qualities of each person.'

Convocation

UKZN WELCOMES NEW CONVOCATION PRESIDENT

His challenge is to get all Graduates to participate in Convocation

Sithembile Shabangu



Convocation President, Mr Vusumuzi 'Fanle' Sibisi.

The 115 000-strong alumni is the largest stakeholder group of the University of KwaZulu-Natal and is regarded as an important champion of the University's future.

Heading that key group is Mr Vusumuzi Wiseman Sibisi, also known as 'Fanle'. He was recently elected as the new Convocation President along with two representatives on Council and six Convocation Executive members.

'Being President of Convocation is a great honour, in fact, I feel humbled and highly appreciated by the society of graduates and the University in its entirety,' he said.

Sibisi, who graduated with a BAdmin degree in 2007, currently works as an Assessor at the KwaZulu-Natal Department of Transport (Provincial Regulatory Entity).

'It is a challenging job because we mostly deal with the taxi industry and other modes of land transport,' said Sibisi.

His job involves assessing routes

applied for by individual members of taxi associations to ensure that conflict is avoided, and mediating conflict and disputes between taxi operators or taxi associations.

Asked about his plans during his tenure, 29-year-old Sibisi said it remained a challenge to get all graduates to participate in Convocation.

'Our duty is to ensure that we take Convocation and its role to greater heights. We need to ensure that good working relations established with the Council of the University are enhanced,' he said.

He added that maintaining and fostering new relationships with Government officials and the private sector would ensure that they collectively shaped the University.

'As a University we need to respond to societal needs and all prominent figures must serve as Ambassadors of the University,' he said.

However, he said the new responsibility remained an enormous challenge that he believed he and the executive team would overcome. He said they vowed to protect the integrity of the University's qualifications as well as of the University in general.

Born and raised in Mtulwa, a rural community in KwaZulu-Natal, Sibisi understands some of the difficult financial, housing, and teaching and learning challenges faced by students who come from disadvantaged communities, which, through miscommunication, usually resulted in student strike action.

Sibisi, a father of three, was brought up by his mother, who works as a general assistant at Applesbosch Hospital. In his youth he was an avid soccer player and a supporter of

Orlando Pirates.

He has served the University in a number of structures, such as House Committee member in 2008; a member of the UKZN Soccer team between 2006 and 2007, and the first elected Student Representative Council President (Westville Campus) after the merger in 2006 – 2007.

He participated in student politics at the former University of Durban-Westville where he joined SASCO and the ANCYL. He was elected as a Gender Officer in SASCO, the Deputy Chair of the ANCYL in the branch and served as a member of the House Committee at Killarney and Coastlands residences simultaneously. The highlight of his years in student politics was when he was elected to serve as the Deputy Chairperson of SASCO in KwaZulu-Natal under the leadership of Sammy Mashita, current Convocation representative on Council.

Advising current and upcoming student leaders he said: 'Student leaders must focus on what matters the most for students and that requires research capacity building, and also good working relations with the Dean of Students as well as the University community.'

'It remains important not to corrupt so that when you argue, you remain unshaken. Student leaders must also look into the issue of sitting on tender committees, whether it's a strength or weakness for them. But one thing for sure is that nobody can defend and represent students better than students themselves.'

Today's SRC now has several opportunities to lead by positive example in achieving their goals.

Communication, he believes, is the key.

Message from the Alumni Relations Team



From left: Mr Finn Christensen, Mrs Fikisile Mabaso, Ms Desiree Govender and Mrs Esmé Estrice.

In 2012 the Alumni Relations Office established and maintained relationships between the University of KwaZulu-Natal and our alumni – the University's largest stake-holder group. The number of alumni currently communicated with stands at 114 242 (106 964 within South Africa and 7 278 internationally). We have a total of 32 088 email addresses for these alumni – an increase of almost 5 000 email addresses since December 2011 – and encourage all alumni to please provide our Office with their email addresses.

A variety of events co-ordinated both locally and internationally have been attended by a total of almost 17 800 alumni. Relationships have been built with graduates with whom the University previously had minimal contact through the organising of contemporary and popular events. The demographic profile of the graduate attendees at events has changed dramatically and now represents the current demographic profile of the University. The attendance and support of young graduates at Workshop Programmes assists these recent graduates with essential life/career-skills required for their career development. This creates a foundation for a long-term bond between alumni and their *alma mater*.

The formation of eight Student Chapters comprising students from a particular Faculty or School – who share a common or similar career path – were established in 2011 and continued in 2012. These Chapters are intended to assist students with networking opportunities, skills development, career prospects, provide a forum for discussion with UKZN graduates from the field and a channel to express concerns about issues pertaining to their future plans. In addition to the benefits to students, it is hoped that the Chapters will further the general development and promotion of the University through

student input and advice and encourage students upon graduation to maintain close links with the University.

New initiatives – such as the pre-release screening of films in Durban and Pietermaritzburg and the Richards Bay Alumnus Lunch were very popular and all were well attended. A UKZN graduate Mentorship Scheme – piloted in the UK – commenced in 2012 and is aimed at assisting/supporting UKZN graduates who wish to relocate to study in the UK. The UK Mentorship Scheme has mentors who are all UKZN graduates now permanently based in the UK. Additional information on the Scheme is included in this publication.

The above events – together with the joint Alumni Relations/UKZN Foundation events including a number of international events held in the UK, Australia and the USA – significantly contributed to building good relationships with alumni and in providing a sound platform for the fund-raising endeavours of the UKZN Foundation. In addition to the events, we have interacted with alumni via a variety of media strategies including email and postal communication, the alumnus publication *UKZNTouch*, the bi-monthly electronic newsletter, the updated and interactive Alumni website, Facebook and Twitter and through information packages distributed at graduations.

A further electronic development/initiative implemented is 'Find-a-Friend'. This initiative allows a graduate to make contact with a fellow graduate via a specially designed portal linked to the Alumni Database and has become very popular – especially amongst our internationally-based alumni.

A new Convocation Executive Committee was elected at the Convocation Annual General Meeting in May 2012 and we wish them well with their portfolio. We also want to thank the former Convocation Executive for their commitment and contribution during their term of office. Information on the Convocation Annual General Meeting and the Convocation Executive Committee is included in this publication.

In 2013 – a number of events and activities will be co-ordinated. Of significance are two important reunions which will take place in April and these are a 'Medical Graduate' Reunion and a 'Music School' Reunion. Information on these reunions is also included in this publication.

Finally, we request all alumni to update their contact details on a regular basis and to provide us with their email addresses.

We look forward to the possibility of meeting you in the near future and welcome suggestions on how we can build lasting relationships with you.

With our very best wishes

The Alumni Relations Team

UKZN Extended Learning (UEL)

Simon Tankard

The CEO of UKZN Extended Learning, Mr Simon Tankard, is upbeat about opportunities to meet the practical development needs of individuals and organisations across sectors and markets: 'Our priority is to provide relevant education that has direct impact in addressing multiple needs - particularly in the context of Africa as a dynamic, developing region of significant importance to the globe's long term economic growth and sustainability.

'We aim to achieve this by providing a world class portfolio of short courses and career development initiatives that are relevant and that meet the practical needs of individuals and organisations, underpinned by the substantial academic research, teaching and learning resources and capability of the University of KwaZulu-Natal,' said Tankard.

Delegates attending courses with UEL may be members of the public who wish to study a subject for personal development or out of general interest, professional



Ms Caroline Harben, Chairperson: UKZN Alumnus Association in Europe, and Mr Simon Tankard, CEO: UKZN Extended Learning, met in Oxford, England in August 2012 to discuss possibilities in education.

practitioners and members of business organisations who wish to increase their knowledge and competency, or employees of organisations in the public sector or the community tasked to work on specific projects.

UEL's courses can last from one day to several weeks and UEL also travels to different geographic locations to meet the learning and development needs of

partner clients.

Open courses cover a wide range of subjects and skills areas, including general management, finance, leadership and governance, and nutrition science, and are offered to prospective delegates from business, the public sector and the community.

In addition, UEL works closely with corporate clients to understand their specific needs and people development requirements and to develop customised courses that provide experiential, active learning opportunities intended for delegates to have a direct immediate impact on their return to their organisations.

UEL extends a warm invitation to alumni of UKZN to contact us to discuss your specific requirements and suggestions across learning and development areas of importance to you and your organisations.

Tankard can be contacted directly via email at: tankard@ukzn.ac.za

Leadership and Project Management Workshops

Sithembile Shabangu

UKZN's Alumni Relations Office hosted a two-day leadership workshop followed by a two-day project management training workshop for the University's April 2012 graduates and graduates from other institutions.

The workshops on the Westville campus were designed to provide leadership and project management skills to alumni to use in the corporate world. The range and diversity of participants proved the workshops appeal to not only recent graduates but also to older, experienced graduates.

Participants included business owners, professors, recently employed graduates, postgraduate students, engineers, contractors and aviation industry representatives from all over KwaZulu-Natal.

The workshops were facilitated by Ms Vani Moodley, an internationally accredited trainer with extensive experience in South Africa and Africa.

In the project management workshop, graduates learned about a range of skills needed to create a successful project plan. Areas discussed included establishing and leading a good team, communication, structures of a project plan, understanding the lifecycle of a project and a range of issues



affecting project managers.

A variety of activities encouraged teamwork and communication while there was also an opportunity for the alumni to network.

'These workshops assist in building long lasting relationships between the University and the graduates - many of whom are starting out on careers which require skills such as project management and leadership,' said Alumni Relations Manager, Mr Finn Christensen.

The workshops, held annually, have previously included topics such as CV writing, interview skills, entrepreneurship, project management and leadership. Alumni Relations welcomes suggestions from graduates on other workshop topics.

New UKZN Convocation Executive

Sithembile Shabangu

New UKZN Convocation Executive Committee members were elected at the Convocation's recent Annual General Meeting on the Westville campus attended by more than 130 alumni.

This is an institutional event organised by the Alumni Relations Office of the Corporate Relations Division and the voting process is administered by the Registrar's Office.

Mr Fanle Sibisi was elected as the new Convocation President while two Council representatives and six Convocation Executive members were also elected.

Guest speaker, UKZN Vice-Chancellor and Principal, Professor Malegapuru Makgoba, urged Convocation members to give back to the University. 'UKZN's alumni have the loyalty and devotion to create scholarships for our students in desperate need to obtain a Higher Education qualification. Our country needs engineers, accountants, doctors and scientists among others. You can do it,' said Makgoba.

He reminded the audience that Convocation was the largest stakeholder grouping at the University (UKZN has over 115 000 alumni) and was an important voice to change the future of the Institution.

Makgoba outlined the history of the University and thanked individuals and the families who had made and continued to make donations to the University. He said each campus had its own rich history to relate.

He acknowledged Mr TB Davis who donated a substantial sum of money in memory of his son Howard to construct the Howard College building; missionaries Mr Alan Taylor and Mr James McCord who fought tirelessly to establish the Medical School; the Joosub Family Trust which made a generous donation towards the development of the Westville campus, and the Campbell family who bequeathed the family home and the Killie Campbell Library with priceless collections and the best African art collections in the southern hemisphere.

Former Convocation President, Mr Sandile Ngcobo, extended his thanks to Convex and the University stakeholders for the



From left, back: Aubrey Mbona, Joy Ndlovu (Vice-President of Convocation), Fanle Sibisi (President of Convocation), Bandile Xaba and Sammy Mashita (Convocation Representative on Council) and Front: Sibusiso Gumbi, Bavelile Hlongwa, Thembeke Dlungwane (Convocation Treasurer), Thokozani Magwaza (Convocation Representative on Council), and Sifiso Mncube.

valuable support during his term of office. 'I thank you from the bottom of my heart. You have helped me grow in my leadership position,' he said.

The New Convocation Executive Committee comprises the following members:

- Mr Fanle Sibisi (President and Chair of Convocation)
- Mr Thokozani Magwaza (Convocation Representative on Council)
- Mr Sammy Mashita (Convocation Representative on Council)
- Ms Thembeke Dlungwane (Treasurer)
- Mr Sifiso Mncube
- Mr Sbu Gumbi
- Ms Joy Ndlovu (Vice-President)
- Ms Bavelile Hlongwa
- Ms Bandile Xaba
- Mr Aubrey Mbona (Support Staff Representative on Convex)
- Professor Delia North (Senate Representative on Convex)



From left: Attending the movie premier were newly-elected Convocation President, Mr Fanle Sibisi, Mr Gordon Druce, Mr Finn Christensen and Ms Ann Druce.

MOVIE PREMIERE FOR ALUMNI

Melissa Mungroo

More than 270 alumni accompanied by partners and family members attended a premiere of the movie *Friends with Kids* as guests of UKZN's Alumni Relations Office.

Alumnus Ms Julie-May Ellingson, CEO of Durban's ICC, was among the guests. 'This event is a good way for alumni to keep in touch with their *alma mater* and old friends. And I'll definitely be coming to the next one,' said Ellingson, who holds a Masters degree in Town and Regional Planning from UKZN.

Ms Esme Estrice of the Alumni Relations Office said the events provided alumni with a chance to interact with colleagues.

'It is a good way of networking with our alumni and provides an opportunity for us to update alumni on their *alma mater* through information packages and a verbal update at the venue.'

Law Student Chapter Meetings

Thandiwe Jumo

Law students aiming to be prosecutors were informed about the career – and in particular the Trainee Prosecutor Programme - during Law Student Chapter meetings held on the Pietermaritzburg and Howard College campuses.

The goal of the two events was to give students an opportunity to engage with legal representatives about skills development, career prospects and other opportunities available to them once they obtained their qualifications and joined the work force.

The meetings were co-ordinated by the Alumni Relations office of the Corporate Relations Division (CRD) and were attended by a total of about 280 students, a Convocation Executive member and staff from both the School of Law and CRD.

Guest speakers from the National Prosecuting Authority (NPA), Senior Public Prosecutors Ms Roshela Benimadho and Ms Xoliswa Ndozana, briefed students on the Aspirant Prosecutor Programme offered by the NPA. The prestigious programme offers 200 candidates prosecutor training annually.

Ndozana warned students of the gruelling selection process. 'We only accept 10 candidates for each centre (there are 20 centres in South Africa) because the tutor has to be able to



Public Prosecutor, Ms Xoliswa Ndozana and Director of University Relations, Mr Len Mzimela, addressing students during the Law Student Chapter meeting.

give each candidate individual attention. We will equip each candidate with basic and practical skills on how to interpret and understand Statutes. I have been with the NPA for 22 years and I can tell you that law is not a stagnant career,' she said.

The impressive turn out at both events was an indication that students are keen to find out about opportunities open to them and to discuss their future plans.

Alumnus and donor gathering in Cape Town

Finn Christensen



The Alumni Relations Office co-ordinated an alumnus and donor get-together in Cape Town on Saturday, 17 March.

The annual event took the form of a three-course dinner at the Vineyard Hotel in Newlands which provided an ideal opportunity for the 58 alumni, donors and friends of UKZN who attended to renew old acquaintances and meet fellow alumni.

Guests were updated on developments at their *alma mater* through thought-provoking and informative talks given by Ms Nomonde Mbadi: Executive Director of Corporate Relations, and Professor Renuka Vithal, Deputy Vice-Chancellor: Teaching and Learning. Guests received information packs containing a selection of University publications and a corporate gift. A similar event took place in Johannesburg in May for all Gauteng-based alumni and donors.

Gauteng Alumnus Lunch



Finn Christensen

Graduates from UKZN and the former Universities of Natal and Durban-Westville as well as donors/friends of the University attended the annual alumnus/donor lunch meeting in Parktown North in Johannesburg on Sunday, 13 May.

The event brought together alumni of all age groups and professions and enabled those living in both the Johannesburg and Pretoria areas to attend. In addition to alumni, the UKZN Foundation invited several friends/donors of the University to the lunch.

The lunch, organised by the Alumni Relations Office, provided an opportunity for alumni to meet old friends, network, share experiences of their university days and to receive information on their *alma mater*.

The guest speaker at the event was Deputy Vice-Chancellor: Teaching and Learning, Professor Renuka Vithal, while Executive Director of Corporate Relations at UKZN, Ms Nomonde Mbadi, provided an update on activities at the University. Guests received information packs which contained a range of University publications and information sheets.

ALUMNUS ASSOCIATION GATHERING IN LONDON

Finn Christensen

The annual function of UKZN's Alumnus Association in Europe – attended by 75 people – was held at the bright and conveniently situated Bankside Gallery overlooking the River Thames on 5 September. The venue was a change from the traditional venue of South Africa House which was unavailable due to a 2012 Paralympics function.

Guest speaker Professor Brenda Gourley, former Vice-Chancellor of the Open University and of the former University of Natal, spoke on 'Trends in Higher Education.' The audience found her talk most informative and asked a wide range of questions.

Ms Nomonde Mbadi, Executive Director of Corporate Relations, and Mr Fanle Sibisi, President of Convocation, also addressed the gathering. Ms Mbadi welcomed everyone on behalf of UKZN and provided an update on the University. Mr Fanle Sibisi spoke on the



From left: Mr Len Mzimela, Professor Brenda Gourley (Guest Speaker), Ms Nomonde Mbadi and Mr Finn Christensen.

importance of Convocation and outlined the plans the Convocation Executive had for their term of office.

South African canapés and drinks were served after the talks and guests were able to network and catch-up with fellow graduates. Folders with the latest UKZN information were distributed, allowing attendees to read about their *alma mater* at their leisure.

Alumnus lunch in Richards Bay

Finn Christensen

An alumnus lunch, organised by UKZN's Alumni Relations Office, Corporate Relations Division, was held at the Protea Hotel Waterfront in Richards Bay.

The lunch was organised for alumni and friends of the University as a reunion, networking and information sharing opportunity. It also provided an ideal opportunity for alumni to meet some of the recently-elected Convocation Executive members, including the President and Chair of Convocation, Mr Fanle Sibisi.

Promoting the University's ongoing interventions, developments and achievements, Director of University Relations and Marketing Support, Mr Len Mzimela, updated guests on the latest developments at the University and the many activities/projects undertaken to promote relationships as well as highlighting the numerous achievements of the University.

The main address was presented by the Dean and Head of the Graduate School of Business and Leadership, Professor Stephen Migiro, who gave a comprehensive overview of the new programmes available at the Graduate School of Business and Leadership.

Migiro emphasised his willingness to engage with business and students to make studying at the University more accessible to those from outside the Durban area and who had very busy schedules.

The event was well received by the 54 alumni who attended and will continue to be an annual event on the Alumni Relations calendar.

Sydney alumnus/donor event

Bruno van Dyk



The purpose of the event in Sydney was to reconnect with UKZN graduates in an attempt to begin cultivating relationships with alumni in Australia.

A short talk was given at the meeting by the Executive Director of the UKZN Foundation, Mr Bruno van Dyk with questions being fielded by the Executive Director of UKZN Corporate Relations, Ms Nomonde Mbadi. It was highlighted that the University is among the leaders in South African Higher Education in terms of research and inclusion in the top 500 universities in the world, being one of only four African

universities included in this category.

It was also mentioned that 8 832 under-graduate and post-graduate students graduated at ceremonies held in April this year – 62% being women. Of these graduates, 371 graduated *cum laude* or *summa cum laude* of which 58% were women.

Ms Ruth Thornton and Ms Lenore Plummer helped the University arrange the event, contacted and found 'lost alumni' and generally did all that was necessary to ensure a successful outing. UKZN is extremely grateful for their continued interest in the University's work and the offer of ongoing commitment to growing the presence of UKZN among its many Australian-based graduates.

The University looks forward to increasing its presence among graduates in Australia over the next few years and to interacting more closely with them in the future!

Class Notes

Keeping in touch!

1950s

ROBIN LEE - BA'59, BA(Hon)'60, PhD(Arts)'71

Robin studied at the Pietermaritzburg Campus from 1957-1960 and taught at schools in London in 1961-1962. He lectured in English at Wits from 1963-1971, receiving his PhD degree in 1971. In 1971 Robin established the Educational Technology Unit at Wits. He left the university in 1974 to work on teacher upgrading projects in rural black primary schools. In 1977 he joined the Urban Foundation and remained there until 1986, holding the post of Managing Director from 1983 onwards. In 1987 Robin was a Visiting Scholar at Harvard Business School and from 1988 to 1990 he established and worked at the Centre for Policy Studies. After five years as an independent development consultant, he was invited in 1996 to take the position of Dean of the Faculty of Management at Wits. He retired in 2000 and now resides in Hermanus, Western Cape. Email: robinlee@hermanus.co.za

1960s

MICHAEL J P MILLER - BSocSc'69 (Psychology and Statistics)

Michael graduated at the former UND in 1969 before joining Unilever in Durban as a Trainee Manager. He subsequently enjoyed a corporate career with several British and American multinational corporations over the next 25 years rising to the level of Marketing Director and Managing Director in South Africa, the United Kingdom and beyond. In 1997 he established Sapro in South Africa and the UK which led to the launch of The South African Shop retail and online businesses in the UK. Having sold the retail and online businesses last year, his team is about to launch new e-commerce sites specialising in South African products and services. Email: mike.miller@sapro.co.uk

1970s

DERRICK OOSTERHUIS - BSc(Agric)'70

Derrick is a Professor in the Department of Crop, Soil, and Environmental Sciences, University of Arkansas, Fayetteville - He was

awarded the 2011 'Werner L. Nelson Award' by the Fluid Fertilizer Foundation at their annual meeting in Scottsdale, Arizona, February 20, 2012. The award recognises outstanding contributions in the development of soil fertility practices and plant nutrition management to increase crop yields for the benefit of the North American farmer and consumer. Derrick holds an Endowed Chair in International Crop Physiology and is a fellow of the Crop Science Society of America and the Agronomy Society of America. Email: oosterhu@uark.edu

LIN GRAVELET-BLONDIN - BSc'73, BSc(Hon)'74

Lin completed his BSc(Hons) Chemistry in 1973 at the Pietermaritzburg Campus and then started his working life in Windhoek for the Department of Water Affairs. After some three months he was transferred to Pretoria and spent most of his time doing research: analytical water quality chemistry including publishing two papers. In 1980 Lin transferred to Durban and was mainly involved in water pollution control, waste and waste water, effluent management, emergency incident management and contaminated land remediation. During the nineties he took over management of this section and was involved in the drafting of the National Water Act including representing the Department on a number of committees/investigations both locally and overseas. In 2009 he retired from the Department and now has his own consulting business dealing with much of the same issues. Lin would like to hear from fellow graduates from the same third and Hons year. Email: wlc@burst.co.za

MARTIN MALDEN - BA'76

Martin lived in the UK for 16 years working first in the Financial Services industry, ending up in the City of London during the 'Big Bang' developments, and then mobile telecoms when cellular was first introduced. After setting up a small telecoms consultancy in the UK, he moved to Hong Kong in January 1995 for a three-month project - and 17 years later he is still there. He now has his own company designing websites and still does consultancy projects in the telecom industry.

Martin avidly follows Formula 1, the Super Rugby, Tri-Nations and 6-nations Tournaments. Email: martin_malden@yahoo.com.hk

GILLIAN MCLAREN (NEÉ COETZEE) - BSc'76, HEd (PG)'77

Gillian is a travel writer, based in Johannesburg. She is married to Professor Grant McLaren and has a son in first year BSc at UCT. www.gillianmclaren.blogspot.com Email: elizabethm@mweb.co.za

GERALDINE GEORGIA KRAUSE (NEÉ BRUSS) - BA'77, BA (Hon)'78, MA'81

Geraldine now resides in Göttingen, Germany, working as a freelance Business and General English trainer mainly at the University of Göttingen as well as at the Adult Education Centre and at various international companies based in Göttingen. Email: geraldinekrause@gmx.de

JEROME TRURAN - BSc'78, BSc(Hon)'83

After High School at St John's College, Johannesburg, Jerome chose to study on the Pietermaritzburg Campus, because that is where the white water of South Africa is [what better reason for choosing one's institution of tertiary education] and therein lies his life story. He turned down vet school at Onderstepoort and left the country to paddle competitively before he got too old! Jerome has had great experiences racing and doing expeditions all over the world and it gave him two of life's great gifts - health and friends. He lives on Vancouver Island, just off the SW tip of Canada, in Victoria, British Columbia. Jerome is on Facebook and for the 'old school' there's always email. Email: jerometruran@shaw.ca

1980s

JOHAN VAN ZIJL - PhD(Ed)'80

Johan worked in the fields of psychology and education. He and his wife Annemarie (BSc(Hons)'82) live in McGregor in the Western Cape and run a charity which provides a safe home for aged, abused and rescued donkeys. Eseltjesrus Donkey Sanctuary www.donkeysanctuary.co.za also provides support, advice and rehabilitation to donkey owners across the country, often in poverty-stricken areas where the donkey is the sole

means of support.

E-mail: johan@donkeysanctuary.co.za

THAVRIN MANICKUM - BSc'86, BSc(Hon)'87, PhD(Sc)'93

After a short period of employment as a Chemist at Fine Chemicals, Cape Town (1994-1996), Thavrin was employed as a Medical Scientist at Chemical Pathology, IALC Hospital, Durban, from 1997-2007. He is currently employed as Senior Scientist at Umgeni Water, Pietermaritzburg, since March 2008 and has recently published articles in prestigious journals, like: *Journal of Chromatography B* and *Hydrology: Current Research*. He has also obtained the B Min degree (*cum laude*), from Calvary University through part-time study in 2010, and is also Administrator/Lecturer of the Ephesus Bible School, at Ephesus Church, Northdale, Pietermaritzburg. He has received various awards and nominations from the American Biographical Institute, United Kingdom and his Biography will appear in *Marquis Who's Who in the World 2012* (29th Edition). Email: Thavrin.manickum@umgeni.co.za

MARTIN MILTON - BA'86

Martin lives in London. Since getting his BA degree from UKZN in 1985 he received his BA (Hons) Degree from UNISA, and MA from Antioch and DPsych from City University London. He is a practising psychologist and psychotherapist with an appointment at the University of Surrey, Guildford UK and a practice in SW London. His first edited book *Therapy and Beyond: Counselling psychology contributions to therapeutic and social issues* (2010) published by Wiley Blackwell and his second *Diagnosis and Beyond: Counselling psychology contributions to understanding human distress* has just recently been published by PCCS books. Email: martin.milton@blueyonder.co.uk

PHILIP A. (TONY) DONOVAN - MAgricMgmt'87, PhD(Agric)'90

Philip has had his 'Writing & Presenting Papers & Reports for Scientists & Technologists' published online by the South African Sugar Technologist Association. Email: tony@sybaweb.co.za

Class Notes is a collection of short biographies sent to us by alumni from all over the world, highlighting their personal and professional achievements. Through these notes, alumni keep in touch and find old friends.

ROBERT MCCULLOUGH - BCOM'87, LLB'89

Robert was a magistrate from 1993 until 2008, thereafter immigrated to Vancouver, Canada. He was called as a Barrister and Solicitor and is In-House counsel for the Insurance Corporation of British Columbia. He is married to Shelley (née Common) BA'88, BA(Hon)'89, HDE'91. Shelley taught at Port Shepstone Senior Primary School, Kokstad Primary school, Pietermaritzburg and Laddsworth Primary School (Hilton). She was Head of Department of Senior Primary and was also Acting Principal at Laddsworth. She now teaches at Lions Gate Christian Academy in North Vancouver. Robert and Shelley have two children Nicholas (15) and Robyn (12). They welcome contact with old friends. Email: rmccullough@shaw.ca

1990s

DUDU MSOMI - BA'92, BA(Hon)'93

Dudu is founder and Chief Executive of Busara Leadership Partners, a research-orientated strategic advisory service and consulting company whose competence and expertise are leadership, governance and strategy. Dudu's experience spans diverse industries such as retail, advertising, financial services, consulting and professional services. In addition to the qualifications received from UKZN, Dudu has a postgraduate diploma in Advertising and Marketing (AAA School of Advertising); postgraduate diploma in Corporate Governance (RAU); Programme for Management Development (GIBS) and a Masters in Business Administration (GIBS). Email: dudum@busaraleadershippartners.co.za

ANDREW COOPER - BSc'93 Eng (Electrical)

Andrew and his wife, Kim, recently moved to Kamloops, British Columbia, Canada. He is working as a Energy Specialist with New Gold at the New Afton Mine. Email: andrew.cooper@newgold.com

CHARMAINE SCHWENN - BA'93, LLB'95

Charmaine is a partner at the law firm Tate, Nolan & Knight and was Chairperson of KZN Women in Business 2010 - 2011. In 2011 she was recognised for her role in developing and growing the company and for contributing to the upliftment and empowerment of women, being awarded first place in the legal category of South Africa's Most Influential Women in Business and Government Awards. She was headhunted by Tate, Nolan & Knight Attorneys in 2001, becoming a director in 2007, and partner in 2009. Charmaine has twice been a finalist in the Business Women's Association Regional Business Achiever Awards - Professional Category (2008 and 2010) and in 2009 was a finalist in the Feather Awards, Courageous Woman Category. Email: charmaine@tnk.co.za

COLIN MARX - AdvDip'96(AdEd), B.SocSc'89, BSocSc(Hon)'90, MTRP'92

Colin is a Lecturer in Land Planning and Management in the Global South at the Development Planning Unit, University College London. Email: c.marx@ucl.ac.uk

ZAMA MADLALA - BSocSc'98, BSocSc(Hon)'99

Zama is a talent Manager and an HR Practitioner for African Rainbow Minerals. She has a passion to make a positive change to communities and South Africa at large. Email: zama.madlala@arm.co.za

2000s

ELSA TSILIMIGRAS (NEÉ DUPEN) - BSc'05 (Statistics and Economics) Cum Laude, BSc'06 (Hon) (Statistics) summa cum laude

Elsa is married and lives in Durban North. She works as a Location Planner for Massdiscounters (Game and DionWired Head Office). Massdiscounters which falls under the Massmart stable has recently been acquired by Wal-Mart, so she now works for the 'largest company in the world'. Email: ElsaT@mdd.co.za

Contacts and Social Media Links

FACEBOOK AND TWITTER



Please join us on these popular Social Networking sites. If you are not already a member, sign up now and connect with the University of KwaZulu-Natal Alumni Relations Office where you can make contact with fellow alumni and keep up to date with all the latest news, forthcoming events and information on your *alma mater*.

Facebook: <http://www.facebook.com/pages/Durban-South-Africa/UKZN-Alumni/100665579978579>

Twitter: <http://twitter.com/UKZNAumni>

FIND-A-FRIEND



Find-a-Friend allows you to locate and contact fellow alumni - to access this system, please visit: <http://un.kidzafrica.co.za/FindAFriend>

CAREERS

The Alumni Relations Office is delighted to provide a career 'Super-Highway' for our alumni, between yourselves and the top companies in South Africa. This portal will provide current high profile jobs and career opportunities for you to consider, and apply directly to: Go here to view the careers webpage - <http://alumniaffairs.ukzn.ac.za/Careers/careers.aspx>

KEEPING IN TOUCH

Provide the Alumni Relations office with 10 email addresses of UKZN alumni that are not on our database and we will send you a UKZN mug. Email: alumni@ukzn.ac.za

CONTACT



Alumni Relations Office:

Phone: +27 (0) 31 260- 2958/2016/2947/2823

Fax: +27 (0) 31 260-3265

Email: alumni@ukzn.ac.za

Web Address: <http://alumniaffairs.ukzn.ac.za>

YES... THAT'S RIGHT... A UNIVERSITY OF KWAZULU-NATAL CREDIT CARD FOR ALUMNI OF THE UNIVERSITY!

Would you like all of the advantages and convenience of an ABSA Silver or Gold Credit Card and to be able to show allegiance to the University of KwaZulu-Natal at the same time? To support your University, ABSA will pay a percentage of the total turnover on your UKZN Credit Card back to the University, at no cost to you.

The UKZN Credit Card could be the right choice if you:

- Earn an income of R4 000 or more per month
- Would like to show your loyalty to your university

Apply now at any ABSA branch, online: www.absa.co.za, call 0861 11 44 11 or sms your "name, surname, SA ID number and KZN" in the following format to 35435: name'surname'id number*KZN. Example: john'smit'7234455564311*KZN





You and your spouse/partner are cordially invited to the

*Reunion of
Music Graduates and Staff*
(with live musical entertainment and guest speakers)

hosted by
University of KwaZulu-Natal's
Alumni Relations Office and School of Arts: Music

Date
Friday, 12 April 2013

Time
18:00 for 18:30

Venue
Centre for Jazz and Popular Music (CJPM)
(Shepstone Level 3, Howard College Campus)



Cost
R150.00 per person
(Includes a three-course dinner and selected drinks)



Seating is limited, early booking is advised
RSVP by Monday, 28 January 2013 to Esmé Estrice on

Tel: 031 260 2016
Email: estrice@ukzn.ac.za

INSPIRING GREATNESS

**UKZN UNB MEDICAL
SCHOOL REUNION:
5-8 APRIL 2013**



This reunion is open to all graduates of **UKZN UNB Medical School** including the teachers at Medical School, Post-Graduate Students and former staff of the Alan Taylor Residence

The reunion will take the form of a sea-cruise on the Sinfonia from **5-8 April 2013**.

Arrangements, Bookings and Payments: The Reunion Committee has now settled on a company which will co-ordinate all activities with respect to the reunion. Please contact this company to make all your arrangements, bookings and payments.

Name of Company: Africa on the Move. Contact person: Claire
Contact details: Tel: 031 767 9516, Cell: 082 8187 592,
Fax: 086 6590 584 or e-mail: claire@africonthemove.co.za

For more information on the reunion, Sinfonia or bookings, please contact: Dr M F (Faruk) Mahomed (Chairperson - Reunion Committee). Email: adminmfm@medis.co.za or mfm@medis.co.za
Tel: 031 902 2798/ 031 902 9740, Fax: 031 902 5732 and
Cell: 083 2311 137.

Facebook: <http://www.facebook.com/groups/274654905936755/>

Mentoring scheme for new **UZN** alumni arriving in the UK

UKZN's Alumnus Association in Europe has launched a scheme to mentor new alumni from the University who arrive in the United Kingdom and need assistance with settling in.

Discussing the arrangement, Chair of the association, Ms Caroline Harben, said: 'I have long wanted to get this scheme off the ground. Anyone living here knows how difficult it is when first arriving in the country to find out what you need to know to get settled. Obviously this applied at one time or another to all UKZN alumni and it seems obvious to me to try and harness the knowledge of others to help new arrivals.'

The scheme will be piloted this year by four mentors – Harben and three volunteers, Ms Zeena Mansoor, Ms Sebenzile Dlamini and Mr Dave Koltz – with progress being reported on at the next Annual Meeting of the association in the UK.

Alumni wanting to make use of the service need to register with the UKZN Alumni Relations office in Durban which will forward details to the UK.

The free mentoring service will comprise telephonic contact with a mentor for a period of about three months with advice being given on basic issues such as tax, the NHS, immigration, transport and banking. It is not designed to substitute professional advice but will help identify where advice may be needed.

Anyone wanting to use the service should contact the Alumni Relations office at alumni@ukzn.ac.za

Please see registration form on the following page.

*With our very best wishes
The Alumni Relations Team*

REGISTRATION FORM

UKZN ALUMNUS ASSOCIATION IN EUROPE • NEW ARRIVAL MENTORING SCHEME IN THE UK

Date: / /

To: Alumni Relations Office, UKZN, Durban (alumni@ukzn.ac.za)

I would like to apply to join the New Arrivals Mentoring Scheme in the UK, and agree to the conditions contained in the guidelines as described below:

I recognise the need to be registered and submit the following information in support of my application:

Full Name: _____

ID Number: _____

Current Address: _____

Years of Attendance at UKZN: _____

Campus:

Potential date of arrival in the UK: _____

Signature: _____

(Signature required as agreement to guideline conditions).

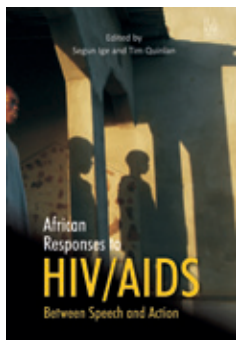
Date: _____

GUIDELINES AS TO HOW THE SCHEME WILL WORK

All people wanting to avail themselves of the scheme need to register through Durban – to check their credentials and veracity. Thereafter, once they have been registered, the Alumni Relations Office in Durban will forward details of how to contact the Chairman of the UK Alumni Association, along with some details of circumstances – form to be supplied.

- Once they have contacted the Chairman, and sent in their form, each person will be allocated to a mentor based in the UK and advised of the name and email address of the mentor.
- We expect that most of the mentoring will take place on the telephone.
- Each mentee will be entitled to a three month time period for a maximum of six phone calls. Each phone call should be set up prior to the call (by email), so that the mentor is aware of the requested call.
- No financial arrangements can be entered into for the provision of such a service. The service is provided free of charge and will be done by volunteer UKZN alumni living in the UK.
- The content of the service will depend on the needs of the mentee
- e.g. if s/he needs to know how to get registered with a doctor, apply for a credit card, know who to contact regarding jobs in his/her field, etc.
- The mentor may, but is not obliged to, provide contact details of any person in the UK. The service is designed to help the mentee help him/herself with guidance from a local person who has been through the same experience.
- The broader network of alumni may become an asset (in the form of a data base of specialists willing to be contacted for guidance) for new arrivals, once the scheme is up and running. The management of the scheme will include retaining details of those experts in one field or another. Alumni will be urged to volunteer to help in their own field, and be willing to be contacted by mentees if the field of specialisation is appropriate.
- The mentoring will cease immediately if the mentee requests money for any purpose whatsoever from the mentor.
- Termination of the service is at the discretion of either party and can take place at any time.
- The mentee is required to respect the privacy of the mentor by phoning only by arrangement. This should be done either by email or by pre-arrangement when on a mentoring call. No call can be made spontaneously.
- We will ask the mentees for feedback at the end of the service so that the service can be improved for future mentees.
- The service will remain strictly confidential, unless the mentor is given permission to discuss some issue with a third party, e.g. UKZN Alumnus Chairman, etc.

On the Bookshelf



AFRICAN RESPONSES TO HIV/AIDS Between Speech and Action

Edited by **Segun Ige** and **Tim Quinlan**

This collection of essays provides a provocative critique of leadership on HIV/AIDS in Africa since the 1980s to the present. It examines the rhetoric on HIV/AIDS which has influenced culture and behaviour, service delivery, policy, the design of national interventions and the varied success of different countries in containing the pandemic. African scholars put into context a host of public and scholarly disputes ranging from AIDS exceptionalism and Thabo Mbeki's 'denialism', to the racist debates on 'African promiscuity' and the recent revival of assertions that homosexuality is not an 'African' behaviour. The text refers to the record of governments in a wide range of African countries with case studies drawing on the rhetoric of governments and the nature of government leadership in South Africa, The Gambia, Morocco, Zambia and Ethiopia and the African Union's declarations on HIV/AIDS.

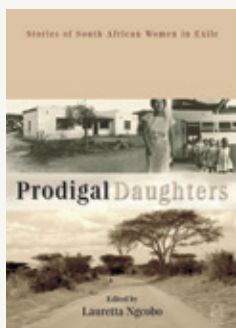
What emerges is that the rhetoric is diverse, occasionally logical and effective in terms of informing systemic HIV/AIDS interventions that improve the welfare of people, and sometimes it is contradictory to the point of absurdity.

Segun Ige has a PhD in philosophy from the University of Natal, Durban, specialising in rhetoric and gender. He is currently Consultant/CEO, JOI Consulting, a rhetoric and speech communication consulting firm in Cape Town.

Tim Quinlan was the Research Director of the Health Economics and HIV/AIDS Research Division (HEARD) at the University of KwaZulu-Natal from 2002 to 2010. He now works independently as well as holding a part-time research post at the Athena Institute, Free University, Amsterdam.

Contributors: Ademola Ajuwon • H. Russell Bernard • Judith Flick • Fatima Harrak • Segun Ige • John Lengwe Kunda Shauna Mottiar • Paul Nchoji Nkwi • Stella Nyanzi • Warren Parker • Tim Quinlan • Getnet Tadele • Keyan G. Tomaselli.

Available from the University of KwaZulu-Natal Press.



PRODIGAL DAUGHTERS Stories of South African Women in Exile

Edited by **Lauretta Ngcobo**

During the years of apartheid rule in South Africa, many women 'skipped' the country and fled into exile to evade harassment, detention, imprisonment and torture by state security forces. Leaving the country of their birth, many took calculated, though dangerous, risks to cross borders. Once in exile, sometimes for several decades, many experienced discrimination, danger, deprivations and the stresses associated with being a foreigner in a strange land. All lived with the distant yet distinct hope that they would one day be able to return to a liberated homeland.

In *Prodigal Daughters*, 18 women tell their intensely personal stories of exile, re-imagining and reliving a past for the sake of fixing in memory narratives that would surely disappear in a country still struggling to shake off the shackles of racial inequality and oppression. Stories of being accepted or rejected in host countries, and equally stories of homecoming, read like bittersweet memories of survival, longing and intrigue. For many of these women,

a life in exile enabled their growing realisation that apartheid was just one facet of oppression in the world. It connected with much broader struggles for justice and human rights.

South Africa has yet to fully appreciate the memories and records of life experienced in that 'desert of exile', experiences that have helped society become what it is today.

'It was in exile that I discovered, fell in love with and was loved by the African continent.' — Brigalia Hlophe Bam

'What exile did for us was to help us formulate that space which can truly be called home.' — Baleka Mbete

Lauretta Ngcobo returned to South Africa in 1994 after thirty-one years in exile. She is the author of two politically inspired novels, *Cross of Gold* and *And They Didn't Die*. Lauretta was the winner of the literary lifetime achievement award from the South African Department of Arts and Culture in 2006 and the winner of the Order of Ikhamanga from The Presidency of South Africa for excellent achievement in the field of literature in 2008.

Available from the University of KwaZulu-Natal Press.



DUSI KING IS PMB CAMPUS 2012 SPORTSMAN OF THE YEAR

Winner of the 2012 Dusi Canoe Marathon and the Non-Stop Dusi, Andrew Birkett, is UKZN's Pietermaritzburg campus Sportsman of the Year.

The announcement was made at the 50th annual sports banquet held at the Victoria Country Club at which five full blues and 16 half blues were awarded.

Award-winners were selected by the University's sports executive and sports officers.



Produced by
Corporate Relations Division
University of KwaZulu-Natal

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<http://alumni affairs.ukzn.ac.za/Homepage.aspx>

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