

School of Public Health

FACULTY OF COMMUNITY & HEALTH SERVICE



Report of Activities 2009-2010



UNIVERSITY of the
WESTERN CAPE

A place of quality,
a place to grow, from hope
to action through knowledge

The Vision & Purpose

The vision of the School of Public Health (SOPH) is the optimal health of populations in developing countries, particularly Africa, living in healthy and sustainable environments with access to appropriate, high quality, comprehensive and equitable health systems, based on a human rights approach.

The purpose of the School is to contribute to developing policy makers and implementers who are knowledgeable and skilled in the principles and practice of public health, whose practice is based on research, influenced by informed and active communities, and implemented with a commitment to equity, social justice and human dignity.

The School was established in 1993 at the University of the Western Cape as the Public Health Programme under the leadership of Prof David Sanders. Its purpose was to strengthen education and research in public health and primary health care and to build capacity in the health services.

Since its inception, the SOPH has established itself as a significant and pioneering initiative in public health with a national and, increasingly, continental influence. Some of its key achievements have been

- establishing a multi-level post-graduate programme in the field of public health, culminating in a Masters in Public Health and doctoral studies in Public Health;
- providing continuing education opportunities for health and welfare practitioners through our annual Summer and Winter Schools;
- establishing a substantial integrated research and service programme to which many of our students have contributed;

- developing training manuals and materials for service providers, arising from research and service work; and
- being designated a World Health Organisation Collaborating Centre for Research and Training in Human Resources for Health Development.

In line with the overall orientation of the School, most of our research focuses on health policy and systems, social determinants of health and building a district-based public health system. It addresses four inter-related programme areas, namely HIV/AIDS and TB, maternal and child health, public health nutrition, and non-communicable diseases.

The School is part of the Faculty of Community and Health Sciences – which also includes the departments of Occupational Therapy; Physiotherapy; Social Work; Natural Medicine; Human Ecology and Dietetics; Sport, Recreation and Exercise Science; Nursing; and Psychology.

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DIRECTOR'S FOREWORD:

Building the Field - Holding Growth and Sustainability in Balance

Prof Uta Lehmann

This is the first bi-annual report which is not introduced by the founding director of the School, Prof David Sanders, as he retired from his role as director in early 2009 and as academic chair in September 2010. He continues to serve the School and the University as emeritus professor and researcher on a number of research projects.

It is appropriate to start this report, then, by noting that UWC's School of Public Health (SOPH) would not be as strong, as exciting and as resilient a place, were it not for the leadership of David Sanders; and to thank him for the contribution he has made to the School, the University and the field of public health in South Africa and on the continent – and to express the hope that he will continue to be available to guide, shape and advise the School in his new role.

This report begins with an interview with David in which he reflects on the state of public health in the country in general, and the achievements and challenges of the UWC SOPH in particular.

Given the prospect of David's formal retirement, the School began in 2008 to think about future leadership and staff constellations as part of our succession planning. We agreed that the future leadership of the School could not rely on a single charismatic leader to the same extent as in the past, and that collegial leadership between its senior academics (Associate/Professors) would be the desirable model for the future – with the School's directorship rotating amongst this senior leadership team. For this reason I was appointed to this post from March 2009.

The past two years have been busy. In this report we give an account of key developments in the School in the period 2009 – 2010, and share some of the thinking about the School's medium-term future.

In May 2009 we moved to our new home in a beautiful, brand new building funded by The Atlantic Philanthropies and celebrated the move with much fanfare the following month, led by our Chancellor and Archbishop Emeritus, Desmond Mpilo Tutu.

In our postgraduate programme we saw 84 students graduate, 61 of them with a Masters in Public Health. The list of their thesis titles on page 13 provides a fascinating insight into the issues and challenges health managers are facing in their professional practice, coming as they do from part-time mature students working in the health sector in a wide range of African

countries who are encouraged to choose topics relevant to their immediate work or the wider contexts within which they work.

In May 2009 the SOPH also launched a Masters programme focusing on health workforce development, collaborating with Eduardo Mondlane University in Mozambique, the National University of Rwanda, and Addis Ababa University in Ethiopia. This programme has enrolled 18 students and is now fully underway (see page 11). Developments in our postgraduate programme are informed by the University's Institutional Operating Plan (IOP) which has a strong focus on strengthening and expanding postgraduate programmes. Some of our initiatives to strengthen our postgraduate programme, such as the introduction of enrolment cycles and concerted efforts to ensure that all academic staff have PhDs, are discussed in this report.

In March 2010 we helped launch the University-wide HIV Research Centre under its framing theme "HIV in Context" (see page 38). The Centre is based in the School of Public Health in the Faculty of Community and Health Sciences, but will work across departments and faculties to become a world-class hub for sharing, developing and implementing engaged, policy and practice-related research that tackles HIV and AIDS prevention, treatment and care with a comprehensive, systemic, inter-sectoral and inter-disciplinary perspective.

Our research portfolio also continues to grow. The School has over 40 active research projects, with a total budget of over R20million. Its hallmark is its location at the interface of research, policy and practice, engaging with current and ongoing public health challenges in South Africa and on the continent, and taking a strong inter-sectoral, multi-disciplinary and collaborative approach to our research and teaching. Much of our research focuses on health policy and systems, social determinants of health and building a district-based public health system – and addresses four inter-related programme areas, namely HIV/AIDS and TB, maternal and child health, public health nutrition, and non-communicable diseases. We are currently actively seeking to ensure both greater coherence and synergy across the portfolio, and sustainability beyond what is possible through the single project approach.

Our reliance on grant funding (which, by its very nature, is cyclical and time-limited) lives in tension with our vision and increasing capacity to drive and shape health and social systems research and innovation;

for example, proactively building new research areas for which funding is not easily available or engaging in large scale and often very expensive longitudinal studies. The risk of building a research enterprise, and the related infrastructure that this requires, increases correlative to the ability to sustain this over the medium to long term. For this reason it now is one of our key priorities to strengthen and secure the medium- and long-term sustainability of the School.

None of the above achievements or the proactive and constructive grappling with challenges, weaknesses and limitations would be possible without the ever-growing team of committed, enthusiastic and energetic staff. The School now has over 80 staff – of whom only 15 are in permanent posts with the rest being employed on contracts funded from external sources, raised by the School for research, training and service development. The staff at the SOPH come from Rwanda, Ethiopia, Zimbabwe, Nigeria, Canada, the US, the UK – and South Africa. This reflects both its international standing and its African mandate, and significantly enriches academic discourse and knowledge development.

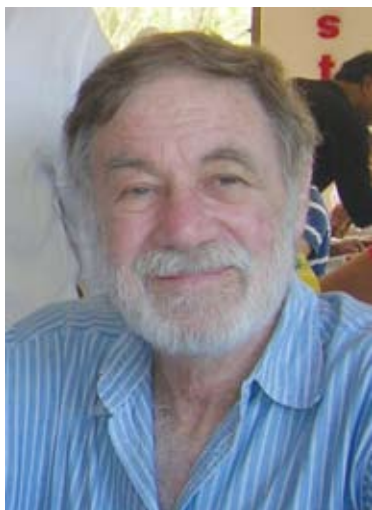
Several staffing challenges present themselves. Most importantly, we struggle to attract senior

academics – and particularly senior academics from designated groups in terms of employment equity and affirmative action. This is partly a function of the fact that the field is small and has limited capacity throughout South Africa and the continent, which we make a constant effort to grow. It is a dilemma which we try to address by ‘head-hunting’ for international academics of exceptional quality, nurturing our own academics who show promise, and supporting but also pressing those staff who have not completed their doctoral degrees to do so. But it is a dilemma we do not expect to resolve easily.

We have made great strides in building collaboration with our sister institutions in the region, in an effort to strengthen both breadth and depth of public health and health systems expertise, and building a strong community of practice. And we will continue to primarily rely on colleagues wanting to join the School out of passion to help build social justice and equitable health systems on the continent, and our reputation as a place which is intellectually vibrant, allows and nurtures innovation, and provides opportunity to grow. We make every effort to retain the flexibility and openness this requires, although we are aware that a growing organisation requires more structure and supervision than a small unit does.



Reflections on Public Health: An Interview with Prof David Sanders



David Sanders was recruited to UWC in 1993 to establish what is now the School of Public Health (SOPH). In 2009, as part of success planning and in preparation for David's retirement in September 2010, Uta Lehmann took over as Director of the School, allowing David to devote more time to teaching, health programme development, writing, advocacy and activism – and fishing in beautiful places.

Shun Govender, the Project Manager in the School, asked him to reflect on teaching and research in public health – and what he will do next.

On learning and teaching and the SOPH's contribution to the development of public health professionals

Shun: The establishment of the SOPH at UWC is largely due to your vision, inspiration and hard work. Looking back, are you pleased with what has been achieved in public health learning and teaching at SOPH since 1994? Has SOPH made a positive difference in almost two decades of working with and training health professionals?

David: Thanks Shun. Am I pleased? Yes and no. Obviously, we've grown from nothing to quite a big Unit with many postgraduate students, including PhDs now; we can't cope with the demand. This is a big achievement, not just by me but by everyone who worked in the Public Health Programme, and now in the School – many of whom are still here. We have achieved a lot, we have a robust graduate programme and also quite a strong research portfolio. We pioneered multi-disciplinary, multi-professional

postgraduate public health training. We were the first to offer a Masters in Public Health (MPH) degree in South Africa. Now there are, I think, six MPH offerings countrywide. The medical schools in particular resented us for that. I think that we are looked at as innovators, but also as somewhat unorthodox.

I am pleased at our achievements but I am also very conscious of what we haven't achieved.

Shun: But would you concede that in almost two decades we have made a contribution to the type of health professional that is out there?

David: Well that is much more difficult to answer because studying postgraduate public health with us is just an interlude in people's learning lives. Some come to us with strong perspectives and experiences in public health – and the programme consolidates some things for them and gives them a certificate. There are others who come to us without a good idea of what they want to get out of it. It is very difficult to assess our distinctive contribution. Some students have reported that this programme has changed their lives, that they have a completely different perspective on things.

A critical observer might look at the state of public health and public health practice in South Africa and express some doubts about the contribution we may have made! We know that we have a massive public health crisis. We know that health indicators, like life expectancy, under-five mortality etc, have deteriorated. And we also know that the functioning of our public health sector is poor.

So have we made a contribution? We don't know what the situation would have been like if we hadn't been here. Would it have been worse? It is a difficult question.

If we are assessing our impact on health – life expectancy, quality of life, mortality etc – that is more difficult, since these result from many things: incomes, the cost of living, housing conditions, alcohol abuse and so on. Our contribution to those is mediated



Helen Schneider appointed as a Professor in the SOPH

In December 2010 the School appointed Prof Helen Schneider to the post which became vacant on the retirement of Prof David Sanders.

Prof Helen Schneider is a medical doctor and public health specialist who for nearly 20 years has worked on the problematics of South Africa's health system, with a special focus on HIV policy. As the former head of the University of the Witwatersrand's Centre for Health Policy, she is an active participant in, and commentator on, health and HIV policy in South Africa and has served on, amongst others, the board of the Medical Research Council (MRC), the South African National AIDS Council (SANAC) and, most recently, on the Department of Health's Task Team on Primary Health re-engineering. Her research and policy interests have included an understanding of the political dynamics of AIDS policy under the Mbeki government.

by several factors – but I'd like to think that we've influenced some people towards better understanding of these and their place and ability to affect them.

On research

Shun: What are your thoughts about the regional and global profile and output of the SOPH as a public health research institution?

David: I think we've undoubtedly got a profile now. We are now often approached by international institutions looking for research collaborators – such as EU-funded projects as well as Canadian, Australian, UK, US and local South African funded initiatives. Is this deserved? I think so. Our output is pretty good. I used to think that our output was, per capita, the best in our Faculty, but actually it is not. That is because we frequently publish with many other authors, and research output in higher education is calculated on the basis of whether the journal is accredited and how many authors there were. As we're involved in several multi-country studies, our units per publication do not reflect our activity. Our numbers of publications, however, almost certainly place us ahead of other units in our Faculty and many in the University. Moreover, we publish in high impact journals such as *The Lancet*, *Health Policy and Planning*, the *Bulletin of the WHO* and others. At the MRC [Medical Research Council], those would be quantified differently because they, unlike the Department of Education, consider journals' impact factors. By publishing in such journals we receive recognition from our peers in South Africa and beyond and this undoubtedly enhances our ability to compete for research funds – even though it does not earn the University more subsidy.

On South Africa's public health research output

Shun: Do you have any concerns about the quality of South Africa's public health research output when compared to your global experiences in this regard?

David: Again my answer is yes and no. South Africa could do a lot better than it does. We don't have good data on public health research. But in biomedical research approximately 40% of the Medline indexed publications from sub-Saharan Africa were generated by South Africa. Nigeria follows with 16%. South Africa, at least in the biomedical field – and I think the same would apply to public health – is leading, but leading a quite weak pack. Africa is definitely not doing well, and South Africa within that is not doing particularly well either.

Shun: If we compared South Africa in the context of the global South, how are we doing?

David: I would be guessing, but generally the South lags behind in research productivity. Latin America is difficult to assess because they primarily publish in Spanish and Portuguese. South Asia I think is in much the same situation as Africa. South Eastern Asia, especially countries like Thailand, Malaysia are probably quite good.

On South Africa's use of research in policy development and implementation

Shun: We struggle with the problematic of research and policy. Are our policy makers sensitive enough to the need for research? Do they take research into consideration when designing policy?

David: No, I don't think so. I don't think they understand how important research is. And I think they also have a caricature of research – as something done in an ivory tower. And they often say to us: "You guys don't know the real work. We're doing the real work. You're just thinking about things." That is nonsense. We are very conscious of the fact – and we try and promote in our teaching programmes – that 'research' is an umbrella term, in that it's not just formal, big research projects. It's also about what we try to teach practitioners to be able to do so they understand why their programmes are not functioning optimally. That is part of health systems research.

More recently they have become oriented to the health system-wide implications of programmatic interventions such as ARV scale-up, documenting policy implementation processes and strategies to formalise and integrate lay work and community-based care and support initiatives into primary health care. She is also the a co-principal investigator of a multi-method programme of research entitled Researching Equity in Access to Health Care (REACH), documenting access to TB, HIV and maternal health services in four sub-districts of South Africa.

Prof Schneider joins the SOPH from UCT where she was a researcher and Associate Professor for the past three years. Before that, she spent 15 years at the Wits University's Centre for Health Policy, which she directed for eight years. She has international collaborations with researchers at MacMaster University and London School of Hygiene and Tropical Medicine and is on the editorial advisory board of the journal Global Public Health.

She will start work at the School in March 2011 and hopes to contribute to a strengthening of conceptual, methodological capacity in the field of health systems and policy research, whilst actively building the next generation of researchers and fulfilling the UWC mission of being an engaged university.

One of the reasons things don't improve much in South Africa is because our health system is not a learning organisation. Practitioners receive policies from above and they try and interpret and implement them. They don't seem to be asking questions like: 'How can I look at what is causing our major health problems? Why is our immunization coverage so poor? Why are our outcomes in severe malnutrition so bad? Why don't people follow our advice about adherence to their antiretroviral treatment? Why are our waiting times queues so long in the system?' They don't seem to be asking those questions. So we're asking the questions for them. We should be asking them together.

On the public health researcher

Shun: *Looking forward for an institution like SOPH to become viable we need academics and researchers of a high calibre as well as adequate resourcing. What are your thoughts about this?*

David: If you look at this comparison between the global North and the global South, and in particular Africa, it's not just that we don't have a well-developed research culture. It's also that we simply don't have the resources. If you are working in a school of public health in the US you'd have many more resources, particularly skilled people. Colleagues of mine who work in the US would have a batch of PhDs, very good Masters and post-Docs who help them – and they are financially supported. We also need to develop more of our staff in research development – from conceptualization, through design to writing the grant proposal, to planning the research etc. This is a big strategic challenge confronting us.

Shun: *Does this issue also relate to financial sustainability? Beyond writing the grant proposals, beyond being part of research consortia – which is the way that money will come to the institution – there do not seem to be other income streams that we could exploit.*

David: Going out there into the research market and trying to raise funds – and sometimes being drawn into areas of research that are not mainstream for us – is partly because we need the cash. We need to sustain and strengthen our already existing focus. Unfortunately we're often not in a position to dictate the research agenda – and this threatens the sustainability of our project.

This causes our senior staff to feel driven to initiate, respond to, and conclude research grant proposals.

And many such time-consuming applications are turned down. This takes a lot of time.

On public health niche research

Shun: *Are there niche areas in public health research and knowledge production that SOPH could and should focus more on? While we are driven by what the market dictates, could we also decide on some areas of research that we would like to promote?*

David: I think we are doing that and believe that we should be focusing on research in those programme areas and health system components where we have strength. Our programme area strengths include nutrition, HIV, NCDs [non-communicable diseases], water/sanitation. Then we have systems areas such as HR [human resources], health information, primary health care. So we need to examine our work in terms of the intersection between programme and systems areas: health systems research applied especially to certain programme areas – for instance HR in HIV, HR in nutrition, health information in HIV and in NCDs, a primary healthcare approach to nutrition, to NCDs, and so on. We should grow these areas – but they are dependent on the staff we've got. We tend to get approached by people who know we're involved in these areas.

In summary, I think that our focus should be on health systems research in those programme areas where we have a comparative advantage. We are not really equipped for research on, for instance, the biomedical aspects of malnutrition or on clinical trials in HIV. We explore some of the upstream determinants, like gender and HIV – and we look at what needs to happen in health systems to address these issues: what needs to be in place in terms of training, HR, health information, and so on.

I think that our research areas can change depending on which staff we have – but the problem is that the research agenda is increasingly driven by the outside donor community. Most of our current research money is not coming from South Africa. It's from Canada, the EU, the US etc. Ultimately collaborators who approach us – from Europe or North America and elsewhere – are responding to the donors' calls. While we do influence the donors, it is substantially from that side – which means that we're not completely masters of our own destiny.

On a personal note

Shun: *Why the move from paediatric specialisation and practice to the field of public health research and teaching?*

David: The paediatric department at the University of Zimbabwe where I was working became an unwelcoming environment. I developed a rural programme in community child health – and as I also had a qualification in public health it was clear to me that clinical paediatrics was very traditional. The lecturers or specialists paraded around the ward every day convinced they were making the best contribution to child health in the country – which was patently not the case. We were admitting only those sick children who were fortunate enough to get into the central hospital.

I often travelled around the rural areas as Oxfam's health advisor. When I visited the district hospitals – where my team members were working as doctors – it was clear that the child health problems there were identical to those in the teaching hospital; that we needed to improve child healthcare in the periphery – and we couldn't do that by just seeing sick patients in our wards. We needed to upgrade care and prevention of child health problems in the districts – which, by the way, applies as much to South Africa now as it did to Zimbabwe thirty years ago.

So I decided to spend more time in the community, in teaching and research. I moved to the Community

Health Department in the same University. I continued my work with Oxfam as well as managed a large nutrition rehabilitation unit for malnourished children. Nobody else wanted to do this work. They wanted to deal with more acute problems in the wards and not engage with problems such as diet, food security in the homes, income, etc. So I worked at the interface between paediatrics and community health and continued to teach in the paediatrics department.

Was it a good choice? I don't know. I do miss the immediate gratification a clinician gets when a really sick kid comes in, you plan treatment and the next day it is sitting up in bed smiling. The gratification is much more tangible than through a five-year research project.

Shun: *And your plans for the future?*

David: I'd like to continue to teach because I think that's probably my greatest skill. My primary passion is not research, unlike some of my colleagues. Teaching is what I get a lot of positive feedback on. I think this is why I get invited to speak at many meetings around the world.

In terms of influencing health policy and programmes, I would like to continue working in Southern and Eastern Africa, not necessarily only in South Africa. So I see myself as working part-time at SOPH and simultaneously in the region – and globally in policy, advocacy and activism.



The School's New Premises

In May 2009 the School of Public Health (SOPH) moved from the leaky prefab buildings in which we had worked for 13 years into a dedicated, new building made possible by a generous grant (R60m) from The Atlantic Philanthropies. This marked the culmination of a process which began in 2006 with the design and commissioning of contractors to its completion in April 2009.

The building was officially opened on 29 June 2009 by Archbishop Emeritus Desmond Mpilo Tutu, then-Chancellor of the University, during the School's annual Winter School – this being the first time in 17 years that this programme was able to be held in the School's own premises.

Following initial teething pains, the building now provides a range of spaces in which the School can work, particularly an assortment of venues for hosting workshops, conferences and outside groups, both for the School and for other departments and groups in the University at large.

DRAWING on AFRICA's CREATIVE EXPRESSION

Making decisions about how to 'adorn' the extensive wall space of the four levels of the new School of Public Health (SOPH) building was a challenge, heightened by the limited budget allocated for interior artwork. During the two years since we moved in, an array of interesting decorative pieces has been sourced and hung on the walls, however, resulting in a vibrantly colourful environment which reflects the local contexts in which we work as well as some of the countries from which our students come.

One of the primary sources of the artworks has been the UWC-Robben Island Mayibuye Archives which houses a significant multi-media collection of historical documents, film, photographs, oral history material and artworks related to aspects of apartheid and resistance in South Africa. Working in close partnership with Hamilton Budaza and Mariki Victor of the Archives, a range of original paintings, linocuts, etchings and posters has been selected and now hang on the walls of our building, on long-term loan to the SOPH.

Some of the better-known South African artists whose works are on display include Willie Bester, Isaac Makeleni and Cecil Skotnes. Two posters by Robert Rauschenberg and Gavin Jantjes, who were part of an international advocacy initiative in the 1980s called

'Artists of the World against Apartheid', can be seen on the first level of the building.

A variety of artworks and cultural artefacts from South Africa as well as other parts of the African continent has also been sourced. These include kente cloths from Ghana, basketry from Zimbabwe, Zambia and Kwa-Zulu Natal and embroidered panels from women's collectives in Winterveldt and Nieu-Bethesda in South Africa. Metres of brightly coloured African fabric, traditionally worn as a kitenge or sarongs, mark the entrances to meeting rooms.

Research posters compiled and presented by SOPH staff at various national and international conferences can also be found throughout the building, providing visitors with an overview of the essence of the School's work over the past decade.

We hope that artistic expressions on the walls of our building create a more human space and provide both staff and visitors with an experience of Africa's creative capacity.

Further information about the UWC-Robben Island Mayibuye Archives can be found at www.mayibuyearchives.org.





ACADEMIC PROGRAMME

The School of Public Health (SOPH) was established to develop the capacity of public health practitioners in South Africa.

Post-apartheid South Africa has seen significant conceptual shifts in health policy from a predominantly tertiary-focused health system to one based on primary health care, organised through the district health system. In the period under review the national Department of Health initiated a process of revitalising primary health care – which in turn will play a central role in the country's proposed National Health Insurance. Transforming the health sector from a largely curative, hospital service to a high quality, equitable, comprehensive community-based system requires health practitioners to engage in new roles and develop new skills. They require training in primary health care and public health strategies, in epidemiology, in health promotion and in key health programmes such as nutrition and HIV/AIDS. They need new skills to take on the management of

human, financial and operational resources, as well as information management.

The School contributes to this much-needed education and training through

- a *multi-level postgraduate programme* offered through a combination of distance learning and contact sessions;
- *short courses* offered by staff and visiting experts at annual Winter and Summer Schools; and
- *in-service training of practitioners* in the field through participatory research and service development as well as commissioned short courses.

A key strength of the School is that it maintains close links between teaching and learning and a range of service-related projects. The professional involvement of academic staff in the field ensures that learning programmes continue to address priority health and leadership needs.

The Postgraduate Programme

The School of Public Health (SOPH) offers three postgraduate programmes:

- Postgraduate Diploma in Public Health (NQF Level 8)
- Master of Public Health (NQF Level 9)
- PhD in Public Health (NQF Level 10)

In addition a few students still graduated with the Postgraduate Certificate in Public Health in 2009 and 2010, although the certificate was discontinued, and no new students registered, in 2008.

Students registered for postgraduate programmes: 2005 – 2010

Qualification	2005	2006	2007	2008	2009	2010
Postgraduate Certificate in Public Health	51	45	53	12	5	n/a
Postgraduate Diploma in Public Health	76	97	103	1	7	14
Masters in Public Health	46	50	81	259	238	218
PhD in Public Health	4	4	8	12	26	27
Total Postgraduate Students	177	196	245	284	276	259

Students who graduated in 2009 and 2010 are listed from pages 13-16.

Postgraduate Diploma in Public Health

The Honours-level Postgraduate Diploma facilitates access to postgraduate qualifications for those who have a three-year tertiary qualification (e.g. some nurses and environmental health officers). The qualification also serves as a useful supplementary qualification for professionals who already have Masters or Doctoral degrees, but who need a public health foundation for career purposes.

Having undergone substantive revision, the Diploma was offered at this level (Level 8 on the National Qualifications Framework) in 2010 for the first time. Key changes to the curriculum included revision of the learning outcomes, topics and learning materials for six modules, the induction of students into public health through a new module which covers “the field” or discipline of public health, understanding disease and the burden of disease within the preven-

tive and promotive paradigm, an orientation to public health in the era of globalization as well as a range of key skills for academic study in the field. Another important shift was reconceptualising the research component as a monitoring and evaluation project which responds to the management role that many of our students play.

Modules in the new curriculum

Introducing Public Health: Its basis and scope – convened by Hazel Bradley

Descriptive Epidemiology – convened by Johann Cailhol

Population Health and Development: A primary health care approach I – convened by Lungiswa Tsolekile

Health Promotion for Public Health I – convened by Suraya Mohamed

Monitoring and Evaluation for Health Services Improvement I – Convened by Thandi Puoane

Management Strategies for the Public Health Services I – Convened by Verona Mathews

Within the context of these changes, the assessment tools were also developed to include a portfolio. This constituted a particularly exciting learning opportunity for students to reflect on changes in their own capacities, a chance to integrate the content of the six modules they study, and to link new capacities with their professional lives. In addition, the portfolios played an evaluation role, allowing lecturers to gain insight into how students were experiencing the new curriculum.

The Masters in Public Health

The SOPH considers its Masters degree to be its flagship programme. Since its inception in 1994, the MPH has attracted large numbers of students from all over Africa (see page 17). The positive regard this indicates is also seen in the WHO's recent R10 million grant to the School, to strengthen the programme and to link it to capacity development of Human Resources for Health in other African countries (see page 18).

Most of the School's students are health professionals studying part-time while they work, (although some 2% chose to take what is regarded as a full-time study

load of more than three or four modules in 2009). They are often employed in demanding management positions, and most are professionals with families – these commitments combining to present them with the typical challenges facing mature part-time students. In addition, the MPH students study at a distance most of the time, which means that student support is given mostly by e-mail, through extensive feedback on their written assignments and mini-theses, as well as through contact sessions such as mini-thesis week and, more recently, via electronic discussion groups (see page 22 of this report).

From 2005 to 2008, the SOPH increased its MPH student intake incrementally in response to student demand – from 43 in 2005 to 64 in 2007 to 87 in 2008. In the same period, realignment of the MPH with the National Qualifications Framework resulted in students completing the course work more quickly. Coupled with the universal problem of a slow thesis completion pace – exacerbated by our students being part-time and working at a distance, this has produced a significant bottleneck of mini-thesis candidates in 2009 and 2010.

This has had serious consequences for the School. Staff found they had 150 theses to supervise in 2009 and 142 in 2010, a supervision load which was not considered sustainable. In response, the School has cut admissions to 34 new MPH candidates in 2009 and 28 in 2010 – coupled with a three-year enrolment cycle which takes account of delayed throughput. The SOPH is also having extensive discussions about the sustainable size of the programme, given current staffing levels.

A Growing Demand for Doctoral Study

Judging from the growing number of queries the School receives on a monthly basis, there is substantial interest in our PhD programme, within the country and on the continent more generally. Our programme has grown from 4 to 27 enrolments in the past five years. A substantial number of these are our own staff, an indication of the School's and the University's serious commitment to building senior academic capacity in the country.



'I am a nurse lecturer – [and] my area of specialty is in community nursing. I looked at what SOPH is offering in the different areas of public health, and I thought that my students would benefit more through my study than what I now know about primary health care, research and research methodology. And what I particularly like about SOPH's approach is that the whole curriculum eventually flows nicely from the Postgraduate Diploma into a Masters programme, which I think is not offered at the other universities in this way.' (SOPH MPH student Denise du Plessis from Namibia)

Student Academic Achievements

In 2009 and 2010, 84 students graduated from one of the School of Public Health's (SOPH) postgraduate programmes:

- 6 with a Postgraduate Certificate in Public Health
- 15 with a Postgraduate Diploma in Public Health
- 61 with a Masters in Public Health, 4 graduating cum laude
- 2 with a PhD.

Postgraduate Certificate in Public Health – 2009 and 2010

2009:

Beukes, Anita
Gogela, Nontuthuzelo Theresa
Mokoena, Elias
Namunyekwa, Johannes

2010:

Mfengu, Sipiwu
Seabe, Elizabeth

Postgraduate Diploma in Public Health

2009:

Katsande, Reggis
Mzana, Nonqaba
Zamxaka, Nontlantla
Kalipi, Selma
Seneadza, Clara
September, Lwandlekazi

2010:

Bhuiyan, Salah
Chandiwana, Precious (new diploma system)
Elago, Marjorie
Eliphas, Hatutale (new diploma system)
Kalangu, Givas
Lewis, May
Mogapi, Thato (new diploma system)
Mutunda, Anne (new diploma system)
Ochieng, Anne

Graduated with the Masters in Public Health (MPH)

Theses form half the requirement for completing the Masters degree – without which students may graduate with the Postgraduate Diploma. The number of students who completed the MPH in 2010 (38) is a considerable increase on the 23 who did so in 2009 – indicating some movement towards unblocking the 'bottleneck' of students occupied with dissertation writing (see page 11 above). In addition, several students who had not made progress with their theses were encouraged to graduate with the PG Diploma in Public Health (above).

As students are encouraged to research and write up an issue that either relates to the work they are doing or a topic they are really interested in, theses are often intimate local studies focusing on a particular issue. In addition they reflect topical public health issues experienced by students at work as well as in the teaching of the course.

In the theses of students graduating in 2009 and 2010 there is a strong emphasis on HIV/AIDS (27 theses – 44%), half of which related to treatment (13). Only one focused on prevention, in contrast to a few years ago when treatment was less available and preventing infection preoccupied many health workers. Two students addressed HIV testing while 7 dealt with social aspects of HIV, with another three focusing on sexual behaviour. Five dissertations were to do with TB, particularly treatments adherence.

Twelve studies addressed an aspect of maternal and child health – while only three had an overt interest in a gender-related issue (two of which focused on men).

Human resources for health were addressed in some way by eight students.



I started off my career in public health in 1992 as a freelance health journalist soon after I graduated from Makerere University ... with a BA (Mass Communication). I was a good writer especially on health issues, which prompted a friend to ask if I would be interested in offering communication support to Uganda's National AIDS Control Programme (ACP) in the Ministry of Health. It was a chance never to be missed. I was given a World Health Organization contract and started work immediately.

My overall task was to disseminate HIV/AIDS information to the public through the mass media i.e. radio, television and newspapers. In that capacity I wrote and published stories, designed announcements and messages on HIV/AIDS for TV and radio. I also mobilized journalists and editors to give more time and space to HIV/AIDS issues. By 1994 when I was reassigned to the main WHO Country Office, Uganda had almost 100% HIV/AIDS awareness among the general public.

I soon realized that communicating HIV/AIDS information was diverse and challenging but also that HIV/AIDS was more than a health problem. I witnessed first-hand that factors like poverty, culture and women's low social status contribute a lot to the spread of the disease. I was actively involved in activities that directly addressed

2009	
ADE-ABOLADE, Khadijah Oluwakemi	Impact of the private sector initiative on the job satisfaction of hospital pharmacists in Lagos state public hospitals
BAITSIWE, Phyllis	An exploration of the reasons for defaulting amongst tuberculosis patients on the community-based Directly Observed Treatment Programme in Siyanda district, Northern Cape province
BATARINGAYA, Cos Kamanda	Immunization coverage and factors associated with failure to complete childhood immunization in Kawempe division, Uganda
BEHUMBIZE, Prosper	A qualitative study to explore the factors influencing males' involvement in prevention of mother to child transmission (PMTCT) services in Kibaale district, Uganda
CHANA, Chapchet Robert	Factors influencing the use of medicines by consumers in Tiko subdivision, Cameroon
CHIBIYA, Hilary Moono	An exploration of prevailing perceptions on the role and skills of environmental health officers regarding the prevention of cholera outbreaks in Lusaka district
DREYER, Abigail Ruth	The participation of men in HIV intervention: Responses from men in the Imbizo Men's Health Project, Soweto, Johannesburg, South Africa
GEBRESELASSIE, Fasil Taye	Investigating the compliance with universal precautions among health care providers in Tikur Anbessa Central Referral Hospital, Addis Ababa, Ethiopia
HLONGWANA, Khumbulani Welcome	Knowledge, attitude and treatment-seeking behaviour towards malaria among Bushbuckridge communities, Mpumalanga
KAGWI, John	Factors contributing to tuberculosis treatment defaulting in Keetmanshoop, Namibia
MAGAFU, Mgaywa Gilbert Mjungu Damas (<i>cum laude</i>)	Assessment of health-related quality of life of adult highly-active antiretroviral therapy recipients at the Kagera Regional Hospital, Tanzania
MTHEMBU, Thuli	Knowledge, attitudes, beliefs and adherence to antiretroviral therapy among people living with HIV/Aids receiving treatment at Shongwe Hospital in Nkomazi Region, Mpumalanga province
MUZIGABA, Moise	Contextual and socio-economic factors that impact food purchasing patterns of health club members residing in a predominantly Black-urban township in South Africa
NASCIMENTO, Denise Antunes	A preliminary assessment of a framework for the allocation of comprehensive primary dental services
NJUGUNA, Wambui	Adherence to highly active antiretroviral therapy among patients in the Keetmanshoop Antiretroviral Therapy Programme, Namibia
NTUMBA, Alexis Tshiyemba Kanyinda	Knowledge, attitude and behaviour related to HIV/AIDS of teenagers on contraception in Andara district, Namibia
OTIENO, Fredrick Odhiambo	Prevalence and quality of syndromic diagnosis of sexually transmitted infections within the Kisumu Incidence Cohort Study in Kisumu, Kenya

these issues but soon scaled up my role and interest from health communication to the broader field of health promotion. This development was later to trigger my interest in broadening my knowledge in health promotion and desire to pursue an MPH course. But prior to that, I completed an MA at Makerere University and also attended many short courses on health promotion.

At the end of a successful workshop to draft the Village Health Teams Strategy which was later to be the focus of my mini thesis, I was challenged by my second level supervisor from the WHO Regional Headquarters ... to back up my skills and knowledge with an MPH. Because I was in full time employment, he recommended that I apply at the School of Public Health, University of the Western Cape where he said, "they have one of the best MPH courses in the region."

When Corinne informed me that I will be graduating in September, I shared the good news with my colleagues at headquarters, regional and country offices. The director who funded my course wrote back: "Congratulations Benjamin. Now prepare to serve even better not only our people in Uganda but also in the entire region." I can only confirm that I am ready, equipped and now very well prepared! (SOPH MPH student Benjamin Sensasi, obtained MPH cum laude, September 2010).

SHILONGO, Lydia	Knowledge, beliefs and practice about sexual concurrent partnering amongst Education students at a tertiary institution in rural Namibia
SIMASIKU, Mary	An exploration of perceived barriers and facilitators to disclosure of HIV positive results by pregnant women to their partners and families
SMUTS, Samantha Lynn (cum laude)	Understanding the patterns of alcohol use among adolescents in a peri-urban historically disadvantaged community in the Western Cape Province, South Africa
TEMBO, Blackson Pitolo	Road traffic accidents in Botswana: A case study of Chobe district
UREDI, Ally Sadiki	Factors contributing to home deliveries in Rungwe district, Tanzania
ZULU, Moses	Psychological, social and information needs of primary care givers of family members living with AIDS in Mansa district, Zambia
2010	
ACHILLA, Tina	Disclosure of HIV status to sexual partners amongst people who receive antiretroviral treatment in Kampala, Uganda
ADEFOLALU, Adegoke Olusegun	Delayed disclosure of sexual violence incidents among victims in New-castle, KwaZulu-Natal
ADIE, Achinyang Olofu	Knowledge of and attitudes towards HIV and risky sexual behaviour amongst adolescent secondary school students in Bekwarra, Nigeria
AKPABIO, Alma	Attitude, perceptions and behaviour towards family planning amongst women attending PMTCT services at Oshakati Intermediate Hospital, Namibia
BAGAHAZAL, Anisa	Factors influencing adherence to antiretroviral therapy at a general hospital in Mombasa, Kenya
BAKUNDA, Kaakaabaale Kamaranzi	Factors associated with late presentation of children under five and pregnant women with malaria for treatment at health units in Bungokho Health Sub-district
BUNE KANYEMBA, Phyllis Changu	Uptake of voluntary counseling and testing at Ngungu Mini-hospital in Ngungu Township, Zambia
CHIKANDIWA, Admire Takuranenhamo (cum laude)	Awareness, knowledge and attitudes about Human Papilloma Virus among female tertiary students in South Africa
CHIVONIVONI, Tamuka	Antimycobacterial treatment among children at start of antiretroviral treatment and antimycobacterial treatment after starting antiretroviral treatment among those who started antiretroviral treatment without antimycobacterial treatment at a tertiary antiretroviral paediatric clinic in Johannesburg, South Africa
DANA, Pelisa	Effects of peer counselling on feeding practices of HIV positive and HIV negative women in South Africa: A randomised control trial
EKEH, Peter	Survey on nail discoloration and association with CD4 count among untreated HIV patients in APIN Centre, Jos, Nigeria



'Currently I am working as a medical officer in Lesotho. I am in charge of the hospital-based ART unit and five other Health Care Centres (HCCs) within the hospital catchment area. I am involved in the total care of HIV/AIDS patients including initiating HAART and conducting monitoring and follow-ups. I also advise the PHC unit on what to do in cases of outbreaks of disease of public health importance such as swine flu, polio and measles. I am keen to be involved in public health programmes. Recently I was involved in the pilot project on male circumcision in Swaziland as a volunteer medical officer. The project was being done to assess the feasibility of Accelerated Saturation Initiative (ASI) for male circumcision for HIV prevention in that country.'

EL SHERIF, Hesham Ahmed Wafai Ali	Patient satisfaction with public primary health care service delivery in Khomas region, Windhoek district, Namibia
GOROVA, Vivianne Inganai	Therapeutic and virological outcomes in adults living with HIV/AIDS at 6 and 12 months after initiation of first-line highly active antiretroviral therapy in an urban population in Namibia
HILL, Jillian Leteatia	Process evaluation of the HealthKick action planning process in disadvantaged schools in the Western Cape.
ILONZE, Charity Chinyere	Knowledge and practice of live bird sellers on health risks and preventative measures of avian influenza in an urban community in Lagos state, Nigeria
KAJURA, Naaman	The perceived and experienced barriers and reported consequences of HIV-positive status disclosure by people living with HIV to their partners and family members in Djibouti
KAKILI, Tuwilika	Factors that contribute to treatment defaulting amongst tuberculosis patients in Windhoek district, Namibia
KASILIMA, Yosh Sospater	Knowledge, attitude and sexual behaviours with regard to HIV/AIDS among upper primary school pupils in Meru district, Arusha, Tanzania
KIWANUKA, Suzanne	The Ugandan Private Students Scheme at Makerere University School of Medicine and its effect on increasing the number of medical doctors enrolled and trained from 1993 to 2004
LLOYD, Bridget	Stakeholder perceptions of human resource requirements for health services based on primary health care and implemented through a national health insurance scheme
LOMBARDO, Candice	A matched case control study of the nutritional status of newly diagnosed tuberculosis patients and tuberculosis free contacts in Delft, Western Cape
Mc LACHLAN, Maria Elizabeth	Experiences influencing the academic performance of first year nursing students at the Western Cape College of Nursing, South Africa, during 2008
MMBANDO, Zebadia Paul	Factors influencing men's involvement in reproductive health in Arusha and Arumeri districts, Tanzania
MUSASA, Ilunga Jean-Paul	Knowledge, attitude and practice with regard to tuberculosis and human immunodeficiency virus co-infection among patients with tuberculosis in Walvis Bay district, Namibia
MWANDA, Kalasa	Impact of a family-centered approach on uptake of HIV testing and anti-retroviral therapy for exposed and infected children in Solwezi, Zambia
NDUGULILE, Faustine Engelbert	Assessment of blood transfusion services in six remote regions in Tanzania
NGODJI, Thertu	Knowledge, attitudes and practices of male circumcision for HIV prevention among voluntary counselling and testing clients in Onandjokwe district Hospital, Namibia

'My research study which had the topic 'Awareness, Knowledge and Attitudes about Human Papilloma Virus among Female Tertiary Students in South Africa' is an example of how a focused, circumscribed research project can provide important evidence to inform policy, practice and future research in public health. The study examined the perspectives of female students on possible uptake of a new HPV vaccine in relation to their knowledge of HPV infection, cervical cancer, and the vaccine itself, and situated this concise survey in a broader literature on vaccine acceptability in order to begin to reflect on how a vaccine campaign might be framed in South Africa. Since I am very passionate about the HPV vaccine I intend to engage in more depth with the nuances of HPV vaccine debates in future work and possibly pursue a PHD degree along the same lines.' (SoPH MPH student Dr Admire T Chikandiwa, obtained MPH cum laude, September 2010)

NTOPI, Simon	Impact of the expansion of the health surveillance assistants programme in Nkhatabay District of North Malawi
OGWU, Anthony	Adherence to antiretroviral therapy amongst women commenced on treatment during pregnancy at research clinic in Botswana
OMENKA, Charity	Factors influencing access to antiretroviral treatment in Benue State, Nigeria
SAKALA, Morgan	Assessment of the barriers to the utilization of antenatal care services in Kazungula district, Zambia
SAMA, Denis Joel	The interaction of community health workers with households in Soroti district, Uganda
SANGA, Erica	Expectations and experiences of HIV vaccine trial participants at the Mbeya Medical Research Programme in Mbeya, Tanzania, 2006-2007
SENSASI, Benjamin (<i>cum laude</i>)	Factors affecting implementation of the Village Health Teams (VHTs) Programme in Mpigi district, central Uganda
SISEHO, Gloria Mutimbwa	The operational effectiveness of a single dose Nevirapine prevention of mother to child transmission of HIV/AIDS programme in Khomas region, Namibia
SISYA, Charity	Identifying the potential barriers and facilitators that can contribute to the level of antiretroviral treatment adherence among people living with HIV/AIDS in the rural district of Chongwe, Zambia
SOKO, White	Frequency of protective host genetic factors of HIV infection among pregnant women in peri-urban Harare, Zimbabwe
ZINGWARI, Jebson	Prevalence of malnutrition in HIV-positive infants (age <18 months) attending a clinic in Windhoek, Namibia

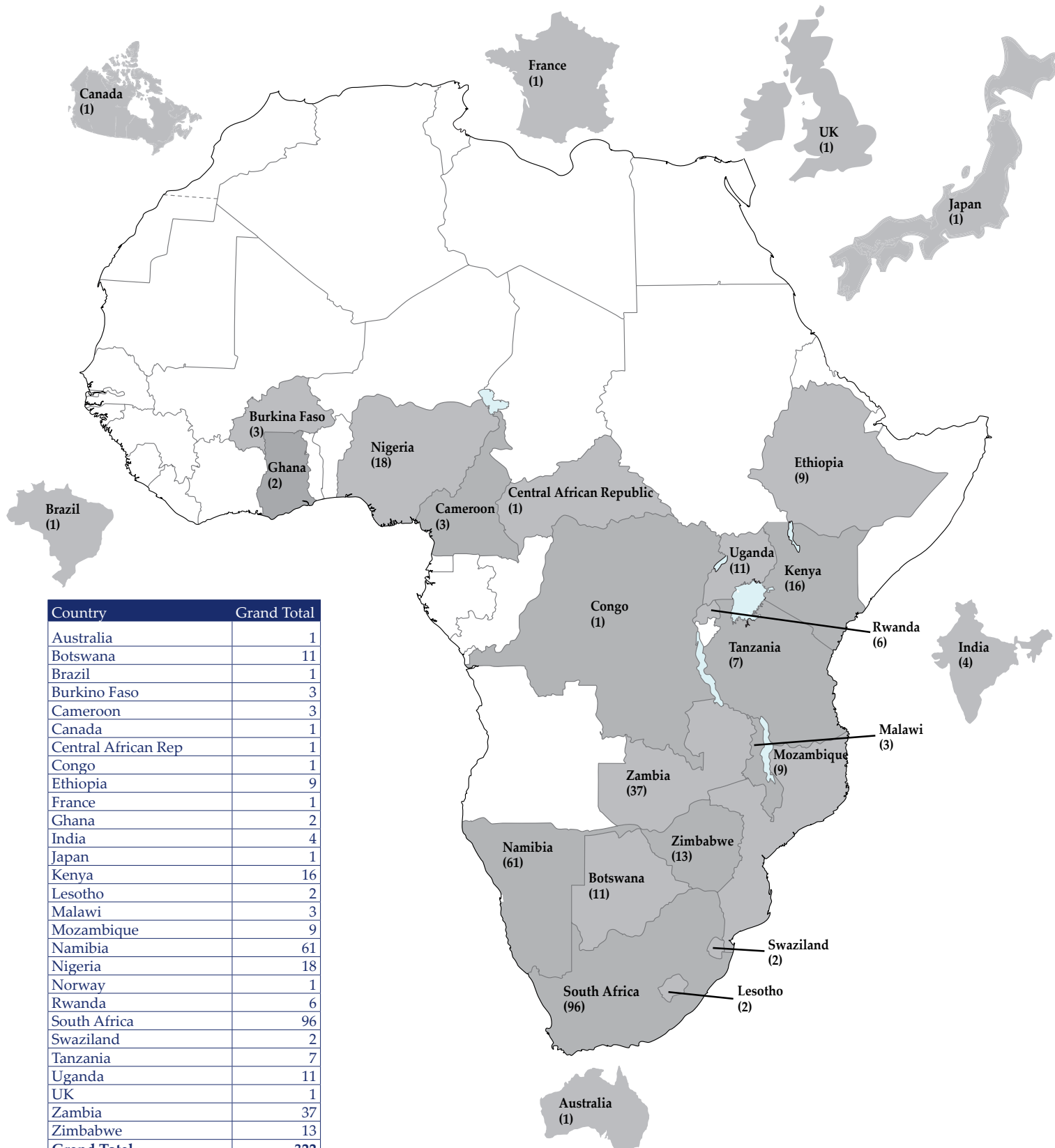
Graduated with the a Doctorate in Public Health (PhD)

2009	
RENDALL-MKOSI, Kirstie	The development of a woman's health handbook in the Western Cape
2010	
IGUMBOR, Ehimario Uche	Epidemiology and burden of chronic pain within the Eastern Cape province, South Africa



'Before the start of the [Equinet] conference [in Kampala, Uganda in Sept 2009] I met with one of our Ugandan students, Denis Sama, who is presently finalising his thesis. This is a student who works in Uganda's remote areas, who has never left the country and has worked his way up from a PG Certificate to where he is now. It was a real inspiration to spend time with him; not only because we could discuss his very interesting thesis on the roles of community health workers, but also because he spoke at length about how important our course had been to him, how he felt engaged, and how the materials spoke to him. I left from that meeting feeling that we are doing some things right after all, if we are so successfully addressing the learning needs of a bright young health professional in very remote parts of the continent. He is determined to do a PhD when he has completed his MPH.' (Prof Uta Lehmann, Director of the School of Public Health, UWC)

Our Global Reach



Tackling the Human Resources Crisis in Sub-Saharan Africa: WHO-UWC Masters in Public Health

Teaming up for success

The WHO-UWC Masters in Public Health (MPH) was launched at the School of Public Health (SOPH) in June 2009, with the aim of building a critical mass of leaders to advance sustained development of the public health workforce capacity in three African countries. The programme originated from WHO's recognition of the crisis in the health workforce and the multi-faceted repercussions this has on efforts to attain a range of critical national and international development targets.

With funding from the Bill and Melinda Gates Foundation, WHO selected a consortium led by UWC's School of Public Health (SOPH) to develop and implement this MPH programme focusing on health workforce development. Chosen over the other approximately fifty applications from prominent academic institutions in developed and developing countries, the consortium included the Community Health Department at Eduardo Mondlane University (Mozambique); the Rwanda School of Public Health and the School of Public Health at Addis Ababa University (Ethiopia).

The SOPH is an official WHO Collaborative Centre on Human Resources for Health (HRH) in Africa. This, along with our academic and institutional capacity and extensive experience in distance learning, may have been factors in our selection as were the strengths and particular interests in health workforce development of the other consortium partners.

Innovative approach to building capacity

In the first phase of the project, the partner universities in collaboration with the Ministry of Health in their respective countries, nominated fifteen students who met UWC's academic requirements to enrol in the MPH programme. Most students are in senior positions in their country's public health sector, either as human resource managers/officers, training officers or academics and as such are well placed to contribute to the improvement of the health workforce situation.

They began studying in June 2009 and are expected to graduate in March 2012.

Like the School's main MPH programme, this special programme is offered through distance learning, supplemented by face-to-face contact sessions at UWC twice a year. In addition, each country-based team of five students is supported by two in-country mentors selected by the partner universities. As senior academics or practitioners in the health sector, the mentor's role is to work closely with, and offer assistance to, students over the course of the programme. As we are pioneering this strategy of local mentoring in this programme, we are learning during the process of implementation and will be evaluating, researching and sharing our experiences with the wider public health community in the next few years. What follows are some of the initial challenges encountered and lessons learnt from the programme.

Dealing with challenges

As part-time students with demanding professional careers who are studying in English as a second or third language, students have encountered a number of challenges. These have included insufficient time and support from employers/supervisors, language and poor internet connectivity and geographical distance between students and mentors.

Like most adults who study while they work, these students have battled with juggling their work and study commitments – particularly as they are required to undertake two or three modules simultaneously. This is not made easier by their employers, many of whom are ministries of health, who are often reluctant to allow them time off work in order to study. As a result, some students have failed modules or dropped out of the programme. The partner universities have called on the employers for consideration of these students and plan to formally request that they appreciate their need for support, especially periodic times away from work, so they can focus on their studies.



'It [studying at the SOPH] was a chance that I got through information of the reputation of the university from my friends. And at the same time there was a programme which was organized by the WHO to build the capacity of health workforce, particularly of those who are employed – capacity building which runs parallel to being on the job. I am registered for the MPH programme over two years and I am taking three modules, one of which is human resource, which I want to specialize in, given that it is a global crisis.' (SOPH MPH student Berhanu Tilla, Ethiopia)

UWC and the partner universities have responded to students who are struggling as a result of doing academic/scientific reading and writing in English for the first time by organising support for language/academic writing in their respective countries. Challenges resulting from poor internet connectivity and geographical distance – which have undermined the mentor-mentee relationship in some cases – have been more difficult to overcome, however. Students who are based outside the capital cities are particularly affected by this, since they cannot benefit from close interaction with mentors who are located there. In addition, some mentors' commitments have meant they simply have not had sufficient time available to support their students.

These challenges notwithstanding, many students have made significant improvements in their academic skills – like critical reading, academic writing, computer and internet usage, and time management.

Finding solutions to addressing the tension between providing access and ensuring adequate support to health professionals, particularly outside of Africa's capital cities, thus remains a challenge, even where additional resources are available. The greatest constraint on providing support to capacity building is the shallow pool of senior academics and practitioners who are both able and available to provide supervision, mentoring, coaching support. Those staff with sufficient expertise and experience to provide such support are usually enormously overstretched and have limited time available – which in turn limits our ability to build additional capacity; a vicious cycle which this programme hopes to help reverse in the medium-term by building a critical mass of practitioners as well as academics in the field.

Deepening institutional capacity through collaboration

Experience and lessons gained from the joint implementation of this project are expected to inform similar initiatives within partner academic institutions,

with a view to improving institutional capacity and leadership development. There is consensus between WHO and the UWC-led consortium on the need to expand the scope of the project to ensure that sufficient capacity is built among the partner institutions, to embed teaching on human resources for health in more locations and ensure sustainability of the project.

In the first instance, the SOPH has offered to collaborate on curriculum development and co-teaching academic units – and there are also plans to work together on material development and the transfer of knowledge and experience.

To realise the aim of improving institutional capacity and leadership development, however, the WHO has agreed to provide additional funding for a second phase of the project. With a view to continue to generate competent leaders who will spearhead the production and management of the health workforce in the partner countries, this phase specifically aims to:

- ensure key staff members in the partner institutions develop essential competencies in health workforce development;
- strengthen capacity of partner institutions to integrate health workforce development into relevant current and future degree programmes offered by their institutions;
- build capacity for open and distance learning among the partner institutions; and
- document and evaluate the outcomes and effectiveness of the project.

To facilitate this work in partner institutions, three additional students have enrolled from partner countries in the MPH programme. All are junior academic staff of the partner universities and are expected to play, along with their fellow WHO-UWC students, an important role in the integration and sustainability of the project in the partner countries in the near future.



'My mini-thesis was developed in the context of the public health issues currently faced by the Brazilian public health system. During the research process, I developed a first version of a Dental Resource Allocation Framework (DRAF) with the aim to help improve equity of access to primary dental services. The DRAF intended to become a tool to guide the allocation of human resources according to primary dental care needs. Due to the deep socio-economic disparities prevalent in Brazil, equity in access to public health care has been a particular challenge faced by public health planners and managers.... In my study, I had a particular interest in addressing wait time benchmarks for primary dental services as an attempt to bring about greater knowledge on the quality of access to primary dental care experienced by people living within catchment areas of the Family Health Programme.'
(SOPH MPH student Denise Nascimento from Brazil)



Training for Public Health Management - some views of our students in Zambia and Namibia

To ensure that the curriculum is up-to-date and relevant to our health professional students' needs, the School has been completing a qualitative study of the roles and competences of public health professionals – who either work within the health services as mid-level managers at district or facility level, or play managerial roles within NGOs. Undertaken in the two neighbouring countries from which our highest student numbers are recruited – namely Namibia and Zambia – the study aimed to:

- identify the roles, competences and attributes required by mid-level health professionals working in the health services and non-governmental health projects in two southern African countries; and
- understand the extent to which the MPH programme is responsive to these needs.

Most of the School's students work full-time and study part-time – and many apply what they learn in their work lives.

[Working in a lab] ... you find [that] a few months later they come back with the same problem. I think that was when my mind said "but why?" What is out there that is keeping them coming back? Well I didn't know about public health very well, but when I heard about public health, I just said that "maybe this is what I need. Let me go and see what is there". I was blind, I didn't know anything about this programme, the public health issues. But when I came to this School – the first year it was like a door opening slowly.

*So that's when [colleagues who are doctors] said 'you know if you study public health, there's more to health other than the patient coming to you and telling you that they're sick.' That's why I decided ... if its possible, let me. If I don't have to step out of work, because I can't afford to.... let me go to find out. And it's been, it's been such a pleasure.
... it has also helped me to understand that without public*

health we cannot prevent most of the diseases and most of the diseases are preventable if we involve the communities themselves and that has really motivated me in public health.

The findings confirmed some of our projected changes to the curriculum in 2012, e.g. making health management a core competence.

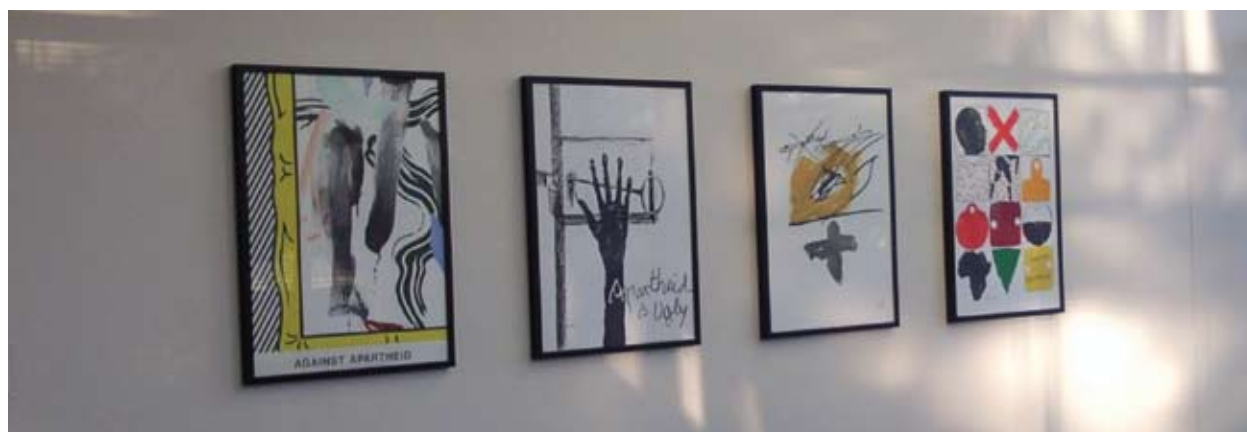
... we need to find a place for management irrespective of what a public health worker is doing since basically public health is about people. It's at whatever level, it's about people. We need to find a place for people management in the curriculum ...

In addition, there was a wide recognition of the importance of research, and of an evidence-base for public health practice, as well as a wide appreciation of the broad basic introduction to Public Health which is part of the curriculum.

But in terms of 'why' it [research] was relevant – it's really applying what you studied, hmm, and also using the research methodologies and techniques to basically carry out something. But it also helps you think at a different level. But it's applied knowledge that you actually ... have to do. So that part [writing the mini-thesis] I enjoyed very much. But ... if it was a thesis it would've been better, but it was worth it - not that the process was nice but the actual thing itself, it is a good idea.

[The MPH and Health Management in particular] it has helped me a lot even in improving my management styles, skills and many other things

The study was funded by the British Council as part of their Developing Partnership in Higher Education (DelPHE) initiative.



Innovative Web-based Support for Teaching and Learning at a Distance

Teaching postgraduate programmes to largely mature, working students, many of whom live in other countries, provides a number of challenges regarding the learning media the School of Public Health (SOPH) produces for these programmes. While Internet connectivity can be irregular in some settings, we have nonetheless embarked on a range of innovative uses of the internet and other electronic media to promote discussion, as well as access to materials.

Access to the internet

When the School first embarked on distance learning, some assignments and feedback were handwritten and faxed. While this is no longer the case, we wanted to ascertain the extent to which students have access to the internet. Of the 70 registered students who responded to a survey (28% of the 250 sent), 68% were from other African countries, mirroring the proportion of students who originate from the continent. The survey found, among other things, that

- 80% of the respondents had daily access to a computer at work and after hours – and 99% considered that they had sufficient access to a computer for their studies;
- 79% felt that they have sufficient Internet time, while 20% feel that they do not; and
- 79% have access to email from work and 20% from a library or internet café; 21% have access from home where they pay for usage.

That being said, the School recognises that among those who did not respond, access may be very uneven, and that caution still needs to be exercised about assumptions regarding universal access. In response, we have retained text-based learning materials as the lead medium, for the equality of access they provide and their portability for public health professionals who often travel in the course of their jobs. The SOPH has also worked hard on expanding the range of supplementary supportive material sent on CD with text-based materials to enhance and create variety in the distance learning process – like Powerpoint presentations with voice-over, podcasts, videos, and presentations from face-to-face sessions.

Open Education Resources

With an eye to expanding our teaching media, sharing and showcasing our own learning materials and benefiting from other institutions' materials, we are working to share existing materials and develop a repository of public health case studies and academic support programmes to enhance our teaching. In so doing

we are increasingly participating in the Open Education Resources movement, in line with UWC Senate's ambitious 2005 Free Content, Free/Open Courseware Policy. Such materials are offered freely and openly under a Creative Commons licence for anyone to use or re-purpose.

Our efforts in this regard are strengthened by our participation in a collaboration network called OER Health. Supported by the Hewlett Foundation Education Program, the network comprises the School of Public Health and the Faculty of Dentistry at University of the Western Cape, the University of Michigan's Schools of Dentistry and Medicine, the University of Cape Town, the Kwame Nkrumah University of Science and Technology and the University of Ghana.

In addition we have lodged a number of our distance modules as Open Education Resources (OERs) on the UWC's Freecourseware site <http://freecourseware.uwc.ac.za/> and at <http://www.oerafrica.org/> including

- Managing Human Resources for Health
- Measuring Health and Disease I
- Alcohol Problems: A Health Promoting Approach

This also enables access by our own students to modules for which they are not registered, or in preparation for higher level modules which they plan to study. There have been many thousands of visits to the site – thus also providing positive exposure to the work of the School and UWC.

Project vision: Strengthening the intellectual and policy infrastructure within and between institutions to grow a vibrant Health OER Network, systematically drawing in more African and global participants to create, adapt, share and use OER to the benefit of health education in Africa, while developing models of collaboration that can be replicated in other regions of the world.

Interacting with students/Taking some of the distance out of distance learning

The last two years have seen a growing interest among lecturing staff in using freestanding internet forums (or 'discussion groups') as an effective means of non-synchronous interaction. Within the distance learning context, discussion groups provide a space for learning interaction between lecturers and students, as well as students and students, including debates around areas of difficulty. They can also be used to direct students to additional relevant resources.

To overcome university bandwidth problems, Google Groups are being used to keep the School's entire student community active and engaged with the institution through a SOPH communication discussion hub where resources are shared by staff and students and important information related to the academic programme is communicated.

Lucy Alexander reflects on her experience of moving into this territory:

'Following on from Ehi Igumbor's success with a Google Group for Measuring Health and Disease II in 2008, and my own with Qualitative Research Methods in 2009, I worked with convening lecturer, Hazel Bradley, in preparation for the 2010 delivery of Introducing Public Health, a new orientation module in the Postgraduate Diploma in Public Health. Here, apart from using it for ongoing communication, we designed the Discussion Group into the curriculum itself, carefully planning a schedule of intensive interaction periods with students to enhance active learning, but also to pace new distance students through the three units of this, their first module. The strategy of predetermining Discussion Interactions as 10 day periods including two weekends was especially important – it meant that everyone was forewarned that this was required of them and it avoided the discouraging feeling of weak or erratic interaction which can undermine motivation to participate in Discussion Groups.

Within a few weeks of commencing the module, almost all students had clocked into the first Discussion, some very actively, and it was apparent that students enjoyed and really needed this forum. They were able to overcome academic difficulties with Hazel and each others' help, to solve logistical problems, share resources and chat socially too.

The assessment component of this module requires students to participate in the Group - and by the second task they were

assigned learning partners with whom they were required to research a disease in public health terms and to develop in Powerpoint, a presentation for a group of community health workers on the topic. Their presentations were evaluated and commented on by another student pair, they revised it and finally it was lodged on the Google site. The degree of interaction has varied from student to student, but the participants agreed on a number of benefits from the Google Group: it was valuable in ... allowing us to get to know a little about each other through sharing photos and profiles and therefore being able to take advantage of some the interesting experience amongst our students. It allowed students to be eased into distance mode with more support than is usual, and with a ready way to ask for help from the lecturer and peers. It created a space for the lecturer to present herself in a less formal way than through e-mail communications and assignment comments which made asking for help easier for students. The much discussed benefits of actively learning together in groups were more than confirmed. One of the students noted that the Group: '...helped to create a classroom environment where we could share ideas and information' while another said the Groups '... fostered a spirit of teamwork which is good in public health'.

Having a consolidated forum for communication and engagement resulted in quick collective interaction, an archive of previous communications for reference and the potential to share additional learning resources. And using Google does not require entry into UWC's restricted bandwidth, removing one of the impediments to connectivity. There were challenges too, particularly initially getting everyone using the Group through e-mail instruction; in addition, the Group made greater time demands on the lecturers during the periods of interaction, but the learning benefits seem, according to both lecturer and students, to far outweigh these difficulties.



Short Courses and Continuing Education

Begun in 1992, the School of Public Health's (SOPH) annual Summer and Winter Schools have provided learning opportunities for close to 10,000 participants from South Africa and other African countries, making this probably the largest continuing education programmes in public health in Africa.

The short course format used in both schools provide

- responsive continuing education to health service providers, as well as
- contact time for our postgraduate students.

They also showcase the University and “market” the School's postgraduate programme, with many of our students from both South Africa and the continent more broadly hearing about us and getting to know us through attendance at one of the short courses.

Both schools are also designed to provide an introduction to the distance modules for our registered students, who are encouraged to take advantage of this face-to-face engagement. In addition, Winter School courses are open to members of the public who would like to undertake stand-alone short courses as part of their professional development, providing opportunities to gain additional skills in current public health issues and practice and those which are run regularly are accredited with the Health Professions Council (HPCSA) for continuing professional development purposes. The courses are mostly one week long, causing a minimum of disruption to the services in which the participants work.

The courses are delivered by the staff of the SOPH and guest lecturers from local and international institutions using interactive and participatory methodologies.

Attendance numbers and topics of courses vary. Below are statistics for the past two years, as well as the topics offered in the 2009 and 2010 Summer and Winter Schools.

Attendance at Winter/Spring Schools: 2009 and 2010
(Registered students and course participants)

	Female	Male	Total
Winter School 2009	365	175	540
Spring School 2010*	118	87	205

In 2010, the Winter School was held in September

rather than the usual June/July period, given the clash with the Soccer World Cup – thus its (temporary) renaming as Spring School. This shift resulted in a drop in attendance, however.

Courses Offered During Winter, Spring And Summer Schools

Community Involvement in Health
Community Participation in Health
Computerised District Health Information Systems: An Advanced Course
Computerised District Health Information Systems: An Intermediate Course
Counselling Behaviour Change Using Motivational Interviewing
Current Thinking & Practice in Health Promotion
Descriptive Epidemiology
Diet and Disease
Epidemiology and Control of HIV/AIDS, Tuberculosis and Malaria in the Era of Antiretrovirals
Epidemiology and Control of Non-Communicable Diseases
Experimental Epidemiology – Clinical and Field Trials
Globalisation and Health: Key Aspects for Policy Makers, Managers and Practitioners
Health, Development & Primary Health Care II
Health Management
Health Promoting Schools: Putting Vision into Practice
Health Promoting Settings: A Partnership Approach to Health Promotion
Health Systems Research II
Information Systems for Human Resources for Health
Introducing Public Health: Its Basis and Scope
Maternal and Child Health Policies and Programmes
Measuring Health & Disease II
Primary Health Care and Restructuring the Health Services
Primary Health Care I & II
Promoting Rational Medicines Use in the Community
Qualitative Research Methods
Quantitative Research Methods
Survey Methods for Health Research
Understanding and Analysing Health Policy
Use of Information for Hospital Management
Using Geographical Information Systems for Analysing and Mapping Health Care Issues
Using Health Information for Effective Management: An Intermediate Course

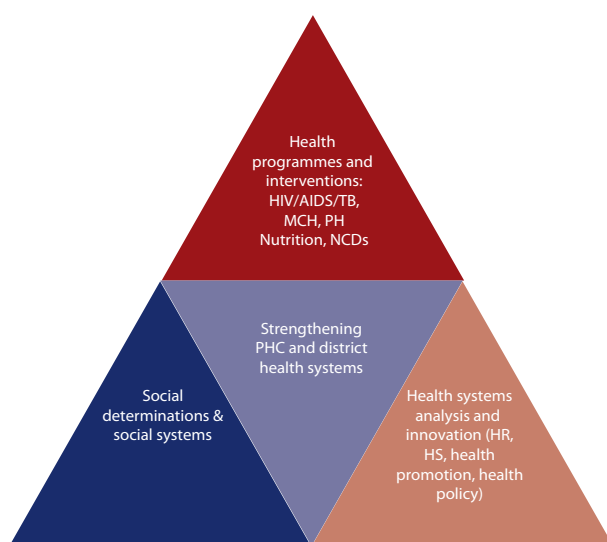


‘Short courses that we do are very important. For some people who come for that, they may just be the entry point into their programmes, into ... becoming students, so to speak. You go, you enjoy, it's very helpful, it's very relevant. So those things are like advertisements for the School. (SOPH MPH student who participated in the study into the capacities needed by public health managers in Namibia and Zambia (see page 21)).



Research and project work: Producing Evidence for Health Systems Analysis and Practice

In line with the overall orientation of the School of Public Health (SOPH), most of our research focuses on health policy and systems, social determinants of health and building a district-based public health system. It addresses four inter-related programme areas, namely HIV/AIDS and TB, maternal and child health, public health nutrition, and non-communicable diseases.



Examples of research projects are

- a multi-country research partnership aimed at compiling and analysing existing, and generating new, evidence on comprehensive primary health care globally;
- a number of projects aimed at strengthening prevention of mother-to-child transmission of HIV (PMTCT);
- research to assess the impact of global health initiatives on health service delivery;
- a prospective cohort study which aims to identify the population-level factors that drive the development of known risk factors for cardiovascular diseases; and
- an action research project in collaboration with service partners to better understand and strengthen health systems functioning in sub-districts and below.

Our research sites are located in rural and urban districts, sub-districts, facilities and communities of the

Western Cape, the Eastern Cape and KwaZulu-Natal. We have field sites and offices in East London as well as Harding, where our staff are engaged in a range of research activities – from clinical and community trials, to the development of models for community health worker programmes and monitoring and evaluation frameworks for these programmes.

Running through these focus areas is a growing recognition of the often underestimated complexity of health systems functioning which frequently leads to a failure to translate strong policy frameworks into the design, implementation and successful management of appropriate services and programmes with the necessary supportive systems.

While some projects are undertaken by staff of the School alone, many are multi-site and multi-country studies conducted in collaboration with local and international partners.

The newly-established Centre for Research in HIV and AIDS which is housed at the SOPH, but is a university-wide research centre, will further strengthen collaboration across departments and faculties within the University, and with colleagues from other South African and African institutions.

Most of our research portfolio is funded by grants from national and international donors. This reliance on external funding (which by its very nature is cyclical and time-limited) lives in tension with our vision and increasing capacity to drive and shape health systems research and innovation – for example, proactively building new research areas for which funding is not easily available or engaging in large scale and often very expensive longitudinal studies. The risk of building a research enterprise, and the related infrastructure that this requires, increases correlative to the ability to sustain this over the medium to long term. For this reason it is now one of our key priorities to strengthen and secure the medium- and long-term sustainability of the School.

On the following pages we will introduce a sample of our over 40 research projects in some detail.

Health Systems Research: District Innovation, Action and Learning for Health System Development (DIALHS)

District and sub-district managers in the South African health system are charged with building, strengthening and managing health systems that implement national policy frameworks. At the same time they need to remain responsive to local needs and contexts, involve multiple actors in decision-making and inspire and motivate staff to be creative in delivering services in resource-constrained settings. This is a complex and complicated undertaking, and managers are often hamstrung by the constraints of existing systems while they themselves are not sufficiently well-equipped to navigate between high need, limited resources and inherent system complexity.

The District Innovation, Action and Learning for Health System Development (DIALHS) project – funded by The Atlantic Philanthropies – is engaging with these challenges at the implementation level in the sub-district of Mitchell's Plain in Cape Town. Comprising a partnership between our sister School at the University of Cape Town and ourselves, as well as the health departments of the City of Cape Town and the provincial government of the Western Cape, the project aims to facilitate a better functioning, more responsive, more effective district health system (DHS). It intends to do this firstly, through better understanding the key restrainers and enablers of health system functioning at local level; and secondly, by jointly developing strategies and interventions which respond to the complex and layered nature of the health system.

As we are employing an action learning approach in this project, we implement all activities through reflective processes which directly engage local health

managers and staff. This involves regular meetings in which we review activities with colleagues within the learning sites, and adapt and revise activities as necessary. So in the development stage and in the first year of implementation in 2010, we have worked with local district/sub-district/facility managers to understand and map the multiple layers and facets of sub-district functioning – with a view to identifying entry points for 'interventions'.

In addition, the research team is playing a supportive role in encouraging practitioners to engage in cycles of planning, implementation/practice, reflection and evaluation, learning and revision. In this way the combined DIALHS team (both researchers and health practitioners) will work with other local health managers to draw out the wider lessons from this experience. For example identifying the enabling and restraining factors at other levels of the health system will generate lessons and ideas about the systemic changes necessary to support the DHS and to improve primary and community care. These could, in turn, positively affect policy implementation and innovation within the DHS – which could provide lessons for the district itself as well as for provincial and national colleagues.

The DIALHS project exemplifies the School's serious commitment to collaborative work which integrates the many elements required for effective systems functioning, rather than focusing on a single topical issue in isolation. It is also breaking new ground methodologically as the project applies and adapts concepts of reflective practice, case study research and collaborative inquiry to the field of health policy and systems research.



THIS CITY WORKS FOR YOU



DIALHS

District innovation, action and learning for health systems development
A collaboration between:

City of Cape Town and its Mitchell's Plain sub structure
Provincial Government of the Western Cape, Metro District Health Services,
and its Mitchell's Plain sub structure

University of Cape Town, School of Public Health

University of the Western Cape, School of Public Health



The Effects of Globalisation on Health

One of the expressions of globalisation in the health sector is in the area of funding. Over the past fifteen years there has been a marked change in donor funding, with Global Health Initiatives (or Global Public-Private Partnerships) becoming increasingly important, especially in Africa

Global Health Initiatives (GHIs) in Africa

In the last three years the School of Public Health (SOPH) has been working with consortium partners from Angola and Mozambique, Ireland, Belgium and Portugal reviewing country-level evidence of the impact of Global Health Initiative (GHI) funding on the health systems in five African countries (Angola, Burundi, Lesotho, Mozambique and South Africa). The School is involved in two countries, South Africa and Burundi. Data have been generated using both quantitative and qualitative research methods including individual interviews and document analysis.

Funded by the European Union, the study was initiated in response to increases in the amount of funding from GHIs, which have emerged as an alternative to traditional bi-lateral and multi-lateral health development funding. Proponents of GHIs see them as an efficient and rational response to global public health threats, yet little is known about how the shift from traditional funding mechanisms towards global approaches has impacted health systems in recipient countries, nor how donor harmonization initiatives (DHIs) have interplayed with HIV-related activities at country level.

Positive benefits of GHIs include their innovative contributions to mobilizing HIV funding, the broadening of stakeholder involvement in HIV/AIDS issues at both global and country levels, and the rapid scale-up of HIV/AIDS programmes with sharp increases in the numbers of people accessing antiretroviral treatment (ART) services. Access to antiretroviral (ARV) medicines has improved the

health status and quality of life of people living with HIV infection. However, the negative effects of GHIs include distortion of national priorities, plans and programmes, and the fragmented implementation of programmes, resulting in the duplicate production of reports and indicators and shifting of human resources from general health services into HIV programmes.

In this study we are assessing how the rise of GHIs has impacted on the architecture of development partnerships and country-level health systems' functions. We are identifying lessons that might inform the better integration of GHIs within existing partnerships and country systems in a way that improves the coherence of development assistance and the co-ordination and efficacy of the health system.

Teaching about Globalization and Health

The School is also expanding its work in this area through the development of a teaching module on Globalization and Health. The purpose of the course is to provide students with an understanding of the political, economic and other causes of disparities in health and health care between and within countries with a focus on how globalisation may contribute to these, and of key actions to address these global factors.

The module was successfully piloted as a short course in last year's Spring School and attracted students from various disciplines, from government departments of health and NGOs. The short course is currently being developed into a full distance learning module in collaboration with the Centre for International Health at Bergen University, Norway and Muhimbili University of Health and Allied Sciences, Tanzania and will be taught at all three universities as part of various Masters programmes.

Case studies from the Global Health Initiatives (GHIs) in Africa study (above) are being used in this course.



'Yes this is another problem we are facing. We depend on donors. The whole national budget for the country, including health, is financed up to 55% by donors. The government provides 45%. So we do not have enough revenue resources to allocate for health, for education etc. We have beautiful plans, even for human resources, but if you have no budget to resource these plans it does not mean anything. But we are making efforts to enhance people's health, people's living standards generally.' (SoPH MPH student Junvencio Matsinhe from Mozambique).

Identifying Risks to mitigate the rise in Non-Communicable Diseases

In the late 1990s, community health workers (CHWs) in the Western Cape became increasingly concerned about the growing levels of diabetes and hypertension in the communities in which they were working. As they wanted to better understand the risk factors and determinants of Chronic Non-Communicable Diseases (CNCDs) more generally, they requested an intervention/programme which would reduce the risks posed by these conditions.

This invitation presented the School with an opportunity to build on our earlier training and research on nutrition in mostly clinical settings. Here we could develop activities which were more community-based and strengthen the public health approach of participatory, action research.

Our earlier work with CHWs had led to their leading a prevention intervention which included public information events, group 'fun walks' that facilitated safe outdoor activities, and screening for high blood pressure and diabetes. In 2005 weekly health clubs were established to broaden the community focus. Facilitated by CHWs and supported by the School of Public Health (SOPH), their initial focus was lifestyle change through cooking demonstrations and exercise sessions. As the aim was to expand the focus to the broader determinants of CNCDs, CHWs were also trained in basic motivational interviewing to improve communication skills with their clients towards assisting members in taking responsibility of their own health.

Building on this initial intervention, the work with CHWs has now been expanded to include a larger population in both urban and rural settings across the Western and Eastern Cape provinces – in a multi-party study called PURE. From 2009, the Prospective Urban and Rural Epidemiology (PURE) study, involving 17 upper-, middle- and low-income countries, was undertaken by an inter-

national collaboration of researchers, including staff from SOPH. It seeks to investigate the causes of the known traditional risk factors for CNCD and involves following over 150 000 adult participants for 12 to 15 years – with data being collected at four levels: national, community, household, and individual.

National data will be on policy and economic indicators that influence health while that at community level will be about social and environmental factors that affect health. Household level data focuses on family structure, income, housing; while data at an individual level is about physical activity, diet and psycho-social behavior.

The PURE study will assist in delineating the societal and biologic pathways, from proximate environmental causes (mal-adaptation to urbanization) to primordial risk factors (obesity) as well as primary risk factors (dysglycemia, dyslipidemia, hypertension) and clinical disease. In this way it hopes to facilitate the development of interventions to mitigate the rise of obesity, diabetes and cardiovascular diseases in populations at varying stages of epidemiologic transition.

Contributing staff and researchers are Thandi Puoane, Ehimario Igumbor, Lungiswa Tsolekile, Moise Muzigaba and David Sanders. Research assistants on the project are Kululwa Ndayi (Medical Research Council Research intern), Ntombodidi Gobile, Boniswa Jwili and Khumbula Ndamase.

Local collaborators include the Chronic Disease of Lifestyle Research Unit of the Medical Research Council, the Sports Science Research Institute and the Department of Medicine, University of Cape Town, and the South African Herbal Sciences and Medicine Institute and departments of Dietetics and Psychology at the University of the Western Cape.



Engaging with HIV/AIDS

The extent and diversity of the HIV/AIDS pandemic in South Africa, and the many challenges it creates for the people, households and communities it affects, are wellknown – as are the associated pressures on health systems, services and personnel.

The School of Public Health (SOPH) devotes a large part of its research to the field of HIV/AIDS. Many of the courses taught to postgraduate students have included issues relating to HIV/AIDS and a short course is taught on 'Epidemiology and Control of HIV/AIDS, Tuberculosis and Malaria in the Era of Antiretrovirals'. Many of their mini-dissertations (listed on pages 13 - 16) show the practical involvement of these part-time students in issues relating to HIV and AIDS.

Working in the field of HIV/AIDS can entail focusing on particular HIV/AIDS-related issues, but can also include broader or related aspects of health. So, for instance, work on health systems, human resources, social determinants of health or management of chronic diseases, can both inform, and be informed by, this significant health issue. The projects the School of Public Health undertakes (listed below), the publications they produce and conferences papers they have presented (listed on pages 49 – 60) attest to work that is both focused on HIV/AIDS as well as on aspects of health that ultimately relate to this pervasive social and health phenomenon.

The School's history of working in relation to HIV/AIDS – and the breadth of the field of public health more generally – made it the ideal place to locate a university-wide Centre for Research in HIV and AIDS. Established in 2009 this new Centre seeks to co-ordinate UWC's HIV/AIDS-related activities and promote collaboration in research. It is reported on page 38.

Working in the field

Since the late 1990s the SOPH has undertaken a range of field-based projects. In a few instances this has entailed establishing a satellite office staffed by employees of the School recruited from the local area. One such site is our office in Harding in the Sisonke district of KwaZulu-Natal. Established in 2002, it has been home to 'Good Start'-related projects – the most recent of which has been a community-based randomised controlled trial to measure the effect of offering people the opportunity to test for HIV in their homes on HIV testing rates. This is the story of that project.

Knock – Knock! HIV counselling and testing at home

In 2010, the right to offer and administer HIV tests was extended to lay health workers in South Africa, significantly increasing access to this test, including through community-based services.

In 2009, the SOPH began a community-based randomised controlled trial in collaboration with the Medical Research Council (MRC), the aim being to measure the effect of offering HIV counselling and testing to people in their homes on the uptake of this service. The findings will have important implications for the expansion of community-based HIV testing, for the training of new cadres of health care workers, and for the development of mechanisms to improve linkages between community and facility-based services. Ultimately they may inform government policy and programming.

The process started with eleven lay counsellors conducting door-to-door home visits in several rural communities of the Umzimkulu sub-district of KwaZulu-Natal. Using district-approved rapid HIV test kits, they offered free counselling and testing to people who were interested in knowing their HIV status.

Over 5,000 people agreed to be tested, about three quarters of those approached by the lay counsellors – suggesting that testing at home is highly acceptable. Just over half (about 57%) were being tested for the first time. The majority (78%) were female, reflecting the underlying population in that area as well as patterns of migration for work – and clients ranged from 14 to 96 years old.

Evaluating the accuracy of the test results is one of the key objectives of the trial, given that the tests were done by lay counsellors. Using a second set of tests which were processed in the lab, the trial is finding that adequately trained lay counsellors are indeed capable of conducting high quality rapid HIV tests and of accurately interpreting the results. Of the 3,861 tests done, the counsellors' results and the laboratory results matched in all but eleven cases.

Of those who were tested, 11% were found to be HIV-positive. The next step is for these people to find out how advanced the infection is by having their CD4 count taken. Another objective of this project, then, is to assess how effectively newly-diagnosed HIV-

positive people access health facilities, especially for care and treatment. While efforts to track the 474 HIV-positive clients are ongoing, by January 2011 only 100 clients had been tracked at a local facility. The median time taken for those who had had their CD4 count taken was 8 days, with three quarters (76%) of clients accessing services within one month. About a fifth (18%) accessed services within three months, while 6% did so after three months. The trial's insight into people's uptake of facility-based services after they have been diagnosed as HIV-positive through a test done at home will increase with further tracking and self-reported data still to be collected.

In terms of the levels of infection among those who had had their CD4 count taken, the median CD4 count was 345 – while about a quarter (24%) had a CD count below 200 (the level at which people became eligible for treatment at that time). Of those, 15 (63%) clients started antiretroviral therapy (ART) literacy classes and 13 (54%) initiated ART.

Aside from research-oriented success, this home-based counselling and testing intervention has achieved great success at community level. One of the staff's proudest moments was at a large community gathering in December 2010, when a prominent chief from one of the intervention areas presented the project team with a Certificate of Appreciation. His extensive speech praising the project's efforts was met with cheers and applause from community members. Several other traditional leaders also spoke out, acknowledging that without the project, many people would not know their HIV status.

The study's post-intervention survey will be implemented in 2011. This will provide a more complete assessment of intervention success with regard to HIV testing rates as well as secondary outcomes such as risk behaviour, community-level stigma, disclosure, and intimate partner violence.



OTHER PROJECTS

These projects undertaken by the staff of the School of Public Health (SOPH) in 2009 and 2010 are often in collaboration with partners, whose organisations are named wherever this is the case. Only the names of the main SOPH staff involved in the project are given here, however.

Health systems analysis and innovation Projects

Assessment of Waiting Times and Systems Efficiency at primary, secondary and tertiary care facilities

Gavin Reagon, Ehi Igumbor, Natasha Titus

A key component of the Routine Health Management Information System of the Department of Health is routine surveys, one of the important ones being the Waiting Times and Systems Efficiency survey which primarily measures how long people wait for a service and the amount of service time they receive at health facilities. In addition to identifying long waiting times, the survey also identifies the reasons why these arose and suggests ways to reduce them. The survey also measures staff's workloads, the efficiency of service provision and the percentage of time staff spent attending to patients.

The overall project objective is to assist the Department of Health to enhance their health information system via routinely conducting these surveys in all facilities in Cape Town. If successful this would then make it possible for the Department to extend routine Waiting Times and Systems Efficiency Surveys to all facilities in the country, thereby significantly improving the potential for achieving ongoing country-wide improvements in health service provision. Specifically it would allow health facilities to decrease waiting times where they are high and improve quality of care where it is poor.

Revitalizing Health for All: Learning from comprehensive primary health care experiences

Nikki Schaay, David Sanders

This research partnership comprises

- the compilation and analysis of the existing evidence base on Comprehensive Primary Health Care (CPHC) globally,
- the identification of areas for new research on CPHC and the methodologies and methods most suitable to such research, and

It also includes the provision of training and research funding for junior researchers and their policy or program partners to undertake new studies of CPHC.

The project is funded by the Canadian Global Health Research Initiative and is jointly facilitated by professors David Sanders and Ron Labonté, Institute of Population Health, University of Ottawa, Canada – who work in close collaboration with a project team comprised of representatives from ten other academic and civil society institutions – including

- the Society for Community Health Awareness, Research and Action (SOCHARA), India for the South Asia region;
- the Universidad de El Salvador, El Salvador; the Universidad Javeriana, Colombia and Radboud University of Nijmegen in Holland for the Latin American region; and
- the Indigenous Peoples' Health Research Centre, Canada, the Co-operative Research Centre for Aboriginal Health and the Department of Public Health at Flinders University and the South Australian Community Health Research Unit, Australia for the project's focus on indigenous/aboriginal health.

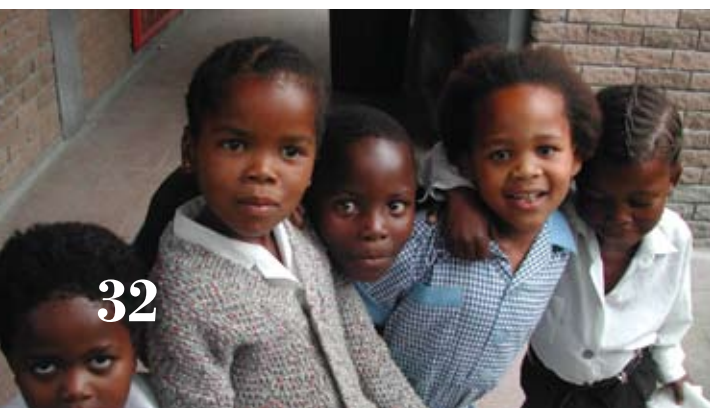
Developing roles and competencies of district pharmacists: A case study from Cape Town

Hazel Bradley, Uta Lehmann

The aims of this project are

- to define the roles and competencies of pharmacists providing primary level services at district and sub-district levels in Cape Town;
- to develop a competency framework for these pharmacists; and
- to develop and pilot a training programme to enhance these competencies.

Divided into three phases, the study commenced in 2008 and will be completed in 2011.



Evaluation of aspects of the training of home community-based carers within the Expanded Public Works Programme (EPWP)

Uta Lehmann, Busisiwe Nkosi

This evaluation study was commissioned by the Department of Health of the Western Cape with a view to developing a better understanding of the outcomes of training of home community-based carers and their alignment with the departmental service delivery platform in the Western Cape.

Developing human capacity in the context of HIV/AIDS: An integrated university-wide approach

David Sanders, Debra Jackson, Christina Zarowsky, Verona Mathews, Suraya Mohammed, Jessica Rebert, Harry Hausler

The programme focuses on developing approaches and interventions which will strengthen the human capacity within the South African health system, focusing specifically on managers and health, education and community workers. It also aims to support and consolidate the implementation of services at the primary level of care, with a particular focus on HIV and AIDS and opportunistic infections, such as tuberculosis. All projects within this programme will focus on the overall aim, namely strengthening and expanding the development and implementation of comprehensive HIV and AIDS prevention, care and treatment programmes in South Africa in order to mitigate the impact of the HIV and AIDS epidemic, and specifically on human capacity development.

The projects in which the SOPH is involved – all of which are funded by CDC/PEPFAR – include the following:

- **Human resource information systems for district level planning and management**

Verona Mathews

Human Resources (HR) are the backbone of any health system. Managing HR data – and ensuring the data collected are both relevant and useful is vital. South Africa has an extensive health system that operates across nine provinces and 53 districts; developing and maintaining good local HR information ensures that HR are effectively managed.

Working in two Western Cape districts, this project focuses on helping district level HR management understand and tailor their district's HR information system framework. Its bottom-up, participatory approach ensures that local staff have full ownership of resulting indicators and their HR information system.

- **Improving quality of community health worker programmes for delivery of HIV/AIDS services**

Uta Lehmann

Community health workers (CHWs) are key service providers for many community-based HIV and AIDS initiatives in South Africa. This project initially sought to train Community Health Workers (CHWs), but it quickly found that the issues for many CHWs revolved around the policy environment, not training. The project now focuses on getting CHW stakeholders in the Western Cape to discuss their issues, both together in workshops and individually with researchers, rather than initiating new policies without consultation. This has already improved policy development at a number of levels.

- **Addressing TB/HIV through the development of health promoting schools**

Patricia Struthers, Suraya Mohamed

Health promoting schools (HPS) have been developed internationally to ensure that the school environment is a healthy setting for learning and working.

Growing a healthy school environment is an intensive process including the capacity development of individuals and the organisation. It includes the development of school TB policies, skills development, addressing challenges in the school's physical and psycho-social environments, developing the school-community network, and facilitating links to appropriate support services.

In South Africa's context, HIV and TB are key issues to address at schools. Based in three Western Cape secondary schools, this project works with school man-



agers, teachers and other school staff, learners and parents, as well as the district education and health departments.

Strengthening health information and human resource management systems in South Africa

Vera Scott, Hilton Synders, Feroza Amien

In this project, project staff have worked with health service partners to develop health information management tools to assess the extent of comprehensive and integrated HIV/TB/STI services in public health facilities in urban and rural health districts. Based on the information generated, the team has identified the human resources and health systems constraints to ensuring quality and sustainability of comprehensive and integrated services. Approaches that strengthen planning, leadership and management capacity have been explored and modelled – including the utilisation of health information management tools.

This project is undertaken in partnership with the health departments of the City of Cape Town and the Provincial Government of the Western Cape – and is funded by the Department of Health and the Rockefeller Foundation.

Social determinants and Social systems Projects

Transforming health and education policies and systems for improved HIV prevention and care

Christina Zarowsky

This project has entailed the establishment of an HIV Research Centre within the SOPH, which will attract a multi-disciplinary team of experts to conduct research that will inform policies and transform health and education systems. The aims are to improve HIV and TB prevention and care, to improve the impact of education on HIV/AIDS prevention and to develop proper responses for prevention of and response to gender-based violence. The research conducted will provide training ground for postgraduate students and post-doctoral candidates.

This work is funded by VLIR-UOS under the Dynamics of Building a Better Society partnership with UWC.

Understanding barriers to access and adherence to antiretroviral treatment in South Africa's Western Cape province

Brian Van Wyk, Thato Ramela, Paschaline Stevens

Barriers to access and adherence to anti-retroviral treatment (ART) have been identified as issues of major concern in the Western Cape province, despite the fact that the province is at the forefront in the rollout of ART in South Africa. Such barriers, much like the diseases being treated, are the result of the complex intertwining of political, economic, social-cultural, gender, and biological factors. This three-year ethnographic study assessed the nature and extent of HIV and AIDS treatment initiation and barriers to adherence at three ART sites (Atlantis, Vredenburg and Malmesbury) and their surrounding communities.

This project was undertaken in partnership with Fiona Larkan of Trinity College, Dublin and was funded by Irish Aid.

Health programmes and interventions Projects

School interventions to prevent non-communicable diseases

Thandi Puoane, Khumbula Ndibaze

Childhood obesity is becoming a problem in South Africa, giving rise to the development of programmes that can be implemented at schools. We are collaborating with the Medical Research Council and the University of Cape's Town Sport Science Research Institute in a project aimed at reducing obesity at schools among learners and educators. The aim of this intervention in two schools in Khayelitsha in Cape Town is to develop a programme to promote healthy eating and increased physical activity, as a means of preventing obesity in the black African community. Baseline data found 20% of females were obese, while the prevalence of obesity among high school learners was 32,4%. Lack of physical



activity and high body mass index (BMI) suggest that there is a need for interventions that will increase physical activity and improve nutritional habits.

Promoting Healthy Lifestyle project

Thandi Puoane, Lungiswa Tsolekile, Moise Muzigaba, Khumbula Ndibaze

Community health workers' concern about increasing levels of diabetes and hypertension in their community resulted in 2000 in a multi-faceted intervention being offered by a multi-sectoral team led by the SOPH. After initial research, training and community-based activities, community health clubs were established in 2005 – and continue to be run by the CHWs with support from the School. Most recently, CHWs have been trained in using Motivational Interviews – with a view to demonstrating the feasibility and acceptability of an MI-based common risk factors disease prevention intervention delivered by CHW to health club members.

Chronic Disease Initiative for Africa

Thandi Puoane (Executive member), David Sanders (Board member), Lungiswa Tsolekile (PhD student)

The SOPH is part of the Chronic Diseases Initiative in Africa (CDIA) network which aims to build internal capacity within Africa to respond to CNCD. The network comprises three South African universities - the universities of Cape Town, Stellenbosch and Western Cape, the South African Medical Research Council, the Hindu Mandal Hospital in Tanzania and Harvard University in the United States.

One aspect of the network has been to develop a chronic disease centre – based at the University of Cape Town – whose vision is the ultimate reduction of the growing burden of chronic diseases and their risk factors in the African region.

The School's Promoting Healthy Lifestyle project (above) is linked to the CDIA initiative.

Improving the hospital management of severe malnutrition

David Sanders, Thandi Puoane, Moise Muzigaba

This study evaluates the effectiveness of the WHO treatment guidelines for severe malnutrition ('10 steps') in the management of malnourished children who are HIV-positive. Children who meet these criteria who are admitted to two district hospitals in the Eastern Cape are tested for HIV on admission, then treated according to the guidelines. Outcome measures are rate of weight gain, length of hospital stay and case fatality rates.

While recruitment has been slow due to the relatively slow rate at which children are admitted to both hospitals, 80% of the required study sample size has been recruited to date. Although there were inconsistencies between both hospitals we began to see some differences with respect to patterns of case fatality rates, rate of weight gain as well as length of stay between HIV-infected and HIV-uninfected children who had been admitted with severe malnutrition in both hospitals.

Antiretrovirals and sexual behaviour: A qualitative study to explore the impact of ART on the sexual behaviour of people on therapy

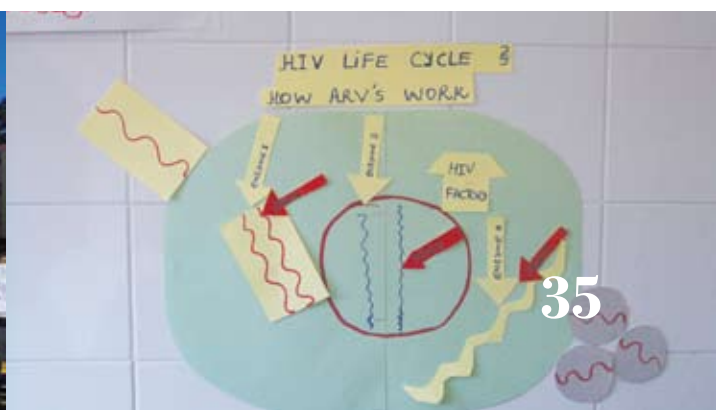
Jessica Rebert, Brian van Wyk, Nikki Schaay, Harry Hausler

Conducted in two sites in KwaZulu-Natal this study aimed to assess the impact of antiretroviral therapy (ART) on the sexual behaviour of people on ART – and to consider the implications this has for the information and support provided to these patients by health workers in public health facilities. The final results of this research will be available in 2011.

Options Western Cape: Implementation and evaluation of a positive prevention intervention among HIV-positive people on ARVs in Cape Town

Nikki Schaay

The aim of this MRC/UCT/HSRC initiated project is to evaluate the implementation of a clinic-based behavioral intervention centered on HIV risk behaviours (entitled 'Options') in the Western Cape, and to test whether it is effective in reducing risky sexual behaviour among patients on ARVs. A report 'Preliminary Findings on the Feasibility of Incorporating Options into Routine Adherence Counselling Practice' has been presented –



and a qualitative analysis of counselling practice before and after the intervention is now being undertaken.

This project is being undertaken as a collaboration between the Medical Research Council, the University of Cape Town and the Human Science Research Council as well as the Western Cape Provincial Department of Health, in association with Tulane University, Brown University, Centers for Disease Control, University of Connecticut, University of Western Ontario.

Reproductive intention in the context of HIV

Debra Jackson

In this collaboration with the University of Missouri, the reproductive intention and family planning in the context of HIV in rural South Africa is explored.

Multi-country EU and CDC-funded cluster randomized trial of peer support to promote exclusive breastfeeding

PROMISE-EBF – Mickey Chopra, Debra Jackson, David Sanders, Tanya Doherty

This project was one study in the PROMISE consortium with three collaborators each from Africa (Zambia, Uganda, Burkina Faso) and Europe (France, Norway, Sweden). It was a cluster randomised trial in the four African countries to examine the effectiveness of using in home peer support to promote exclusive breastfeeding during the first six months of life. In South Africa there were three project sites and the project included sub-studies on peer support to assist with obtaining social welfare grants, and infant feeding in HIV-positive mothers.

Saving newborn lives: An effectiveness study of integrated, community-based package for maternal, newborn, child and HIV care in disadvantaged communities in South Africa, 2008-2010

Debra Jackson, Tanya Doherty

This project is a cluster randomized trial on commu-

nity health workers' promotion of newborn health in Umlazi, Durban, KwaZulu-Natal. It is being undertaken in collaboration with South African Medical Research Council and Stellenbosch University.

Cluster randomized trial of home-based VCT and TB/HIV/PMTCT Integration – Sisonke District

Debra Jackson, Jeannine Uwimana, Weliswa Binza, Tanya Doherty

This project comprises several CDC (SA) funded studies – undertaken in collaboration with MRC and TBHIV Care. They include the Facility Nurse Mentor Project aimed at promoting integration of HIV/TB/STI and PMTCT services; Action research to examine comprehensive integrated CHW services for HIV/TB/STI and PMTCT services; and a cluster randomized trial to examine the effectiveness of a home-based VCT programme.

Best practices and PMTCT-MNWCH integration

Debra Jackson, Tanya Doherty

This project documented best practices in the integration across South Africa of prevention of HIV transmission from mother to child (PMTCT) – and MNWCH (maternal, neonatal, women and child health). A publication on best practices in PMTCT and handbook for district-level integration of PMTCT into MNWCH services was developed.

National PMTCT evaluation

Debra Jackson, Wondwossen Lerebo, Tanya Doherty, Selamawit Woldesenbet

A situation analysis of EID (early infant development) services and a national survey of six-week expanded programme of immunisation (EPI) clinics were undertaken in all nine provinces to investigate HIV transmission and outcomes in the national PMTCT programme.

Rwanda PMTCT Evaluation: 2010-2011

Debra Jackson

Rwanda is implementing a national PMTCT pro-



gramme evaluation, using routine testing of mothers and infants at the six-week infant immunization visit. As a co-Principal Investigator, on the South African PMTCT Evaluation, Debra Jackson is consulting with Rwanda UNICEF, National University of Rwanda and Rwanda Department of Health to provide technical assistance and promote collaboration across these two important studies.

Sisonke baseline survey for community-based intervention for TB/HIV/PMTCT integrated care

Debra Jackson, Harry Hausler, Jeannine Uwimana, Wondwossen Lerebo

Despite being advocated by national and international agencies such as the World Health Organisation (WHO), the integration of TB and HIV programmes has been slow, particularly in sub-Saharan Africa. This project aims to integrate TB/HIV & PMTCT services at both facility and community levels using a QI approach, nurse mentors and comprehensive supervision and training of community health workers.

A double blind randomised placebo-controlled trial of the efficacy and safety of infant peri-exposure prophylaxis with lamivudine to prevent HIV-1 transmission by breastfeeding ANRS 12174 - PROMISE-PEP, 2008-2010

David Sanders, Debra Jackson, Tanya Doherty, Cheryl Nikodem, Mandisa Singata et al ANRS/EDCTP

This is a second study within the PROMISE consortium. This is a randomised controlled clinical drug trial examining the effectiveness of alternative drugs to prevent mother to child transmission of HIV (PMTCT) through breastfeeding. Currently only Nevirapine is recommended. No other drugs have been tested for this purpose so results are important for potential options for clinicians in the management of infants at risk for acquiring HIV during the first year of life.

Strengthening African research for responsive health policy and systems: Mapping and analysis of public health research and capacity strengthening initiatives in Africa

Christina Zarowsky, David Sanders, Uta Lehmann, Debra Jackson

This three-year project contributes to the broad-based vision of the new UWC Centre for Research in HIV/AIDS through research and synthesis about broader health policy and systems-oriented capacity development initiatives and approaches, beyond a focus primarily on HIV/AIDS. This project is mapping, analysing, and fostering linkages among programmes of health policy and systems research, training and capacity strengthening in sub-Saharan Africa. It is also strengthening linkages and exchanges between UWC and Canadian researchers and institutions. This will complement the Centre's vision of integrating HIV/AIDS into broader health systems, education, and gender analysis and practice.

African capacity development for complex intervention trials – Phase 2 (ADAPT2)

Christina Zarowsky (Co-investigator)

The goal of the ADAPT programme is to support African researchers and institutions to prepare for and lead large, multi-centre AIDS prevention trials.

Building on the experience and networks created in ADAPT1, Phase 2 will feature a range of opportunities – like a series of intensive short courses on epidemiology and clinical trials methods for researchers from southern African countries; an ongoing HIV prevention trial being undertaken in Botswana, Namibia and Swaziland; support in developing fundable proposals and partnerships to increase sustainability.

The School has been assisting in planning and early stages of implementation of this second phase of the programme, which is being funded through Global Health Research Initiative, Canada.



The UWC Centre for Research in HIV and AIDS



In 2009, the University of the Western Cape established a cross-faculty Centre for Research in HIV and AIDS, housed in the School of Public Health and closely associated with the University's HIV and AIDS Programme. Under the leadership of Prof Christina Zarowsky, the Centre catalyses and co-ordinates multi-disciplinary HIV-related research across the University and beyond, with a view to supporting and adding value to this research and its use in the field from policy and systems development through to implementation. It does this through organizing symposia and seminars, acting as a clearing house for existing and proposed research, recruiting and hosting graduate students and postdoctoral and other fellows; and promoting publications including a series of working papers on HIV/AIDS and related issues.

The Centre's objectives are:

1. to conduct and promote multidisciplinary research in the areas of integrated HIV and AIDS prevention and care, with an initial focus on health policies and systems, education, and gender based violence;
2. to harness, encourage and co-ordinate demonstrated multidisciplinary research potential related to HIV across the faculties of the University through seminars and workshops;
3. to develop sustainable HIV-related research capacity at the University, through providing a research base for staff and student fellows in multidisciplinary research and capacity strengthening related to integrated HIV and AIDS prevention and care;
4. to contribute, through research, to the transformation and strengthened capacities of health and education policies and systems and of broader community and social systems to decrease the burden of HIV and related conditions, including effective responses to gender-based violence;
5. to fundraise for and develop research partnerships around planned projects that are in line with the Centre's broad aims and objectives.

The work of the Centre is currently organised around two large grants held by the SOPH:

- a founding grant from the Flemish Interuniversity Council (VLIR) intended to support research for stronger policies and interventions in health systems, education, and gender-based violence; and

- a CDC/PEPFAR grant – given to the School before the Centre was established – intended for strengthening human capacity to address HIV/AIDS and TB in South Africa. (The Centre's Director is now the Principal Investigator for this grant.)

Together these grants provide a foundation for post-graduate research across Africa and an anchor for increasing collaboration and complementarity across both existing and new research across the University and with South African and international partners.

Activities in 2010

The Centre was formally launched in late March 2010, during its first international symposium on the theme of 'Public Health in the Age of HIV'. In addition to this event, the highlights of the Centre's first year of operation have included:

- the continued implementation of the existing research grants and development of new interdisciplinary grant proposals;
- our first Postdoctoral Scholar, Dr. Thomas Achia from the University of Nairobi, who is working on spatial statistics and HIV in Kenya and South Africa;
- the joint development with the HIV and AIDS Programme of a UWC AIDS portal (www.hivaids-uwcc.org.za) launched late in 2010;
- the launch in December 2010 of our 'HIV in Context' Seminar Series;
- the publication of the first three 'HIV in Context' Working Papers: HIV and Health Systems in Southern Africa by Doherty et al, Intersections of Gender and HIV by Tamara Shefer; Health systems, public health and research capacity strengthening in South Africa: Ongoing literature search and review by Shamu & Zarowsky;
- a strong presence at the AIDS 2010 conference in Vienna, as well as other international and national conferences;
- the establishment of new linkages with civil society, decision makers and related initiatives in other universities – like the South African universities of Pretoria, Cape Town, KwaZulu-Natal and the Witwatersrand, and further afield, the universities of Toronto, Montreal and McGill as well as Ghent University and New York University.

HIV RESEARCH AT UWC

The 2009 Audit of HIV at UWC conducted by the University's HIV and AIDS Programme identified over 200 discrete research products and activities, covering nearly all faculties of the University and ranging from student research projects to major collaborative research programmes. Some of this work was presented at a March 2009 Symposium organized under the VLIR funding. Participants expressed great interest in learning about others' work and in finding ways to collaborate or, at least, to share and co-ordinate efforts more regularly and more effectively.

In keeping with UWC's history, much of the research was linked closely to teaching, policy, and on-the-ground practice with communities, NGOs, and health and education practitioners, managers, and decision makers.

The large number of Masters' theses in the audit indicates that there is a substantial body of potential researchers who could bring a range of disciplinary and topical perspectives to bear on HIV. Some faculties and departments have developed a particular focus around HIV. For example, the Faculty of Education and the HIV & AIDS Programme have developed a significant body of curriculum and education intervention. The School of Public Health and colleagues in other departments within the Faculty of Community and Health Sciences have developed a large body of HIV-related research, including several large grants involving South African and international partnerships, recent academic appointments, and doctoral students attached to research programmes.

Conferences at which SoPH Staff presented papers and articles and papers they published are listed on pages 52 - 60. Students' mini-theses on HIV/AIDS are among those listed on pages 13 - 16.



ACADEMIC LINKS, PARTNERS & FUNDERS

External Academic Links and Partners

In South Africa:

Alternative Information and Development Centre (AIDC)
City Health Directorate, City of Cape Town
Health Systems Trust (HST)
Human Sciences Research Council (HSRC), Durban
Metro District Health Services (MDHS), Cape Town
National Department of Health
National Research Foundation (NRF)
People's Health Movement (PHM)
Provincial departments of health: Western Cape, Eastern Cape, KwaZulu-Natal, North West, Limpopo, Gauteng
Rhodes University
South African Medical Research Council (MRC)
University of Cape Town (UCT)
University of KwaZulu-Natal (UKZN)
University of Limpopo
University of Pretoria
University of Stellenbosch
University of the Witwatersrand (Wits)
Walter Sisulu University

Beyond South Africa:

Addis Ababa University, Ethiopia
African Centre for Global Health and Social Transformation (ACHEST), Uganda
Alliance for Health Policy & Systems Research, World Health Organisation (WHO), Switzerland
Brown University, USA
Center for Chronic Diseases in African Region
Centre Muraz, Burkina Faso
City University of New York (CUNY), USA
Community Working Group on Health (CWGH), Zimbabwe
Duke University, North Carolina, USA
Eduardo Mondlane University, Mozambique
Flinders University, South Australia
Foundation for Research in Community Health, India
Great Lakes University of Kisumu (GLUK), Kenya
Harvard School of Public Health, USA
HEAL Africa, Democratic Republic of Congo
Institute of Population Health, University of Ottawa, Canada
Jimma University, Ethiopia

London Metropolitan University, UK
London School of Hygiene and Tropical Medicine, UK
Makerere University, Uganda
Mbarara University of Science and Technology, Uganda
McGill University, Canada
McMaster University, Canada
Mekelle University, Ethiopia
Ministry of Health, Tanzania
Muhimbili University, Tanzania
National Center for HIV Reference, Bujumbura, Burundi
National Institute for Medical Research, Tanzania
National University of Ireland, Maynooth (NUIM), Ireland
National University of Rwanda
Pontificia Universidad Javeriana, Médico, Columbia
Radboud University, Holland
Royal Tropical Institute (KIT), Netherlands
Society for Community Health Awareness, Research and Action (SOCHARA), India
Swiss Tropical and Public Health Institute, Switzerland
Tropical Institute of Community Health and Development (TICH) in Africa, Kenya
Tulane University, USA
UNICEF
UNICEF, Rwanda
United Nations Standing Committee on Nutrition, USA
Universitätsmedizin Berlin, Germany
University of Bergen, Norway
University of Burundi
University of Connecticut, USA
University of Edinburgh, Scotland
University of Eduardo Mondlane, Mozambique
University of Ghent, Belgium
University of Missouri, USA
University of Montpellier, France
University of Oslo, Norway
University of Western Ontario, Canada
University of Zambia
University of Zimbabwe
Uppsala University, Sweden
VLIR (Flemish Inter-Universities Council), Belgium
WHO Collaborating Centre for Research and Training in Human Resources for Health
World Health Organisation (WHO), Switzerland

Funders

In South Africa:

Department of Health
Medical Research Council (MRC)
National Research Foundation (NRF)
Provincial Government of the Western Cape (PGWC)
TB/HIV Care Association

Beyond South Africa:

African Population and Health Research Center, Kenya
British Council, UK
Catholic Organisation for Relief & Development Aid (CORDAID), Netherlands
Combat Diseases of Poverty Consortium (CDPC), University of Ireland
European Commission (EC), Belgium
European Union (EU), Belgium
Global Health Research Initiative, Canada
Hamilton Health Sciences Corporation, Canada
International Development Research Centre (IDRC), Canada
Irish Aid, Ireland
Norwegian Centre for International Co-operation in Higher Education, Norway
PEPFAR, USA
Teasdale-Corti Global Health Research Partnership Program, Canada
The Atlantic Philanthropies, USA
The Rockefeller Foundation, USA
UNICEF (US Fund for UNICEF), USA
University of Montpellier, France
University of Ottawa, Canada
US Centers for Disease Control and Prevention (CDC), USA
Vlaamse Interuniversitaire Raad (VLIR), Belgium
William and Flora Hewlett Foundation/ University of Michigan, USA
World Health Organisation (WHO), Switzerland

Selected major grants

1. SOPH received a three-year grant of **R11 400 000 from the Atlantic Philanthropies** in 2009 to develop, support, and learn from, innovative action to strengthen the district health system and particularly its primary and community levels. In a partnership with the University of Cape Town (UCT), the City of Cape Town, and the Provincial Government of the Western Cape (and other partners in future

years), the SOPH will also seek opportunities to draw lessons from the sites into our management teaching and structured engagement with all levels of the health system, as well as a range of related, larger scale, national research.

2. An **EC grant of €184,029** was awarded to SOPH in 2010 to extend sustainable African capacity to produce and use high quality health policy and systems research. The research will be undertaken over a four-year period by harnessing synergies among a Consortium of African and European universities with relevant expertise. The African partner institutions are: School of Public Health and Family Medicine, University of Cape Town, South Africa; Institute of Development Studies, University of Dar es Salaam, Tanzania; School of Public Health (SPH), University of Ghana, Legon, Ghana; Tropical Institute of Community Health, Great Lakes University of Kisumu, Kenya; College of Medicine, University of Nigeria Enugu, Nigeria; School of Public Health, University of Western Cape, South Africa; Centre for Health Policy, University of Witwatersrand, South Africa.
3. In 2010 SOPH was awarded a **three-year EC grant of €420,939** to undertake research into accessing medicines in Africa and South Asia through an international research consortium of 7 partners. The members of the consortium are: The University of Edinburgh, UK, the University of Ghent, Belgium, the Swiss Tropical and Public Health Institute, Switzerland, Mbarara University of Science and Technology, Uganda, Makerere University, Uganda, the University of Western Cape, South Africa and the Foundation for Research in Community Health, India.
4. In 2010 with an additional two-year grant of **R4 152 000 the WHO** extended its collaboration with SOPH on the Masters Degree programme with a focus on Health Workforce Development. The grant supports the SOPH's scholarship programme to build human resource capacity in Ethiopia, Mozambique and Rwanda in partnership with the National University of Rwanda, Eduardo Mondlane University (Mozambique), and Addis Ababa University (Ethiopia).

DISTINGUISHED VISITORS

During 2009 and 2010 the School of Public Health (SOPH) hosted a number of distinguished visitors, some of whom visit us on a regular basis.

Where they give public lectures at the School, these are attended by academics and health personnel in Cape Town – a selection of these being as follows.

Prof Eileen O’Keefe, London Metropolitan University, United Kingdom.

‘An introduction to the characteristics and uses of Health Impact Assessment’ (17 February 2009).

Prof Gavin Mooney, Honorary Professor of Health Economics at UCT and at the University of Sydney.

‘Global Meltdown – the impact on health and the impact on neo liberalism’ (25 June 2009).

Prof Nancy Edwards, School of Nursing, and the Department of Epidemiology and Community Medicine, University of Ottawa, Canada and Scientific Director, Institute for Population and Public Health, Canadian Institutes for Health Research

‘Tackling health inequities: Exploring connections between research, policy and practice’ (9 July 2009).

Prof Nicholas Freudenberg, Distinguished Professor of Public Health at Hunter College and the Graduate Center, City University of New York

‘Municipal responses to childhood obesity in New York City and London: Lessons for Cape Town’ (2 October 2009).

Prof Melanie Walker, University of Nottingham

‘Contributions of the human capabilities approach to developing quality dimensions, professional capabilities in higher education and graduate attributes in the UWC context’ (20 October 2009).

Prof Derek Colquhoun, Professor of Urban Learning and Director of Research at the Institute for Learning, University of Hull, United Kingdom.

‘How children can address the structural determinants of obesity/health through their school communities’ (28 September 2010)

Prof Marleen Temmerman, one of the School’s staunchest friends, visited the School and UWC on several occasions. Marleen is the Head of the Department of Obstetrics and Gynecology at Ghent University Hospital, founding director of the International Centre for Reproductive Health (ICRH), and a Senator in the Belgian Parliament. Her work focuses on gender equality, reproductive health and rights, and research capacity strengthening in Africa in the fields of public health. Characterised by a deep commitment to justice, scientific rigour and integrity, and social transformation, Marleen has often worked in difficult contexts with vulnerable populations.

Among the numerous awards she has received are the Lifetime Achievement Award of the British Medical Journal, the International Federation of Gynecologists and Obstetricians Award in Recognition of Women (made only once every three years) and the “De Beys” Prize, one of the most prestigious Belgian awards for medical research which recognizes medical research with a social dimension, particularly in situations of crisis and emergency.



Prof Temmerman has been working with the Faculty of Community and Health Sciences, and specifically with the SOPH, for the past ten years. She helped conceive and drive the partnership between UWC and the association of Flemish universities in Belgium (VLIR) – particularly the Dynamics of Building a Better Society (DBBS) programme which aims at transforming health and education policies and practices related to HIV in South Africa. Despite her many commitments and punishing schedule, she always finds time to seek, find and build common ground to further the work of this project through students supervision, jointly planned conferences and the development of VLIR project activities more generally. Engagements with her are not always easy, as she demands a lot of herself and her colleagues – but they are invariably immensely enriching. She has and continues to make an important contribution to building capacity in the School and the University.

STAFF OF THE SCHOOL OF PUBLIC HEALTH

Assoc Prof Uta Lehmann, MA (Hannover), PhD (Hannover)

Director of the School

Uta Lehmann joined the SOPH in 1999 and was appointed as director in 2009. Having worked in health personnel education since 1991, her interests and expertise lie in human resource development, monitoring and evaluation and qualitative research. She has worked extensively with the World Health Organisation (WHO) and was a member of the Rockefeller-funded Joint Learning Initiative on health human resources. Uta has a background in social sciences and a PhD in social history.

Senior Professor and Academic Chair

Prof David Sanders, MBChB (Birm), DCH (RCS Eng), MRCP (UK), DTPH (London)

David Sanders headed the SOPH since its inception in 1993 till 2009. He has over 30 years' experience in public health and primary health care in Zimbabwe and South Africa. His qualifications are in Paediatrics and Public Health and his main interests are health and development, child health, nutrition, primary health care and human resource development. David has worked extensively with WHO and UNICEF in child health, nutrition and health human resources – and is the author of three books: *The Struggle for Health, Questioning the Solution and Fatal Indifference: The G8, Africa and Global Health*. He was Heath Clark Visiting Lecturer at the London School of Hygiene and Tropical Medicine in 2005 and an Honorary Professor at that institution. He was an Adjunct Professor at the Centre for International Health, University of Bergen, Norway with which he continues to collaborate – and until 2009 he was a Visiting Professor at Charité – Universitätsmedizin Berlin.

Professors

Extraordinary Prof Debra Jackson, RNC (Florida State), MPH (San Diego State), DSc (Boston)

Debra Jackson has qualifications in Nursing, Public Health, Epidemiology and Biostatistics. Her interests are maternal and child health, perinatal health, nutrition, ethics and outcomes research. Debra has worked in the Pacific Islands, the United States and now South Africa, where her current research focuses on prevention of mother-to-child transmission of HIV, infant feeding and community health workers with a view to improving maternal and child health.

Prof Thandi Puoane, B(Cur) (UNISA), BA Soc Sci (UNISA), MPH (Berkeley), DrPH (Berkeley)

Originally trained as a nurse, Thandi Puoane has extensive experience in nursing, research, nutrition and chronic diseases. Her main research areas include improving the hospital management of severe malnutrition and prevention of risk factors for non-communicable diseases among peri-urban women using a participatory action research approach. She has worked with several provincial departments of health developing programmes and establishing monitoring and evaluation systems to improve the

programme implementation. She is rated as a C3 scientist by the National Research Foundation (NRF).

Prof Christina Zarowsky, MD (McMaster), MPH (Harvard), PhD (McGill)

Director of the UWC Centre for Research in HIV and AIDS (Appointed June 2009)

Christina Zarowsky joined the SOPH in 2009 to head up the university-wide Centre for Research in HIV and AIDS located in the SOPH. A medical doctor, she has specialised in public health and medical anthropology. From 2000, she worked for the Canadian International Development Research Centre (IDRC) where she led the Research for Health Equity suite of programmes. She was the founding leader of IDRC's Governance, Equity and Health (GEH) programme initiative, which examines public health and health systems issues from a governance perspective, emphasising civic engagement, attention to power and process, and strengthening linkages between research, policy, practice, and social change – perspectives which continue to inform her work at UWC. Her areas of interest include social determinants of health, community and systems perspectives on HIV and AIDS, refugee and migrant health, and research capacity strengthening.

Assoc Prof Patricia Struthers, BSc Physiotherapy (UCT), MPhil Public Health (UWC), PhD (UWC)

Patricia Struthers, an Associate Professor in the Physiotherapy Department, was seconded to the School of Public Health for 2010. Her interests and expertise are in the fields of health promotion, in particular health promoting schools and support services for inclusive education.

Senior Lecturers

Ms Hazel Bradley, B Pharm (Bath), MPH (UWC)

Hazel Bradley is a pharmacist with an interest in primary health care. Prior to joining the SOPH in 2003, she worked with a Cape Town non-governmental organisation delivering primary health care, and in primary level drug management. Hazel's current research is in district level pharmaceutical human resources and public health education – with other interests being pharmaceutical information systems and rational medicines use. Hazel previously worked on a community-based project on the primary prevention of cardiovascular diseases and in health promotion.

Dr Ehimario Igumbor, BSc. (Hons) (UVenda), MPH (UZimbabwe), PhD (UWC)

With a background degree in physiotherapy, Ehimario Igumbor joined the SOPH as a senior lecturer in epidemiology and health information systems in 2007. His research interests include chronic disease epidemiology, burden of disease analyses, public health education and routine health information systems. Ehi has a Masters degree in Public Health (MPH) majoring in Health Measurements (Epidemiology, Biostatistics and Population Studies) and a PhD in Public Health.

Dr Gavin Reagon, MBChB (UCT), FCPHM (UCT)

A medical doctor and a public health specialist, Gavin Reagon joined the SOPH in 1999. He is involved in developing health management and information systems in South Africa and is experienced in health financing and health systems research.

Dr Brian van Wyk, BSc (Hons) (Stellenbosch), MSc Psychology (Stellenbosch), DPhil (Stellenbosch)

Brian van Wyk is a social psychologist with a passion for research methods. Prior to joining SOPH in January 2006, he was a chief researcher in the Social Aspects of HIV/AIDS and Health research programme at the Human Sciences Research Council (HSRC). He trained in health systems research at the South African Medical Research Council (MRC), and his current interests are in human resource management in health, socio-behavioural aspects of health and HIV and AIDS and community-based interventions.

Lecturers

Ms Verona Mathews, BA (Hons) Social Work (UWC), MPH (UWC)

Having joined the SOPH in 1999, Verona Mathews initially worked in the health information systems programme where she facilitated and co-ordinated the development, training and implementation of district health information systems in South Africa. Verona's recent research focus has been on human resources for health and information systems – and she is currently researching the development of human resource information systems and use of information at a district level.

Ms Suraya Mohamed, Nat Dip (RAD) Cape Technikon, MPH (UWC)

Suraya Mohamed has worked as a radiographer in various state and private hospitals. She is involved with health promotion and health promoting schools.

Ms Lungiswa Tsolekile, BSc (Hons) Dietetics (UWC), MPH (UWC)

Lungiswa Tsolekile is a dietician and is currently registered as a PhD student. She has been involved in research on chronic poverty and her current focuses include childhood obesity and prevention and the control of chronic non-communicable diseases in adults. She has been working with community health workers in promoting healthy lifestyles for prevention of chronic diseases.

Senior researchers

Dr Tanya Doherty, B Nursing (UCT), MSc Nursing (UCT), MPH (Harvard), PhD (Uppsala)

With qualifications in nursing and public health, Tanya Doherty's research focus areas are prevention of mother-to-child transmission (PMTCT) of HIV, child health, infant feeding and community randomised trials. She is currently working on a community randomised trial to assess the impact on the uptake of HIV testing of a door-to-door offer of VCT in a rural community in KwaZulu-Natal. She is also engaged in a community intervention in which community health workers aim to improve newborn caring and feeding practices in Umlazi, also in KwaZulu-Natal. Tanya holds a joint position with the SOPH and the Medical Research Council (MRC).

Dr Thubelihle Mathole, BSc (Hons) (UZ), MPA (UZ), PhD (Uppsala, Sweden)

Thuba Mathole joined the SOPH as a senior researcher in 2008, bringing with her wide experience in research, training and programme planning and management. Her professional work experience includes management and implementation of primary health care and public health programmes in both government and non-governmental organizations. Her areas of interest are international/global health, monitoring and evaluation, health systems, HIV, global public policy and maternal and child health.

Dr Busisiwe Nkosi, BPaed (Home Economics) (UZ/UKZN), BA (Hons) Human Ecology (UWC), MA Environment & Dev (UN), PhD (UMN)

(Joined SOPH in August 2009)

Busi Nkosi has degrees in home economics, human ecology and in the environment and development – reflecting her current interests in rural health, community development, food security – and now including orphans and vulnerable children (OVCs), HIV/AIDS, and community health workers. She has worked extensively in the rural and peri-urban areas of KwaZulu-Natal.

Ms Nikki Schaay, BA (Hons) Psychology (UN), MPH (UWC)

Nikki Schaay has worked in the field of HIV/AIDS since 1991 during which time she managed local non-governmental HIV/AIDS projects and then directed a national project focused on developing HIV/AIDS policy for government. Her work on a schools project on gender-based violence formed the basis for her MPH thesis. Having worked at the SOPH previously (1998–2000), Nikki re-joined the SOPH in 2004 and works in health promotion.

Dr Vera Scott, MBChB (UCT), DCH (UCT), MPH (UWC)

A medical doctor, Vera Scott worked as a clinician and programme co-ordinator within a fledgling district health system in Mitchells Plain in Cape Town in the late 1990s. Since joining the staff at SOPH she has worked extensively on projects aimed at developing and strengthening district health information systems and has contributed to developing a South African HIV Gauge, a Cape Town Equity Gauge and provincial HIV and TB monitoring and evaluation systems. Vera completed the MPH at the SOPH in 2001 and is currently registered for a PhD through which she hopes to explore the factors that influence how facility managers use health information.

Dr Ruth Stern, BSc (Physio) (Wits), Dip Health Promotion (London), MA (London), DrPH (London)

Since joining the SOPH in 2002 Ruth Stern's focus has been on equity, social determinants in health, and the importance of partnerships and community participation in health promotion – the topic of her doctoral research. Ruth, who trained initially as a physiotherapist, has a Diploma in Health Promotion, a Masters in Social Policy and a Doctorate in Public Health.

Education specialists

Ms Lucy Alexander, BA Hons (Wits), BAFA (UNISA), Dip Ed Ad (UCT), MPhil in Adult Ed (UCT)

Lucy Alexander joined the SOPH in 2002 bringing with her many years of experience in curriculum and materials development in a non-governmental distance education programme. With a background in adult education, she lectured at the Centre for Adult and Continuing Education (CACE) at UWC for six years before moving to the SOPH where she has, until recently, played the role of Senior Academic Co-ordinator and curriculum/materials developer. Lucy is registered for a PhD which focuses on public health education at a distance, particularly the enhancement of student support and the qualitative improvement of the learning experience through the use of emerging technologies. She is also involved with a project in Open Education Resources and the development of case studies for public health education.

Ms Nandipha Matshanda, B Soc Sc (UCT)

Nandipha Matshanda has been working as a materials developer since 2003. Her background is in adult learning, educational materials development and distance learning.

Project staff

Dr Shun Govender, BA (Unisa), BD (UDW), Drs (Netherlands), ThD (Netherlands) Project Manager

(Joined SOPH in June 2009)

Before joining the SOPH in 2009, Shun Govender had held senior management positions at the Institute for Democracy in South Africa (IDASA) since 2001. These included managing a public sector budget analysis programme, a governance programme and then a country office for IDASA in Nigeria. Responsible for overall management of the SOPH's Project Unit, Shun co-ordinates projects, provides assistance to project heads, and monitors project progress and reports. He also produces the SOPH Bulletin, the School's staff newsletter.

Mr Woldekidan Amde, BA (Addis Ababa), MA (Ruhr-Bochum), MA (UWC)

(Joined SOPH in March 2009)

Having worked as a development professional in Ethiopia and South Africa, Woldekidan Amde joined the SOPH in 2009 as the Programme Manager of the WHO-UWC MPH programme focusing on Health Workforce Development. His background is in sociology, development management, administration, and information communication technology. Wolde administers the 'HRH for Africa' website, a digital resource centre the SOPH is implementing as a WHO Collaborative Centre – and also manages content for the School's own website.

Ms Weliswa Binza, Dip in Comp Studies (College of Commerce and Computer Studies)

Weliswa Binza joined the SOPH in 2003 as a field researcher in the HIV and Infant Feeding Project in Rietvlei. She is from the Rietvlei area and is making a significant contribution to her home community. Prior to joining the SOPH she had experience in data management.

Ms Emma Chademana, BSc (Hons) (AU), DipPers Mgt (IPMZ), MDev (UKZN)

(Joined SOPH in October 2010)

Prior to joining the SOPH as the CDC Project Administrative Co-ordinator, Emma worked at the University of KwaZulu-Natal's Doris Duke Medical Research Institute (DDMRI), the Higher Education AIDS Programme's 'Piloting the HIV/AIDS Module into Teacher Education' and World Vision International in Zimbabwe. Emma's research interests are in the areas of HIV/AIDS and livelihoods, poverty and HIV/AIDS, orphans and vulnerable children, food security, migration and health.

Ms Lynette Cook

(Joined SOPH in July 2007)

Before joining the SOPH in July 2007, Lynette worked at the Western Cape Education Department as an Administration Clerk. She works as a Research Assistant on the Health Information Systems Projects which includes the Routine Waiting Times Surveys, conducted regularly in Primary and Tertiary health facilities within the Western Cape province.

Ms Caroline Kinyua, BSc Hons (UWC), MSc Pharm Sciences (UWC), MPH (Health Economics) (UCT)

(Joined SOPH in October 2010)

Caroline Kinyua's research interests are in health care financing, economic evaluation of health care interventions with a keen interest in pharmaco-economics. She is working on the three-year multi-country study 'Access to Medicines in Africa & South Asia' (AMASA).

Ms Bvudzai Magadzire, BSc Enviro Health (Solusi University), MPhil HIV/AIDS Management; PGD HIV/AIDS Management (University of Stellenbosch)

(Joined SOPH in November 2010)

Before joining the SOPH late in 2010, Bvudzai Magadzire had been involved in operational research relating to public health and the evaluation of development projects for donor agencies, NGOs and governments in South Africa, Zimbabwe, Malawi, Botswana and Uganda.

She is currently working on the three-year multi-country study 'Access to Medicines in Africa & South Asia' (AMASA).

Ms Jenny McLoughlin

(Left SOPH in December 2009)

Jenny McLoughlin is a professional nurse who has run the HIV/AIDS clinic at Kokstad. She joined the UWC and TB/HIV Care team in the Sisonke district to improve the quality of TB and HIV services in the district.

Ms Tamlin Petersen

(Joined SOPH in October 2009)

Tamlin Petersen has been with the SOPH since 2002, first working part-time on the Summer and Winter Schools. She joined the SOPH full-time in 2009 as Project Co-ordinator for the newly-formed UWC Centre for HIV & AIDS Research for which

she is responsible for the overall administrative co-ordination. In March 2010 she organized the annual international "HIV in Context" Symposium.

Ms Jessica Rebert, BA (Pitzer College, U.S.), MSc (London)
(Left SOPH in April 2010)

Jessica Rebert's educational background is in sociology and public health in developing countries. Before joining the SOPH as a researcher and project assistant, she worked with various NGOs who worked with youth and HIV/AIDS in Latin America. Her interests include nutrition, HIV/AIDS, food security and maternal and child health.

Mr Hilton Snyder

Hilton Snyder started at SOPH as a student assistant during the Winter School of 2006. He then moved to student administration before being employed as a research assistant in May 2007. He is currently completing his BSc in Decision Science through the University of South Africa (UNISA).

Ms Natasha Titus

Project Administrator: Health Information Systems Projects

Natasha Titus joined the SOPH in January 2005, after obtaining secretarial/PA and Information Technology Systems Support qualifications. She is the project administrator for the Waiting Times Surveys which have been routinely conducted in health facilities within the Western Cape, KwaZulu-Natal and in a number of regions in the Tanzania. She is involved in database software development and in quality testing and contributes to training and support.

Ms Charlene Valentine

(Joined SOPH in July 2007)

Charlene Valentine joined the SoPH in July 2007, having obtained a Certificate in Bookkeeping and Office Administration. She works as a research assistant on Health Information Systems Projects – particularly the Waiting Times Surveys which have been routinely conducted in Primary and Tertiary health facilities within the Western Cape province.

Administrative staff

Ms Marlene Petersen

Senior Co-ordinator

Marlene Petersen joined the SOPH in 1998. She heads the Administration of the School and her responsibilities include office and personnel management, Summer and Winter Schools and the financial administration of projects.

Ms Sidiqa Abbas

Finance Administration Officer

(Joined SOPH in May 2010)

Sidiqa Abbas is responsible for the financial administration of the

School which includes the management of various project funds. She comes to the University from the private sector.

Mr Melvin Adams

Office Assistant

Melvin Adams joined SOPH in 2002 as support for the administrative office and academic staff, after working for Nampak for 19 years. He provides various forms of technical support to meetings, classes and events – including the Summer and Winter Schools – and is the School's driver.

Ms Bridget Basson, BAdmin (Hons) (UWC)

Administrative Officer

Bridget Basson joined the SOPH in 2000. She provides administrative support to a range of staff, arranges conferences and travel – and is involved in the co-ordination of the Summer and Winter Schools.

Ms Corinne Carolissen, ND Exec Sec & NHDPSE (Peninsula Tech)

Senior Programme Officer

Corinne Carolissen joined the SOPH in March 2001, prior to which she worked in the retail industry for a buying support group, first as a buyer's assistant then secretary to the regional manager. After studying education, she moved to the non-governmental sector where she worked for eight years in finance and administration, taught adult learners and organised national workshops. She now administers the School's Masters and PhD programmes, including co-ordinating thesis administration, assisting with the Winter and Summer Schools and providing support to a range of staff and students.

Ms Teresa de Lima

Financial Administrator

Before joining the SOPH in May 2004, Teresa de Lima worked at the SA Reserve Bank for 16 years, as well as the Independent Development Trust (IDT) and the European Parliamentarians for Africa. She is responsible for the financial administration of the School which includes the management of all project funds.

Ms Nolitha Gojo, BCom Mgt (UWC)

Receptionist

(Joined SOPH in December 2009)

Before joining the SOPH in December 2009, Nolitha worked as the administrative officer at economics department at UWC. She is responsible for reception and general administration, and assists with the administration of Winter and Summer School.

Ms Janine Kader

Student Administrator, Postgraduate Programme

Janine Kader joined the SOPH in February 2002. She co-ordinates the administration for Postgraduate Diploma, and provides administrative support to the MPH as well as to a range of academic staff and students.

Ms Lynette Martin
Administrative Officer

Lynette Martin joined the SOPH in 1994. In addition to assisting the Director, she provides secretarial support to other members of academic staff. She co-ordinates the use of venues in the School's new building, and assists with the Summer and Winter Schools.

Mr Zaeem Najaar
Financial Assistant

(Joined SOPH in February 2009)

Zaeem Najaar first worked at the SOPH as a student, assisting with various administrative tasks - and was later employed as Financial Assistant. He is currently completing a BCom degree at UWC.

PhD students attached to projects

Dr Johann Cailhol, MD (Paris), MPH (Paris)

(Joined the SOPH in January 2009)

Johann Cailhol is a medical doctor, qualified as an infectious diseases and public health specialist. She holds a Masters degree in Epidemiology and has experience in leading epidemiological surveys. After practising in a university hospital in Paris, Johann has been responsible for establishing and co-ordinating a collaborative HIV clinic in Burundi. She is currently enrolled for a PhD at the SOPH, researching Global Health Initiatives (GHIs) and health policy and systems.

Mr Wondwossen T Lerebo, BEd (Ethiopia), MSc Pop Studies & Demography (UWC)

A demographer (applied statistician), Wondwossen Lerebo joined the SOPH as a PhD student, part-time lecturer and researcher in late 2007. Prior to this, he was a teacher and occupational safety and health inspector in Ethiopia. His current research interests include demographic and socio-economic factors associated with the uptake of voluntary counselling and testing (VCT) for HIV, and child survival in sub-Saharan African countries.

Mr Moise Muzigaba, BSc Nutr Sc (Zimbabwe), MPH (UWC)

(Joined the SOPH in April 2010)

Moise Muzigaba joined the SOPH in 2007 as an MPH student and later as a research assistant, after being a research intern at the Scientific Research and Development Centre within the Food and Nutrition Council of Zimbabwe. He has degrees in nutritional sciences and public health and is currently registered as a PhD student in the SOPH. Since April 2010 he has been employed as a junior researcher on two projects: PURE (a Prospective Urban and Rural Epidemiological study); and a project in the Eastern Cape that seeks to assess the effectiveness of the WHO 10-step treatment guidelines for case-management of severe malnourished HIV-positive children.

Ms Annie Neo Parsons, BSocSci (UCT), MSc (London)

(Joined the SOPH in December 2009)

Annie Parsons' background is in HIV and AIDS education and adherence in South Africa and the USA. She has conducted research and designed materials for various school-based programmes. Currently enrolled for a PhD at the SOPH, Annie is researching Global Health Initiatives (GHIs) and health policy and systems.

Ms Thato Ramela, MPharm (RU)

(Joined the SOPH in July 2009)

With qualifications in pharmacy from Rhodes University, Thato Ramela first joined the SOPH in 2009 as a research assistant on a project that looked at barriers to access and adherence to antiretroviral therapy. She is currently a PhD candidate investigating knowledge translation and side effects of highly active antiretroviral therapy among Xhosa-speaking patients. Thato's research interests include HIV/AIDS knowledge, communication about side effects of ART, knowledge translation, doctor-patient communication. She has been working on a project which seeks to understand the barriers to access and adherence to antiretroviral treatment in the Western Cape.

Mr Simukai Shamu, BSc Soc (Hons) (Zimbabwe), MSc Soc & Soc Anthro (Zimbabwe)

(Joined SOPH in June 2009)

Having trained in sociology and social anthropology, Simukai Shamu taught health promotion, medical sociology and health systems research in the Department of Community Medicine at the University of Zimbabwe from 2004. He joined the SOPH as a PhD candidate and researcher in 2009, and his current research interests include intimate partner violence and the risk of HIV among pregnant women. Simukai has published in the field of gender, sexual and reproductive health and HIV/AIDS.

Ms Paschaline Stevens, BA (Hons) Psychology (UWC), MA Anthro (UWC)

(Joined SOPH in June 2009)

Paschaline Stevens is currently enrolled as a PhD student in the Department of Anthropology and Sociology at UWC. Her research interest is in the field of gender and same-sex sexuality. She recently worked as a research assistant on a project which explored the barriers HIV-positive patients in the West Coast experience in accessing and adhering to antiretroviral therapy. She has been working on a project which seeks to understand the barriers to access and adherence to antiretroviral treatment in the Western Cape.

Ms Jeannine Uwimana, BSc (Hons) (Rwanda), MSc PT (UWC), PGD Public Health (UWC), PGC Int Comm Health (Oslo)

As a practising physiotherapist with training in public health and international community health, Jeannine Uwimana co-ordinated an HIV/AIDS educational programme at Kigali Institute

of Science and Technology from 2002, after which she joined the School of Public Health, National University of Rwanda (NUR) as lecturer in 2006 where she has been involved in teaching and reviewing the MPH programme to date. Jeannine joined the SOPH in 2006 as a research assistant and enrolled in the PhD programme in 2008. Her primary area of research is developing mechanisms for enhancing integration of TB and HIV/AIDS programmes at primary care level – and her current interest is in collaborative TB/HIV activities including PMTCT and community participation. She is a research co-ordinator of a project on upskilling community care workers for provision of comprehensive TB/HIV/PMTCT care in Sisonke district, KwaZulu-Natal.

Post-doctoral student

Dr Thomas Achia, PhD (Nairobi)

(Joined SOPH in April 2010)

Thomas Achia completed his PhD in Mathematical Statistics at the University of Nairobi in 2006, having been a member of the Department of Mathematics at that university since 2002. He has extensive teaching and research experience, increasingly in applied spatial statistics working with teams on poverty mapping, HIV prevalence modeling and HIV vaccine development.

Honorary Professors

Prof Sylvia Tilford, BSc, MA, PGCE (Leeds)

Until her retirement, Prof Sylvia Tilford was the Director of the Centre for Health Promotion Research at Leeds Metropolitan University. As a prolific author of books and articles on health promotion and having worked in several African countries, she is highly regarded in health promotion circles internationally. Her

expertise includes evidence-based health promotion practice, monitoring and evaluation of health promotion programmes, research capacity building, and running training courses for health promoters. Prof Tilford has been a great source of knowledge, expertise and support to the Health Promotion cluster at the School of Public Health for many years.

Assoc Prof Mickey Chopra, BSc (Med Sociology), BM (Soton), DCH (SA), MSc [PHDC] (London)

Mickey Chopra joined the SOPH in 1997, after spending four years as a District Medical Officer in Hlabisa Hospital in KwaZulu-Natal. He has been involved in health systems research and in developing district-based health programmes, especially in nutrition. He has qualifications in medical sociology, medicine and public health. Although he still plays an active role at the SOPH, he is now Head of Health at UNICEF, New York.

Assoc Prof Harry Hausler, BSc (British Columbia), MDCM (McGill), MPH (Johns Hopkins), PhD (London) ABPM

Harry Hausler is a family physician and preventive medicine specialist focusing on international health. He has worked with the World Health Organisation (WHO) and was the National TB/HIV Technical Advisor in the South African Department of Health. He has co-ordinated operational research focused on implementing and evaluating a comprehensive programme of TB/HIV/STI prevention, care and support. His current interests include developing systems and capacity to assist with the implementation and evaluation of the rollout of antiretroviral therapy in the context of comprehensive primary health care. He worked at the SOPH for two years, leaving in September 2007.



ACADEMIC AND PROFESSIONAL ACHIEVEMENTS OF STAFF

Publications

Books

Lerebo, W T (2010) *Religion, education and child immunization in Ethiopia*. Saarbrücken, Germany: Lap Lambert Academic Publishing. ISBN 978-3838384504

Chapters in Books

Doherty, T (2009). PMTCT Indicators. In: Day, C, Barron, P, Monticelli, F, Sello, E (eds). *The District Health Barometer 2007/08*. Durban: Health Systems Trust.

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Textbook for South Africa: A rights-based approach. Parow: Medical Research Council, p 901-928.

Sanders, D (2009). Chapter 14. Globalization, Social Determinants, and the Struggle for Health. In: Labonte, R, Schrecker, T, Packer, C, Runnels, V (eds.), *Globalization and Health: Pathways, Evidence and Policy*. New York and Oxford: Routledge, pp 334-340.

Sanders, D, Bradshaw, D, Ngongo, N (2010). The status of child health in South Africa. In: Kibel, M, Lake, L, Pendlebury, S, Smith, C (eds.), *South African Child Gauge. 2009/2010*. Cape Town: The Children's Institute, University of Cape Town, pp 29-40.

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Legge, D, **Sanders, D**, McCoy, D. Comment. Trade and Health: The need for a political economic analysis. *The Lancet*. Published online, Jan 2009, DOI:10.1016/s0140-6736(08)61761-4.

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Pillay-van Wyk, V, **van Wyk, BE**, Jooste, S, Phaswana-Mafuya R & Simbayi L. *What is driving the HIV epidemic among young women in South Africa?* 5th Annual Conference of the Public Health Association of South Africa (PHASA), Durban, 30 November-3 December 2009.

Puoane, T. *Rethinking research in health: The role of translational research in public health*. Invited guest at Medical Research Council research day, Cape Town, 15 October 2010.

Puoane, T, **Igumbor, E U**, **Tsolekile, L**, **Muzigaba, M**, Brangan E. *Urbanization and Health. A research agenda for public health*. Academic Seminar in Collaboration of the World Health Day 2010, School of Public Health, UWC, Cape Town, 11 April 2010.

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Reagon, G, **Igumbor, E U**, Koopman F. *Assessment of waiting times at tertiary level health care facilities*. 5th Annual Conference of the Public Health Association of South Africa (PHASA), Durban, 30 November-3 December 2009.

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Rebert, J, **Van Wyk, B E**, **Schaay, N**, **Hausler, H**. *Antiretrovirals and sexual behaviour: A qualitative study to explore the impact of risk reduction education on the sexual behaviour of people on therapy in South Africa*. 5th Annual Conference of the Public Health Association of South Africa (PHASA), Durban, 30 November-3 December 2009.

Sanders, D. *Invited presentation: Health in Ruins: A man-made disaster in Zimbabwe*. Human Rights Day lecture at University of Cape Town, Cape Town, 30 March 2009.

Sanders, D. *Improving HIV treatment, prevention and care through*

research on gender, schools and health systems. 2nd Annual HIV in Context Research Symposium: 'Public Health in the Age of HIV: Reflections and (re?)Directions', University of Western Cape, Cape Town, March 2009.

Sanders, D. *Confronting a Crisis: Key challenges for health policy implementation in South Africa.* Cape Metro Health Forum Summit, University of Cape Town, Cape Town, 17 April 2009.

Sanders, D. *National Health Insurance - Human resource requirements.* University of Cape Town, Cape Town, 29 July 2009.

Sanders, D. Invited presentation: *National Health Insurance: Can it solve South Africa's health crisis?* The Harold Wolpe Memorial Trust, Cape Town, September 2009.

Sanders, D. Invited presentation: *Public/population health research for Southern Africa.* In session on 'Potential Models for Future Higher Education Cooperation between South Africa and Norway'. Seminar hosted by Norwegian Centre for International Co-operation in Higher Education (SIU) and the University of the Western Cape, Cape Town, 27 November 2009.

Sanders, D. *Revitalizing Health For All: Learning from comprehensive primary health care experiences.* 5th Annual Conference of the Public Health Association of South Africa (PHASA), Durban, 30 November-3 December 2009.

Sanders, D. Invited presentation: *National Health Insurance: Can it solve South Africa's health crisis?* The Harold Wolpe Memorial Trust series, East London, April 2010.

Sanders, D. *Revitalising primary health care to Address South Africa's health crisis: the place of community health workers.* Presented at SANAC meeting, Johannesburg, April 2010.

Sanders, D., Zembe, W. Does social support aid or drive the TB and HIV epidemics? TB Conference 2010: Round Table Discussion, Durban, June 2010.

Sanders, D. *The Reality: Addressing the status of child health.* South African Child Gauge 2009/2010 launch and symposium, Cape Town, 27 July 2010.

Sanders, D. *The priorities for the reform of the South African health system.* ISD, Social Policy Forum Workshop - Social Protection: The impact of social and economic policy in the Southern Africa Region, Cape Town, 26-27 August 2010.

Sanders, D. *The politics of South African health care reform.* Institute of Social and Economic Research (ISER) Health Colloquium, Grahamstown, 3 September 2010.

Sanders, D. *Key public health actions to revitalise primary health care and address the health crisis in Africa and South Africa.* Public lecture at the School of Public Health, University of the Western Cape, Cape Town, 16 September 2010.

Sanders, D. Convened and facilitated Workshop 1: Health System Reform in South Africa: How can the Right to Health be strengthened? – hosted by The People's Health Movement South Africa (PHM-SA) – at 6th Annual Conference of the Public Health Association of South Africa (PHASA), East London, 29 November - 1 December 2010.

Sanders, D., Reynolds, L. *Making paediatrics matter: Key challenges to meet the child health crisis in South Africa.* Red Cross Children's Hospital Paediatric Meeting, Cape Town, 2 October 2009.

Schaay, N., Rebert, J. *Risk reduction within HIV care and treatment programmes: Challenges to primary level care settings in South Africa.*

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Schneider, H., Lehmann, U., Matwa, P., Colvin, C. *Mobilising community health workers for HIV/AIDS in SA: A sustainable response to the human resource crisis?* 5th Annual Conference of the Public Health Association of South Africa (PHASA), Durban, 30 November-3 December 2009.

Scott, V., Azevedo, V., Caldwell, J. *Is there room for improvement? Intervening at facility and district level to improve a well-performing TB control programme: The Cape Town experience.* 6th Annual Conference of the Public Health Association of South Africa (PHASA), East London, 29 November - 1 December 2010.

Scott, V., Zweigenthal, V., Jennings, K. *Between HIV diagnosis and HAART: Assessing care for people living with HIV in the public primary care service in Cape Town, South Africa.* 6th Annual Conference of the Public Health Association of South Africa (PHASA), East London, 29 November - 1 December 2010.

Struthers, P., Collett, K., Lawrence, E., Mohamed, S., Moolla, N., Sonn, B., Wegner, L. *Developing health promoting secondary schools: A participatory action research project.* Health Promoting Schools Conference 2009: Addressing health priorities in schools, Exploring strategies and experiences in classrooms and schools, University of the Western Cape, Cape Town, 19 February 2009.

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Uwimana, J., Jackson, D., Hausler, H., Mtinjana, K., Radebe, N. S. *Upskilling of community care workers to provide comprehensive TB/HIV/PMCT care at community level in Sisonke District, KwaZulu-Natal.* 2nd South African TB Conference, Durban, June 2010.

Uwimana, J., Jackson, D., Hausler, H., Radebe, N. S., Osei, N. S., Msomi, T. L. *Assessment of integration of TB prevention and care into PMCT program in one of rural area in KwaZulu-Natal.* 29th Conference on Priorities in Perinatal Care, Worcester, March 2010

Uwimana, J., Lerebo, W., Jackson, D., Hausler, H., Mtinjana, K., Radebe, N. S. *Assessment of provision of collaborative TB/HIV activities including PMCT at community level in KwaZulu-Natal, South Africa.* 2nd South African TB Conference, Durban, June 2010.

Woldesenbet S., Jackson D. *The impact of quality of antenatal HIV counselling on HIV-free survival.* 28th Conference on Priorities in Perinatal Care, Drakensburg, March 2009.

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Zarowsky, C., Rebert, J., Sanders, D. *Human capacity to address*

HIV and AIDS in SA: A CDC/PEPFAR UTAP contribution. 5th Annual Conference of the Public Health Association of South Africa (PHASA), Durban, 30 November-3 December 2009.

Zarowsky, C. *HIV in Context: Scaling up, joining up or re-inventing HIV research.* Seminar at Health Economics and HIV/AIDS Research Division (HEARD), University of KwaZulu-Natal, Durban, 13 April 2010.

Zarowsky, C. *Lowering the impact of chronic illness on households and the state.* Workshop on Social Assistance for the Chronically Ill, Technical Task Team on Human Rights and Access to Justice, South African National AIDS Council (SANAC), Pretoria, 13 August 2010.

Zarowsky, C, Alexander, L, Lehmann, U, Sanders, D, Bradley H, Igumbor, E, Cailhol, J, Hoosain, N. *Research in public health training and practice.* 6th Annual Conference of the Public Health Association of South Africa (PHASA), East London, 29 November-1 December 2010.

Zarowsky, C. *Human capacity and health systems strengthening: Opportunities for collaboration between traditional health practitioners and the public health service across provinces.* Workshop on Traditional Health Practitioner Programs in Western Cape and KwaZulu-Natal. Hosted by UWC Centre for Research in HIV and AIDS, Cape Town, 13 December 2010.

Zembe, W, **Binza, W, Doherty, T, Jackson, D, Sanders, D.** *The Child Support Grant: Improved uptake but barriers to access remain.* 29th Conference on Priorities in Perinatal Care, Worcester, March 2010.

International

Alexander L, Matshanda, N, Igumbor E. *Open Educational Resources health – Work in progress.* International Meeting of OER Health Africa, Cape Town, South Africa, July 2009.

Awotedu, A A, Oluboyo, P O, **Igumbor, E U** & Awotedu, K O. *Accuracy of diagnosis and quality of asthma care in rural South Africa: An audit study in primary care facilities.* American Thoracic Society 2009 International Conference, San Diego, USA, 15-20 May 2009.

Bradley, H A, Venter, S, Von Zeil, M, Butler, N, Lehmann, U. *Roles and competencies of district pharmacists: A case study from Cape Town, South Africa.* World Congress of Pharmacy and Pharmaceutical Sciences, 69th Congress of FIP, Istanbul, Turkey, 3-8 September 2009.

Cailhol J, Mathole, T, Parsons, A, Niyongabo, T, Sanders, D. *Importance of country ownership in donor's co-ordination: Field experiences and comparison between Burundi and South Africa.* Abstract 49. Global Symposium on Health Systems Research, Montreux, Switzerland, 15-19 November 2010.

Haoses-Gorases, L, Sagwa, E, Mazibuko, G, Mabirizi, D, Nwokie, J, Brock, T, Lates, J, Durango, L, **Bradley H, Duwiewua, M, Woode, E, Smit, L, Stergachis, A.** *Development of a needs- and competency-based pharmacy degree for Namibia.* World Congress of Pharmacy and Pharmaceutical Sciences 2010, 70th Congress of FIP, Lisbon, Portugal, 28 August-2 September 2010.

Igumbor, E U. *Setting a research agenda for HIV/AIDS, medicinal plants and geophagia: A public health outlook.* Plenary Lecture: International Symposium on HIV/AIDS, Medicinal Plants and Geophagia, Walter Sisulu University Health Resource Centre, Mthatha, South Africa, 22-24 July 2009.

Igumbor E U. *HIV/AIDS as a chronic disease. Reframing a public health problem in South Africa.* 2nd Annual HIV in Context Research Symposium: 'Public Health in the Age of HIV: Reflections and (re?)Directions', University of the Western Cape, Cape Town, South Africa, 25 - 26 March 2010.

tions and (re?)Directions', University of the Western Cape, Cape Town, South Africa, 25 - 26 March 2010.

Jackson, D, Invited participant, Technical Consultation for UNICEF on the evaluation of the impact of PMTCT programmes in averting new infections in children and improving child survival, February 2009.

Jackson, D. Invited plenary speaker: *Community health workers: Making the link.* International Stillbirth Association, Drakensberg, South Africa, March 2009.

Jackson, D, Invited participant, WHO Meeting to discuss generic protocol to measure PMTCT impact using 6-week child health visit as an entry point. WHO Geneva, Switzerland, 26-27 July 2010.

Jackson, D, Rohde, S, Doherty, T, Ramokolo, V, Goga, A. *Development of a package for integration of PMTCT into routine MNCH services in South Africa.* American Public Health Association, Denver, USA, November 2010.

Jackson, D, Tylleskär, T, Chopra, M, Diallo, H, Doherty, T, Ekström, E-C, Engebretsen, IMS, Goga, A, Kankasa, C, Klungsoyr, J, Lombard, C, Meda, N, Nankabirwa, V, Nankunda, J, Van de Perre, P, Shanmugam, R, Siuluta, C, Sommerfelt, H, Tumwine, J.K, Wamani, H. for the PROMISE-EBF study group. (2009) *Preliminary results from the multi-centre cluster-randomised behaviour intervention trial PROMISE EBF: Exclusive breastfeeding promotion in sub-Saharan Africa.* American Public Health Association, Philadelphia, USA, November 2009.

Larkan, F, **Van Wyk, B E.** *Agency, social eligibility and access.* 18th International AIDS conference 2010, Vienna, Austria, 18-23 July 2010.

Lehmann, U. *What are obstacles and enablers to health systems innovations in primary health care facilities in the context of HIV/AIDS?* 53rd UN Session of the Commission on the Status of Women. NGO Forum. Supporting Health Systems to Fight HIV/AIDS. New York, USA, 2 March 2009.

Lehmann, U. *Saviors or scapegoats in fragile health systems? What role can community health workers play?* Presentation to International Development Research Centre, Ottawa, Canada, 4 March 2009.

Lehmann, U. *What are obstacles and enablers to health systems innovations in primary health care facilities in the context of HIV/AIDS?* International Women's Day Panel hosted by the International Development Research Centre (IDRC), Ottawa, Canada, 5 March 2009.

Lehmann, U. *Task delegation and CHW programs – Appropriate responses to the human resources crisis?* Presentation to Canadian International Development Agency (CIDA), Ottawa, Canada, 5 March 2009.

Lehmann, U. Invited address: *Successes and failures of community-based interventions: What roles can community health workers play?* European Congress of Tropical Medicine and International Health, Verona, Italy, 9 September 2009.

Lehmann, U. *Impact of HIV scale-up on health workforce dynamics: Opportunities for rethinking traditional roles and concepts.* Pre-conference meeting on 'Accelerating the Impact of HIV Programming on Health Systems Strengthening' of the International AIDS Society, Cape Town, South Africa, 17 July 2009.

Lehmann, U. *Putting policy into practice: Implementing the national community health worker policy in South Africa.* Equinet Conference, Kampala, Uganda, 25 September 2009.

Lehmann, U. *Moving community health workers into the centre of*

integrated HIV service delivery in Africa? 18th International AIDS Conference 2010, Vienna, Austria, 18–23 July 2010.

Mathews, V. Poster: *Using action research to develop and implement a district based human resource information system. A case study approach.* 1st Global Symposium on Health Systems Research, Montreux, Switzerland, 15–19 November 2010.

Mathole, T, Cailhol, J, Parsons, A, Sanders, D. *Validity, Access and Reliability: Reflections on the experiences of interviewing the elite in South Africa and Burundi.* Qualitative Health Research Conference, Vancouver, Canada, 6–8 October 2010.

Mathole T, Parsons A, Cailhol J, Buch E and Sanders D. *'Learning From Mistakes'. South Africa's experiences in working with Global Health Initiatives and their effects on health systems.* 1st Global Symposium on Health Systems Research, Montreux, Switzerland, 15–19 November 2010.

Mathole, T, Parsons A, Buch, E, Sanders, D. *Effects of Global Health Initiatives funding for HIV on South African health systems.* Geneva Health Forum 2010, 19–21 April. Geneva.

Mohamed, S, Struthers, P. *Developing secondary schools as health promoting schools for the reduction of HIV and TB: A collaborative approach.* 20th IUHPE World Conference on Health Promotion, Geneva, Switzerland, 11–15 July 2010.

Naik, R, Pillay, M, Madurai, L, Tabana, H, Binza, W, Zembe, W, Doherty, T, Jackson, D, Khwela, N. *Quality of in-home rapid HIV testing by community lay counsellors in a rural district of South Africa.* 18th International AIDS Conference 2010, Vienna, Austria, 18–23 July 2010.

Naik, R, Tabana, H, Binza, W, Zembe, W, Doherty, T, Jackson, D, McLoughlin, J, Radebe, G, Makhaye, S. *Acceptability of home-based HIV counselling and testing in a rural district in South Africa.* 18th International AIDS Conference 2010, Vienna, Austria, 18–23 July 2010.

Parsons, A N, Cailhol, J, Mathole, T, Sanders, D. Poster: *Accountability, global health funding and community level antiretroviral therapy access in South Africa.* Geneva Health Forum, Geneva, Switzerland, 19–21 April 2010.

Parsons, A N, Cailhol, J, Mathole, T, Sanders, D. *'More services, more patients, but same staff': Providing ART in South Africa with GHI funds.* 1st Global Symposium on Health Systems Research, Montreux, Switzerland, 15–19 November 2010.

Parsons, A N, Mkhize, T, Mathole, T, Sanders, D. *The impact of Global Health Initiatives on local-level health infrastructure in South Africa.* 18th International AIDS Conference 2010, Vienna, Austria, 18–23 July 2010.

Pillay-van Wyk, V, van Wyk, BE, Jooste, S, Simbayi, L. *HIV risk behaviours and risk perception among South African youth: Strategies for prevention.* 18th International AIDS Conference 2010, Vienna, Austria, 18–23 July 2010.

Puoane, T. *Why do HIV-positive patients on ARV therapy use TM? Experiences of health workers, traditional healers and patients. A study in two provinces of South Africa.* American Public Health Association, Denver, USA, 6–10 November 2010.

Puoane, T, Igumbor, E U, Tsolekile, L. *Prospective urban and rural epidemiology study: Concept and methods.* 1st International Course on Health Research Methodology, Zewenwacht, Cape Town, South Africa, 29 January–1 February 2010.

Sable, MR, Libbus, MK, Jackson, D, Hausler, H, Rashe, H. *The*

role of pregnancy intention in MTCT prevention in South Africa. International AIDS Society, Cape Town, South Africa, July 2009.

Reagon, G, Adams, G, Titus, N, Igumbor, E U. *Development of a customized free and open source database for routinely assessing waiting times of patients at health facilities.* MedInfo Conference (International), Cape Town, South Africa, 12–14 September 2010.

Reagon, G, Igumbor, E U. *Strengthening health systems through training of health care providers in the conduct of routine waiting time and system efficiency surveys.* MedInfo Conference (International), Cape Town, South Africa, 12–14 September 2010.

Reagon, G, Igumbor, E U, Titus, N, Adams, G. *Developing and implementing waiting time surveys as routine monitoring and evaluation tools for health facilities in South Africa.* 1st Global Symposium on Health Systems Research, Montreux, Switzerland, 15–19 November 2010.

Reagon, G, Igumbor, E U, Titus, N, Cook, L, Valentine, C, Adams G. *Conducting routine waiting time surveys in health facilities in developing countries.* 1st Global Symposium on Health Systems Research, Montreux, Switzerland, 15–19 November 2010.

Sanders, D. *Revitalising primary health care and addressing social determinants: The role of social action and advocacy.* Prince Mahidol Awards conference, Bangkok, Thailand, 27 January 2009.

Sanders, D. Invited presentation: *Revitalisation of primary health care and health system development: The potential of community health workers.* Community Participation and Primary Health Care Seminar, Flinders University, Adelaide, Australia, 19 March 2009.

Sanders, D. Invited plenary presentation: *Key public health actions to revitalise primary health care and address global health inequities.* 12th World Congress on Public Health, Istanbul, Turkey, 28 April 2009.

Sanders, D. Invited presentation: *The Revitalisation of primary health care: Opportunities and challenges for child survival.* International Training Program on Child Survival, Uppsala, Sweden, 11–13 May 2009.

Sanders, D. Three presentations on the 'Globalization and Health' course at the Centre for International Health, University of Bergen, Bergen, Norway, 14–18 May 2009: *Globalization and funding of health care; Human resources and brain drain; The challenge of introducing change.*

Sanders, D. Invited presentation: *Global Health Initiatives and the revised primary health care strategy: Conflicts or synergies?* Workshop on 'Global Initiatives for the Health Related Millennium Development Goals – Need for improved implementation' organized by the Norwegian Forum for Global Health Research – at the 6th European Congress on Tropical Medicine and International Health, Verona, Italy, 6–10 September 2009.

Sanders, D. Invited presentation: *Improving the hospital management of severe child malnutrition: Challenges and opportunities in the health services.* 19th International Congress of Nutrition, Bangkok, Thailand, 4–9 October 2009.

Sanders, D. Invited presentation: *Achieving human rights in Africa and South Africa: The continuing challenge of child health.* International Conference on Realising the Rights to Health and Development for All, Ha Noi, Vietnam, 26–29 October 2009.

Sanders, D. *The research and innovation agenda for social determinants of health.* Global Forum for Health Research 2009, Innovating for the Health of All, Havana, Cuba, 16–20 November 2009.

Sanders, D. Invited presentation: *Enhancing capacity in Africa for food and nutrition security*. Second meeting of the African Union Task Force on Food & Nutrition Development, Addis Ababa, Ethiopia, 25 November 2009.

Sanders, D. *Building capacity of health systems through public health education for Africa and enhancing community action*. ACHEST Consultative Meeting, Kampala, Uganda, 16 December 2009.

Sanders, D. Invited presentation: *Key public health actions to revitalise primary health care and address health inequities in Africa* at meeting of Canadian International Development Agency (CIDA)'s African Health System Initiative, Pretoria, 2-4 March 2010.

Sanders, D. Invited presentation: *The role of universities in addressing Africa's health crisis*. Commonwealth Universities Conference on the Millennium Development Goals and Higher Education, Cape Town, South Africa, 26 April 2010.

Sanders, D. Invited presentation: *Building sustainable research capacity in resource-poor countries*. European Commission, Global Health Conference, Brussels, Belgium, 10-11 June 2010.

Sanders, D. Invited presentation: *In the shadow of the World Cup of soccer: Health challenges and public health in South Africa*. Reykjavik University, Nautholsvik, Iceland, 21 June 2010.

Sanders, D. Invited presentations at the University of Bergen Annual Summer School, Bergen, Norway, 28 June-2 July 2010: *Global Health Initiatives and the revised primary health care strategy: Conflicts or synergies?*; *Health systems and the human resource crisis: A view from Africa*; *Primary health care: History, evolution and revitalisation*.

Sanders, D. Invited presentation: *Obesity and overweight in South Africa: Trends, causes and required interventions*. 11th International Congress on Obesity (ICO), Stockholm, Sweden, 11-15 July 2010.

Sanders, D. Invited presentation: *The continuing challenge of child health in Africa and South Africa: Strategic priorities for practitioners, researchers and advocates*. 26th International Pediatric Association Congress of Pediatrics of the International Pediatric Association, IPA 2010, Johannesburg, South Africa, 4-9 August 2010.

Sanders, D. *Capacity development of medical doctors and senior managers in South Africa in the management of severe acute malnutrition. Caring for severely malnourished children as a core competency*. 26th International Pediatric Association Congress of Pediatrics of the International Pediatric Association, IPA 2010, Johannesburg, South Africa, 4-9 August 2010.

Sanders, D. *Displaced children in southern Africa*. 26th International Pediatric Association Congress of Pediatrics of the International Pediatric Association, IPA 2010, Johannesburg, South Africa, 4-9 August 2010.

Sanders, D. Invited plenary presentation: *Challenges in meeting nutrition and food security needs in Africa*. 4th Africa Nutritional Epidemiology Conference (ANEC 4), Nairobi, Kenya, 5 October 2010.

Sanders, D. *Achieving human rights and social justice in Africa and South Africa: The continuing challenge of child health*. 138th American Public Health Association (APHA) Annual Meeting, Washington DC, USA, 6-10 November 2010.

Sanders, D. *Education for activism and the struggle for health: The experience of the International People's Health University*. 138th American Public Health Association (APHA) Annual Meeting, Washington DC, USA, 6-10 November 2010.

Sanders, D, Alexander, L. Invited presentation: *The challenge for public health education of implementing PHC in decentralized systems*. 12th World Congress on Public Health, Istanbul, Turkey, 28 April 2009.

Schaay, N, Sanders, D, Labonté, R. Poster: *Revitalizing Health for All: Learning collectively from comprehensive primary health care experiences in Africa*. 1st Global Symposium on Health Systems Research, Montreux, Switzerland, 15-19 November 2010.

Shamu, S, Abrahams, N, Temmerman, M, Musekiwa, A, Zarowsky, C. Poster: *A systematic review of African studies on intimate partner violence against pregnant women: Prevalence and risk factors*. 18th International AIDS Conference 2010, Vienna, Austria, 18-23 July 2010.

Shamu, S. *Accelerating the impact of HIV programming on health systems strengthening*. Pre-Conference Meeting of Health Systems Experts, HIV Researchers and Implementers. International AIDS Society/Rockefeller Foundation, Cape Town, South Africa, 17-18 July 2009.

Shamu, S. *Intimate partner violence and risk of HIV during pregnancy in Zimbabwe*. Conference organized by African Population and Health Research Centre, Nairobi, Kenya, 13-16 May 2010.

Stackpool-Moore, I, Akter, H, Cairo, L, Carceres, F, Charensok, S, Hale, F, Luna, A, Gomes, M, Osborne, K, Patterson, H, **Schaay, N, Sharp, L, Vazquez, M J, Welbourn, A, Wong-Grünwald, R.** *Health and humanity: Results from The People Living with HIV Stigma Index in four countries to overcome stigma and ensure universal access*. 18th International AIDS Conference 2010, Vienna, Austria, 18-23 July 2010.

Struthers, P, Wegner, L, De Koker, P, Leribe, W. *The development, validity and test retest reliability of a health promoting schools monitoring tool*. International Union for Health Promotion and Education (IUHPE) World Conference on Health Promotion, Geneva, Switzerland, 11-15 July 2010.

Rooth, E, Sylvester, T, **Struthers, P, Christoffels, A.** *A holistic participatory approach to counter TB and HIV/AIDS in schools in the Western Cape, South Africa*. London International Conference on Education (LICE), London, UK, 6-8 September 2010.

Tabana, H, Naik, R, Zembe, W, **Binza, W, Doherty, T, Jackson D, Dlanjwa, N M, Dlamini, N.** *Home-based HIV counseling and testing in a rural community in South Africa: An intervention reaching more women than men*. 18th International AIDS Conference 2010, Vienna, Austria, 18-23 July 2010.

Thobias, A, **Van Wyk, B E.** *Issues in adherence to antiretroviral therapy in an urban state hospital in Namibia*. 4th International Conference on HIV Treatment Adherence, Miami, USA, 5-7 April 2009.

Uwimana J, Van Wyk B E, Jackson D, Hausler H. (2009) *Health systems barriers for implementation of TB and HIV collaborative activities in a rural district of KwaZulu-Natal, South Africa*. International AIDS Society, Cape Town, 17 July 2009.

Uwimana, J, Van Wyk, B E, Jackson, D, Hausler, H, Radebe G. (2009). *Community participation in the implementation of TB and HIV collaborative activities in a rural district of KwaZulu-Natal, South Africa*. International AIDS Society, Cape Town, 17 July 2009.

Van Wyk, B E. *Building social capital in an era of HIV/AIDS – The role of disclosure*. 4th International Conference on HIV Treatment Adherence 2009, Miami, USA, 5-7 April 2009.

Van Wyk, B E. *Recreational use of antiretroviral drugs: Imagination or crisis?* European Association of Social Anthropology (EASA)

Conference 2010, Maynooth, Ireland, 22-27 August 2010.

Van Wyk, B E, Larkan, F & Stevens, P. *Dying to tell – How HIV treatment programmes in rural South Africa fail*. 18th International AIDS Conference 2010, Vienna, Austria, 18–23 July 2010.

Woldesenbet, S, **Jackson, D.** (2009) *The impact of quality of antenatal HIV counselling on HIV-free survival*. International AIDS Society, Cape Town, 17 July 2009.

Zarowsky, C, Lehmann, U. Co-convened the 2nd Annual HIV in Context Research Symposium: 'Public Health in the Age of HIV: Reflections and (re?)Directions', University of the Western Cape, Cape Town, South Africa, 25-26 March 2010.

Zarowsky, C. Poster: *Scaling up, joining up, or giving up? Real-world experiences in capacity strengthening to address HIV and AIDS in South Africa*. 18th International AIDS Conference 2010, Vienna, Austria, 18–23 July 2010.

Zarowsky, C. Expert review meeting for a special supplement to the journal *Health Research Policy and System: SUPPORT Tools for evidence-informed health Policymaking (STP) 1: What is evidence-informed policymaking?*, London, England, 6-7 July 2009.

Zarowsky, C. Invited presentation: *Recherche en santé mondiale: pourquoi, pour qui, et comment?* at the Ecole d'été de recherche en santé mondiale", University of Quebec in Montreal (UQAM), Montreal, Canada, May 31-June 4 2010.

Zarowsky, C. Invited presentation: *Whose good practice? Perspectives on Global Health Research*. At the Colloque sur les bonnes pratiques de recherche en santé mondiale, l'Axe de recherche en santé mondiale (ARSM) du Réseau de recherche en santé des populations du Québec (RRSPQ), Montreal, Canada, 1 June 2010.

Zarowsky, C. Invited presentation: *HIV and Mental Health in Context: Reflections from South Africa*. Summer programme in Global Mental Health Research, McGill University, Montreal, Canada, 3 June 2010.

Zarowsky, C. *Public Health in the Age of HIV: Reflections on research and practice capacity from South Africa*. Lunchtime seminar at the International Development Research Centre (IDRC), 19 October 2010.

Zarowsky, C. *HIV, Health Systems and Public Health*. Invited professor on short course on Integrating HIV, Public Health and Development in Southern Africa, at the Health Economics and HIV/AIDS Research Division (HEARD), University of KwaZulu-Natal (UKZN), Durban, 1-5 November 2010.

Other professional activities of academic staff

Thomas Achia

- Reviewer, South African Journal of Science, 2010

Lucy Alexander

- Member, Faculty Academic Planning Committee, 2009

Hazel Bradley

- SOPH representative, Faculty Research Grants and Study Leave Committee, 2009 & 2010
- Member, Pharmaceutical Society of Great Britain, 2009 & 2010
- Member, Pharmaceutical Society of South Africa, 2009 & 2010
- Member, South African Pharmacy Council, 2009 & 2010

- Member, South African Association of Hospital and Institutional Pharmacists, 2009 & 2010
- Member, Public Health Association of South Africa (PHASA), 2009 & 2010
- Reviewer, CHS Faculty Journal, 2009 & 2010

Johann Cailhol

- Co-ordinator and lecturer, Postgraduate Diploma on clinical HIV management, University of Burundi (joint diploma between University of Burundi and Paris-13 University), 2009 & 2010
- Affiliated researcher, National Center for HIV Reference, Bujumbura, Burundi, 2009 & 2010
- Reviewer, Bulletin de la Société de Pathologie Exotique, 2009
- Member, French Society of Infectious Diseases, 2009 & 2010

Tanya Doherty

- Reviewer, Plos One (2009), British Medical Journal (2009), WHO Bulletin (2010), BMC Health Services Research (2010), BMC International Health and Human Rights (2010)
- External examiner, University of Cape Town (2009 and 2010)

Ehimario Igumbor

- Reviewer, South African Family Practice Journal (2004 – present), Rural and Remote Health Journal (2005 – present), Journal of Community Health Sciences, Population, Health and Nutrition (2009), African Journal of Primary Health Care and Family Medicine, Human Resource Research (2010)
- Reviewer, National Research Foundation, 2009
- Member, Public Health Association of South Africa (PHASA), 2006 – present
- Member, Pain South Africa, 2003 – present
- Chair, Masters in Public Health (MPH) Special Interest Group (SIG) of the Public Health Association of South Africa (PHASA), 2010 – present
- External examiner, universities of KwaZulu-Natal, Limpopo, and Walter Sisulu

Debra Jackson

- Member, Vice-Rector's Research Committee, 2009
- Member, University of the Western Cape, Young Researcher Award Committee, 2009
- Member, University of the Western Cape Research Task Team, 2008 – 2009
- Member, American Public Health Association, 1984 – present
- Member (2008 – 2010) and Chair (2010), American Public Health Association National Nominations Committee, 2008 – 2010
- Member, WHO/RHR maternal and perinatal health research and reproductive epidemiology advisory group (MAPREG), 2009 – present
- Member, Western Cape Provincial Health Research Committee (South Africa), 2008 – present
- Member, Public Health Association of South Africa (PHASA), 2002 – present
- Member, Perinatal Priorities Association of South Africa, 2001 – present
- Member, Association of Women's Health, Obstetric and Neonatal Nurses, 1983 – present
- Member, Society for Epidemiologic Research, 1991 – present

- Chair-Elect: Maternal and Child Health Section, American Public Health Association, 2009 – 2010
- Review panelist (Focus Area Grants, Freestanding Post-Doctorate Grants), National Research Foundation, 2005 – present
- Reviewer, Maternal and Child Health Journal (1997 – present), Journal of Obstetric, Gynecologic and Neonatal Nursing (1996 – present), National Research Foundation (2004 – present), Journal of Social Aspects of HIV/AIDS Research Alliance (SAHARA) (2008 – present), The Lancet (2010), South African Journal of Epidemiology and Infection (SAJEI) (2010)
- Completed Colorado Outward Bound Standard Course, August 2009
- External moderator, University of Cape Town
- External examiner, universities of KwaZulu-Natal and Stellenbosch

Uta Lehmann

- Co-ordinator, WHO Collaborating Centre for Research and Training in Human Resources for Health, 2004 – present
- Member, Senate, University of the Western Cape, 2002 – present
- Member, Senior Appointments Committee of Senate and Council, 2006 – present
- Member, Faculty Management Committee, 2009 – present
- Member of steering committee, African Health Workforce Observatory, 2009 – present
- Member, Global Health Workforce Alliance's international expert panel to develop guidelines for the scaling up of community health worker programmes, 2009 & 2010
- Member, Public Health Association of South Africa (PHASA), 2003 – present
- Member, Research on the State of Nursing (ReSON) national working group? (at present), 2009 – present
- Member of editorial board, Human Resources for Health, 2006 – present
- Reviewer, Education for Health, Educational Action Research, Health Policy and Planning, WHO Bulletin, Social Science and Medicine
- External examiner, universities of the Witwatersrand, KwaZulu-Natal and Cape Town, Royal Tropical Institute (KIT), Netherlands

Verona Mathews

- SOPH representative, Faculty Academic Planning Committee, 2009 & 2010
- SOPH representative, Faculty Teaching and Learning Committee, 2009 & 2010
- Member, Public Health Association of South Africa (PHASA), 2004 – present
- Member, Human Resource Information Reference Group (HIRG), WHO, 2008 – present

Thuba Mathole

- External examiner, University of KwaZulu-Natal (UKZN), 2010

Nandipha Matshanda

- Member, Faculty Public Relations Committee, 2009 & 2010

Suraya Mohamed

- Trainer, Health Promoting Schools for Gauteng Departments of Education and Health, 2009
- Member, Health Promoting Schools Forum, 2009 & 2010
- Member of task team, Towards an integrated provincial

wellness strategy for Department of Cultural Affairs and Sport, 2009

- Member, Public Health Association of South Africa (PHASA), 2009 & 2010

Thandi Puoane

- Member, Senate, University of the Western Cape, 2009 – present
- Member (2002 – present) and executive member (2008 – present), Public Health Association of South Africa (PHASA)
- Member, MRC African Traditional Medicine, Drug Discovery and Drug Development National Collaborative Research Programme (NCRP), 2009 & 2010
- Member, South African Medical National Collaborative Research Programme, 2009 & 2010
- Executive member, Center for Chronic Diseases in African Region, 2009 & 2010
- Editorial Board member, Journal of Life Sciences, 2010
- Board member, Mamelani Community Project, 2010
- External examiner, universities of Pretoria, Limpopo (MED-UNSA), Walter Sisulu and Rhodes

Gavin Reagon

- Chair, Faculty Higher Degrees Committee, 2009
- Member, Public Health Association of South Africa (PHASA), 2009 & 2010

David Sanders

- Member, Senate, University of the Western Cape, 1993 – present
- Member, Senate Academic Planning Committee, University of Western Cape, 1995 – 2009
- Member, Global Steering Council, People's Health Movement, 2005 – present
- Member, Global Co-ordinating Commission, People's Health Movement, 2005 – present
- Vice-Chair (2009) and Chair (2010) of Steering Committee, People's Health Movement, South Africa
- Board member, Alternative Information and Development Centre (AIDC), 2009 & 2010
- Member of the Advisory Board, African Centre for Global Health and Social Transformation (ACHEST), Uganda, 2009 & 2010
- Board member, Health Information Systems Programme (HISP), 2009 & 2010
- Visiting professor, Centre for International Health, University of Bergen, Norway
- Visiting professor, teaching on the Master Study Programme 'Health and Society: International Gender Studies Berlin', Charité – Universitätsmedizin Berlin, 2-4 February, 2009
- Member of WHO Working Group on policy and health system indicators of Countdown to track progress in maternal, newborn and child survival, 2008 – present
- Temporary adviser to the World Health Organisation (WHO) to a meeting of the Countdown 2010 Working Group on Policy and Health System Indicators, Geneva, 5 & 6 February, 2009
- Invited by WHO to participate in the Implementers Consortium on Maximizing Positive Synergies between Health Systems and Global Health Initiatives Meeting, in Chiangmai, Thailand, 23 – 24 April 2009
- Invited by WHO to attend a high level dialogue on Maximizing Positive Synergies Between Global Health Initiatives and Health Systems, in Venice, Italy, from 22 to 23 June 2009

- Invited to a WHO/PEPFAR informal meeting on scaling up education and training of health workers, Geneva, 13 – 14 October 2009
- External examiner of PhD Thesis, Department of Sociology, University of Cape Town, 2009
- External examiner, Department of Public Health, Flinders University, Adelaide, Australia, 2009
- External examiner, Masters in Public Health (MPH) Programme, Division of Community Health (DOCH) of the College of Medicine (COM), University of Malawi, 2005 – 2009
- Member, Global Health Workforce Alliance's international expert panel to develop guidelines for the scaling up of community health worker programmes, 2009 & 2010
- Co-chair of the Working Group on Capacity Development of U.N. Standing Committee on Nutrition, 2002 – present
- Member, Public Health Association of South Africa (PHASA), 2003 – present
- Principal investigator and senior medical consultant to UNICEF and National Department of Health Nutrition Directorate for project: Capacity Development of Medical Doctors and Senior Managers in South Africa for the Management of Severe Acute Malnutrition, 2009/10
- Member of Advisory Group for IHP+ Results (monitoring group researching International Health Partnership), 2009 – present
- B-rated researcher with the National Research Foundation (NRF) since 2009.
- Member of the Editorial Advisory Board, Journal of Epidemiology and Community Health
- Member of editorial board: Critical Public Health (Centre for Social and Policy Research, University of Teesside, UK), 2006 – present
- Associate editor: International Journal of Integrated Care (Utrecht University, the Netherlands), 2006 – present
- Reviewer of manuscripts submitted for publication in Health Policy and Planning, Critical Public Health, Human Resources for Health, International Journal of Integrated Care, BioMed Central Public Health, The Lancet.

Nikki Schaay

- Facility Board Member, False Bay Hospital, Cape Town, 2009
- External examiner, Nelson R Mandela School of Medicine, 2009

Vera Scott

- Member of task team, Western Cape Provincial HIV/TB task auditing HAST services, 2009/2010
- External examiner, University of Limpopo (MEDUNSA), 2010

Simukai Shamu

- Member, Public Health Association of South Africa (PHASA), 2010
- Member, Sexual Violence Research Initiative (SVRI) Forum, 2010
- Reviewer, Reproductive Health Matters, International Journal of Sociology and Anthropology, 2010

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- Board member, DOPSTOP, Stellenbosch 2009 & 2010
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