

School of Public Health

FACULTY OF COMMUNITY & HEALTH SCIENCES



Report of Activities 2013 – 2014



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: Navigating an uncertain world



The School of Public Health (SOPH) was established in the early 1990s, at the dawn of democracy in South Africa. It was an initiative of then Rector Jakes Gerwel, as part of an assertive broader project of the University of the Western Cape (UWC) as the 'university of the democratic left'. The leitmotifs of the new public health programme were primary health care and district health systems, social justice and equity, redress and transformation. When I joined the SOPH in 2011, nearly twenty years after its first beginnings, I was struck by the enduring presence and power of these values and how much they still frame the agendas of teaching, research and engagement, both in the School and in the broader university environment.

It is thus entirely fitting that, one year after his passing in 2012, the University decided to honour Jakes Gerwel's legacy by establishing an award in his name, with the support of the Mauerberger Foundation. This is to be given each year to an alumna or alumnus of the SOPH judged by staff and students as making an outstanding contribution to the field of public health. The first recipient of the award in 2013 was Kirstie Rendall-Mkosi and the second was Saadiq Kariem in 2014. Both have been significant players in public health - Kirstie with her work on the quasi-feudal social relations which perpetuate dependency on alcohol in rural areas of the Western and Northern Cape; and Saadiq as a critical voice inside the ANC during an era of AIDS denialism. Each, in their own way, has demonstrated the ongoing role of public health as speaking truth to power in post-apartheid South Africa.

As you will see in the individual stories of our graduates in the pages of this annual report, we have no shortage of deserving future candidates for the Jakes Gerwel Award. We are privileged to count among them senior Ministry of Health officials, practitioners at the frontline of the Ebola epidemic, and activists campaigning against botched sterilisations in Chhattisgarh State in India.

As two thirds of our students come from beyond South Africa, we have engaged over the last two years in a systematic way with the rapidly evolving new landscapes of educational access through on-line and e-learning modalities. In 2014 we piloted the shift in the delivery of a few Master of Public Health (MPH) modules from paper-based distance learning materials (expedited in large boxes to students each year) to UWC's integrated on-line Learning Management System (a SAKAI e-learning platform referred to as iKamva). We have also been experimenting with the dizzying array of associated technologies for interaction with students at a distance, whilst remaining sanguine about the limits of technology in education. We have found that the years of investment and experience with educational design and development of distance educational materials has prepared us well for the transition. In this regard, we are hugely indebted to the role played by our educational specialist, Lucy Alexander, who has steered the distance-learning endeavour in SOPH for many years and who stepped down from a full-time position in 2014 to pursue a wider range of interests.

In this report, we profile a new development in our educational programmes in the field of Pharmaceutical Public Health. In partnership with Management Sciences for Health, UWC's School of Pharmacy and Richard Laing of Boston University (also an extraordinary professor in the SOPH) we offered a series of short courses during our annual Winter School in 2014. In 2015 we are developing these into accredited online modules for both our MPH and occasional students.

In addition to our MPH and Postgraduate Diploma, which remain the SOPH's flagship courses, we have seen the growth and consolidation of our PhD programme. This has been significantly supported by the start of Wim van Damme's tenure as our SARCHI (South African Research Chair Initiative) incumbent in 2013; and also by the availability of funds to appoint post-doctoral fellows across a number of projects. These are the pipelines of dedicated academics we hope will one day lead the SOPH.

Any discussion of our teaching and learning activities is not complete without mention of our annual Winter School short course programme. In 2013 and 2014, the 21 courses offered at the 22nd and 23rd editions of the School attracted 250 to 300 participants each. Winter School remains singularly the most energetic moment in our calendar, during which the face-to-face engagements with mid-level and frontline health systems players feed us as much as they do the participants.

It is hard to capture in a few sentences the essence of the research and engagement endeavour in the SOPH. More than two dozen projects over the period included the multi-year projects that were featured in previous annual reports, such as PURE (Prospective Urban Rural Epidemiology) and DIAHLS (District Innovation and Action Learning on Health Systems). Our project themes continue to address health interventions (HIV and TB, maternal and child health, chronic diseases), social determinants of health (nutrition, diet) and health systems, and involve a wide range of partnerships and networks across the globe.

As indicated, 2013 saw the inception of our SARChI Chair in Health Systems, Complexity and Social Change, and the finalisation of a memorandum of understanding with the Antwerp Institute of Tropical Medicine (ITM). This signaled the start of a significant new partnership for the SOPH that has spawned a number of capacity building, research and fundraising initiatives. One of the highlights of SARChI was the hosting of the popular Emerging Voices for Global Health (EV4GH) programme, linked to the International Conference on AIDS in Southern Africa (ICASA) and the Global Symposium on Health Systems Research held in Cape Town in 2013 and 2014 respectively.

SARChI forms an integral part of our now well-established portfolio of health systems research and development activities, much of which is conducted collaboratively with partners at the University of Cape Town. Over the past two years we have significantly deepened our capacity, thinking and contribution in this still emergent area of public health. We also successfully organised, together with five other partners, the prestigious biannual Health Systems Research Symposium of the Health System Global Society in September/October 2014.

In 2014 the Centre for Research in HIV and AIDS wrapped up a large five-year programme of work funded by CDC (Centers for Disease Control and Prevention) which, with Christina Zarowsky's return to Canada after five years of dynamic leadership, concluded a significant era in the life of the Centre. In late 2014 the Centre underwent a formal review and its future will be finalised in 2015.

Other developments in the period included our partnering in the National Research Foundation funded Centre of Excellence in Food Security hosted as UWC, and the awarding of an Extra-Mural Medical Research Council Unit entitled 'Health Services to Systems'. As with SARChI, these initiatives are funded in one way or another through the South African fiscus, suggesting a welcome new trend towards providing core research funds to institutions such as ours.

As these pages attest, our research productivity in the collective of staff and associated honorary appointments remains high, and in this regard we were ranked in the top ten departments of the University for the period 2011 to 2013.

Finally, our wonderful building and facilities have given us unparalleled opportunities to host seminars, meetings and visitors to the SOPH. In 2013 and 2014 these included the annual David Sanders lectures, a '20 years of democracy' seminar series, Emerging Voices for Global Health programmes, Jakes Gerwel Award ceremonies, our Summer and Winter Schools, HIV-in-Context symposia and seminars, amongst countless other events. We owe the convening power of our building to the generous funding of The Atlantic Philanthropies, which has played a crucial role in supporting the SOPH over many years.

These achievements have not been without their losses and challenges. In mid-2014, just weeks after we had appointed her as a new professor, Meera Chhagan died tragically in an accident while travelling; our staff have had their fair share of ill-health; and our much-liked former Dean and strong supporter of the School, Rati Mpofu, passed away.

Also, despite our stability and apparent progress as a School, there is little room for complacency. Universities in South Africa are facing an unprecedented wave of critique. In the many commentaries on the situation in higher education institutions, a core theme has been the dismantling of the myths of the 'new South Africa' as a 'rainbow nation' of racial harmony, and of higher education institutions as spaces of reason and enlightenment outside of these social tensions. This is occurring against a backdrop of increasing skepticism of the South African state's responses to the enduring legacies of racism, inequality and injustice, and of a world beyond that is steeped in senseless violence. It is altogether a context of deep uncertainty, requiring us to see ourselves in new and self-critical ways and in which there are no clear guides to action nor simple solutions. Our challenge over the next few years will be to find ways to navigate this complex world in new and generative ways, whilst learning to live with being unsettled and uncertain.

THE ACADEMIC PROGRAMME

For the past 23 years, the School of Public Health (initially the Public Health Programme) has trained public health practitioners in South and sub-Saharan Africa for district health system development and implementation through

- *short courses* offered by staff and visiting experts at annual Winter and Summer Schools; and
- a *multi-level postgraduate programme* delivered through a flexible learning approach.

The Postgraduate Programme

The postgraduate programme consists of three courses and qualifications:

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

The table below reflects our enrolment figures over the past four years, showing overall stable numbers in the Postgraduate Diploma, a decrease in MPH enrolments, and a slight increase in PhD students, with some variations from year to year. Most noteworthy is the decrease in MPH enrolments. This reflects a deliberate effort to establish sustainable enrolment targets, following ballooning numbers in previous years, as a result of a 'legacy' of students completing their studies at a slower than expected pace while we were enrolling large numbers every year. We now feel confident that our MPH targets are sustainable at present staffing levels, and that growth will focus on our PhD programme (see below).

Students registered for postgraduate programmes: 2011- 2014

Qualification	2011	2012	2013	2014
Postgraduate Diploma in Public Health	32	16	+38	38
Master of Public Health	180	146	115	113
PhD in Public Health	38	44	46	42
Total	250	206	199	193

Students who graduated in 2013 and 2014 are listed on pages 12 to 15. As in previous years, they live and work in Southern, East and West Africa (see map on page 8), with 37% coming from South Africa, 60% from other African countries and 3% from outside of the African continent.

Postgraduate Diploma in Public Health

The Honours-level 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 complementary qualification for professionals who already have Masters and Doctoral degrees, but who want a public health foundation for career purposes.

The Diploma, offered at level 8 on the National Qualifications Framework, inducts students into the field or discipline of public health; introduces concepts of disease and the burden of disease within the preventive and promotive paradigm; orients students to public health in an era of globalisation; offers training in a range of key skills for academic study in the field; and, importantly, guides students in conducting a monitoring and evaluation project which responds to the management role that many of our students play.



In his MPH mini-thesis James Bashweka undertook an 'Exploration into the factors affecting the coverage of household latrines in Kagera, Tanzania'.

"I do not want this mini-thesis to remain on the drawing board and in the library, and I have started to design interventions on water sanitation and hygiene for a wide range of levels - household/families, community and school health programmes. I am also working with other stakeholders, including civil societies, councils, health management team and regional health management teams, to use my expertise and contribute to the improvement of the health status of people in our region."

2014 MPH graduate, James Bashweka, Tanzania

The Master of Public Health (MPH)

The SOPH considers its Masters degree to be its flagship programme which, since its inception in 1994, has attracted large numbers of students from all over Africa. The positive regard this indicates is reflected in the World Health Organisation's R10 million grant to the School, allocated to strengthen the programme and link it to capacity development of Human Resources for Health in other African countries.

Most of the School's students are health professionals studying part-time while they work. 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 they largely study at a distance. While most attend Summer and Winter Schools, some never come to the School at all.

This means that much of the students' learning experience is mediated in the first instance through well-developed learning materials and student support, instead of classroom teaching. Since the MPH programme was launched, all our modules have been produced in print and sent to students at the beginning of each year. Student support is mostly given via e-mail and phone, through extensive feedback on their written assignments and mini-theses, as well as through contact sessions such as the mini-thesis weeks.

During the past few years we have also begun to engage with the opportunities afforded by new technologies - experimenting with Google discussion groups, podcasts, use of blogs, on-line teaching using media such as Skype or Webex, and recording and posting lectures on UWC's e-learning platform, iKamva. While some staff (and students) take to these new modalities like ducks to water, others are more circumspect, even intimidated, preferring tried and trusted print and paper to the digital world. As a School which has worked with students at a distance for 15 years, we

are acutely aware of the great opportunities presented by new technologies - but also know from experience that technology is only a means to an end, and that the real challenge lies in bringing these means to bear on excellent educational practice. The coming years will no doubt see substantial changes in our educational delivery, to be documented in future reports.

A growing demand for doctoral study

There is also substantial interest in our PhD qualification, both within the country and further afield. In the past nine years our programme has grown from four to 42 students – some of whom are our own staff, an indication of the School and the University's serious commitment to building senior academic capacity in the country.

We are responding in two ways to this growing demand:

- The development of a PhD training and support programme, which includes the Social Innovation in Public Health Impulse (SIPHI) fellowship programme (for details see pp 13 below); and
- The initiation of plans for a multi-country, professionally-oriented Doctorate in Public Health programme, with colleagues from the universities of Cape Town, Ghana and North Carolina as well as Makerere University. This initiative is still in its early stages of development, and we shall report on progress in the coming years.



Eustarckio Kazonga's mini-thesis examined the 'Outbreak investigation of cholera in Lusaka, Zambia from 2007 to 2011'.

"Studying for the MPH at UWC as a distance learning student was quite involved but also exciting and enriching. I had to find time for my full-time work as a Minister and Constituency Member of Parliament, and this combination of ministerial, parliamentary and MPH studies was a big challenge.

I hope to integrate my study into the development, implementation and evaluation of public health policies and programmes. Additionally, I will be able to incorporate some of the skills and knowledge from the programme in lecturing on some of the public health courses such as health systems research, biostatistics and epidemiology."

2014 MPH graduate, Eustarckio Kazonga, Zambia

LEARNING MATERIALS

While the School revises its learning materials on an ongoing basis, two projects have been specifically dedicated to this work in the past two years.

Modules in Pharmaceutical Public Health

The team that developed the Winter School short courses is currently developing three 15-credit on-line modules—Rational Medicines Use, Medicines Supply Management and Analysing Pharmaceutical Systems—with the support of our materials developers Lucy Alexander and Jenny Birkett. These modules will facilitate the establishment of a new stream in the Master of Public Health (MPH) – i.e. Pharmaceutical Public Health – in line with several other streams offered within the programme. The Rational Medicines Use module will be offered in the second semester of 2015 and the other two modules will become available from 2016 onwards.

We are thrilled that participants who are not our MPH students will also be able to register as occasional students for these on-line modules – a first for the SOPH!

CHEPSAA courses in health systems development and research

As part of the Consortium for Health Policy and Systems Analysis in African (CHEPSAA) (see p 20) the SOPH has been centrally involved in the development of two Masters-level modules. These were distributed to participants in an organised session at the Third Global Symposium on Health Systems Research held in Cape Town in October 2014, and were subsequently published on the CHEPSAA website (<http://www.hpsa-africa.org/index.php/teaching-materials/modulescourses>).



- The first module, *An Introduction to Complex Health Systems* covers topics such as the definition of a health system; frameworks for analysing health systems; complexity in health systems and the importance of agents and their mindsets, interests and power; plus leading change in health systems.
- The second module, *Introduction to Health Policy and Systems Research*, covers topics such as the definition of health policy and systems research; generating and framing questions; the important role of researchers' own perspectives and disciplines in research; study design; rigour and ethics.

Both sets of course materials consist of a course outline, notes for facilitators, PowerPoint slides and handouts. They are made available under a creative commons licence, are intended for adaptation to local teaching contexts and aim to contribute to building an international community of practice in health policy and systems training.



**Geographic spread of downloads
of CHEPSAA curriculum materials by January 2015**



At the end of 2014 the SOPH reluctantly said good bye to Lucy Alexander, the School's educational specialist for more than twelve years. With a background in adult education Lucy joined us in early 2002, in the very early phase of our open learning teaching programme, and in the following years became synonymous with our mission to develop and offer educational materials and processes of excellent quality. Lucy refined the SOPH brand of materials; wrote/ re-wrote and reviewed almost all of our modules, introduced us to the world of open educational resources, and ensured – sometimes against collective inertia – that we pay attention to pedagogy. As one staff member said in thanking her: "Thank you for being the quiet but firm advocate for all of our distance education students. You have constantly reminded us of their learning needs, the challenges they are likely to face in accessing resources and engaging with ourselves; that it is their learning needs rather than our teaching needs that are important."

When we moved into our new premises Lucy almost single-handedly transformed a fairly sterile building into a space alive with beautiful African art – drawing on her vast expertise in this field too – now much envied and commented on by colleagues and visitors. Lucy leaves an irreplaceable gap! And while we hope to engage her expertise occasionally, we also wish her well in a very well deserved retirement.

Impact of the MPH in lower- and middle-income countries

In 2011 education specialist, Lucy Alexander, joined five other schools of Public Health, all of which served students in lower- and middle-income countries (LMICs), to conduct a comparative impact evaluation of the Master of Public Health (MPH). The study was sited at the Royal Tropical Institute (KIT), Amsterdam, The Netherlands; the School of Public Health, Fudan University, Shanghai, China; the Hanoi School of Public Health, Vietnam; National Institute of Public Health, Mexico; the University of Science and Technology, Khartoum, Sudan supported by their Federal Ministry of Health; as well as at this School of Public Health (SOPH) at the University of the Western Cape.

Led by Dr Prisca Zwanikken of KIT, this collaboration yielded an extraordinarily co-operative process amongst research team members based on four continents, as well as some important findings for the schools themselves and for public health education more generally.

Rationale

Most earlier studies in health professional education have focused on the shortages of health care workers and skilled managers, researchers and policy makers. Calls were made for health professional education, including higher degrees in public health (Zwanikken et al, 2013) - which gave rise to questions regarding the relevance and impact of these degrees in LMICs. This study therefore set out to identify the influences of the MPH and Masters in International Health (MIH) “on the graduates, their work and on society” (Zwanikken, 2015: 137) and to contribute to addressing the knowledge gap identified by the WHO (2006) regarding the impact of health professional education on practice (Zwanikken, 2015).

As the outcomes and impact of education are not easy to measure (attribution being the key issue) the study was designed using an adaptation of Kirkpatrick's (2006) evaluation framework which anticipates multiple levels for evaluation, with outcome and impact being the key focus. While ‘outcome’ was defined as the application of competencies at the workplace or in life as well as effects on individual career, ‘impact’ is the changes in

organisational performance on the part of the graduate and/or on society, including improved health of recipients of services, or policies related to this.

Findings

Quantitative findings suggest that 69% of the respondents have experienced changes in leadership position and 69% in technical position, while 80% acquired new responsibilities and 63% enjoyed increased remuneration – with the MPH being attributed with making a significant contribution to such changes. Although the response rate for UWC's SOPH was low, an analysis of these findings is under way.

There is also substantial evidence of changes in graduates' practice in the qualitative findings – which they attributed, as did their peers and supervisors, to the MPH. For example, a supervisor commented on the fact that a graduate who worked at an HIV-focused non-governmental organisation was providing leadership in a process of ‘gender mainstreaming’ in Uganda; the graduate, in turn, attributed her increased consciousness of “what things ought to be and what they are not” to the Health, Development and Primary Health Care II course in her MPH.

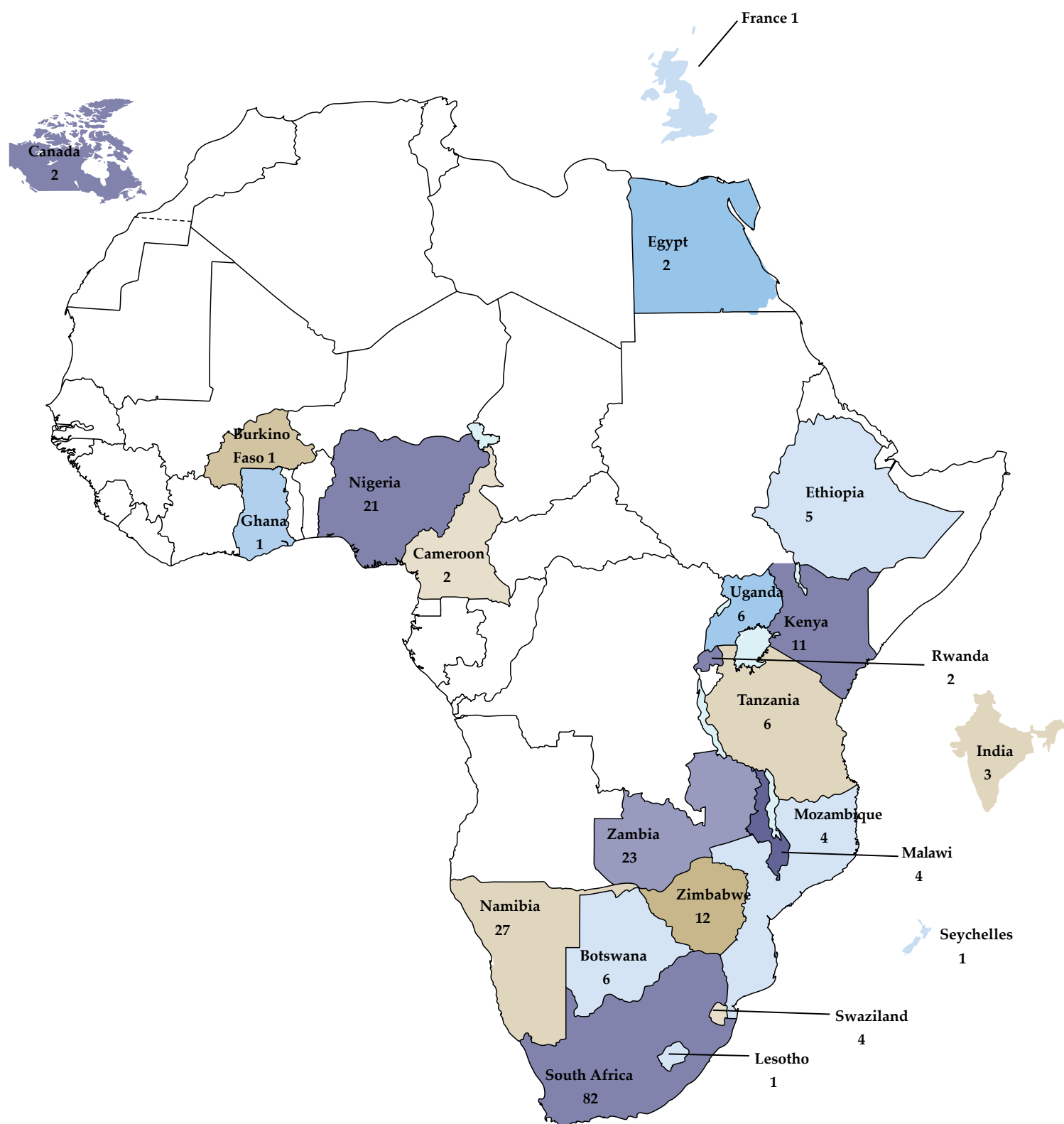
In almost all interviews, community involvement was mentioned by graduates, and peers or supervisors, or both. For some graduates, community involvement meant understanding community hierarchies; identifying gatekeepers; being able to talk to, or plan with, local communities; but also involving others like Members of Parliament, religious leaders and youth (SOPH-A5, -S5, -P5). “So it is systematic wherein to involve the gatekeepers, their leaders; and once you've convinced them, they do exceptional work for you on the ground”(SOPH-A5).

While many nuances emerged across institutions, it can nevertheless be concluded that these MPH programmes contributed substantially to the “the application of public health analytical competencies, as well as leadership, context-specific and planning and management competencies” (Zwanikken, 2014b).

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Our Global Reach: Geographical origins of our students 2013 – 2014



Student Academic Achievements

In 2013 and 2014, 90 students graduated from one of the School of Public Health's (SOPH) postgraduate programmes:

- 28 students graduated with the Postgraduate Diploma in Public Health
- 55 students graduated with the Master of Public Health(MPH)
- 7 students graduated with the PhD in Public Health.

Postgraduate Diploma in Public Health

2013:

Binza, Welizwa
Byleveld, Stiaan
Chabala, Susan
Chipinduro, Joseph
Dyantyi, Khona
Getyeza, Asanda
Khamane, Malefu
Makhaza, Timothy
Mbanjwa, Mlungisi
Noshir, Cynthia
Samona, Alick
Singh, Roschelle

2014:

Amwaalwa, Frieda
Burger, Gertruida
Hlahla, Elsie
Igboerika, Ekene
Kakororo, Edward
Leteka, Polo
Makwindi, Nyembesi
Masvosva, Bernard
Mhango, Rachael
Mogapi, Mompoti
Mutondwa, Rabelani
Nyama, Lainah
September, Elindi
Siwendu, Mamela
Stefanus, Frieda
Thomas, Tarryn-Inge

Master of Public Health

As students are encouraged to research and write up an issue in their mini-theses that either relates to their work or is a subject in which they are really interested, dissertations are often small-scale local studies focusing on a particular topic. They may also reflect current public health issues experienced by students at work as well as in the teachings of the course.

A number of themes can be seen across the theses of the students graduating in 2013 and 2014.

Just under a third (16 of 55) related to human resources for health, which included topics such as addressing health workers' experiences of work and the role of community health workers in the provision of care. Another 30% (16 of 55) included a focus on maternal and child health, from the choice of where women delivered their babies to the care of orphaned children. Four of these focused on nutrition. HIV/AIDS and TB remained key themes, being addressed in 30% (16 of 55) of theses.

In addition, six theses looked at the provision of services – either their availability or the implementation of clinical procedures – while three addressed topics related to information systems.



"The aim of our study was to find out reasons for low enrolment of TB patients into the community TB care programme, from the TB patients themselves and their care providers' point of view. This programme allows TB patients to take their treatment in the community while they are observed by a family member, community health promoter, colleague or teacher - rather than going to a health facility daily for directly observed therapy. The study showed that health system factors were more responsible for low enrolment into the programme than all the other factors.

Studying public health as a medical laboratory scientist was an eye opener. Most of the concepts were new, and it was a real struggle at first. However, I learnt a lot through the programme, and got to appreciate concepts on governance, risk management and compliance, all of which are crucial for management."

2014 MPH graduate, Thato Mogapi, Botswana

2013

AKINAW, Solomon	Exploring the implementation of the 'model families' approach as a strategy for diffusing desirable health practices in the community: The case of Yelmana-Denssa district, Ethiopia
ANTHONY, Adele	Assessment of clinical practices in children admitted with severe acute malnutrition in three district hospitals in the Western Cape
ATUHAIRE, Lydia	Challenges and strategies to increase uptake of cervical cancer screening services among women seeking care for maternal child health services in Kampala, Uganda
CASSIM, Abdus-Samad	A retrospective evaluation of the effectiveness of the mobile HIV/AIDS treatment teams in the Amajuba district, KwaZulu-Natal
CHANDA, Mulimansenga Michael	Factors that impact on the capacity of District AIDS Task Forces to co-ordinate decentralised HIV/AIDS services in Zambia
CHITETE, Lusungu	Uptake of HIV testing among acutely malnourished children in Dowa district of Malawi
EGHAREVBA, Johnbull	Determination of the factors influencing the choice for hospital delivery among women in Abakaliki, Nigeria
GAUSI, Khoti	Assessment of the use of routine Health Management Information Systems in decision-making in Malawi
GITAU, Lillian	Assessment of community knowledge, attitude and practices around malaria prevention activities in Gatwikira area in Kibera, Kenya
HAMZAT, Omotayo	Assessment of the pharmaceutical information system in district hospitals in Abuja, Nigeria
JALANG'O, Grace Atieno	Outpatient diabetes care at Kenyatta National Hospital: An assessment of institutional care practices against national diabetes care guidelines
JOEMAT, Janine	A ten-year review of routine data for teenage mothers who deliver in public sector primary health care facilities in the Western Cape Province in Cape Town, South Africa from 2000 - 2010
KILONZO, Henry	Community health information management practices: Assessment of community health workers information use for adaptive health programming in Nyando Division, Kenya
MADEDE, Tavares	The effects of global health initiatives on human resources for health development in the public sector in Chokwe District, Mozambique
MAFOKO, Emmanuel	Process evaluation of the multiple concurrent partnerships "O Icheke, Break the Chain" Campaign for HIV prevention in Botswana from 2009 – 2012
MAKIE, Vuyolwethu	Quality of home-based HIV counseling and testing performed by lay counsellors in a rural sub-district of KwaZulu-Natal, South Africa
MBEBE, Adelaide	Internal brain drain in Mozambique's National Health Service: Medical doctors' and managers' perceptions of factors that influence intention to stay in or leave the public health sector in Maputo City, Mozambique (2000 – 2010)



"Available evidence in Nigeria shows that the burden of childhood malnutrition has remained unchanged for nearly a decade, with increasing prevalence in some regions of the country. The aim of the research was to evaluate the pattern of malnutrition in acutely ill children who were seen in the paediatric emergency unit of the Jos University Teaching Hospital.

As a result of the study, I am going to have a paradigm shift in terms of my understanding and approach to child health and disease. The concept of continuous assessment, analysis and action on health needs and management of resources will be a useful tool for me. I will also integrate health education, promotion and prevention into my work and career as a paediatrician."

2014 MPH graduate, Isaac Ocheke, Nigeria

MEDHANE, Fitsumberhan	Factors affecting career intentions of medical students in two medical schools in Addis Ababa, Ethiopia
MFENGU, Sipwo	Factors associated with the re-admission of patients with schizophrenia to the East London Mental Health Unit
MUTUNDA, Anne	Factors impacting on the menstrual hygiene among school-going adolescent girls in Mongu district, Zambia
NDUMBA, Idah	Association of non-polio enteroviruses with acute flaccid paralysis in Zambia
NGUNI, Catherine	Exploration and description of barriers to male participation in antenatal and prevention of mother to child transmission of HIV (PMTCT) services in Mumbwa district in Zambia
NYAMUDEZA, Evajoyce	Developing an understanding of HIV/AIDS awareness, attitudes and sexual practices among the elderly in Harare, Zimbabwe
OREJE (AKOKO), Susan Joy	Assessment of prescribing patterns and availability of anti-malarial drugs to children under five years of age in a rural district in Kenya
SAID, Abubakar	Comparative study of patient satisfaction with HIV/AIDS care provided by nurses and by doctors at the Infectious Disease Hospital in Kano, Nigeria
SINGH, Yagespari	Multi-source assessment of community health worker performance in the context of a supportive supervision programme in Durban, Kwa-Zulu-Natal
STEENKAMP, Carlyn	Risk perception to HIV and sexual behavior practices among college students at Rosebank College in Pretoria, South Africa
VATASSERYVADAKKEMADOM RAMAIYER, Raman	What influences local mentorship arrangements in community health worker programmes? Exploring the CHW mentorship system in Rajasthan State, India
ZUNGU, Lynette Thembisile	Knowledge and practices of infant feeding among HIV positive mothers attending the Prevention of Mother to Child Transmission (PMTCT) Programme in the Eastern Cape

2014

ANDREWS, Donavan Mark	The integration of clinical forensic medicine into the district health system in the Western Cape
BASHWEKA, James Barongo	Exploration into the factors affecting the coverage of household latrines in Kagera, Tanzania
BUSINGE, Bitamazire Charles (cum laude)	The risk factors of HIV infection among antenatal mothers in King Sabata District Municipality of the Eastern Cape Province of South Africa
CHERU, Tesfaye Gudeta	Assessment of job satisfaction amongst physicians working in public hospitals in Addis Ababa, Ethiopia
HUSSELMANN, Karin	Factors influencing the use of the female condom in Karasburg, Namibia: A qualitative descriptive study
JUMA, Betty	An exploratory study to assess the roles and challenges of community health workers in delivering the Kenya Essential Package for the Health to young children affected by HIV/AIDS in Kisumu West District, Nyanza province, Kenya
KAZONGA, Eustarckio	Outbreak investigation of cholera in Lusaka, Zambia from 2007 to 2011



"The theme of my research was highlighting cancer incidence estimates, trends and differentials in the urban population of Buffalo City. Results from my study will inform future research, making it possible to examine urban-rural variations in cancer profiles thus giving a more comprehensive picture of the cancer burden in the Eastern Cape Province and South Africa. My experiences as a full-time employed distant learner included making sure that I manage my time properly between my job responsibilities and the university work. For my research I chose a topic related to my work and this made it easy for me to have invaluable input, expertise and support from my supervisors and colleagues."

2014 MPH graduate, Nomfuneko Sithole, South Africa

KRUGER, James Andrew	Community perspectives on comprehensive primary health care and creche services for an agricultural rural migrant community in De Doorns in the Western Cape
LIYALA, Pamela	Perceptions of women regarding the place of child delivery and how the perceptions influence the choice of delivery place among women utilizing antenatal care services at Ngong Sub-District Hospital, Kajiado County, Kenya
LUMBWE, Njekwa Yuyi	A case study of the Flying Angels HIV Support Group for people living with HIV and AIDS in Ng'ombe compound, Lusaka, Zambia
MACHEVO, Sonia Geraldo	Lessons learned during implementation of the new Community Health Worker Programme: Experiences from one rural district in southern Mozambique
MAVHUNGA, Farai	Factors associated with the delayed culture conversion among patients being treated for multi-drug resistant tuberculosis in Namibia
MOGAPI, Thato Eunice	Exploration of experiences and factors that influence enrolment to the community-based tuberculosis programme in a rural area in Kweneng East district, Botswana
MUGWANEZA, Placidie	Assessment of in-service training needs of health workers in the prevention of mother to child transmission programme in a district in Rwanda
NCANA, Lundi	Assessment of the management of virologic failure in patients on first-line regimen of antiretroviral treatment in Nkonkobe sub-district
NDAYI, Kululwa	Vendors' perceptions of food products they sell and their willingness to sell foods that may prevent childhood obesity in primary schools of Khayelitsha township
NSUBUGA, Fredrich Mangasi	Case study of reporting needle stick injuries among health care workers in Luwero district- Uganda
OBEMBE, Bolajoko Oladunni	Evaluation of the first year of managing the procurement and supply of second-line anti-tuberculosis drugs in Nigeria
OCHEKE, Isaac Ejembi	Patterns of malnutrition in children with acute illnesses in a tertiary hospital in Nigeria
PFAFF, Colin	Assessment of hypertension and diabetes programme support and service delivery in two rural districts in Malawi
SEBASTIAN, Beverley Ann	Exploring psychological well-being among orphans from child headed households in the context of the socially, economically and politically unstable environment of Zimbabwe
SIMUYEMBA, Moses Chikoti	Caring for the carer: A study of burnout amongst doctors at the university teaching hospital, Lusaka, Zambia
SITHOLE, Nomfuneko	Cancer profile in an urban hospital of the Eastern Cape Province
SONDASHI, Ilitongo Saasa	Exploration of the factors related to ensuring the maintenance of quality of medicines in government health centres in Lusaka, Zambia
TARUMBWA, Casper Farai Cyril	Factors involved in the implementation of nosocomial infection prevention and control practices at a district hospital in Namibia
ZAMASIYA, Texas Douglas	Factors affecting the utilisation of integrated Community Case Management (iCCM) of pneumonia, diarrhoea and malaria among children under five years in hard to reach areas of Malawi: A family and community perspective in Dedza District



In his MPH thesis, Texas Zamasiya looked at 'Factors affecting the utilisation of integrated Community Case Management (iCCM) of pneumonia, diarrhoea and malaria among children under five years in hard to reach areas of Malawi: A family and community perspective in Dedza District.'

"At the time of my enrollment at the UWC until to date I have been working on Community Health Programmes with a special focus on iCCM with UNICEF in Malawi. The findings from this study, and indeed the knowledge gained in the entire MPH programme, will help me to engage with government, NGOs, civil society and other UN agencies working on community health interventions. This degree has broadened my vision in public health and catalysed me to become more innovative in health programming if better health outcomes are to be attained, particularly in resource constrained countries.

2014 MPH graduate, Texas Zamasiya, Malawi

Building the pipeline of future researchers

The number of PhD students at SOPH has increased substantially over the past years with a total of 44 and 42 doctoral students being registered in 2013 and 2014 respectively. The nature of the PhD programme is such that approximately one third of the doctoral students are Cape Town-based; another third live elsewhere in South Africa; and another third live outside South Africa. Many doctoral students are self-funded, and combine doctoral studies with a full-time job. Indeed, most PhD students at the SOPH are selected on the basis of a proposal that builds on their professional experience as field actors involved in health care provision and health care organisation.

With the growth of the programme, which clearly responds to a need and a demand both from within South Africa and the region, we have had to revisit our own capacity and systems for supervision. The newly established PhD training and support weeks described below have been the beginning of this process.

Strengthening the doctoral programme

In 2013 the first PhD training and support workshop was conducted over three weeks (16 September to 4 October). It was attended by 25 doctoral students, more than half of whom received financial support from the South African Research Chair Initiative (SARChI) PhD fund to travel to Cape Town from elsewhere in the country and Africa. The workshop provided opportunities for students to present, and get formative feedback on, their proposals and completed research phases, as well as foster peer-to-peer learning and mutual support. Several research methods sessions were conducted based on needs identified by the students.

This workshop created a conducive environment for PhD students to create a distance from their field work and to reflect on it, and to discuss their work with their supervisors, with fellow doctoral students and with post-doctoral fellows in the School. This was felt to unblock a real bottleneck in the progress of many students, and successfully created an atmosphere of exchange and cross-fertilisation.

The timing of the workshop also meant that students had the opportunity to attend the 2013 Public Health Association of South Africa (PHASA) conference in Cape Town.

SIPHI fellowship programme

Following the success of this workshop, the Social Innovation in Public Health Impulse (SIPHI) fellowship programme was established under the leadership of Prof Wim van Damme (the SARChI chair in the SOPH), with funding from the Belgian government. The aim was to strengthen the doctoral programme in public health at UWC's SOPH as well

as at his home university, the Institute of Tropical Medicine (ITM-Antwerp), towards an international doctoral programme comprising the granting of short fellowships to promising young public researchers.

Two PhD workshops were held under the SIPHI programme in 2014: the first was part of the SOPH Winter School (30 June – 11 July), and the second was prior to the Third Global Symposium on Health Systems Research, held in Cape Town in early October. The grants offered short-term fellowships for those students in full-time employment to take a short 'sabbatical' from work, thus providing time and focus for data analysis and writing up.

As these two workshops prioritised the writing up of results, they were specifically for PhD students who had made significant progress in their research. They focused on specific skills training; in Atlas.ti and SPSS for qualitative and quantitative data analysis, writing for publications, as well as progress presentations to elicit constructive feedback on current or work that was nearly completed. The first workshop was attended by 12 students (11 from SOPH and one from ITM); and 7 (two from SOPH and five from ITM) at the second workshop.

We are hoping that this and similar opportunities will become regular and growing features in the SOPH doctoral programme – further facilitated by the increasing number of staff members in the School who hold, or will soon graduate with, PhD degrees.

Budding post-doctoral programme

With the increasing number of doctoral graduates we have also begun to develop the next level in the academic career trajectory by establishing and seeking funding for post-doctoral fellowships.

The Belgian VLIR project, attached to the School's Centre for Research in HIV and AIDS, was the first to offer this opportunity, with four post-doctoral fellows being resident in the School between 2010 and 2013. The SARChI programme has also offered two fellowships – while the CHESAI project has four fellowships held jointly with the University of Cape Town. Details of our 2013/14 fellows can be found in the respective project articles descriptions in this report.



Graduated with a PhD in Public Health

Our intake of doctoral students has been increasing steadily in the past few years. At present 42 students are enrolled for doctoral studies; some are our own staff, some are attached to research projects which carry PhD scholarships, and some are self-funded. While only a few people have graduated from the PhD programme to date, we expect an acceleration of graduations in the coming years. In 2013 and 2014 we celebrated the graduations of seven students.



HAZEL BRADLEY

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

Supervisor: Prof U Lehmann

Co-Supervisor: Prof N Butler

Citation:

Hazel Bradley conducted a participatory action research study on the roles and competencies of pharmacists in Cape Town's primary health care facilities. As South Africa's public health system has been reforming over the past 20 years, different health professions have had to rethink and redefine their roles in, and contributions to, rendering health care to the vast majority of the population.

For over four years, Bradley worked with pharmacists and managers employed to ensure good pharmaceutical services in clinics and community health centres to better understand and improve their contribution to quality health service delivery. Her study approach and results are an exemplar of UWC's mission as an engaged University that creates public value through its research, and its importance as a WHO Collaborating Centre for Research in Human Resources for Health.

One of the external examiners commented that Hazel's thesis makes distinctive and important contributions to both the fields of health policy and systems research and of pharmacy practice.



ABIGAIL BASSON

The association between Crohn's disease activity, serum 25(OH)-vitamin D status, the disease-associated environmental risk factors and the variability of Crohn's disease phenotype in the Western Cape population, South Africa

Supervisor: Assoc Prof E C Swart

Co-supervisor: Dr G Watermeyer

Citation:

Crohn's disease is a chronic, relapsing remitting inflammatory disorder of the gastrointestinal tract which can be very painful and debilitating. The incidence rates within developing nations have been rising at an astounding rate. While it appears that inter-racial differences in Crohn's disease exist, it is unclear whether this finding may be attributed to the genetic burden of individual ethnic groups or to other

contributing factors, such as health care utilisation, or smoking prevalence rates. Vitamin D appears to modulate active inflammation, implying that treating patients to maintain high vitamin D levels may prove to be of clinical benefit.

Examiners unanimously agreed that the dissertation was crafted with immense attention to detail and resulted in sophisticated work at the PhD level. The research yielded four "fantastic" publications (to quote the international examiner) in peer-reviewed international journals.



MARY KASULE

A model for obtaining informed consent for HIV clinical trials research with paediatric patients

Supervisor: Prof T Puoane

Co-supervisor: Dr F Barchi

Citation:

All research involving human subjects should be conducted in accordance with the general ethical principles of autonomy or respect for persons, beneficence and justice. While competent adults can exercise their autonomy and can choose to take on risk if they want to – and are therefore able to protect their own interests – while in paediatric research the 'best interests of the child' takes precedence over autonomy. In other words giving informed consent for the child, is not 'who decides' but 'what is the best decision for the child'.

Due to a lack of consensus on the gold standard to guide researchers and assess the quality of parental informed consent in Botswana, the candidate examined the practical and ethical challenges posed in obtaining parental informed consent for child enrolment in paediatric HIV clinical trials. Given the low parental literacy levels, long and complex consent forms were challenging – and illnesses of children and opportunities to access health care motivated parents to give consent for enrolling their children in the trial.

The findings were used to develop a model that could be used to inform the development of the guidelines and the review of regulations regarding research involving children in Botswana.

**WONDWOSSEN LEREBO**

A hierarchical modeling approach to identify factors associated with the uptake of HIV counseling and testing and prevention of mother to child HIV transmission programme among post-partum women in Ethiopia

Supervisor: Prof D Jackson

Co-supervisors: Prof S Callens, Prof C Zarowsky, Prof M Temmerman

Citation:

Wondwossen Lerebo conducted his doctoral research in his home country of Ethiopia where he examined critical issues in maternal health – which face not only Ethiopia but all of Africa. His research focused on factors contributing to women accessing HIV testing, antenatal care and prevention of transmission of HIV to their babies. Using innovative statistical models, he elegantly combined field-based original research with mathematical modeling to provide a more comprehensive examination which can assist programme managers in Ethiopia to improve antenatal health care.

One external examiner commented: “The main strength of the thesis is that it is a multifaceted and sophisticated approach including a comprehensive literature review, appreciation of the primary problem, original field research (which is always challenging in a stand-alone PhD setting) and thorough and high level statistical analysis of the data.” The international examiner commented: “the study will provide an important advance in our understanding of how best to analyse this type of data.”

**ESTELLE LAWRENCE**

School-based HIV counselling and testing: Providing a youth friendly service

Supervisors: Prof P Struthers and Prof G van Hove

Citation:

This study was conducted in six secondary schools in Cape Town where a mobile HIV counselling and testing service was provided by an NGO. The learners want HIV counselling and testing to be provided in schools on condition that their fears and expressed needs are taken into account, including their concerns regarding privacy and confidentiality. They also want information regarding the benefits and procedure of HIV counselling and testing before testing takes place, as well as assurances of follow-up support for those who test positive.

The mobile service did not meet all the needs of the learners nor did it have all the characteristics of a youth friendly health service. Nevertheless, there was a high uptake of HIV counselling and testing at the schools. Of concern were the low risk perception of learners with regards to HIV infection and the fact that learners who tested HIV positive were not being linked with treatment and care. Recommendations are made for providing youth-friendly school-based HIV counselling and testing.

**JOHN MANDISARISA**

Predictive factors of adherence to antiretroviral therapy in a rural and an urban setting in Zimbabwe

Supervisor: Assoc Prof B van Wyk

Citation:

John Mandisarisa analysed adherence behaviour of treatment-experienced patients on antiretroviral treatment (ART) registered at two public health services in Zimbabwe (one rural and one urban). This is the first study of its kind to provide longitudinal data on adherence behaviour and clinical outcomes and predictors associated with adherence in the public health sector of Zimbabwe.

John used both qualitative methodologies and advanced statistical techniques to determine the factors that influence adherence in this cohort.

This study shows that measuring adherence with self-reported missed doses and validating these with pill counts and CD4 counts is both feasible and cost-effective in resource-limited settings. Good adherence to ART was impacted by (a) the interaction between complicated ART regimens and the cultural context; (b) barriers generated by the patient and their environment; and (c) barriers generated by the health care system. Results from this research should inform intervention development to improve long-term adherence to ART in Zimbabwe.

**SELAMAWIT WOLDESENBET**

Coverage, quality and uptake of PMTCT services in South Africa: Results of a national cross-sectional PMTCT survey (SAPMTCTE, 2010)

Supervisor: Prof D Jackson

Citation:

The South African national Prevention of Mother-to-Child Transmission of HIV Evaluation (SAPMTCTE) was the first national population-based evaluation of prevention of mother-to-child transmission of HIV (PMTCT) services in the world.

Selamawit investigated three major aspects of this research for her doctoral thesis, contributing new knowledge on how PMTCT health services contribute to reduction of HIV transmission to newborn infants. This thesis identified critical bottlenecks which prevent mothers and babies from receiving high quality care and showed that when care is received at above the international minimum standard of services, HIV transmission is reduced. This link was theorised but not previously proven. In addition, the research made suggestions for improving linkage to care for newborns to assure appropriate HIV testing. Her research has already contributed to South African national policy on PMTCT.

Short Courses and Continuing Education

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

The short course format used in both schools provides:

- 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 registered students, who are encouraged to take advantage of this face-to-face engagement. Winter School is also open to members of the public who would like to undertake stand-alone short courses as part of their professional development, providing them with opportunities to gain additional skills in current public health issues and practice.

Courses are mostly of one week's duration, causing a minimum of disruption to the services in which the participants work. Those which are run regularly are accredited with the Health Professions Council of South Africa (HPCSA) for continuing professional development purposes. Attendance numbers and topics of courses vary.

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

Winter School

Just over a quarter of Winter School registrations in 2013 and 2014 (162 of 574) were from people in management and co-ordinating positions while 15% were in support posts (such as monitoring and evaluation officers, human resources practitioners, etc). A total of 110 (19%) were health workers, while

14 worked as community workers of some kind. Just under 10% were environmental or occupational safety officers and 26 participants worked in laboratories and pharmacies. A higher proportion than in previous years was involved in research or academic work of some kind – 9,5% or 55 of 574 - while 29 were ward councillors.

Attendance: 2013 and 2014

2013	308
2014	266
Total	574

Courses offered: 2013 - 2014

Clinical trials and indigenous herbal medicine
Community participation in health
Computerised district health information systems:
Advanced course
Computerised district health information systems:
Intermediate course
Current thinking & practice in health promotion
DHIS 2 – web based: Foundation course
Epidemiology and control of HIV and tuberculosis
Globalisation and health: Key aspects for policy makers, managers & practitioners
Health management
Health promoting schools: Putting vision into practice
Health promoting settings: A partnership approach to health promotion
Information systems for human resources for health
Introduction to complex health systems
Medicines supply management
Monitoring and evaluation of primary health care programmes: Programme I
Qualitative research methods
Quantitative research methods
Rational medicines use
Urbanisation and health in developing countries
Using geographical information systems for analysing and mapping health care issues
Using health information for effective management: Intermediate course



"The Winter School is a very useful event from a teaching point of view. As well as the content of the courses, there is always very good interaction between the course participants, bringing together people from different backgrounds, be it professional, geographical, SOPH students and people doing the courses as in-service training. They learn so much from each other. The evaluations show that this is a very important component of the courses. Participants often take each other's details to maintain contact after the courses have ended. For the SOPH students it enables them to get to know each other and other participants, often from different countries and contexts.

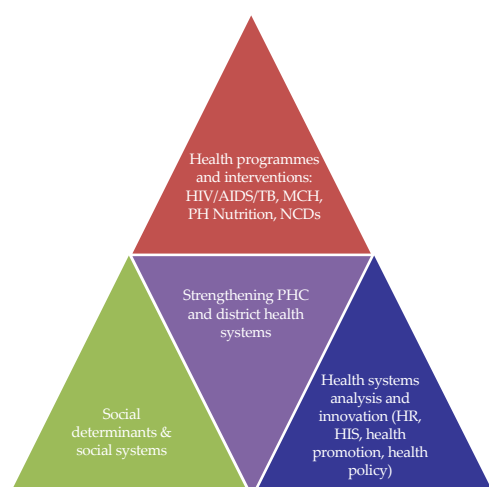
And of course, not to overlook that we, as course facilitators, learn so much from the participants, in particular about the realities on the ground that they face on a regular basis. So we are delighted when we see them return to take different other courses in subsequent years.

Dr Ruth Stern, Winter School lecturer and SOPH Senior Researcher

RESEARCH AND PROJECT WORK:

Supporting health services and systems through research and development

The School of Public Health (SOPH)'s research agenda continues to encompass the areas of health programmes (including non-communicable diseases, HIV/AIDS and TB, maternal-child health), health systems (such as service delivery responses to chronic life-long conditions, access to medicines, governance and leadership), and the social determinants of health (food security and nutrition). We have also researched our teaching and learning role.



While these are represented as discrete areas, in reality there are many overlaps in themes and staff across projects. For example, an interest in community-based responses and the role of community health workers is a focus of many projects in the SOPH; access to medicines is another cross-cutting theme. Some, such as the collaborative South Africa-Rwanda project on maternal health reported in the pages that follow, deliberately seek to examine the interfaces between a health programme and health systems. All have a strong orientation towards

strengthening community-based, primary health care and district health system responses.

Several projects are breaking new ground methodologically. Amongst these is the work on health systems resilience, employing systems dynamic modeling approaches, and the 'positive deviance' approach to systems analysis in the SARCHI (South African Research Chair Initiative) programme.

The last two years have seen the consolidation of a regional hub in health systems research and development. Beginning as a series of joint projects between the universities of the Western Cape and Cape Town, activities have extended to a regional network (including the City and Provincial Government, Health Systems Trust, the Medical Research Council and Stellenbosch University), enabled by a deliberate field-building component. It culminated in the joint hosting, with five other institutions, of the Third Global Symposium on Health Systems Research in September/October 2014. We highlight several of the projects which have contributed to the hub.

A feature of many of our projects is the integration of research with intervention, teaching, networking and field building. An example is the intensified focus on Pharmaceutical Public Health.

Our projects span the local to the global, involving close engagement, and often co-production, with health system actors. Several extend beyond the region to include international collaborations with researchers on other continents. In this regard, the SOPH is an active player in the Centre of Excellence in Food Security, a multi-centre collaborative initiative also profiled here.



SARChI: A collaborative programme with Antwerp ITM

The South African Research Chair Initiative (SARChI) Chair in Complexity, Health Systems and Social Change – funded by the National Research Foundation (NRF) – has made possible a structured collaboration between the School of Public Health (SOPH) and a major node of innovative thinking in health systems, the Antwerp Institute of Tropical Medicine (ITM). Appointed as a 50% Chair on SARChI, Wim van Damme has brought with him a team of Antwerp researchers – amongst others, Bruno Marchal, Sara van Belle, Carlos Kiyani and Remco van Pas. The collaboration was formalised in the signing of a memorandum of understanding between Antwerp ITM and the University of the Western Cape (UWC), and since 2014 we have benefitted from Belgian government funds channeled through ITM to support collaborative activities and exchanges.

SARChI at SOPH has two overall goals – research and capacity building – and in the last two years has made considerable strides in both.

Research

The research of SARChI has focused on chronic life-long conditions, introducing the methodological approach of ‘positive deviance’ within systems – investigating the local contexts of difference in performance in health systems in the management of chronic conditions. A pilot project testing the approach in the Western Cape was completed, in partnership with the Institute of Development Studies, Sussex, while PhD student Bvudzai Magadzire has evaluated a novel chronic medication distribution system in this province.

In 2014, a consortium led by the Karolinska Institute, Sweden – with Wim van Damme and senior SOPH member Thandi Puoane as joint principal investigators – was awarded a European Commission grant to investigate retention in care for Type II diabetes in South African and Uganda.

Post-doctoral fellow Charl Swart has analysed the leverage points for sustained access to antiretroviral treatment through South Africa’s public health system (in partnership with Stellenbosch University).



Capacity building

SARChI’s capacity building role has included a focus on strengthening the SOPH’s PhD programme (see page 13). This takes the form of providing a series of small grants (raised through Flemish Government sources) for part-time and distance-based doctoral students to receive support in the form of face-to-face supervision, travel and time away from work to write up their dissertations, and to attend short courses.

However, undoubtedly the most high profile activity of the partnership between ITM and the SOPH over the last two years has been the hosting of two Emerging Voices for Global Health (EV4GH) programmes at UWC, supported jointly by SARChI and Belgian Government funding.



Dr Charl Swart, BA (Hons), MA, PhD (Stellenbosch)

Charl Swart joined SOPH in November 2013 as a SARChI post-doctoral research fellow in Health Policy and Systems Research. He received his PhD in Political Science from the University of Stellenbosch in March 2014 and is currently involved in a Future Studies project on HIV and AIDS in South Africa, as well as research in health policy and systems, the food system, global comparative health policy and health governance.

Emerging Voices for Global Health



Originally an initiative of Antwerp ITM, Emerging Voices for Global Health (EV4GH) is a blended training programme for young researchers on health research and scientific communication, training them to participate actively in international conferences and to raise their voices in scientific debate. Through a combination of distance learning and intensive face-to-face coaching, participants learned about the skills of oral presentation in a scientific conference, communication through social media and publication in a scientific journal.

Both the 2013 and 2014 EV4GH programmes were hosted by ITM in conjunction with the SOPH - with the 2013 programme being convened with the School's Centre for Research in HIV and AIDS (CRHA) and linked with ICASA, an international conference on HIV and STIs in Africa held in Cape Town that year. The 2014 programme was co-hosted by five institutions: the Institute of Public Health Bengaluru (India), Peking University Health Science Centre (China), the University of Cape Town, ITM and the SOPH. Of the four EV4GH programmes held to date, three have been linked to the bi-annual Global Symposium on Health Systems Research, the most recent of which was held in Cape Town in 2014.

Together the 2013 and 2014 EV4GH programmes brought to the SOPH about a hundred young researchers from all corners of the globe, into an intensive space of learning and networking. Post-doctoral SARCHI fellow, Liezille Jacobs who, with the



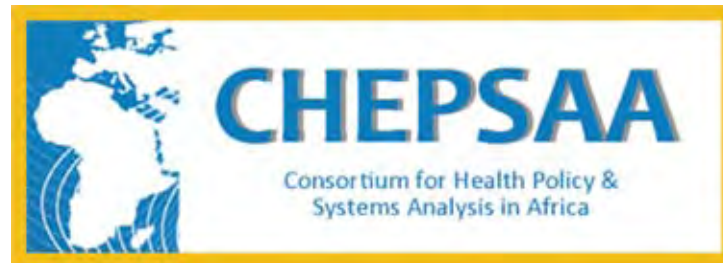
able support of SOPH's Tamlin Petersen, spent much of the year preparing for the 2014 EV4GH - commented on the participants as follows:

"It is a requirement that EVs are under 40. So, as you can just imagine, this year's selection of 50 EV4GHs was a vibrant, provocative group of young scholars from all continents, mostly from low- and middle-income countries. Most EVs wrote back to me since they departed South Africa saying that they have gained so much more than what they signed up for. They made growing friendships, learnt how to boost their academic outcomes and how to influence health policy in their home countries."



Dr Liezille Jacobs, PhD (Stellenbosch)

Liezille Jacobs was a SARCHI post-doctoral research fellow in the School in 2014, following her PhD in Psychology from Stellenbosch University. Her research interests focus on public mental health interventions and she is especially interested in the intersections of gender, race and sexuality. Liezille did a PhD internship in health promotion at the Medical Research Council and a post-doctoral research fellowship at the Human Sciences Research Council in Population Health and Health Systems. She has mainly published on women's secretive drinking and alcohol advertising in local and international journals.



The Consortium for Health Policy and Systems Analysis in Africa (CHEPSAA) is a network of seven African and four European universities working to strengthen the field of Health Policy and Systems Research and Analysis (HPSR+A) in Africa. Funded by the European Union from 2011 to early 2015, CHEPSAA focuses on the development of teaching materials, networking and developing the next generations of researchers, teachers and practitioners.

In the past two years CHEPSAA achieved the following, among other things:

- Designed and published new health policy and systems training curricula for use in Masters programmes or short courses. (The curricula will be used by all member organisations in their own courses and are freely available online as Open Educational Resources on the CHEPSAA website: <http://www.hpsa-africa.org/>.)
- Begun a collaborative endeavour to develop a professionally-oriented doctorate in public health in Africa.
- Created a social media presence to share events and resources for Health Policy and Systems Research (HPSR) in Africa: CHEPSAA@hpsa_africa.
- Implemented an Emerging Leaders programme aimed at supporting and strengthening the capacity of young researchers, educators or practitioners.

One of our colleagues commented: *“My participation in Emerging Leaders and the three short courses I attended were instrumental in advancing my knowledge and appreciation about HPSR to a great extent. The programme has given me useful practical insights on personal growth and leadership. [I have] learned a great deal about research approaches and practices, and gained insight and skills into curriculum design and facilitation. I have incorporated my knowledge of HPSR in my research work. I’m sure I will draw more on what I learned about curriculum and facilitation in the future”.*



Building collaborative health systems practice through the CHESAI Project

The Collaboration for Health Systems Analysis and Innovation (CHESAI) project is a four year collaboration (2012 – 2016) between the schools of Public Health at the universities of Cape Town (UCT) and the Western Cape (UWC), funded by the Canadian International Development Research Centre (IDRC).

This collaboration is based on the understanding that Health Policy and Systems Research (HPSR) is an emerging field within the broader terrain of health research, with conceptual and methodological foundations that require substantial development. The overall aim for CHESAI is, therefore, to contribute to expanding and strengthening the health policy and systems knowledge base in Africa through building an intellectual hub for HPSR in Cape Town, creating spaces for engagements between researchers and practitioners, supporting African HPSR capacity development and sharing/disseminating HPSR conceptual and methodological innovations.

CHESAI builds collaboration and HPSR capacity through

- post-doctoral awards for four emerging researchers;
- short-term professional sabbaticals for African 'practitioner scholars';
- short-term residencies for HPSR experts from low- and middle-income countries outside of South Africa; and
- space creation for reflection and information exchange.

Post-doctoral awards

The post-doctoral awards for four emerging researchers, are given partly to allow them time to publish the results of their doctoral work, partly to further develop their research interests, and partly to contribute to the research and field-building activities of the CHESAI collective.

After a lengthy search we appointed two post-doctoral fellows in 2014. Gina Teddy who is based at UCT was appointed in April, followed in September by Boroto Hwabamungu who is based at UWC (see their biographies below). The last two fellowships were awarded late in 2014 and will be taken up from January 2015 by Dintle Molosiwa and Martina Lembani.

Short-term professional sabbaticals

One of the aims of the CHESAI group is to enable critical engagements between researchers and practitioners. Practitioners are being given an opportunity to spend time at UCT and UWC, during which they may contribute to, or participate in, CHESAI activities. This gives them time to reflect and engage with peers and researchers, or to share their experiences and understanding of health systems functioning through writing and publication within the area of HPSR.

In 2013 two practitioners, Thoko Maboe and Wezile Tshali from the provincial departments of health in Gauteng and the Eastern Cape respectively, joined the CHESAI team for several weeks, engaging with colleagues, reading and deepening understanding of the field. They returned in October 2014 to participate in the Third Global Symposium on Health Systems Research.

Short-term residencies

HPSR experts from beyond South Africa who undertake short-term residencies at the SOPH bring relevant international expertise to Cape Town and support innovative thinking. During their stays, they provide mentoring for post-doctoral fellows, practitioner scholars and other, local postgraduate students; and stimulate the critical reflection and thinking of the more senior CHESAI team members.

In 2013 we invited our first expert resident, Prof Irene Agyepong from the School of Public Health in Ghana. She attended the CHESAI October retreat after which she stayed on for a week for further collaboration which included engaging with CHESAI colleagues on a variety of projects and presenting her latest work to CHESAI colleagues. Prof Agyepong also brought two of her PhD students with her, so the collaborative relationships were strengthened further in that way.



Dr Gina Teddy is a post-doctoral fellow with the CHESAI project. Based primarily at UCT, Gina is involved in postgraduate teaching, research and administrative support for the CHESAI and other projects. Her primary research areas include health and health policy, governance and leadership; health leadership development, workplace-based learning, health systems function and research, innovation and complexity in health; and actors and networks.

Gina's PhD in Social Policy and Social Work from the University of York, UK explored the experiences of actors and stakeholders in a multi-level and multi-dimensional implementation process in a thesis entitled 'From Policy to Process: An Insider Perspective of Implementing the National Health Insurance Scheme at the Districts in Ghana'.

Following her fellowship, Gina will return to the Ghana Institute of Management and Public Administration, where she leads a team of multi-disciplinary experts at the Centre for Health Policy and Systems Research.

Space for reflection and exchange

CHESAI also includes activities such as seminars and journal clubs which provide space for reflection and the exchange of information. Of particular importance has been the Western Cape Province HPSR Journal Club which aims to create a space for debate and reflection, for collaboration and conversation, between local health systems practitioners and researchers. At the Club shared areas of interest are discussed in the context of current research papers. It is attended by colleagues from the five HPSR research institutions in Cape Town, as well as senior- and middle-level managers and policy makers from the provincial and municipal departments of health.

In 2013 and 2014 the journal club met nine times and the papers presented by both academics and practitioners covered topics such as systems change, maternal health, leadership, organisational culture, practice-research engagement, policy implementation, community accountability and quality of care. With a mailing list of close to a hundred people, the journal club is regularly attended by between 25 and 35 participants. It has been identified as a space of collaborative thinking, which has created important spin-offs and ideas for policy development and implementation.

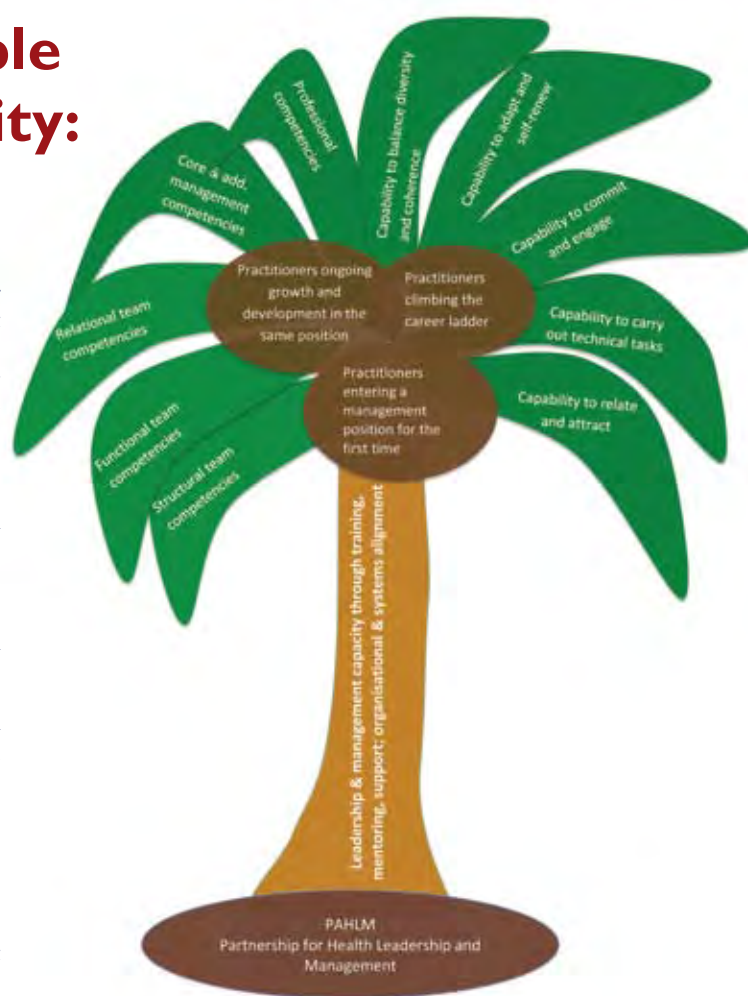
Developing sustainable approaches to capacity: The PAHLM project

Another new initiative in this period is PAHLM – Partnership in Health Leadership and Management – a joint project of the universities of Cape Town, the Western Cape and Stellenbosch, commissioned by the Western Cape Department of Health. It is being implemented in 2014 and 2015.

The objectives of this project are to identify leadership and management competencies across levels of the health system; identify gaps in these competencies; and propose systemic approaches to development of leadership and management capacity. The project is currently in the scoping, assessment and design phase, with the intention of implementation phases in the future.

One of the contributions of PAHLM thus far has been to propose a framework that links individual, team and system leadership and management competencies.

A key challenge is the plethora of donor-funded initiatives targeting health service managers. This has highlighted the need to avoid reinventing the wheel and to develop ways of channeling lessons into sustainable systems of leadership and management development.



Dr Boroto Hwabamungu joined the SoPH as a post-doctoral fellow with the CHESAI project in September 2014. He specialises in Health Information Systems – having obtained a PhD in Information Systems from UCT, a Masters in Informatics from the University of Pretoria, and a BCom Honours in Information Systems from UWC. Boroto's research interests are health information systems, strategic information systems planning, mHealth and information and communication technology for development. During his fellowship he will undertake research in health policy and systems, with a focus on health systems strengthening and capacity development, stakeholders' relations and the implementation of eHealth strategies in the context of developing countries.

Pharmaceutical Public Health - an emerging focus

Pharmaceutical Public Health (PPH) is emerging as a new focus area at the School of Public Health (SOPH). This is in response to the increased prominence of access to medicines within the South African health system, prompted primarily by a changing disease burden in the country which increasingly comprises conditions that require life-long treatment with medication. These include the huge HIV/AIDS burden, with many people now on life-long anti-retrovirals (ARVs), and the growing proportions of the population who have chronic non-communicable diseases, particularly cardio-vascular and related diseases such as hypertension and diabetes.

Foundational initiatives

Several key initiatives at the School over the past two years have provided the foundation for this new focus on Pharmaceutical Public Health. These were short courses, such as the Promoting Rational Medicines Use in the Community Courses, and research projects, such as the Accessing Medicines in Africa and South Asia (AMASA) Project, reported on in previous SOPH reports.

This new focus area is being advanced through growing collaborations with colleagues within the University of the Western Cape (UWC) and beyond. A significant development has been Richard Laing's appointment as extraordinary professor in the School in July 2014. A professor of International Health at Boston University School of Public Health, USA, he brings a wealth of experience to the emerging field of pharmaceutical public health and policy at SOPH. This includes his involvement with the Zimbabwean Essential Drugs Programme in the late 1980s and ten years at the World Health Organisation in the Essential Medicines Division. A highlight during Richard Laing's visit in July 2014 was his presentation of the Annual David Sander's Lecture: 'Access to medicines: The struggle continues' (see page 42) – and we look forward to his contributions to teaching and research at the SOPH.

New Winter School Courses in 2014

One of our first initiatives in growing this area has been two new short courses offered in the 2014 Winter School – Rational Medicines Use and Medicines Supply Management. These were developed and offered in collaboration with Richard Laing as well as colleagues from the School of Pharmacy at UWC, the Institute of Tropical Medicine Antwerp, and Management Sciences for Health/Systems for Improved Access to Pharmaceuticals and Services (a USAID-funded organisation which supports the South African government in strengthening pharmaceutical services in the country). It was also supported by the national and Western Cape departments of health.



The Rational Medicines Use course introduced participants to a range of tools to investigate and promote rational use of medicines in their settings. The Medicines Supply Management course covered the key principles of procurement, quality assurance, inventory management and storage control, as well as the use of pharmaceuticals and logistics management systems. In addition, the course provided participants with several key tools for the quantification and financial management of medicines.

Introducing PPH into the MPH

The team that developed the Winter School short courses are now developing three 15-credit on-line modules – Rational Medicines Use, Medicines Supply Management and Analysing Pharmaceutical Systems (profiled on page 6). These modules will facilitate the establishment of a new stream, Pharmaceutical Public Health, to be offered from 2015 in the Master of Public Health.

Medicines within the health system

Over the past few years, several research projects at SOPH have studied medicines within the health system, with the focus being mainly on medicines for chronic conditions. These include the work of SARCHI PhD scholar Bvudzai Magadzire, whose doctorate is on the Western Cape Chronic Dispensing Unit, as well as a project on access to medicines at primary and community levels in the Western Cape: 'Taking treatment of chronic life-long conditions to scale: Applying the positive deviance approach to health programme management' (see page 18).

A second research focus is pharmaceutical human resources which aligns well with SOPH's designation as a WHO Collaborating Centre for Research and Training in Human Resources for Health Development. This focus builds on Hazel Bradley's PhD research which explored district and sub-district pharmacists in Cape Town, looking particularly at their roles, competencies and experiences as they transitioned into these new positions. There are several opportunities to build on this research locally, both by linking with other projects in the School, such as the PAHLM Project, as well as internationally through Hazel's involvement in the Global Pharmacy Workforce Observatory hosted by the International Pharmacy Federation.



Mainstreaming a health systems approach to delivery of maternal health services: transdisciplinary research in Rwanda and South Africa

Too many women in low- and middle-income countries (LMICs) still die as a direct result of pregnancy and childbirth. We know from experiences in high-income countries that the vast majority of these deaths are preventable.

Most experts believe that strengthening various aspects of the health system is the solution – based on the six World Health Organisation (WHO) building blocks, which include the health workforce; health information systems; leadership and governance; and actual service delivery. It is still unclear, however, which building blocks are most important, which interventions within the building blocks are the best value for money, and how interventions in different building blocks influence one another. Another aspect that is critical for improving maternal health, but which is insufficiently emphasised in the building blocks, is enabling patients to demand good access to high quality services.

In response to these challenges, the School of Public Health (SOPH) – in collaboration with the universities of the Witwatersrand, Radboud (Netherlands) and Rwanda – is undertaking a research project to generate knowledge on how health systems strengthening can improve maternal health. Through four sub-projects, the key components currently prioritised to improve maternal health in Rwanda's and South Africa's health systems are being identified and tested – with the aim of particularly identifying which health system supply and demand initiatives have the largest impact.

The project includes undertaking realist and systematic literature reviews and primary research.

Reviewing the literature

The first sub-project comprises a systematic review – now completed – which documents the key components of health systems that countries currently prioritise in their efforts to improve maternal health outcomes. It includes all published studies and reviews on health system intervention for improving maternal health in LMICs and involved the screening, coding, mapping and data extraction of 35,078 articles on maternal health interventions in LMICs published between 2000 and 2012. Research outputs are currently being written from this first phase.

The next stage, which uses the database of coded articles for more focused systematic reviews, is still ongoing. This includes reviewing patterns in the authorship of maternal health intervention research in LMICs; patterns in maternal health intervention research in LMICs; and health systems interventions for improving maternal health in LMICs. In collaboration with the WHO, the research team is also undertaking reviews of maternity waiting homes, male involvement, birth companions, community transport schemes, and new roles of traditional birth attendants.

Rwanda and South Africa

An important aspect of the project is the collaboration and comparisons between Rwanda and South Africa as this enables useful insights into maternal health in both countries. The Ministry of Health in Rwanda and the Departments of Health in Gauteng and the Eastern Cape in South Africa are active partners in this programme.

The third and fourth sub-projects, then, aim to improve maternal health policy and practice in Rwanda and in two provinces in South Africa. Case studies are being used to investigate key health system elements required to improve maternal health, with a focus on provision of care during emergencies in pregnancy or childbirth. Through working closely with policy leaders and civil society in these three settings, the research team has been documenting challenges in emergency obstetric care services as well as best practices that could be scaled up to improve maternal services.

Practically, this means that teams of policy makers and researchers in Rwanda and South Africa will apply knowledge learnt in the project and attempt to markedly improve the way maternal services are organised. In so doing, the team also draws on strong policy linkages and has substantial potential to impact on systems improvement at the level of service delivery. In addition, shared or collective learning within and between partners may also influence policy changes for improving policy directions for maternal and child health in both countries.

This four-year project is being undertaken from 2012 to 2016 and is funded by the Netherlands Organization for Scientific Research / Science for Global Development (NWO/WOTRO). The SOPH team comprises Thubelihle Mathole, Debra Jackson, Christina Zarowsky and David Sanders.

Health Systems Resilience: A complex adaptive systems analysis

'Health Systems Resilience: A Systems Analysis' is a project which seeks to understand, in systems terms, what characterises health systems resilience in contexts of crisis. This involves understanding both what constitutes the greatest threats to the operation of health provision in times of crisis, and also what represents effective responses to address such threats. Resilience has emerged as a dominant concept underpinning development assistance and humanitarian support in contexts vulnerable, through conflict or natural disaster, to crisis. A systems dynamic approach offers an effective means of exploring the determinants of systems vulnerability and resilience as it lends itself to group model building through intensive, participatory consultation with stakeholders, as well as representation and refinement of models using graphical systems tools.

The project is implemented by the Mailman School of Public Health, Columbia University in collaboration with the School of Public Health (SOPH) at University of Western Cape. The work is funded by DFID through the ReBUILD programme, co-ordinated by

the Liverpool School of Tropical Medicine and Queen Margaret University, Edinburgh.

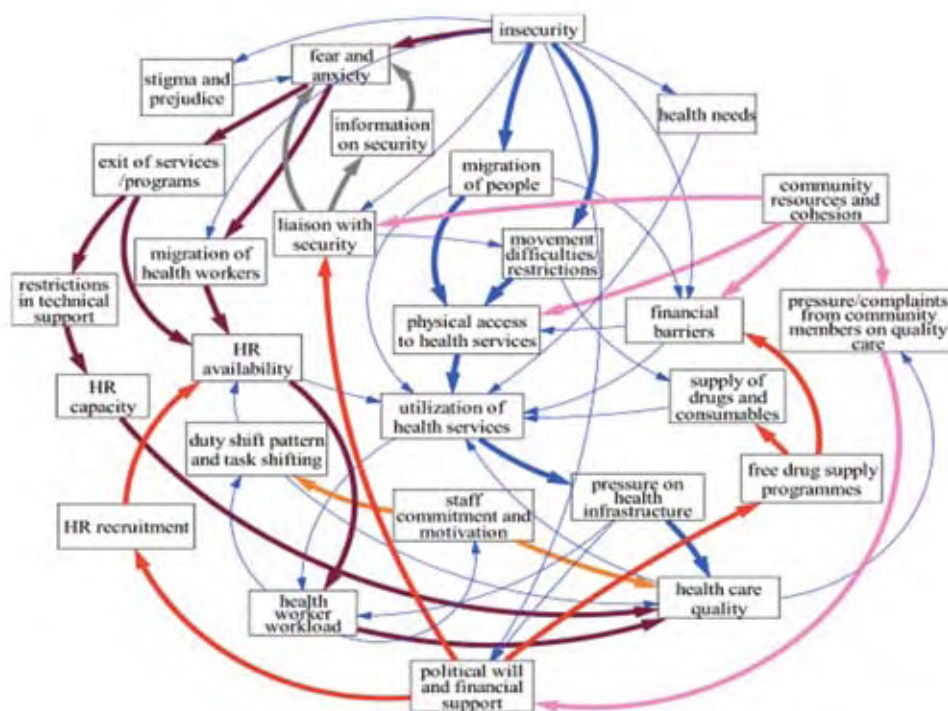
Case studies

A series of three case studies was conducted during the project. The first, an historical analysis, considered measures addressing the disruption of HIV services in Cote d'Ivoire, following the disputed presidential election of 2010. A second case study focused on chronic health systems challenges in one district in the Eastern Cape province in South Africa.

The final case study focused on circumstances in the health sector in Yobe State in Northern Nigeria which were related, and in response, to the Boko Haram insurgency beginning around 2011 (and which continues to the present day). In this context, it is clear that prevailing insecurity has been the major driver of threats to health service utilisation and quality. The figure on the next page is a refined systems model reflecting the team's analysis of quantitative and qualitative data, subsequent to the group model building session.



Systems model developed by stakeholders in Yobe and refined to show key pathways of threat and response



Source: http://rebuildconsortium.com/news/documents/HealthSystemsResilience_YobeCaseStudy_FinalizedReport.pdf

The blue and the purple pathways in the figure above indicate the two major routes by which insecurity impacted service utilisation and quality.

- Blue shows the influence on health service utilisation and quality, principally through restricting access to health services either directly through transport difficulties or indirectly as a result of population displacement.
- Purple shows the impact of insecurity through depletion of the human resources available to the health system, reflecting loss of personnel and loss of technical assistance to support personnel.

Without any actions in response to these threats, health service utilisation and quality would have been severely reduced. However, three major sources of response are identified in the systems analysis.

Political will on the part of State Government and other parties reinforced a number of pathways (marked in red in the figure above) ameliorating the systems impacts of insecurity. Community resources and cohesion were identified as another source of pathways of influence mitigating the impacts of the crisis (shown in pink). The community was drawn together over time to liaise with the security services, which reduced fear and anxiety and their negative impacts. Communities pooled resources (knowledge, transport and finance) to enable physical and financial access to health facilities for those in need.

The other key pathways promoting systems resilience in the context of the ongoing crisis arise from staff commitment and motivation (shown in orange). Although this is difficult to objectively quantify, interviews and discussion repeatedly noted the strong commitment of indigenous health workers and its protective influence.



Dr Martina Lembani joined the SOPH in January 2014 as a post-doctoral fellow with the 'REBUILD' project.

Martina received her PhD in International Development Studies in 2013 from Ruhr University of Bochum, Germany at the Institute of Development Research and Development Policy.

Having worked for over ten years with various organisations in the areas of community development, research, monitoring and evaluation, HIV/AIDS, and rural livelihoods, Martina has substantial experience in both quantitative and qualitative research, including participatory methods of data collection and analysis. She has specialised skills in research design, monitoring and evaluation (M&E) of development programmes at various levels, having worked for CARE International as an M&E specialist for just under five years.



The Centre of Excellence in Food Security

Food and nutritional security are imperative for human survival with dignity and are necessary for economic vitality, social justice, human health and environmental health.

South Africa is a stark exemplar of the double burden of malnutrition in Africa, with persisting significant levels of stunting and micro-nutrient deficiencies, as well as a rapidly accelerating epidemic of obesity and associated non-communicable diseases, especially diabetes and heart disease. This pattern of malnutrition is increasingly expressed in low- and middle-income countries (LMICs) and is closely associated with diets that are nutrient-poor, often lacking in variety and low in micronutrients and protein.

In South Africa this increasingly dominant diet is a reflection of a highly concentrated and globalised food system, with small-scale food production being increasingly marginalised. Moreover, South African food companies (manufacturers and retailers) are expanding into sub-Saharan Africa, influencing many countries' food environments and nutritional indicators. Hence, South Africa's experience and policies can inform improved understanding and policy making on the continent.

Policies

Since the advent of democracy there has been a vigorous process of policy making in the fields of agriculture, food, trade and nutrition and the implementation of several large-scale programmes.

Nutrition policies and programmes initially focussed on nutritional deficiency – and since 1994, the Integrated Nutrition Programme (INP) has provided a broad framework for the re-orientation of nutrition services in South Africa, as a result of which significant gains have been made. Additional specific policies in relation to micronutrient deficiencies, infant and young child feeding, school feeding and nutrition in HIV have also been developed, although implementation has often been sub-optimal.

In the past five years, policy making processes in nutrition have intensified, with the South African government recognising the urgency of the widespread double burden of malnutrition and its relationship to the food system. A recent important intervention has been the introduction of legislation to limit the salt content in food.

Centre of Excellence at UWC

It is timely, then, that a research initiative – the Centre of Excellence (CoE) in Food Security – has been established at the University in 2014, directed by Julian May of the Institute for Social Development. Co-hosted with the University of Pretoria (UP), this is the first time a CoE has been hosted at an historically disadvantaged institution – and follows the University of the Western Cape (UWC)'s successful bid in response to a call for applications by the Department of Science and Technology (DST) and the National Research Foundation (NRF).

The CoE is a virtual centre. At UWC the main units involved are the School of Public Health (SOPH) and PLAAS (Institute of Poverty, Land and Agrarian Studies). Other members of the CoE in South Africa are researchers at the universities of Cape Town, Fort Hare, Johannesburg, Limpopo, Nelson Mandela, North West, Stellenbosch and Venda, as well as the Tshwane University of Technology, the Agricultural Research Council, and the Water Research Commission. The international partners are the Australian National University, City University of New York, International Food Policy Research Institute, Institute of Development Studies at Sussex University, Michigan State University and Missouri University.

Scope and structure

The scope of work to be undertaken by the DST/NRF CoE in Food Security comprises research, capacity building and dissemination on how a sustainable food system can be achieved to realise food security for poor, vulnerable and marginal populations.



The CoE's work is structured under several research programmes, two of which are health and nutrition led by Rina Swart of UWC's Department of Nutrition and Dietetics and consumer choice and the food environment led by David Sanders of the SOPH. Related research programmes include the food value chain as well as food production and processing.

The CoE has already provided funding to the PURE (Prospective Rural and Urban Epidemiological) project in which the SOPH is involved, with the objective of investigating in greater detail the dietary choices and immediate food environment of the PURE cohorts in urban Langa in Cape Town, and rural Mount Frere in the Eastern Cape. The definition of the monthly household 'food basket' and factors shaping it will be core to gaining a better understanding of the determinants of food and nutrition security in typical urban and rural settings.

Additional research projects already funded under the CoE include an investigation by colleagues at the Medical Research Council into the impact of provision of the child support grant on the diversity of diets purchased by mothers for their small children.

The annual budget of the CoE will be between R7 and R10 million per year over the next ten years. The research programme allows for postgraduate scholarships at UWC and partner institutions, with significant participation by students from previously disadvantaged communities.

It is envisaged that the expertise, energy and funding mobilised under the umbrella of the CoE will assist the SOPH to advance its work in the area of nutrition as a key social determinant of South Africa's large burden of disease.



Thandi Puoane "left South Africa as a nurse and returned [from the USA] with a PhD in Public Health!" During her doctorate, Thandi was involved in a longitudinal study of children from age nine to eighteen. "That is where my interest in non-communicable diseases (NCDs) started. I wrote my thesis on obesity, culture and family functioning".

"On my return I was so surprised when I looked at people, even those within my family: everyone was bigger, and there were problems with weight! It became very evident that they don't know what to eat. People would say, 'I don't eat a lot' but they would drink sugar-loaded soft drinks and chocolates, not knowing that these are not nutritious and are dangerous."

Thandi joined the SOPH staff in 2002 – and "worked on a project on under-nutrition in children, improving the hospital management of malnourished children. I also worked on obesity. There is a relationship between under-nutrition and over-nutrition. Both are due to poor nutrition. Obesity has become a really huge problem today."

"When we began, there was not much support for this research. Now that it has become a global problem ...and as obesity is increasing, there is more uptake – although unfortunately, there are still large numbers of people who do not see this as a problem. Thandi was among those who spotted the threat of NCDs early. She worked with community health workers from the health NGO SACLA in Khayelitsha, Cape Town, to develop and implement prevention interventions in the township. They encouraged residents to eat healthily and cut back on their salt intake, be more physically active and quit smoking – resulting in measurable increases in knowledge and a drop in participants' body weights.

Thandi points to the social and contextual factors that shape individual behaviour like employment, poverty, education, accommodation, socio-economic status, the marketing of unhealthy products and the food environment. The interplay of these determinants is being assessed in a study among rural and urban men and women between the ages of 35 and 70. Thandi expects a few surprises - like the impact on people's food choices of the increase in fast food and supermarket chains in rural areas.

Any holistic remedy lies beyond educating individuals about the virtues of healthy eating and physical activity. Policy is needed and should cover everything from fast foods to food labeling and tuck shops at schools. "Non-communicable diseases can deepen poverty, reduce economic productivity, and strain an already under-resourced healthcare system.... You can't change people if you don't change their environment," says Puoane.

The Centre for Research in HIV and AIDS



As a virtual centre based at the School of Public Health (SOPH), the Centre for Research in HIV and AIDS (CRHA) catalyses critical inquiry and co-ordinates multi-disciplinary HIV-related research across the University and beyond. It seeks to support and add value to this research and its use in the field – from policy and systems development through to implementation by government, civil society and other partners.

Recognising both the deeply cross-disciplinary efforts needed to address HIV, and the impossibility of ‘doing it all’, the Centre has increasingly focused its work over the past few years. Our research grants have been concentrated in two major areas: integrating HIV and TB and its drivers within health systems strengthening; and the social determinants of HIV and TB risk, with a particular emphasis on migration. In partnership with the UWC HIV and AIDS Programme, we have also focussed on gender-based violence.

The annual UWC HIV-in-Context research symposia has remained our flagship, while sustained attention has been paid to student work and capacity strengthening, notably through writing retreats and fostering active engagement in policy and research dialogue through participation in national and international conferences. This approach has allowed relationships and skills to be developed and activities to be ‘joined up’ organically, without losing the responsiveness to context that is central to our work.

Founding projects

This biennium saw the successful completion and positive external evaluations of the CRHA’s two major founding grants. The first was ‘Transforming health and education policies and systems for improved HIV prevention and care’ which was part of the UWC-VLIR-UOS partnership, ‘Dynamics of Building a Better Society’ – while the second was the ‘Human capacity development to address HIV and AIDS in South Africa’ funded by the Centers for Disease Control and Prevention (CDC - see page 39 for the constituent

projects). As a result, 2014 was an important transition year for the Centre, with significant attention being paid to the final close-out of the CDC-funded project and the production of a book on the lessons learned through the VLIR-UOS-UWC Partnership (see Zarowsky C, Lees J, Temmerman M – page 61).

Ongoing work

In 2013 and 2014, we continued work which reflects the Centre’s focus on health systems and social determinants of health, particularly in the project ‘Mainstreaming a health systems approach to delivery of maternal health services: Transdisciplinary research in Rwanda and South Africa’ (page 25). We also secured new grants or extended funding for three projects: ‘Health Systems Resilience: A complex adaptive systems analysis’ (page 26), ‘Increasing access to TB case finding and treatment in Sisonke District, South Africa’ (page 38) and ‘Ethnographic exploration of migration health and social support in the Cape Metropole’ (page 41).

This research has led to a range of outcomes comprising publications (including student-first-authored peer-reviewed papers), new PhDs (two graduates in 2013), post-doctoral fellows, interns, and policy engagement as both Masters and Doctoral graduates take up, or return to, positions within local, provincial and national government.

In 2013 the Centre hosted two HIV-in-Context Symposia. The 5th symposium on ‘Urbanisation, Inequality and HIV’ was held in March while the 6th Symposium – ‘HIV in Africa beyond the MDGs: Emerging Voices, Emerging Agendas’ – was held in December as the culmination of a successful Emerging Voices for Global Health (EV4GH) programme convened with our partners from the Antwerp Institute of Tropical Medicine (see page 19). This included supporting these young EV4GH researchers to engage in ICASA 2013, the largest HIV conference in Africa, in which CRHA also organised some sessions.



The 7th symposium – planned for 2014, but ultimately held in March 2015 – built on the ‘Urbanisation, Inequality and HIV’ symposium, and reported on our research on cross-border migrants accessing health services.

The Centre also hosted a number of public seminars in 2013 and 2014:

- Irregular migration, human trafficking and HIV and AIDS in South Africa - *Joshua Aransiola, CRHA post-doctoral fellow.*
- Who cares: Heading home in the other shoes - *Patricia Repar, University of New Mexico* (co-hosted with UWC HIV and AIDS Programme).
- Making health care accountable: The role of civil society in monitoring stockouts - *Amir Shroufi and Andrew Mews, Médecins sans Frontières (MSF).*
- Monitoring socio-economic inequalities in health: Global lessons from Scotland - *John Frank, Scottish Collaboration for Public Health Research and Policy, Edinburgh.*

2014 also included a University-mandated review of the first five years of the CRHA, which included a major self-evaluation and an updated audit of HIV and AIDS work at UWC.

The Centre has consulted regularly with its Advisory Board and, in February 2014, with a group of South African and international colleagues. This re-affirmed UWC’s and the CRHA’s special niche as an intersection

of theoretical/critical analysis of the systems and social dimensions of HIV, with very practical, focused, context-sensitive research and intervention at the ‘coalface’. It also noted the value of the efforts made in support of developing African research capacity for such critical but applied work through our work with students.

Ways forward

The Centre’s work has been accomplished with very limited infrastructure and ‘core’ financial and human resource – the latter comprising a small, dedicated and energetic team and excellent support from SOPH. It has worked to realise its scope and vision by applying project funds not only to specific project objectives, but also to the cross-cutting vision and goal of building a Centre for Research in HIV and AIDS.

As the two founding projects ended, a transition in leadership was also underway, as the Centre’s founding director, Christina Zarowsky, returned to Canada to head the Department of Social and Preventive Medicine at the new School of Public Health of the University of Montreal. She retains an active involvement with the SOPH through her appointment as an extraordinary professor.

The Centre’s website is a repository of our activities and products and we invite you to visit it at www.hiv-aids.uwc.org.



Christina Zarowsky left the SOPH and Cape Town at the end of 2013 to take up a position as director of the School of Public Health at the University of Montreal in her native Canada.

Christina joined the SOPH from Ottawa in 2009 as professor and director of the then newly established Centre for Research in HIV and AIDS. This entailed taking on a complex portfolio of work, having to conceptualise the work of the new Centre and carrying full teaching and supervision duties in the School. She took on these tasks with characteristic energy and flair, hosting annual symposia and the HIV-in-Context seminar series, leading and pulling together the immensely diverse ‘Developing human capacity in the context of HIV/AIDS’ project. She was exceptionally successful in not only guiding students to MPH and PhD completions, but also supporting them to publish from their theses.

Christina’s words below sum up her legacy well.

We will miss her energy and willingness to ‘say it as it is’ – and are delighted that she will retain her link with us as an extraordinary professor in the School.

Directors’ reflections

“As the founding director of the CRHA, I naturally believe that the work to address “HIV in Context” – with UWC’s niche of being a particularly engaged university – is nowhere near completed. While I hope that the Centre will continue to develop and thrive with active support from UWC, I am confident that the approaches and innovations developed in these first years can continue to bear fruit in either a ‘focused’ or ‘mainstreamed’ approach – and that HIV can be effectively addressed both through an HIV-focused lens, and through a broader systems or determinants approach.

The CRHA, within SOPH and UWC, remains well positioned to catalyse and support dialogue and exchange across disciplines and sectors. It does so while developing and implementing research activities that increasingly engage HIV as a chronic disease but which confront both the social determinants of health and the lived experience of fundamental aspects of the human condition: sex, power, vulnerability, resilience.”

‘Science and practice of people-centred health systems’

The Third Global Symposium on Health Systems Research, Cape Town, 2014

The Third Global Symposium on Health Systems Research was held in Cape Town from 29 September to 3 October 2014. It was hosted by Health Systems Global and the South African Local Organising Consortium (SALOC) consisting of five organisations: the universities of Cape Town, Stellenbosch and the Western Cape (in the form of the School of Public Health), and the Medical Research Council and Health Systems Trust.

Almost two thousand participants attended from 125 countries, the majority of which are on the African continent.

People: a central focus and critical resource

Focusing on the theme of the science and practice of people-centred health systems, this five-day symposium aimed to provide researchers, practitioners, policy makers and activists with a platform to share their thinking, their experiences, and their research related to this theme. Welcoming participants to the Symposium, Lucy Gilson, co-chair of the SALOC, described the theme as follows:

“People-centred health systems make the goal of universal health coverage the heartbeat of their daily operations. They don’t see people just as recipients or beneficiaries of care. They recognise people as engaged citizens, who actively contribute to making and shaping the decisions that affect their lives – about their own health and about the health system where they live. And health systems also encompass a wide array of other people - from the lay worker in the community to a huge diversity of health workers and professionals, managers at every level, and those charged with overall stewardship. Health systems are just FULL of people!”

The Symposium theme recognises that it is the daily activities and routines of all these people, and their ways of engaging with others, that bring a health system alive. We have to understand how these practices shape the implementation of change within health systems, and how to support practices in line with the goal of universal health coverage.”

The Symposium sought to develop the field of health systems research: to discuss innovative approaches to research addressing this theme; to strengthen the rigour of this research; and to build the capacities of researchers, policy makers, implementers and civil society organisations to conduct and use health systems research to build responsive, accountable health systems orientated to respond to people’s emerging health needs.

The urgency of building such health systems – that respect and ensure the rights and dignity of all people who use health systems and those who provide health care – was highlighted during the opening of the Symposium by Dr Margaret Chan, Director-General of the World Health Organisation. She reflected on the health system challenges faced by several West African countries currently in the context of the growing Ebola epidemic:

“I believe the world and its leaders are finally ready to recognise the essential role played by health systems research. ... Better health is a nation-building strategy. ... You cannot build health systems during a crisis. Instead they collapse. ... As we all know, access alone is not a sufficient marker for adequate health care provision. Health systems must be people-centred. They must respond to the needs of people who receive services.”

Principles of inclusivity, diversity and active engagement

Participants had multiple opportunities to immerse themselves in the field of health policy and systems research as the Symposium comprised four plenary sessions, 170 concurrent sessions, 572 posters, a film programme and an exhibition space for 54 institutions and organisations to present their work – as well as two days of satellite sessions that preceded the Symposium. In addition a number of publications were launched during the Symposium - including a special edition of the journal *Health Policy and Planning* focusing on the Symposium theme.

Importantly, when planning the Symposium the organising committee made a concerted attempt to realise the principles of inclusivity and diversity and to encourage active engagement between participants. This was done, for example, by calling for ‘alternative format’ organised sessions (such as fishbowls and world cafés);



establishing the principle that each participant could play an active role in only one organised session, make one oral presentation and display one poster to allow more voices to be heard; and deliberately constructing the plenary sessions to ensure representation from different geographic regions, Symposium audiences and disciplinary perspectives.

Behind the scenes

Behind the scenes, over 400 people made in-kind contributions (in terms of hours of work) to make this Symposium happen. These were administrators and academic staff of the five academic institutions in the SALOC; student volunteers; reviewers; international executive committee members, and members of the four symposium working groups responsible for the programme, resource mobilisation, communications and logistics.



Under the leadership of Lucy Gilson and Di McIntyre, the co-chairs of SALOC, the School of Public Health (SOPH) played a very active role in the organising team. Apart from participating in a range of general committee functions over the twelve months leading up to the Symposium, there were specific aspects of the arrangements for which the SOPH took significant responsibility.

For example, as part of the Programme Working Group, the SOPH took the lead in conceptualising and managing the first plenary session: 'Governance and health in Africa: Pan-African perspectives on state stewardship for people's health' and compiled a short video 'Africa Speaks', featuring African health workers and managers, community members, patients, activists and researchers who shared their unique perspective on the theme of the Symposium. (Both the panel discussion and video are on the Symposium website at <http://hsr2014.healthsystemsresearch.org/videos>.)

The SOPH team also played a key role in organising the Symposium's 'marketplace' which provided participants with an informal place to meet and network as well as a space where literature and resources related

to health systems research and people-centred health systems could be displayed.



The organisation of the volunteer programme was another aspect of the Symposium in which the SOPH was actively involved. Drawn from local institutions and usually comprising HSR postgraduate students or junior staff, the 60 volunteers took care of a range of administrative activities like ushering, room monitoring and being on hand to respond to general questions participants had. The volunteer programme was simultaneously seen as a skills-building process, as volunteers were encouraged to attend sessions in between their duties.

On a very practical level, the SOPH was also actively involved in arranging the 2,000 participant bags and lanyards. In doing so we ensured that these were sourced from locally-based organisations and made by community-based co-operatives.

Lastly, and importantly, in between all of the behind-the-scenes organisation, the SOPH was well represented in the proceedings of the Symposium. Staff members gave ten oral presentations and organised sessions, presented seven posters and contributed two articles to the special edition of the *Health Policy and Planning* journal.



Information contained in this article was drawn from the SALOC's 'Final Technical Report on the Symposium' and an internal report 'Process Guide to Organising the Global Symposium on Health Systems Research' (December 2014).



Projects

This is a listing of projects undertaken in 2013 and 2014 which are not mentioned substantively elsewhere in this report. They were implemented by the staff of the School of Public Health (SOPH), often in collaboration with partners whose organisations are named wherever this is the case. Only the names of the SOPH staff and the School's extraordinary professors are given here, however.

A phase III double-blind placebo/controlled trial of the efficacy and safety of infant peripartum prophylaxis with lamivudine to prevent HIV-1 transmission by breastfeeding (PROMISE-PEP trial)

Debra Jackson, Justus Hofmeyr, Mandisa Singata

The PROMISE PEP study, completed in April 2013, was a randomised double-blind placebo-controlled multi-centre trial that measured the efficacy of prolonged peripartum prophylaxis with lamivudine (3TC) or Zidovudine to prevent HIV-1 transmission through breast milk and death in children born to HIV-1-infected mothers not eligible for HAART.

Funded by the European & Developing Countries Clinical Trials Partnership, this project was a collaboration between the SOPH and ECRU; the universities of Bergen, Montpellier 1 and Zambia; Centre Muraz; and Makerere University.

Effectiveness of the national Prevention of Mother-to-Child Transmission (PMTCT) Programme in South Africa

Debra Jackson, Tanya Doherty

The aim of this evaluation was to conduct a national facility-based survey to monitor the population level effectiveness of the South African national PMTCT programme. The primary objective was to measure rates of early mother-to-child-transmission (MTCT) of HIV at six weeks postpartum in 2010, 2011 and 2012, along with 18 month HIV transmission and HIV-free survival in a cohort of HIV-exposed infants in 2012 to 2014. The early MTCT was 3.5% and 2.7% in 2010 and 2011, respectively. 2012 data is pending release in 2015.

This project was undertaken in collaboration with the National Health Laboratory Service, the University of the Witwatersrand and the Medical Research Council, who also contributed to funding it along with the National Department of Health, the National Research Foundation, CDC/PEPFAR and UNICEF.

Rwanda Mother-to-Child Transmission (PMTCT) Evaluation

Debra Jackson

The aim of this evaluation, completed in 2013, was to conduct a national facility-based survey to monitor the population level effectiveness of the Rwandan national PMTCT programme. The primary objective was to measure rates of early mother-to-child-transmission of HIV at six weeks postpartum in 2012.

Funded by UNICEF, the evaluation was undertaken in collaboration with the South African Medical Research Council, the Rwanda Biomedical Council, the National University of Rwanda, and UNICEF Rwanda.

External evaluation of the Catalytic Initiative (CI)/ Integrated Health Systems Strengthening (IHSS) Programme in Ethiopia, Mali, Mozambique, Ghana, Malawi and Niger

Debra Jackson, Tanya Doherty, David Sanders

The purpose of this external evaluation was to evaluate the effect of the Canadian DFATD/UNICEF-sponsored Integrated Health Systems Strengthening (IHSS) programme on the coverage of a limited package of proven, high impact, and low cost maternal and child health interventions in Ethiopia, Ghana, Malawi, Mali, Mozambique and Niger.

Completed in 2014, it did this by assessing the effect of the IHSS programme on

- coverage of selected maternal, newborn and child health and nutrition interventions, particularly integrated community case management of diarrhoea, malaria and pneumonia, which were supported by the IHSS programme;
- the number of additional lives saved by the IHSS programme;



Debra Jackson left the SOPH and Cape Town for New York in October 2013 to take up a post with UNICEF, and to be closer to her sons who are studying in the USA.

For over 13 years Debra developed and taught our epidemiology modules, supervised large numbers of MPH and PhD students and led research work in maternal and child health and in PMTCT with large numbers of national and international collaborators. Amongst the highlights of her large body of research work with the SOPH was the EU-funded PROMISE-PEP clinical trial based in four African countries for which she was the South African

co-PI. She also participated in the 2010-2013 evaluation of the national PMTCT programme in South Africa - which Debra led with Ameena Goga from the MRC and Thu-Ha Dinh from the US Centres for Disease Control - which found the first big success of the Department of Health's PMTCT programme: the reduction of MTCT rates to 3.5% from previously 20-30%.

Debra travelled (and no doubt still travels) widely, leading projects in the rural Eastern Cape and KwaZulu-Natal, and consulting with the Ministry of Health in Rwanda for their PMTCT evaluation, amongst others.

Debra has a fearsome work pace, and her UNICEF colleagues will by now be used to the 2 a.m. e-mails which her students and her colleagues became accustomed to while she was here. We miss her input, dedication and great collegiality, and are delighted that Debra will retain her link with us through remaining an extraordinary professor with the School.

- strengthening the health system (workforce, service delivery, information, supplies, financing and leadership/governance);
- the capacity of government and/or civil society organisations to train, equip, deploy, and supervise front-line health workers to deliver this limited package of interventions.

The project provided data for future decision making, recommendations for improvements to the programmes as it scales up, as well as lessons for other countries.

The study was undertaken between July 2012 and July 2014 by the SOPH, the Medical Research Council and Save the Children Fund. The reports are available at: <http://www.mrc.ac.za/healthsystems/publications.htm>.

Accessing Medicines in Africa and South Asia (AMASA)

David Sanders, Boudzai Magadzire, Kim Ward, Henry Leng

Completed in 2013, the main aim of this project was to investigate how the interplay of patent regimes, pharmaceutical regulation, availability of drug production facilities, health care infrastructure and service provision, and engagement by foreign donors influence appropriate, affordable access to medicines in South Asia and sub-Saharan Africa.

The project mapped patterns of production, distribution, supply and consumption of medicines within five health care areas – HIV/AIDS, malaria, reproductive health, TB control, and mental health. It also investigated the strategies and influence of selected Indian, Chinese and Brazilian producers who are active in the study countries as exporters, partners in joint ventures, or as direct producers.

Using a case study approach, we followed specific drugs to explore these issues, employing a multi-disciplinary approach, bringing together public health scientists and clinicians, political economists, sociologists and anthropologists.

Thus far, analysis of the South African data reveals stark inequities in distribution of drug outlets across different sites, and the role played by nurses as ‘brokers’ in assisting clients to overcome medicine supply chain obstacles in their local facilities. Additional findings will soon be available.

Funded by the European Commission, this project was a collaboration between the SOPH, the universities of Edinburgh and Ghent, the Swiss Tropical and Public Health Institute, Mbarara University of Science and Technology and Makerere University in Uganda, and the Foundation for Research in Community Health, India.

Mid-term review of the National Strategic Plan for Maternal, Newborn, Child and Women’s Health and Nutrition (MNCWH&N) 2012 – 2016 and implementation of the CARMMA in South Africa

David Sanders, Thuba Mathole

South Africa is committed to achieving Millennium Development Goals 4 and 5 to reduce maternal, newborn and child mortality. The national MNCWH&N strategy 2012-2016 and the Campaign on Accelerated Reduction of Maternal, newborn and child Mortality in Africa (CARMMA) outline key strategies and targets for the country – and there have been substantial advances in

addressing maternal and child health outcomes over the last few years.

To assess the mid-term implementation of the MNCWH&N strategy 2012-2016, the National Department of Health commissioned a review to assess progress made against specific targets, identify challenges, lessons and best practices for potential replicability and scale-up as well as identify approaches to support delivery of integrated quality care to improve MNCWH&N outcomes. An additional function was to assess whether the monitoring and evaluation (M&E) framework had been implemented and to identify additional M&E requirements to maximise learning during on-going implementation. The review also assessed the stewardship of the plan and key institutional supporting structures at sub-national levels, including promotive approaches to address the broader determinants of health.

Funded by UNICEF, the project utilised technical expertise and financial resources from multiple development partners, locally and globally.

Source country perspectives on the migration of highly trained health personnel: Causes, consequences and responses

Thuba Mathole, David Sanders

This study, funded by the Canadian Institutes of Health Research, aimed to better understand the causes, consequences and responses of four countries regarding the migration of highly skilled health personnel to Canada and other countries. The purpose was to provide new evidence regarding the implications of this migration for the Philippines, India, Jamaica and South Africa. The SOPH worked on the South African study with the University of Limpopo and Ottawa University, Canada.

While the South African government has tried to respond to human resources for health (HRH) challenges through a number of initiatives, initial findings of this study indicate that the South African experience clearly demonstrates the complexity involved in addressing these issues. Increased pay for health professionals by itself is not sufficient. The problem requires interventions in management and more broadly in working conditions - and even apparently positive steps can have unintended negative consequences. Perhaps most critically, the policy terrain is contested. To implement actions intended to address HRH problems there is a need to engage a wide range of stakeholders with a range of perspectives and interests. Political sensitivity and strategic skills are essential in fashioning appropriate policies.

Building capacity for health in South Africa and the African continent through multi-disciplinary research, teaching and networking

Helen Schneider, Wim van Damme

As part of our broader collaboration with the Institute of Tropical Medicine (ITM), the SOPH is a beneficiary of the Belgian government funding under the Third Framework Agreement between Belgian Development Co-operation and ITM. The programme runs for a three-year period (2014-16), with the objective of increasing the capacity of SOPH to provide, and support others in providing, postgraduate public health training.

The funding specifically supports the development of open-access distance learning materials (such as the new on-line Pharmaceutical Public Health courses), enabling the sharing of experiences in flexible, distance and on-line modes of delivery for postgraduate programmes in our partner institutions across the continent, including exchanges around e-learning with ITM's other major partner in South Africa, the Faculty of Veterinary Sciences at University of Pretoria. It also provides PhD scholarship funding for non-South African students wishing to study at UWC, and supports regular exchanges between SOPH and ITM.

Policy review and development of a framework for home and community-based (HCBC) services

Helen Schneider, Nikki Schaay

In 2012/3 the SOPH led a collaborative project with the universities of Cape Town and Stellenbosch to review home- and community-based services in the province. This was commissioned by the Western Cape Provincial Health Department and followed a prior review of intermediate care services in the province a year earlier.

During a period of eight months a team of nine researchers, in close collaboration with their provincial counterparts, completed an in-depth review of home- and community-based services. Drawing on the newly-developed provincial strategic framework, Healthcare2030, and the national Primary Health Care Re-engineering proposals, the review mapped the arrangements regarding the roles and service delivery, human resource, financing and governance of an extensive NGO-contracted service delivery infrastructure, based on community health workers – and analysed the challenges of re-orienting this towards new goals.

The findings were compiled in a comprehensive report and have contributed to a new phase of thinking and policy development around community-based services in the Western Cape.

District Innovation, Action and Learning for Health Systems (DIALHS)

Uta Lehmann and Lucy Gilson, Vera Scott, Nikki Schaay

The DIAHLS project is an action research and learning collaboration between the City of Cape Town, the Western Cape Provincial Department of Health, and the schools of public health at the universities of the Western Cape and Cape Town. It aims to strengthen district health systems in South Africa by understanding the key restrainers and enablers at local (sub-district, programme and facility) levels.

DIAHLS' specific objectives are to:

- develop and test strategies for strengthening the district system through improved implementation of existing policies and programmatic innovation;
- identify both key restrainers and enablers of district health system development, and appropriate actions to overcome or enhance these, respectively;
- guide the development and distil practical examples of the leadership and management strategies needed across levels to support effective policy implementation and strengthen the district health system;
- provide support for postgraduate public health and health management training programmes that draw on such experience.

The specific areas of focus within activities are evolving over time. In the past two years a particular focus has been on supporting and strengthening relationships between sub-district management teams, primary care facility managers, environmental health practitioners and community members. Project activities are not only jointly conceptualised with local health officials, but also jointly written up and presented at conferences.

DIAHLS is funded by The Atlantic Philanthropies.

Increasing access to TB case finding and treatment in Sisonke district, South Africa

Christina Zarowsky, Thuba Mathole, Jeannine Uwimana, Harry Hausler

The aim of this WHO-funded project was to increase access to early TB diagnosis and treatment in Sisonke, a poor rural district in South Africa. The objectives were:

- to increase TB case finding and treatment through mobile HIV counselling and testing linked with TB symptom screening;
- to diagnose TB with the Gene Xpert in health facilities;
- to intensify TB contact tracing and household TB screening at community level; and
- to evaluate through operational research
 - the feasibility of a facility-community continuous quality improvement (CQI) approach with an initial focus on improving HIV/TB services for pregnant women; and
 - the feasibility and acceptability of a cellphone-based (m-Health) system to enhance TB/HIV case finding, treatment adherence and linkage to care.

The SOPH undertook the operational research. In the CQI component, cohort tracking tools were developed and implemented in seven facilities organised into a Learning Network – which then worked together to achieve clear aims for each step in PMTCT. Improving TB care was integrated with improving the complete antenatal PMTCT process. CQI teams were formed in all participating facilities, where they were mentored and met regularly to review the data, to identify gaps and work together to close them. The mHealth component developed and piloted mobile phone applications to enable community care workers to capture and upload household data and to enhance their supervision.

Symposium showcasing a collaborative initiative on health workforce development

Uta Lehmann, Woldekidan Amde

A two-day mini-symposium was held in March 2013 to showcase contributions of the WHO-funded collaboration on health workforce development which exists between the SOPH, the Department of Community Health, University of Eduardo Mondlane, Mozambique; School of Public Health, Addis Ababa University, Ethiopia; and School of Public Health, University of Rwanda. At the symposium, attended by 26 participants drawn from the partner institutions/countries, and the WHO,

- leadership and delegates from collaborating institutions engaged in systematic reflections on the progress and challenges of embedding UWC's MPH programme/courses focusing on Health Workforce Development, in their respective contexts;

- graduates from the programme shared their research findings, networked with academic staff and other graduates of the School; and
- students reflected on their experiences, including key factors which facilitated and impeded their study, learning and progress.

The symposium also provided the opportunity to plan the way ahead regarding consolidating the programme locally, and advancing the development of a joint teaching platform among the institutions, as well as the wider sharing of developed materials.

Strengthening human capacity development to address HIV/AIDS in South Africa

Christina Zarowsky, David Sanders, Debra Jackson, Uta Lehmann, Harry Hausler, Verona Mathews, Helen Schneider, Patricia Struthers

A major challenge in addressing HIV is how to strengthen the capacity of individuals, organisations and systems to integrate curative and preventive activities related to HIV and TB with existing health, education, and community services and programmes – whilst adapting to changing epidemiological, scientific, social and policy contexts.

This multi-faceted five-year programme – implemented through the School's Centre for Research in HIV and AIDS (CRHA) – addressed this challenge by expanding the delivery of HIV and AIDS treatment and care, strengthening systems, and improving the quality of care in South Africa. It focused specifically on managers and practitioners working in health, education and in community-based structures. Referring to several sub-projects, the CRHA's review panel noted that: 'The work also had an impact far beyond the University. Both provincial and national government departments adopted models developed [in these projects] as part of their policies: it is not an exaggeration to say that [this] work developed government policy.'

Funded by the CDC through PEPFAR – and ending in 2014 – this programme comprised ten discrete sub-projects (listed below). In addition, the programme also had a 'Core, synergies and sustainability' component, which promoted and funded activities to enhance synergies and exchange across UWC projects; and strengthened capacity for research and teaching related to the project's themes. This value-adding component, led by the CRHA's director, was realised through symposia, writing retreats, seminars, networking, conference presentations and the development and dissemination of publications and products.

Half of the sub-projects did not directly involve staff from the SOPH – being

- Training health care providers and traditional health care practitioners on collaboration for HIV & AIDS prevention and care
- HIV & AIDS prevention through sports participation
- Training nurse-midwives in community-based PMTCT & HIV/AIDS prevention and management skills and competencies
- Provide management and leadership training for new HIV programme managers and HR managers at the provincial and district levels

- Molecular surveillance by accurate detection of HIV-1 drug resistance mutations in patients on antiviral treatment in Southern Africa: An informatics approach.

The remaining five involved SOPH staff and extraordinary professors, as follows:

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

Patricia Struthers

Health promoting schools (HPS) have been developed internationally and championed by various bodies, including the WHO. Growing a school environment that provides a healthy setting for learning and working is an intensive process, including the capacity development of individuals and the organisation. Creating a healthy setting in South African schools includes the development of school TB and HIV policies, skills development, addressing challenges in the school physical and psycho-social environment, developing the school-community network, and facilitating links to appropriate support services.

This project worked with school management, staff, learners and parents, as well as the district education and health departments – to promote collaboration between sectors; to provide training and consultation to stakeholders working with schools; and to promote policy engagement.

Implemented in three Western Cape secondary schools, this was the first application of HPS approaches to the secondary school setting in South Africa.

- **A web-based HIV/TB educational programme for South African school learners**

Patricia Struthers

This project aimed to develop the capacity of teachers and learners with a view to preventing the spread of HIV/AIDS and TB. Through interactive materials which foregrounded perspectives and voices of teachers and learners in poorly-resourced local schools, it aimed to engage and educate teenagers about TB in particular, within the context of HIV, supporting them in making decisions about their lives that will mitigate some of the risks of infection.

The project was implemented in several Western Cape secondary schools, where the materials were developed in consultation with teachers and learners as well as through provincial and national consultations with experts, stakeholders and Departments of Education. While the initial distribution of the Resource Kit reached 4,000 learners and teachers in five schools in the Western Cape, many more grade 7 to grade 9 learners were reached through making this material available to teachers – through formally mainstreaming the material in the curricula for these grades. In addition, there is access through an interactive website (www.skills4life.org).

- **Building capacity to monitor and evaluate HIV care in KwaZulu-Natal**

Harry Hausler

This project sought to improve the capturing and use of HIV- and TB-related data through supporting the secondment of three monitoring and evaluation (M&E) officers to the KwaZulu-Natal provincial Department of Health – with a view to improving the capacity of the health system.

The M&E officers were often involved in building the capacity of district-level information teams and HIV/AIDS/STI/TB (HAST) co-ordinators to monitor and evaluate integrated TB and HIV care, both at facility and community levels. This also included training community care givers, supervisors and community health facilitators involved in the home community-based care programme in M&E generally, and in the use of data collection tools in particular.

The project also supported the implementation of the electronic HIV care and antiretroviral treatment register (TIER.net) to replace paper-based registers, following a mandate from the National Department of Health.

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

Helen Schneider, Busi Nkosi

Initially intended to develop and implement a training programme for community health workers (CHWs), this project responded to the rapidly changing policy environment and government priorities by shifting focus to enhancing capacities for policy dialogue and policy development. The implementing team created spaces for often difficult policy dialogue and provided technical and expert support to the provincial and national departments of Health and to civil society organisations. The focus was on integrating community-based activities with each other and with the formal health system, as well as on formalising and regulating the status of CHWs.

In addition, working closely with the National Department of Health, a monitoring and evaluation (M&E) strategy for ward-based outreach teams was designed and tested through an extensive consultative process – and piloted in the North West Province. One component of this was an mHealth system of M&E for outreach teams.

- **Human Resource Information System**

Verona Matthews

This project was completed in 2012 – so is not reported here.

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

Christina Zarowsky

The aim of this long-term academic collaboration between UWC and Flemish universities through VLIR – the Flemish Inter-University Council – was to develop and strengthen capacity and engage in joint research collaboration and supervision of PhD students. This initiative was integrated into the wider *Dynamics to Build a Better Society* (DBBS) Programme at UWC.

In the SOPH, VLIR provided foundational five-year funding for the Centre for Research in HIV and AIDS (CRHA), which ended in 2014. The overall development objective was to transform health and education policies and systems with the aims of decreasing the burden of HIV/AIDS and TB; improving the impact of education on HIV/AIDS prevention; and developing proper responses for the prevention of, and response to, gender-based violence.

While the overall academic objective was to develop sustainable HIV-related research capacity, the specific academic objective was to build research capacity and strengthen partnerships in the areas of integrated HIV/AIDS prevention and care, with a specific focus on HIV/AIDS and TB, education and gender-based violence.

The VLIR project provided funding for three PhD scholarships and the Centre's first post-doctoral fellows, core funding for five annual HIV-in-Context research symposia and assistance with funding additional activities in the Centre.

THE HARICCI COLLABORATION - HIV and AIDS Research in Complex Contexts of Inequality

The HARICCI Collaboration is an interconnected body of work which addresses HIV from a social determinants of health perspective, and which links community, policy and health systems interventions on the structural drivers and social impacts of HIV. Migration, inequality, violence (interpersonal, gender-based, political and structural) and resilience are the key entry points and cross-cutting themes. HARICCI comprises an evolving set of research studies, symposia, fellowships, and participatory interventions that build on existing research and partnerships across and beyond UWC.

The following two research projects were undertaken in 2013 and 2014:

- **Irregular migration, human trafficking and HIV/AIDS in South Africa**

Joshua Aransiola

A baseline situational analysis on irregular migration, human trafficking and HIV/AIDS in South Africa was conducted by post-doctoral fellow Joshua Aransiola.

Despite increasing efforts at local, national and international levels, human trafficking has proved particularly resilient to remedial action, with

desperate and vulnerable individuals continuing to fall into bondage on every continent. While trafficked victims are vulnerable to HIV/AIDS due to their lack of power to negotiate sex, their illegal migrant status and fear of repatriation increases their vulnerability as they do not access medical care. As HIV-infected trafficked victims, they may also try to avoid being stigmatised, as either an illegal migrant or as HIV-positive, or both.

Through a desk review, policy analysis and key informant interviews with policy makers and NGOs, this study explored how stakeholders perceive the problems of human trafficking and HIV in South Africa, and what research and interventions are needed.

- **Ethnographic exploration of migration, health and social support in the Cape Metropole**

Christina Zarowsky, Sally Guttmacher

The link between migration and increased risk for HIV infection is well established. While this is particularly acute in South Africa, little is known about the distribution of HIV infection among foreign migrants here, making it hard to identify vulnerable groups within this population.

This study sought to understand how cross-border migrants experience and manage risk, vulnerability and violence – and where they locate HIV amongst the complex set of challenges and priorities they face. Funded by the CDC as part of a larger quantitative study undertaken by the Medical Research Council ('Conducting regular HIV behavioural and biological surveillance among hard to reach high risk populations in the Western Cape'), it entailed conducting robust surveillance to measure key risk behaviours and HIV prevalence in hard to reach, high risk population of cross-border migrants in Cape Town, South Africa.

Using respondent driven sampling to gain access to social networks, the interviews explored how the experiences documented in the individual MRC-UCT questionnaires play out within the public social and livelihood contexts of migrant men and women, with a view to developing socially and culturally appropriate interventions.

The findings included starkly varying HIV prevalences amongst different groups of foreign nationals as well as a reluctance among some to engage with the issue, given other survivalist priorities.

Community-based interventions to improve access to medicines for patients with Chronic Life-Long Conditions (CLLCs) in resource-constrained settings and hard to reach population groups: A scoping review protocol

Bvudzai Magadzire, Hazel Bradley, Brian van Wyk

The dual burden of HIV and non-communicable diseases in low- and middle-income countries gives rise to the emergence of a huge cohort of patients with chronic conditions who need to be managed with limited public

health resources. Various service delivery models have been piloted to improve access to medicines. Such models have included community-based distribution of medicines i.e. distribution of medicines outside of health facilities. Policy makers and researchers have expressed an interest in obtaining systematic evidence to inform policies and service delivery guidelines within the frameworks of pharmaceutical policy and practice.

This systematic scoping review will examine the breadth of evidence on this topic and provide a descriptive account based on studies identified. The primary review question is: What models of community-based distribution of medicines are available for CLLCs in low- and middle- income countries and for vulnerable communities in high-income countries? The themes which will guide the description include characteristics of the models; links with the supply chain and management of medicines; policy and regulatory issues; dimension(s) of access to medicines addressed; indicators by which these interventions have been measured; and the types of studies that have generated this evidence.

Family-based counselling and testing

Lucia Knight

This NIH-funded project builds on the successful delivery of an HIV home-based counselling and testing (HBCT) intervention in Vulindlela, South Africa, conducted in collaboration with researchers at the Human Sciences Research Council and the Africa Centre for Health and Population Studies, University of KwaZulu-Natal.

Drawing on lessons from the HBCT model, formative qualitative work and a review of the literature, this family-based counselling and testing project aims to design an intervention to encourage the uptake of HIV testing and counselling by the whole family (including children). It aims to do this through developing a model that facilitates and encourages inter-generational discussions about health and specifically sex and HIV as well as attempting to normalise disclosure at the family level.

AIDS scenario project

Charl Swart

The South African Research Chair Initiative (SARChI) and the SOPH, in collaboration with Stellenbosch University, initiated the HIV/AIDS scenario project in order to explore the future impact of epidemic in South Africa. The project aims to identify emerging challenges and assess implications for ensuring sustainable responses through the national health system by identifying key 'leverage points' for sustained responses. The purpose is to inform the considerations, decisions and actions of key stakeholders, including government, civil society and practitioners. In order to achieve this, the project is employing future studies methodology, which has previously been utilised by the United Nations and Metropolitan Holdings to study possible trajectories of the epidemic in Africa and South Africa respectively.

SPECIAL EVENTS

A number of special events were held at the School of Public Health (SOPH) during 2013 and 2014.

The Jakes Gerwel Award for Outstanding Contribution in the field of Public Health was launched in 2013 and two annual awards were made – while the second and third Annual David Sanders Lectures in Public Health and Social Justice were also held.

In addition, the Faculty of Community and Health Sciences hosted a seminar series in 2014 to mark '20 Years of Democracy'.

Annual David Sanders Lecture in Public Health and Social Justice

To celebrate Emeritus Professor David Sanders' contribution as founding director of the School of Public Health at UWC and his influence in the field of public health generally, an annual lecture was instituted in 2012 in his name.

- The 2013 lecture was given on 27 September by Emeritus Professor Shula Marks, School of Oriental and African Studies, UK. She addressed the topic of "Contesting health care, 1930-2013: South Africa's experience of social medicine in international perspective".
- Professor Richard Laing, professor of International Health, School of Public Health, Boston University, USA presented the 2014 lecture on 25 June - on "Access to medicines: The struggle continues."

2013: Shula Marks

Shula Marks was born in Cape Town, emigrated to the United Kingdom in 1960 and received her doctorate from the University of London in 1967. She has lectured and written widely on late-nineteenth and twentieth century South African history, including the history of health care in South Africa.

Apart from ten years between 1982 and 1992, spent as Director of the Institute of Commonwealth Studies, Prof Marks has spent her academic life at the School of Oriental and African Studies, where she is an Emeritus Professor and Honorary Fellow. She has honorary degrees from the universities of Cape Town, KwaZulu-Natal and Johannesburg, is an Honorary Emeritus Professor of the University of Cape Town, an Honorary Research Fellow of the School of Advanced Studies, University of London, and (now Emeritus) Fellow of the British Academy. Beyond the academy, she is currently on the Council of the Canon Collins Educational and Legal Assistance Trust, and spent thirty years on the Council for Assisting Refugee Academics, which she chaired for ten years.



Emeritus Prof William Pick, Prof Uta Lehmann (SOPH), Emeritus Prof Shula Marks (School of Oriental & African Studies, UK), Emeritus Prof David Sanders (SOPH), Prof Helen Schneider (SOPH)

She introduced her lecture on 'Contesting Health Care, 1930-2013: South Africa's experience of social medicine in international perspective' with the following points. While the miracles of modern medicine have never been more miraculous, the numbers of people dying of

preventable diseases have probably never been higher than at the present time. Our television screens present an image of the most remarkable cures – alongside visions of human illness and despair, even in the most affluent countries of the world. Inequalities in health are not simply marked between societies but within them, and while the private and public expenditure on health care climbs ever higher, this is in general a poor guide to the health of the national population as a whole. This is as true in most of the ‘developed’ as it is in the ‘developing’ countries. Devising appropriate and affordable health care delivery systems is widely acknowledged to be one of the crucial issues of our time, widely debated and contested.

In this lecture, Prof Marks looked at South Africa’s experience of these contestations in an international context at those three ‘moments’: in the 1940s and 1950s, the 1970s and 1980s, and since 1994.

2014: Richard Laing

Over forty years ago Richard Laing and David Sanders were medical students together in Zimbabwe, where they were both subsequently involved in various capacities in the health services. During his last three years in the country (1987- 89) Richard developed the Zimbabwean Essential Drugs Programme (ZEDAP). This set the direction for his professional career in pharmaceutical policy, notably at the World Health Organisation (WHO) and latterly back at Boston University’s School of Public Health as professor of International Health.

Prof Laing focused on critical issues influencing access to medicines. He commenced by reflecting on key moments including the first essential medicines list developed in 1977; the Nairobi conference on Rational Medicines Use which introduced a compromise by limiting the concept to the public sector; and the breakdown in 1998 of the compromise when 39 big Pharma companies sued the South African government.

While many have perceived patents and patent law to be barriers to the essential medicines concept, Kowalski et al (2011) quashed this assumption by showing that less than 6% of essential medicines were patent protected anywhere in the world. Besides patents, however, pricing remained a key issue with studies showing wide variations in prices both

between countries and within the public and private sectors. Ironically, even though medicines in the public sector may be affordable, and even free in some cases, frequent poor availability results in patients reverting to high-priced medicines from the private sector. Affordability of medicines is a critical issue in many countries with cumulative mark-ups between the manufacturers’ selling price and the final patient price varying considerably. Studies have revealed that in some countries the cumulative mark-up can be up to 600 times the manufacturers’ selling price.

Although generic medicines have been proposed as one answer to ensuring availability and affordability of essential medicines, available data show massive variations in use between countries. While the United States is a world leader in generic uptake by volume (almost 80%), Austria is at the other end of the scale with generics having just over a third of the market share and brand loyalty remaining high, even after patents end. The situation in South Africa falls between these two: in 2010 generics had 71% market share and brand erosion in the year after the patent ends varied between 60% to 90%.

Prof Laing concluded by pointing to several hopes and challenges in South Africa regarding access to medicines, including the National Health Insurance, which will hopefully include access to essential medicines; reform of the Medicines Control Council to speed up drug registrations; and lastly reform of patent legislation resulting in faster access to generics. He asserted that whilst South Africa has made significant progress in extending access to medicines in the past 20 years since democracy, ‘the struggle continues’.



Emeritus Prof David Sanders (SOPH), Dr Hazel Bradley (SOPH), Prof Richard Laing (Boston University, USA)

'2014: 20 years of Democracy'

Faculty of Community and Health Sciences Seminar Series

The 20th anniversary of democracy in South Africa has been an important moment of celebration and reflection. We live in a complex and contradictory society, where the gains of democracy have been real but the challenges – social, economic and political – appear to grow every day. Even if access to social grants, electricity and housing has expanded greatly, for too many in South Africa, quality of life is a distant dream.

Multi-disciplinary reflection

To reflect on the ongoing process of transformation in South Africa through our lenses as health and social sector professionals, educators and researchers, the Faculty of Community and Health Sciences (CHS) hosted a series of seminars during 2014. CHS is a uniquely multi-disciplinary faculty – with under- and postgraduate programmes in an array of health and social professions like nursing, physiotherapy, occupational therapy, dietetics, psychology, social work and public health. This provides a fertile space for inter-disciplinary engagement, reflection and sense-making, which the seminar series aims to promote. While a range of topics was addressed, these were framed by the prevailing question of how we might rightly appraise what has been achieved, while making sense of the ongoing challenges facing us as a nation. And importantly, how do we prepare our learners and position ourselves as scholars to best engage the constitutional project of social justice and equity in such a complex and confusing world?

The programme

Each Department or School hosted a seminar, individually or jointly, on the series theme through their disciplinary perspective:

- 27 May: *The new epidemics of the democracy: Confronting the social determinants of health* – School of Public Health and Department of Dietetics.
- 5 June: *Complementary medicine 20 years into our democracy and beyond* - School of Natural Medicine.
- 10 June: *Youth in marginalized communities: The lost generation: what have we lost? Forgotten Communities: Putting community engagement back on the agenda* – Department of Psychology.
- 9 July: *Transformation in nursing education: Past to the future* – School of Nursing.
- 17 July: *Global trends influencing nursing and nursing education future* – School of Nursing.
- 18 September: *Social work in post democracy: Voices from practice* – Department of Social Work.
- 15 October: *Occupational justice and community development: Key milestones and considerations* – Department of Occupational Therapy.

- 10 November: *Sport as a tool to promote peace* – Department of Sport, Recreation and Exercise Science (SRES/ICSSD).
- 5 December: *Reflection on the journey since 1994: Moving beyond disability as a health and welfare construct* – Department of Physiotherapy.

The new epidemics of democracy: Confronting social determinants of health

The seminar hosted by the SOPH and Department of Dietetics was given by experts in diseases, mortality and public health:

- Debbie Bradshaw and Victoria Pillay-van Wyk: *The changing burden of disease: The new epidemics*
- David Sanders: *The politics of under- and over-nutrition*
- Tracey Naledi: *The epidemic of violence and injury.*

Between 1997 and 2010, while the list of the top ten causes of death remained consistent, the structure of the list has changed: interpersonal violence dropped 51%, while diabetes increased 29% and respiratory infections moved up to the number three spot (following HIV/AIDS and cerebrovascular disease). "We need to continue efforts to provide access and treatment for HIV positive individuals," Pillay-van Wyk recommended, "and also to scale up efforts targeting prevention and management of NCDs, particularly diabetes."

In discussing the epidemics of underweight and obesity and how they lead to serious health complications, David Sanders noted that "South Africa is a country that suffers simultaneously from the problems of affluence and poverty and both of these are a result of nutritional challenges." Rates of anaemia, stunted growth, hypertension and diabetes are affected by diet. "I like to call this nutritional immunodeficiency," said Sanders, "because that brings home to me how, like HIV, poverty and food can have a big effect on overall health."

Tracey Naledi discussed the impacts of injury and violence, how they vary between different provinces and groups, and how to respond to them socially. For example violence in the Western Cape is concentrated in areas of multiple deprivation like Khayelitsha, where poverty and disease are also rife. In the search for health solutions, Naledi noted that "if we are to deal with violence and accidents we need to be strengthening communities, and how they come together and perceive social issues."

Jakes Gerwel Award for an Outstanding Contribution in the field of Public Health



This Award honours the late Prof Jakes Gerwel, former Vice-Chancellor of the University of the Western Cape (UWC) who, among many other things, advocated passionately for, and supported the development of, South Africa's first School of Public Health to be established outside a medical school. He clearly saw the need for UWC to focus on public health practice, based on solid science, that led to measurable improvements in peoples' health. Over the last few years the School has achieved these aspirations.

This annual Award for an Outstanding Contribution in the field of Public Health, honours and recognises Jakes Gerwel's central role in promoting public health practice. Launched in 2013, it is open to all former graduates of the SoPH within and beyond South Africa who have demonstrated through their work, the ability to have an impact on some aspect of population health.

Mrs Dianna Yach from the Mauerberger Foundation Fund attended both the launch of the Award in 2013 and the presentation of the next Award in 2014.

"At the heart of what we've been trying to do over the years through the Foundation is to focus on equality, excellence, social justice and communities."

"During Jakes [Gerwel's] time at UWC, we were honoured as the Mauerberger Foundation to be one of the first donors, along with the MRC, of the School of Public Health. At that time it was revolutionary because Jakes was challenging the old curative model of medicine. He was challenging medical establishments who had yet to build schools of public health."

"When Jakes moved to Madiba's Office it was no surprise to any of us that he supported measures of public health interest as part of the Mandela Inaugural Projects after his election in 1994. So there is a long legacy here of pioneering work and theory into practice, speeding up the results of evidence-based research and turning them into concrete differences on the ground with communities."

2013: Dr Kirstie Rendall-Mkosi

Dr Kirstie Rendall-Mkosi received the first Jakes Gerwel Award – at which she presented a lecture on *Foetal alcohol syndrome as a public health crisis: Possibilities for an integrated prevention programme*.

Extracts from the citation

"Kirstie is one of our most outstanding graduates, having obtained both her Master in Public Health and her PhD at the School of Public Health at UWC.

Dr Kirstie Rendall-Mkosi began her career as an occupational therapist, having graduated at Wits. Although her first jobs were in hospital-based physical rehabilitation, she soon realised that her passion lay in community-based work. Her first community-based post was in Grassy Park in the Cape Flats working through an NGO with children and adults with visual impairment.

Kirstie has had a longstanding association with UWC, first as a clinical co-ordinator and lecturer in the Occupational Therapy Department from 1988 to 1995, which included a secondment to the Academic Development Centre. Later, she completed her MPH while working at the Alexandra Health Centre in Johannesburg where she was the Director of the Institute of Urban Primary Health Care.

On her return to Cape Town she joined the SOPH at UWC as a lecturer from 1999 to 2003, and began her

PhD focusing on the problem of low birth weight in rural Western Cape. While working as a senior lecturer at the School of Health Systems and Public Health at the University of Pretoria she completed her PhD in Public Health at UWC under the supervision of Prof Debra Jackson.

Dr Rendall-Mkosi has continued to contribute to the SOPH through teaching a course related to alcohol issues at the Winter School and revised the related distance learning module during 2012. She has also been active in carrying out research projects related



Dr Kirstie Rendall-Mkosi, Ms Patricia Lawrence (Institutional Advancement, UWC), Mrs Dianna Yach (Mauerberger Foundation Fund)

to the prevention of foetal alcohol syndrome, the development of a family health file as part of a PMTCT project, the development of innovative training of miners in heat stress, and health promoting schools.

Dr Rendall-Mkosi has co-authored two books – one focusing on alcohol-related prevention initiatives at a community level and one on comprehensive primary health care and health promotion (2012). Apart from her research outputs, she has also been a member of several national and regional bodies, in particular in the field of foetal alcohol syndrome and alcohol abuse.

We admire Kirstie's strength and intellectual contributions to the field of public health in South Africa and believe she is very deserving of the inaugural Jakes Gerwel Award in Public Health."

2014: Dr Saadiq Kariem

On 11 July 2014, the second Jakes Gerwel Award was presented to Dr Saadiq Kariem (MBChB, MPhil Public Health, FCPHM, EMBA) - who gave a lecture *From health activist to manager - Reflections on a health journey: 1986 - 2014*.

Extracts from the citation

"Dr Saadiq Kariem is one of the first graduates of the Public Health Programme at UWC, obtaining an MPhil (later re-named MPH) in 1997. Saadiq graduated in medicine from UCT in 1992, obtained the Fellowship of the College of Public Health Medicine South Africa (FCPHM) in 2002 and Executive Masters in Business Administration (EMBA) from UCT in 2009.

In the period before and during his Masters studies, Saadiq spent several years working as a medical officer at community health centres in Crossroads and Khayelitsha and during the transition period served on the Strategic Management Team of the Minister of Health in the Western Cape (1996), assisting with developing priority programmes for the restructured Department of Health in the Western Cape.

Saadiq has been centrally involved in the restructuring of health services in the country at local, provincial and national levels. He has played a leadership role

in policy formulation in the health sector, both as the ANC National Health Secretary from 1996 to 2006 as well as serving for seven years on the Council for Medical Schemes from 2001 to 2008, in the latter years as Deputy Chairperson.

His first senior position in government was as deputy director of the HIV/AIDS Programme in the Western Cape (1997–2000) where he was responsible for, amongst others, implementing the first mother-to-child-transmission (MTCT) programme in South Africa, despite high-level political opposition. This initiative, which has deservedly received much praise, inspired other provinces to later initiate similar programmes.

Saadiq remains actively involved in community organisations and serves as the Chairperson of the National AIDS Convention of South Africa (NACOSA), an organisation focussed on building capacity amongst civil society organisations in the field of HIV/AIDS. NACOSA is the principal recipient of the Global Fund Grant to South Africa responsible for disbursing several million rand to community organisations and non-governmental organisations in South Africa.

Since 2010 Saadiq has been Chief Director: General Specialist and Emergency Services in the Western Cape Department of Health, responsible for regional hospitals, psychiatric hospitals, oral health services, emergency medical services, forensic pathology services as well as the Western Cape rehabilitation centre. During this time he has *inter alia* been instrumental in drafting the Interim Bilateral Agreements between the Western Cape Department of Health and the University of the Western Cape as well as between the Department of Health and the Cape Peninsula University of Technology.

Dr Kariem has combined his clinical and public health training and skills with a dogged commitment to influencing politics and policy in health. His courage in initiating HIV/AIDS treatment at a time of 'denialism' played a critical role in influencing the evolution of this programme which is rightly hailed as one of South Africa's great post-apartheid health successes. His role in this struggle is little known, having been attributed to others. For this alone, Dr Kariem is a worthy recipient of the Jakes Gerwel Award in Public Health."



From left - Dr Saadiq Kariem, Mrs Dianna Yach (Chairperson and Director - Mauerberger Foundation Fund), Prof Helen Schneider (Director of School of Public Health, UWC), Mr Heinrich Gerwel, Prof David Sanders (nominated Dr Kariem for award), Prof Brian O'Connell (UWC Vice Chancellor)

Obituaries

The SOPH had to say a very untimely farewell to three members of the Community and Health Sciences Faculty and University with whom we had had long and important associations.



Farewell to Rati Mpofu

Emeritus Professor Rati Mpofu, passed away on 19 October 2013 at the age of 68, after a long illness.

Prof Mpofu had recently retired as the Dean of the Faculty of Community and Health Sciences (CHS),

and was responsible for many reforms at the University in the field of rehabilitation, community-based education, inter-professional education and physiotherapy. She participated in and championed the inter-professional core courses initiated in the 1990s and drove the restructuring of the Faculty.

First and foremost Rati was a vocal and passionate advocate for making health services (and thus health professions education) accessible, appropriate and affordable particularly to poor communities.

SOPH's David Sanders worked with Rati in Zimbabwe after independence, where both were centrally involved

in the heyday of establishing the district health system which, to this day, is one of the examples of successful health sector reform.

In 1993, Rati moved to another recently-liberated country, joining UWC as a lecturer in physiotherapy. She found a department that was struggling to find its feet and establish its standards, and she did all she could to help students and fellow staff members alike, while completing her own PhD. Appointed chairperson of the Physiotherapy Department, she implemented a straightforward, practical and goal-oriented approach to improving the department that achieved results.

It was no surprise when she took up the position of Dean of CHS in 2001, taking the opportunity to develop, innovate and empower – promoting a curriculum that ensured students would work in local communities and get to know the needs there as part of their degrees.

The SOPH had a staunch supporter and often critic in Rati, who was challenging, with firm opinions, but also great determination to support our shared vision of health professions training.

To some of us she was not only a cherished colleague but also a good friend, and we miss her tremendously.



Farewell to Ingrid Miller

Ingrid Miller, registrar for UWC, passed away after a very long illness on 21 December 2013. Before she joined the executive management of the University in 2007 she was a colleague in the CHS Faculty and, like Rati Mpofu, part of the team that introduced

inter-professional education in the health sciences. Both as a colleague in the faculty and in her role as registrar she accompanied and actively supported the growth of the SOPH, and often eased the way to support the needs of our students all over Africa.

The University lost one of its brightest stars in her, and the SOPH a firm friend.



Farewell to Charmaine Johnson

We also had to bid farewell very prematurely to Charmaine Johnson, who passed away after a short illness on 23 March 2013.

It is hard to imagine the faculty office, where she worked for 22 years supporting key faculty committees, without Charmaine. Always warm and caring, endlessly patient with, and supportive of, academics rushing in with late submissions and students coming with special requests. She was a carer and a wonderful colleague and is sorely missed.

LINKS, PARTNERS AND FUNDERS

Links and partners

NATIONAL

Academic

Human Sciences Research Council
Social, Behavioural and Biomedical Interventions Unit, HIV/
AIDS, STIs and Tuberculosis (HAST) Programme, KwaZulu-
Natal
Medical Research Council
Health Systems Research Unit
National Research Foundation
University of Cape Town
University of KwaZulu-Natal
University of Pretoria
University of Stellenbosch
University of the Witwatersrand
African Centre for Migration and Society
Centre for Health Policy

Government

City of Cape Town: Health Department
Provincial departments of health: Eastern Cape, Gauteng,
KwaZulu-Natal, North West, Western Cape
National Department of Health
Western Cape Department of Education
National Department of Basic Education

NGOs and research organisations

Anova Health Institute, Health Systems and Advisory Services
Health Information System Project (HISP)
Health Systems Trust (HST)
Management Sciences for Health (MSH)
Médecins Sans Frontières (MSF)
TB/HIV Care Association
Effective Care Research Unit (ECRU), East London
Health Promoting Schools Reference Group, Cape Metropole

INTERNATIONAL

Academic

Addis Ababa University, Ethiopia
Boston University, USA
Bristol University, UK
Canadian Global Health Research Initiative
Columbia University, USA
Mailman School of Public Health
Eduardo Mondlane University, Mozambique
Foundation for Research in Community Health, India
Fudan University, School of Public Health, China
FXB Center for Health and Human Rights,
Harvard University, USA
Great Lakes University of Kisumu, Kenya
Hanoi School of Public Health, Vietnam
Institute of Health Sciences, Botswana
Institute of Tropical Medicine, Belgium
Johns Hopkins Bloomberg School of Public Health, USA
Karolinska Institutet, Sweden
London School of Hygiene & Tropical Medicine, UK
London University, UK
School of Oriental and African Studies
Makerere University, Uganda
Department of Health Policy Planning and Management
Mbarara University of Science and Technology, Uganda
McMaster University, Canada
Monash University, Australia
Muhimbili University of Health and Allied Sciences, Tanzania
School of Public Health and Social Sciences
National Institute of Public Health, Mexico
National University of Ireland
National University of Rwanda
School of Public Health
Public Health Foundation of India
Radboud University, The Netherlands
René Descartes University, France
Royal Tropical Institute (KIT), The Netherlands
Rwanda Biomedical Centre, Rwanda
The City University of New York, USA
School of Public Health
Université Paris V, France
Universiteit Ghent, Belgium
University of Amsterdam, The Netherlands
Medical Anthropology Department
University of Baltimore, USA
University of Basel, Switzerland
Swiss Tropical and Public Health Institute

University of Bergen, Norway
 University of Dar es Salaam, Tanzania
 Institute of Development Studies
 University of Edinburgh, UK
 Scottish Collaboration for Public Health Research and Policy
 University of Ghana
 School of Public Health
 University of Ghent, Belgium
 Department Obstetrics
 University of Leeds, UK
 Nuffield Centre for International Health and Development
 University of Missouri, USA
 University of Montpellier 1, France
 University of Nigeria Enugu, Nigeria
 College of Medicine
 University of North Carolina at Chapel Hill, USA
 Gillings School of Global Public Health
 University of Ottawa, Canada
 University of Ouagadougou, Burkina Faso
 University of Sussex, UK
 Institute of Development Studies
 University of Sydney, Australia
 School of Public Health
 University of Toronto, Canada
 Department of Public Health Sciences
 University of Uppsala, Sweden
 University of Warwick Business School, UK
 University of Washington, USA
 Department of Global Health
 University of Zambia
 Western Washington University, USA
 Woodring College of Education,

Government

Federal Ministry of Health, Khartoum, Sudan
 Policy & Planning Directorate, Human Resource
 Development
 Flemish Government

Global institutions

World Health Organisation, Afro region
 Health Systems and Services Directorate
 World Health Organisation, Geneva, Switzerland
 Essential Medicines Department
 Health Systems and Services Directorate
 International Pharmacy Federation

Funders

NATIONAL

Western Cape Department of Health
 Mauerberger Foundation Fund
 Medical Research Council
 National Research Foundation
 South African Qualifications Authority

INTERNATIONAL

Belgian Government, (via the Framework III
 Agreement with the Institute of Tropical
 Medicine, Belgium)
 British High Commission
 Centers for Disease Control and Prevention
 (CDC), USA
 Department for International Development
 (DfID), UK
 DGIS, Ministry of Foreign Affairs, Netherlands
 European Commission
 European & Developing Countries Clinical
 Trials Partnership (EDCTP)
 Flemish Inter-University Council (VLIR),
 Belgium
 Hamilton Health Sciences Corporation,
 Canada
 International Development Research Centre
 (IDRC), Canada
 Medical Research Council (MRC), UK
 Netherlands Organisation for Scientific
 Research/ Science for Global Research
 (WOTRO), Netherlands
 Rockefeller Foundation, USA
 TBReach
 The Atlantic Philanthropies, USA
 UNICEF
 University of Washington/ITECH, USA
 University of Bergen, Norway
 University of Ottawa, Canada
 World Health Organisation (WHO)

A short history of The Atlantic Philanthropies' long support to the School of Public Health

A visit in the early 2000s by Chris Oechsli – then head of the Population Health Programme and now CEO of The Atlantic Philanthropies – to the School's leaky and cramped accommodation in an aging prefabricated buildings was the beginning of a long and fruitful relationship with this University, and particularly its School of Public Health (SOPH).

In 2004, The Atlantic Philanthropies assisted the young School to stabilise its staff base by funding seven new academic posts to add to the existing four permanent posts. These have subsequently become University-funded, thus making a substantial contribution to the SOPH's sustainable growth. This was followed in 2009 by the funding of a spacious, state-of-the-art building to house the growing School.

Housing the exchange of ideas

While The Atlantic Philanthropies' initial staffing grant provided a crucial staff foundation, the School's building provides an important venue for engagement and dialogue. More than simply an academic building, it is a meeting place; where government and civil society organizations meet to discuss matters relating to public health; where public lectures, working

symposia and conferences are held; where experiences are shared, ideas contested and developed; and where learning takes place, especially between practitioners, be they enrolled on a degree programme or attending a short course or event.

In 2010, for example, the School hosted and facilitated a series of consultations with community representatives, lay workers, NGOs and health managers on the role of lay health workers in the South African health system. These consultations fed into national policy debates about a national community health worker policy, and senior staff at the School were subsequently asked to facilitate the development of a national monitoring and evaluation framework for the new programme – work which also was supported by The Atlantic Philanthropies.

Building district leadership and management capacity

In addition to providing a beautiful 'vessel' for engagement and a solid human resource foundation, The Atlantic Philanthropies has also funded several programmatic projects aimed at strengthening the district health system and supporting leadership and management development. This has included



in a focus on health information systems to contribute to monitoring and evaluation of aspects of the Primary Health Care Re-engineering policy; and, more recently, the *The District Innovation and Action Learning for Health Systems* (DIALHS) project (see page 38).

Health systems strengthening was, and continues to be, one of the cornerstones on which the School was first established 22 years ago, and continues to be its core mandate – with management and leadership being the key to the being able to deliver better health care to all.

Winding down

The Atlantic Philanthropies is a ‘giving while living’ philanthropy and donor, as its founder, Chuck Feeney called it. As such, it is in the process of winding down commitments in South Africa. As a final expression of their belief and trust in the work we do, in 2013 The Atlantic Philanthropies awarded the SOPH a R10million contribution to a sustainability fund to secure our long-term capacity to do innovative public health research and teaching – an incredibly generous gift and affirmation, which will double in size if we can find matching funds for a further R5million.

Support from The Atlantic Philanthropies over the past eleven years has made a crucial contribution to the School’s expanding and strengthening its capacity to fulfill this mandate, and we express our deep gratitude and appreciation.



Obituary: Gerald Kraak (1956-2014)

We pay tribute to Gerald Kraak, Programme Executive of The Atlantic Philanthropies’ Reconciliation & Human

Rights Programme in South Africa, who passed away in October 2014. While we did not often deal directly with Gerald, we were keenly aware of his imprint and leadership of the South African office, in shaping an orientation towards rights and justice and in forging a unique grantmaking space in the South African landscape.

Gerald was also an award winning novelist, filmmaker and indefatigable champion of the Lesbian, Gay, Bisexual and Intersex (LGBTI) community in South Africa. He will be sorely missed by many.





STAFF OF THE SCHOOL OF PUBLIC HEALTH

Professor and director

Prof Helen Schneider, MBChB (Cape Town), MMed (Witwatersrand), DCH (SA College of Medicine), DTMH (Witwatersrand)

Helen Schneider is a medical doctor, public health specialist and health systems and policy researcher who has worked for more than 20 years on the problematics of South Africa's health system. She started her career as a trainer of primary health care nurses in rural Limpopo in the mid-1980s and went on to become a public health specialist at Wits University, where she was based until 2007, working mainly at the Centre for Health Policy which she directed for eight years.

Helen has been a long-standing 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, the South African National AIDS Council (SANAC) and the Department of Health's Task Team on Primary Health Care Re-engineering. Her research and policy interests have included an understanding of the political dynamics of AIDS policy under the Mbeki government and the health system-wide implications of programmatic interventions such as ARV scale-up. More recently, her research interests have shifted towards documenting policy implementation processes and strategies to formalise and integrate lay work and community-based care and support initiatives into primary health care.

Emeritus professor

Emeritus Prof David Sanders, MBChB (Birm), DCH (RCS Eng), MRCP (UK), DTPH (London), DSc (Hon Causa) (UCT)

David Sanders headed the SOPH from its inception in 1993 till 2009. He has over 30 years' experience in public health and primary health care in Zimbabwe and South Africa and has worked extensively with governments, the WHO, UNICEF and other agencies in child health, nutrition and health human resources. He is active in various civil society organisations that promote social justice and Health for All.

David's 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. He is the author of many peer-reviewed articles and three books: *The Struggle for Health*; *Questioning the Solution*; and *Fatal Indifference: The G8, Africa and Global Health*.

David was Heath Clark Visiting Lecturer at the London School of Hygiene and Tropical Medicine in 2005 and an Honorary Professor at that institution from 2005 to 2007. He is a Visiting Professor at Charité-Universitätsmedizin, Berlin as well as at the Centre for International Health, University of Bergen, Norway, with which he continues to collaborate. He has been appointed as an Honorary Professor in the Department of Paediatrics and Child Health, Faculty of Health Sciences, UCT from July 2013 and as Professor in the School of Medicine, Faculty of Health Sciences, Flinders University of South Australia from August 2013.

In 2012 David was awarded an Honorary Doctorate by UCT in recognition of his contribution to the development of policies and programmes in primary health care nationally and internationally. In 2013 he was the recipient of the International Academic Partnership Merit Award from the Faculty of Medicine, University Eduardo Mondlane, Mozambique, and in 2014 he received the Public Health Innovation and Lifetime Achievement (PHILA) Award from the Public Health Association of South Africa (PHASA).

NRF SARChI Chair in Health Systems, Complexity and Social Change

Prof Wim van Damme, MD (KU Leuven), MPH (ITM), PhD (Vrije Universiteit Brussel)
(Joined SOPH January 2013)

Wim van Damme is a professor in Public Health at the Institute of Tropical Medicine in Antwerp, Belgium, as well as at the Paris School of International Affairs. He also coaches PhD students from Asia and Africa. Prior to this, Wim worked for Medecins sans Frontieres for 12 years in various countries including Peru, Sudan, Guinea and Cambodia.

Focusing on International Health Policies, his fields of specialisation are health services organisation and health policy. He has been the principal investigator of a variety of research projects: health systems and access for the poor, Cambodia and China (PovIII); the impact of AIDS on health systems in Southern Africa, especially on human resources for health (ARVMAC); the impact of new international funding mechanisms on national health policies (INCO-GHIs). His current research focuses on health systems in fast transition, and takes place mostly in South-East Asia and in Southern Africa.

Wim is an advisor to the Belgian Development Co-operation on issues related to international health policies and is the vice-chair of the Technical Evaluation Reference Group (TERG) of the Global Fund, in addition to which he gives advice to various agencies including the WHO and the World Bank.



Professors

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

(Left SOPH October 2013 – now extraordinary professor)

Debra Jackson joined the Health Section of the UNICEF Knowledge Management and Implementation Research Unit as a Senior Health Scientist in 2013, leaving the SOPH where she had worked for 13 years. While at the School, she served as principal investigator for a range of research projects, such as the multi-country PROMISE-EBF trial on promoting exclusive breastfeeding, and the National South African PMTCT Evaluation.

Debra has qualifications in nursing, public health, epidemiology and biostatistics. Her interests are maternal and child health, perinatal health, nutrition, ethics and health systems research. Her most recent research focus has been on prevention of mother-to-child transmission of HIV, infant feeding and community health workers.

Debra lived in South Africa for 14 years and has experience in several African countries, including South Africa, Uganda, Zambia, Burkina Faso, Malawi, South Sudan, Ghana and Rwanda. She has also worked in the Pacific Islands and the United States.

Debra is active in several professional organisations, and in particular has held leadership positions within the American Public Health Association (APHA), including chair of the Maternal and Child Health Section, Governing Councilor, chair of the APHA Nominating Committee, member of the Intersectional Council Steering Committee and the APHA Awards Committee.

Debra has over 60 peer-reviewed publications and has consulted for both WHO and UNICEF in the areas of PMTCT and iCCM.

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

Uta Lehmann joined the SOPH in 1999 and was director from 2009 to 2012. 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 WHO and is the co-ordinator of the WHO Collaborating Centre for research and training in human resources for health. She was also 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.

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

(Retired from SOPH in December 2014; now on contract)

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 a member of the Obesity Task Team in the National Department of Health as well as of the Chronic Disease Initiative for Africa.

Farewell to Meera Chhagan

We welcomed Dr Meera Chhagan as full professor at the School of Public Health on 21 July 2014. Five weeks later Meera passed away in a tragic accident while attending a paediatric conference in Kenya.

Meera obtained her MBChB (Bachelor of Medicine & Surgery) degree from the University of Natal, a specialist degree in Paediatrics (FCP) from the SA College of Medicine, and a PhD in Nutritional Epidemiology from Tufts University, Boston, USA. Prior to joining us, she was an associate professor in the Department of Global Health and Primary Care, University of Bergen, Norway, as well as a research associate in the Department of Paediatrics and Child Care, University of KwaZulu-Natal.

Despite her brief presence as a member of staff, through her energetic, open and curious style we all felt we had got to know Meera well. We recognised her many attributes and had developed high hopes and aspirations for her future in the SOPH. She stood out not only as a cutting edge epidemiologist and public health researcher, but also as an adventurous and independent spirit, capable of leading the SOPH and the field of public health in new and exciting directions. Her untimely passing is a very great loss to her family, colleagues and the field.

In her memory, the School has decided to award an annual Meera Chhagan Masters Bursary for study in Maternal and Child Health. The first award will be made in 2015.



Prof Christina Zarowsky, MD (McMaster), MPH (Harvard), PhD (McGill)
Director of the UWC Centre for Research in HIV and AIDS

(Left SOPH December 2013– now extraordinary professor)

Christina Zarowsky joined the SOPH in June 2009 where she also headed the university-wide Centre for Research in HIV and AIDS. A medical doctor and anthropologist, she has specialised in public health. From 2000, Christina worked for the Canadian International Development Research Centre (IDRC) where she led the Research for Health Equity suite of programmes and developed several donor partnerships. Her work at SOPH takes forward the focus of her work at IDRC which examined 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. Christina's areas of interest include social determinants of health, community and systems perspectives on HIV and AIDS, refugee and migrant health, and research capacity strengthening.

Associate professor

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

Brian van Wyk is a research psychologist with a passion for training and teaching 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. He trained in health systems research at the Medical Research Council, and his current research interests are in access to, and adherence behaviours of, HIV patients on antiretroviral treatment.

Extraordinary professors

Prof Naeemah Abrahams, PhD Public Health (UCT), MPhil Public Health (UWC), Dip Paediatric Nursing (RXH), Dip Community Health (PenTech), Nursing Dip General Nursing and Midwifery (GSH)

Naeemah Abrahams is the deputy director of the Gender and Health Research Unit of the Medical Research Council. She has a nursing background and completed a Masters in Public Health at UWC in 1997, followed by a PhD in Community Health in 2002 at UCT. Her research focus includes gender-based violence and the interface between this and HIV. Her work on intimate partner violence has included a range of topics like men as perpetrators; risk factors for perpetrating intimate partner violence; femicide; the role of guns in gender-based violence; health sector responses to gender-based violence; sexual assault services; prevention of HIV following a sexual assault; HIV stigma; mental health; and burden of disease studies exploring gender-based violence as a risk factor for health outcomes.

Prof Tanya Doherty, BNursing (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 of HIV, child health, infant feeding and community randomised trials. She is currently working on an evaluation of child survival interventions in six African countries, as

well as developing a mobile technology platform for community health workers (CHWs) in South Africa to improve monitoring and evaluation, visit completeness, and communication between CHWs, mothers and clinics. Tanya holds a joint position with the SOPH and the Medical Research Council.

Prof Lucy Gilson, BA (Hons) (Oxford University), MA (distinction) (Univ of East Anglia), PhD (Univ of London)

Lucy Gilson holds the appointment of professor both at the University of Cape Town and the London School of Hygiene and Tropical Medicine, UK, and is an honorary professor at the University of the Witwatersrand. Throughout her career, her research has been driven by a concern for equity in health and health care. This has involved conceptual and empirical work on issues of health care financing, organisation, management and policy change. Lucy has played a leading role in developing the field of health policy analysis, and currently manages a continental initiative to strengthen training in this field. She has also conducted collaborative research with colleagues in other countries in Eastern and Southern Africa, and in Asia.

Prof Sally Guttmacher, BA (University of Wisconsin), MPhil (Columbia University), PhD (Columbia University)

Sally Guttmacher is Professor of Public Health in the Department of Nutrition, Food Studies and Public Health and the Global Institute of Public Health at New York University (NYU). She has extensive research, teaching, and accreditation experience and has been actively involved in accrediting and advising on the development of public health programmes. Her focus areas are gender, migration, health equity, prevention of infectious disease – and her recent research has been on the use of community health workers employed by community-based organisations in educating ethnic communities in New York in the prevention of chronic disease; and the health risks encountered by cross-border migrants in South Africa.

Since August 2010 Sally has also been working with the Centre for Research in HIV and AIDS in the SOPH, where she participated in the early development of the HARICCI programme (HIV and AIDS Research in Complex Contexts of Inequality) while a sabbaticant in 2012 / 2013.

Prof Debra Jackson is listed above.

Prof Richard O Laing, MD (Zimbabwe), MSc (London), DA (South Africa), MBChB (Zimbabwe)

Richard Laing is a physician who worked for 18 years in the Ministry of Health in Zimbabwe. After receiving postgraduate degrees in public health and health policy, he spent 13 years in Boston, USA, where he initially worked for an international consulting company, Management Sciences for Health (MSH), establishing the International Network for the Rational Use of Drugs. He was also an editor for *Managing Drug Supply* (2nd edition). Richard taught international public health at Boston University's School of Public Health before joining the WHO in mid-2003 as a medical officer. During his 10 years at WHO Richard served on a number of expert committees and has

been engaged in working on measurement of medicines pricing and availability as part of the joint WHO/HAI project. He has an extensive list of academic publications: he edited the *Essential Drugs Monitor*; he was one of the authors of the *Priority Medicines for Europe* and *The World Report*; and was also the editor of the *WHO World Medicine Situation* (3rd edition). In 2014 Richard became Professor of International Health at Boston School of Public Health, teaching primarily in the pharmaceuticals track.

Emeritus Prof David Sanders is listed above.

Prof John Seager, BSc (Hons) (Wales), PhD (Wales)

John Seager is a freelance research consultant with 30 years' public health research experience in Africa – covering AIDS and development, tuberculosis, diabetes care, urban health systems, and social determinants of health. John's main research interest is social determinants of health among the poor in developing countries. His recent work includes health systems evaluation, HIV and AIDS, homeless populations and social aspects of climate change. His publication record spans the authoring and co-authoring of more than 60 journal articles and 50 research reports. John holds a BSc (Hons) in Zoology and a PhD in Ecology and Population Dynamics from the University of Wales and has completed advanced training in Epidemiology and Public Health in the USA, UK and South Africa.

John is also an extraordinary professor at the University of Stellenbosch where he is a member of the Transdisciplinary Sustainability Analysis Modelling and Assessment Hub. He serves as the public health specialist on the Lesotho Highlands Development Authority's Panel of Environmental Experts.

Prof Christina Zarowsky is listed above.

Extraordinary associate professors

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

Harry Hausler is a family physician and preventive medicine specialist. In 1995 he worked with the WHO and from 1996 to 2003 was the National TB/HIV Technical Advisor in the South African Department of Health. A two-year period at the SOPH from 2005 to 2007 was followed by his continuing with the School in an honorary capacity.

Harry's current interests include developing systems and capacity to assist with comprehensive HIV and TB prevention and treatment in the context of comprehensive primary health care – and to this end he co-ordinates operational research focused on implementing and evaluating a comprehensive programme of TB/HIV/STI prevention, care and support. As the Chief Executive Officer of the non-governmental organisation TB/HIV Care Association, he has been the principal investigator of a number of research projects: two CDC-PEPFAR co-operative agreements on comprehensive HIV and TB prevention in the general population (in six districts) and among sex workers (in Cape Metro and Ethekwini); a Stop TB Partnership TB REACH project in Sisonke district; and a Global Fund project to increase HIV and TB case finding and treatment in correctional facilities in the Western Cape.

Assoc Prof Ehimario Igumbor, BSc (Hons)(UZ), MPH (UNIVEN), PhD (UWC)

With a background degree in physiotherapy, Ehi Igumbor joined the SOPH as a senior lecturer in epidemiology and health information systems in 2007. He left in October 2012 to join the Centers for Disease Control and Prevention (CDC) in Pretoria.

Ehi's research interests include chronic disease epidemiology, burden of disease analyses, public health education and routine health information systems. He holds a Master of Public Health (MPH) majoring in Health Measurements (Epidemiology, Biostatistics and Population Studies) and a PhD in Public Health.

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

Patricia Struthers, an Associate Professor in the Community and Health Science Faculty, has been working closely with the SOPH since 2010. Her interests and expertise are in the fields of health promotion, in particular support services for inclusive education and health promoting schools. Trish has been leading work on the development of high schools as health promoting schools and has been instrumental in the revival of the Health Promoting Schools Network, including stakeholders from all levels of government, non-governmental organisations, and higher education institutions. She has also undertaken research linked to school health and the Integrated School Health Programme (ISHP) of the departments of Health and Basic Education.

Senior lecturers

Dr Hazel Bradley, B Pharm (Bath), MPH (UWC), PhD (UWC)

Hazel Bradley is a pharmacist with an interest in public health and 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 PhD research was on district level pharmaceutical human resources. She is a member of various pharmaceutical professional organisations and her interests include pharmaceutical human resources, access to medicines and public health pharmacy education. Hazel is leading the establishment of a pharmaceuticals specialisation in the MPH.

Dr Peter Delobelle, Doctor in Medicine, Surgery and Obstetrics (Belgium), PhD (Belgium)

(Joined SOPH February 2014)

Peter Delobelle is a medical doctor with a background in the public and private sectors. He has worked as general practitioner, specialist in training and medical journalist - having acted as associate editor of several newsletters - but eventually became a public health practitioner through his field work for the medical humanitarian organisation Médecins Sans Frontières (MSF). Upon arrival in South Africa in 2004, Peter worked on HIV/AIDS/TB referral systems in Limpopo province, which resulted in the development of a health promoting hospital. He became interested in global health and health systems research through his affiliation with the Institute for Tropical Medicine (ITM), Belgium, and with SOPH. His research focuses on health systems and promotion in the fields of HIV/AIDS, non-communicable

disease (especially diabetes), maternal and child health and health information systems. He has a keen interest in system dynamics modelling and complexity science and is involved in projects with national and international partners. Peter was actively involved in the International Union for Health Promotion and Education and acted as the European Co-ordinator for its student and early career network.

Dr Lucia Knight, BSc (UCT), MPopStuds (UKZN), PhD (London)

(Joined SOPH March 2014)

Lucia Knight has a Masters in Population Studies from the University of KwaZulu-Natal and her PhD was in Family Demography from the Centre for Population Studies at the London School of Hygiene and Tropical Medicine. Following her PhD, she worked in the HIV/AIDS, STIs and TB unit at the Human Sciences Research Council in Durban/ Sweetwaters as a research specialist where she was involved in a range of research projects. Some highlights included two studies of alternative models of HIV testing and a large and ongoing study assessing the well-being of young children in South Africa. Before joining the SOPH Lucia had just completed a study assessing the repercussions of maternal mortality for orphaned children and the household in order to draw attention to the need for prevention. Lucia's research focusses on the social and structural determinants of health and the knock-on effects of ill-health for families.

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.

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 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 – and is currently registered as a PhD student, doing research on health promoting schools.

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

Lungiswa Tsolekile is a dietician and is currently registered as a PhD student in the SOPH. She has been involved in research on chronic poverty and her current interests include childhood obesity and the prevention and control of chronic non-communicable diseases (NCDs) in adults. She has been working with community health workers (CHWs) in promoting healthy lifestyles for prevention of chronic NCDs, as well exploring the use of motivational interviewing by CHWs to change the eating behaviours of community members. Her current work focuses on the training and curriculum for CHWs involved with chronic NCDs.

Senior researchers

Prof Justus Hofmeyr, MBBCh (Wits), MRC OG (Left SOPH July 2013)

Justus Hofmeyr joined the PROMISE-PEP clinical trials project as principal investigator in March 2011. He is director of the Effective Care Research Unit, Department of Obstetrics and Gynaecology, East London Hospital Complex which is part of the universities of the Witwatersrand and Fort Hare. Prior to this he had been professor of Obstetrics and Gynaecology at the Coronation Hospital and Wits University. Justus has published over 300 papers in peer-reviewed journals, 25 chapters in text books and 8 audio-visual teaching programmes. He is co-editor of the Cochrane Pregnancy and Childbirth Group and the World Health Organisation (WHO) Reproductive Health Library. In 2012 he received the South African Medical Association (SAMA) 'Spirit of Medicine' award.

Prof Henry Leng, PhD (UCT), MBA (Stell) (Left SOPH May 2013)

Henry Leng joined the AMASA (Access to Medicines in Africa and South Asia) project as senior researcher in October 2010, having been a professor in pharmaceutical chemistry in the School of Pharmacy at the University of the Western Cape. He serves on the Medicines Control Council and the Executive Committee of the Academy of Pharmaceutical Sciences. He is also an expert member of both the Pharmaceutical and Analytical Committee and Biological Medicines Committee of the Medicines Control Council.

Dr Bruno Marchal, MPH Belgium, Diploma in Tropical Medicine and Hygiene (DTM&H) (Belgium), MD (Belgium)

(Joined SOPH January 2013)

After graduating as a medical doctor and obtaining a degree in Tropical Medicine at the Institute for Tropical Medicine (ITM), Bruno Marchal worked for six years in Nyamira District (Kenya) as a medical doctor and hospital director. Following the completion of a Master of Public Health (MPH) he joined the Department of Public Health at ITM in 2000, where he co-ordinated the MPH course. Bruno's doctoral research was on the influence of (health workforce) management practices on performance of hospitals in Ghana and Tanzania, using realist evaluation as the main methodology. He is currently working mainly on strategic management of health care organisations, stewardship and evaluation of complex issues in health.

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

Thuba Mathole joined the SOPH as a senior researcher in 2008, bringing wide experience in research, training and programme planning and management. Her experience includes management and implementation of primary health care and public health programmes in both government and non-governmental organisations. 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)

(Left SOPH March 2013)

Busi Nkosi has degrees in home economics, human ecology and in the environment and development – reflected in her interests in rural health, community development, food security and in her extensive work in the rural and peri-urban areas of KwaZulu-Natal, prior to joining the SOPH in August 2009. Busi's work also focused on orphans and vulnerable children, HIV/AIDS, and community health workers.

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

Prior to joining the SOPH in 2004, Nikki Schaay worked in the field of HIV. She first managed a local NPO, which was one of the first community-based organisations in South Africa to support a cadre of local HIV educators; and later directed a national project which provided technical assistance to the national Department of Health, specifically in relation to HIV multi-sectoral capacity building and policy development. Nikki contributes to the SOPH's teaching activities by convening the core module 'Population Health and Development: A Comprehensive Primary Health Care Approach' and by facilitating a course on community participation. Her current research initiatives involve contributing to a review of home and community-based services for the Provincial Health Department in the Western Cape.

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 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.

Ms Mandisa Singata, Madliki Dip Comprehensive Nursing Science (Ciskei Nursing College, East London), MBA (Regent Business School, Durban)

(Left SOPH July 2013)

Following a qualification in nursing and an MBA, Mandisa Singata has undertaken a PhD thesis at the University of Cape Town comprising a randomised control trial 'studying the effects of the copper intrauterine device and injectable progestogen contraceptive on depression and sexual functioning of women in the Eastern Cape'. She is the deputy director of the Effective Care Research Unit (ECRU) in the Department of Obstetrics and Gynaecology, East London Hospital Complex – and joined the School of Public Health (SOPH) as a research co-ordinator for the Promise PEP study in 2007. Mandisa has published over ten publications and is a systemic reviewer for the Cochrane pregnancy and Childbirth Group and Fertility Group.

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 of health, and the importance of partnerships and community participation in health promotion – the topic of her doctoral research. Ruth was responsible for establishing a three-year British Council collaboration with the London Metropolitan University which ended in 2011, and she currently spends her time between Cape Town and London, teaching the health promotion distance learning module and supervising MPH and doctoral students. Initially trained as a physiotherapist, she has a Diploma in Health Promotion, a Masters in Social Policy, and a Doctorate in Public Health from the London School of Hygiene and Tropical Medicine.

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

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, after which she joined the School of Public Health, National University of Rwanda where she has been involved in teaching and reviewing the MPH programme to date. Jeannine joined the UWC SOPH in 2006 as a research assistant enrolled in the PhD programme, graduating in 2012. Her research interest are developing mechanisms to enhance collaborative TB/HIV activities including PMTCT; community participation; health systems strengthening; and mobile Health. She is currently working on a TB REACH project on improving TB case finding, linkage to care and treatment adherence through continuous quality improvement methodology and mobile health in KwaZulu-Natal.

Researchers

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

Woldekidan Kifle Amde joined the SOPH in March 2009 as manager of the WHO-UWC Masters programme focusing on Health Workforce Development. This informs his current PhD work on the complexity of a multi-country capacity development initiative in the area of health workforce development. He also administers the 'HRH for Africa' website, a digital resource centre being implemented by the SOPH as a WHO Collaborative Centre, and manages content for the School's own website. Wolde is a member of the SOPH team engaged in two inter-university collaborative initiatives to develop capacity in the field of health policy and systems analysis in Africa - the Consortium for Health Policy and Systems Analysis in Africa (CHEPSAA) and the Collaboration for Health Systems Analysis and Innovation (CHESAI). Having worked as a development professional in Ethiopia and South Africa, his background is in sociology, development management, administration, and information communication technology.

Mr Ferdinand Mukumbang, MNursing (Western Cape), MPhil (Stellenbosch), PGDip (HIV/AIDS Management) (Stellenbosch), BNS (Buea, Cameroon)

(Joined SOPH June 2014)

Ferdinand Mukumbang is working on a realist evaluation of the antiretroviral-adherence club model in the Cape Metropole in the Western Cape. He is also currently doing work for his doctoral degree.

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

(Left SOPH March 2013)

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. Having worked at the SOPH for just over three years, Annie is currently enrolled for a PhD at the SOPH, for which she is researching Global Health Initiatives and health policy and systems.

Ms Sarah Rohde, BS Nursing (British Columbia), PG Cert in Public Health (UWC), BA (Hons) (London), MPH (Cape Town)

(Left SOPH March 2014)

Sarah Rohde has a background in clinical nursing from Canada, with a specific focus on HIV care and addiction medicine. While completing her MPH, she has been leading the development and piloting of monitoring and evaluation tools for primary health care ward-based outreach teams, a commission for the national Department of Health. Prior to this, she worked with the Medical Research Council's Health Systems Research Unit. Sarah's interests include primary health care strengthening for improved maternal and child health.

Dr Kim Ward, PhD Pharmacy (UWC)

(Left SOPH April 2013)

Kim Ward, a senior lecturer at the School of Pharmacy at UWC, was seconded to the SOPH for three years to co-ordinate the Access to Medicines in Africa and South Asia (AMASA) project which examined the registration, production, acquisition, distribution, supply and consumption of essential medicines. The intention was to identify the major bottlenecks to medicine flow in each of these countries, and Kim's focus in this project was on the downstream side of the supply chain, including rational medicine use and distribution. Kim obtained her PhD in Pharmacy Practice at UWC in 2008.

Education specialists

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

Senior researcher

(Left SOPH December 2014)

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 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 undertook an inter-country study of the impact of the MPH programme from 2005 to 2011. She has been involved with a project in Open Education Resources and the development of case studies for public health education.

Ms Ziyanda Mwanda, BSc (UWC)

Research assistant

Ziyanda Mwanda joined the SOPH as a research assistant in 2012, the year she graduated from UWC with a BSc in Biotechnology. She is now an e-Learning specialist and assists both students and staff with technical issues regarding iKamva and other teaching multimedia.

Project and field staff

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

(Left SOPH June 2014)

Prior to joining the SOPH in October 2010 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 is registered for a doctorate in the SOPH and her research interests are in wellbeing and quality of life, HIV/AIDS, livelihoods and poverty, orphans and vulnerable children, and food security.

Ms Ntombodidi Gobile

Ntombodidi Gobile is currently a field worker for the Prospective Urban and Rural Epidemiology (PURE) study, prior to which she worked as a data capturer. She is enrolled at UNISA for the Certificate in Health Science and Social Services.

Ms Boniswa Mphiti/Jwili, Dip Enrolled Nurse Assistant (Elliot Hospital)

Since 2009 Boniswa Mphiti/Jwili has been a field worker and data capturer for the Prospective Urban and Rural Epidemiology (PURE) study. She has worked as a fieldworker and a moderator for 10 years, prior to which she worked for several companies doing market research. Boniswa is currently studying for a BA in Community Health Psychology at UNISA.

Mr Khumbula Ndibaza, Dip Nursing (Groote Schuur Nursing College)

Since 2009 Khumbula Desmond Ndibaza has been a field worker and a data capturer for the Prospective Urban and Rural Epidemiology (PURE) study. He has a Diploma in Nursing from Groote Schuur Nursing College and is currently studying for a BA in Community Health Psychology at UNISA.

Mr Lungisani Ngodwana, BSc (Walter Sisulu Univ) (Left SOPH 2013)

Since 2009, Lungisani Ngodwana has been a field worker /research assistant for the Prospective Urban and Rural Epidemiology (PURE) study. Born and bred in the Eastern Cape, he has a BSc in Health Promotion from Walter Sisulu University.

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

Before joining the SOPH in November 2010, Bvudzai Magadzire had been involved in operational research relating to public health and the evaluation of development projects for donor agencies, non-governmental organisations and governments in South Africa, Zimbabwe, Malawi, Botswana and Uganda. She worked on the three-year multi-country study 'Access to Medicines in Africa & South Asia' (AMASA) and is currently working on her PhD on the Western Cape Chronic Dispensing Unit.

Administrative and support staff**Ms Marlene Petersen****Senior office 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.

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

Before joining the SOPH in June 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 provides assistance to project heads, and monitors project progress and reports. He also produces the SOPH Bulletin, the School's monthly newsletter.

Ms Sidiqa Abbas**Finance administration officer**

Sidiqa Abbas is responsible for the financial administration of various projects in the School which includes the management of various project funds. She came to the University in May 2010, having worked in the private sector.

Mr Melvin Adams**Office assistant**

Melvin Adams joined the 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 various projects in the School which includes the management of many project funds.

Ms Janine Kader

Student administrator: Postgraduate Programme

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

Ms Nolitha Komeni, BCom Mgt (UWC)

Receptionist

(Left SOPH February 2013)

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 the Winter and Summer Schools.

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, and assists with the Summer and Winter Schools.

Mr Zaeem Najaar

Financial assistant

Zaeem Najaar first worked at the SOPH as a student, assisting with various administrative tasks and was later employed as financial assistant in February 2009. He is currently completing a BCom degree at UWC.

Ms Tasneem Parker Dip Adv Exec Sec (PC Training & Business College)

Receptionist

(Joined SOPH April 2013)

Prior to joining SOPH, Tasneem Parker worked for eight years as a Personal Assistant in the financial services industry and six years as a recruitment consultant/personnel manager in the hospitality industry. At SOPH she is responsible for reception, provides administrative support to the administrative and academic staff and assists with the Winter and Summer School Programmes.



Lynette Martin

***Twenty Years of dedicated Service
to UWC and the School of Public Health***

Ms Tamlin Petersen

Administrative co-ordinator: Centre for Research in HIV and AIDS

Tamlin Petersen joined the SOPH in 2002, first working part-time on the Summer and Winter Schools and assisting the School's administrative team. She joined the staff full-time in 2009 as administrative co-ordinator for the newly-formed UWC Centre for Research in HIV and AIDS. In addition to the overall administration of the Centre, Tami is responsible for event management, particularly the annual international HIV-in-Context Research Symposium. She maintains the Centre's website and serves as secretary to the Board.

PUBLICATIONS AND CONFERENCES

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Chapters in books

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Sanders D. Invited presentation: *Diet-related disease: The role of trade and the food and beverage industry in South Africa.* Seminar on Economic and Health Impacts of Legislative and Fiscal Policies to Improve Nutrition in South Africans, University of Witwatersrand School of Public Health, 20 February 2013.

Sanders D. Invited presentation: *More of the same will not address South Africa's health crisis: The need for a People's NHI.* Panel discussion on the NHI, South African Civil Society Information Service (SACSIS)/Friedrich Ebert Foundation, Cape Town, 2 August 2013.

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Sanders D. Oral presentation: *Diet-related disease: The role of 'Big Food' in South Africa* 9th Public Health Association of South Africa (PHASA) Conference, in collaboration with the African Federation of Public Health Associations (AFPHA), Cape Town, 26-27 September 2013.

Sanders D. Oral presentation: *Re-engineering Primary Health Care requires more CHWs who can do more.* 9th Public Health Association of South Africa (PHASA) Conference, in collaboration with the African Federation of Public Health Associations (AFPHA), Cape Town, 26-27 September 2013.

Sanders D. Invited presentation: *Health in South Africa since 1994: Achievements and challenges. Will current policy initiatives resolve the crisis?* International Honors Program of US students, 20 October 2013.

Sanders D. Invited plenary presentation: *Progress in Child Health in South Africa.* 4th Child Health Priorities Conference, University of the Witwatersrand, 31 October 2013.

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Sanders D. Invited presentation: *Africa's health crisis: Key social determinants of health and health systems.* Wits PhD/Registrar programme, School of Public Health, University of Witwatersrand 21 February 2014.

Sanders D. Invited presentation: *The health effects and political economy of under- and over-nutrition in South Africa: What is to be done? '20 years of Democracy 2014 Seminar Series',* Faculty of Community and Health Sciences, University of Western Cape, 27 May 2014.

Sanders D. Invited presentation: *Health and healthcare in South Africa - 20 years after Mandela.* A response to Mayosi and Benatar at Dean's Open Forum, Faculty of Health Sciences, University of Cape Town, 8 October 2014.

Sanders D. Invited plenary presentation: *The health effects and political economy of under- and over-nutrition in South Africa: what is to be done?* KwaZulu-Natal Integrated Nutrition Programme Symposium, Pietermaritzburg, 17 October 2014.

Schneider H, Wilson N. Oral presentation: *A review of home and community based services in the Western Cape Province: what lessons for a new policy framework?* 9th Public Health Association of South Africa (PHASA) Conference, in collaboration with the African Federation of Public Health Associations (AFPHA), Cape Town, 26-27 September 2013.

Schneider H. Invited input: *Review of HCBC in the Western Cape.* NHI Workshop of the Department of Health, Eden Pilot District, Western Cape, 25-26 July 2013.

Schneider H. Invited input: *Review of intermediate care and home and community based Care.* CBS Summit, Western Cape Department of Health, Somerset West, 15 February 2013.

Schneider H. Invited panellist: *Policy maker engagement: Getting evidence into policy.* Global Alliance for Chronic Diseases, 2nd Annual Joint Technical Steering Committee Meeting (JTSC), Cape Town, 15 November 2013.

Schneider H. Invited speaker: *Intermediate care services in the Western Cape: Human resourcing challenges.* UCT Rehabilitation Research Conference, Cape Town, 2 September 2013.

Scott V, Dinginto N, Xapile Z. Poster presentation: *Implementing programmes at facility level: How facility managers use information in prioritising within and between programmes.* Western Cape Province Department of Health Research Day, Mitchells Plain, Cape Town, South Africa, 24 October 2014.

Scott V, Lehmann U et al. Oral presentation: *Collaborative action learning and reflection to strengthen district health systems: the DIAHLS project.* Satellite session. 9th Public Health Association of South Africa (PHASA) Conference, in collaboration with the African Federation of Public Health Associations (AFPHA), Cape Town, 26-27 September 2013. **Stinson K, Van Zyl D, Mdebuka H, Zeelie JP, Boateng M, Colvin C, Johnson L, Coetzee D, Schneider H.** Poster presentation: *The impact of community health workers and improved monitoring on PMTCT programmes in the Free State Province – a randomised control trial.* 9th Public Health Association of South Africa (PHASA) Conference, in collaboration with the African Federation of Public Health Associations (AFPHA), Cape Town, 26-27 September 2013.

Struthers P. Oral presentation: (2014) *Integrated school health programme and Caring and Support for Teaching and Learning (CSTL): Are schools ready?* Health Promoting Schools Symposium, University of the Western Cape, 14 May 2014.

Struthers P. Convener: Health Promoting Schools Symposium, School of Public Health, UWC, 14 May 2014.

Tsolekile L, Puoane T, Okop K, Levitt N. Oral presentation: *Prevalence of obesity and hypertension among men and women in resource-poor South Africa communities: the PURE study.* 9th Public Health Association of South Africa (PHASA) Conference, in collaboration with the African Federation of Public Health Associations (AFPHA), Cape Town, 26-27 September 2013.

Uwimana J. Oral presentation: *Use of mobile Health to enhance TB and HIV screening, treatment, support and linkage to care in one of the rural district, KwaZulu-Natal.* ICT 4 Health Conference, 11-13 September 2013, MRC, Cape Town, South Africa.

Van Wyk B. Oral presentation: *Patterns of non-adherence to ART in West Coast/Winelands District.* Western Cape Province Department of Health Research Day, Mitchells Plain, Cape Town, South Africa, 2013.

Van Zyl D, Zeelie JP, Stinson K, Mdebuka H, Boateng M, Colvin C, Johnson L, Schneider H, Coetzee D. Poster presentation: *Training, mentorship and supervision as key components of a facility-based Community Health Worker model.* 9th Public Health Association of South Africa (PHASA) Conference, in collaboration with the African Federation of Public Health Associations (AFPHA), Cape Town, 26-27 September 2013.

Zarowsky C, Guttmacher S. Oral presentation: *What's HIV Got To Do With It? Cross-border migrant perspectives on survival and HIV.* SA AIDS, Durban, June 2013.

Zembe W, Ramokolo V, Doherty T, Sanders D, Jackson D. Oral presentation: *Child Support Grant and child growth.* 9th Public Health Association of South Africa (PHASA) Conference, in collaboration with the African Federation of Public Health Associations (AFPHA), Cape Town, 26-27 September 2013.

Zembe W, Ramokolo V, Jackson D, Sanders D, Doherty T. Oral presentation: *The dynamic relationship between cash transfers and child health: Can the child support grant in South Africa make a difference to child nutrition?* 10th Public Health Association of South Africa (PHASA) Conference, Polokwane, 3-5 September 2014.

International

Ager A, Lembani M, de Pinho H, Delobelle P, Zarowsky C. Poster presentation: *System dynamics analysis of health systems resilience: Case studies from Ivory Coast and Nigeria.* 3rd Global Symposium on Health Systems Research, Cape Town, South Africa, 30 September-3 October 2014.

Arends J, Scott V. Poster presentation: *The development of a tool to evaluate the quality of PMTCT programmes offered to the HIV exposed infants in a primary health care facility setting in Cape Town.* 20th International AIDS Conference, Melbourne, Australia, 20-25 July 2014.

Arrey AE, Bilsen J, Delobelle P, Deschepper R. Poster presentation: *Drivers of HIV/AIDS among Cameroonian youth: A review.* 2014 STD Prevention Conference, Atlanta, USA, 9-12 June 2014.

Arrey AE, Deschepper R, Lacor P, Delobelle P, Bilsen J. Poster presentation: *Fear of disclosure among sub-Saharan African migrant women living with HIV/AIDS in Belgium.* 14th European AIDS Conference, Brussels, Belgium, 16-19 October 2013.

Baum F, Freeman T, Javanparast S, Labonte R, Sanders D, Packer C, Lawless A, Jolley G, Ah Chee, D, Boffa J, Francis T, Bentley M. Poster: *Learnings from multiple international case studies of people-oriented comprehensive primary health care: Lessons for research, policy, and implementation.* 3rd Global Symposium on Health Systems Research, Cape Town, South Africa, 30 September-3 October 2014.

Blume J, Wang S, Jackson DJ, Hofmeyr GK, Tylleskär T. Oral presentation: *Medication return and success in administration: Sub-study of the ANRS 12174 trial in South Africa.* 17th ICASA Conference, Cape Town, South Africa, 7-11 December 2013.

Bradley H. Invited speaker for plenary session: *Identification of shared competencies between health professions.* Third World Health Professions Regulation Conference, Geneva, Switzerland, 17-18 May 2014.

Bradley H. Poster presentation: *Becoming a district or sub-district pharmacist.* International Pharmaceutical Federation (FIP) World Centennial Congress of Pharmacy and Pharmaceutical Sciences, Bangkok, Thailand, 30 August-4 September 2014.

Bradley H. Poster presentation: *Using a participatory action research approach to identify roles and competencies of district pharmacist in Cape Town, South Africa.* International Pharmaceutical Federation (FIP) World Centennial Congress of Pharmacy and Pharmaceutical Sciences 2014, Bangkok, Thailand, 30 August-4 September 2014.

Chowdhury SN, Thow AM, Sanders D, Negin J, Drury E, Puoane T, Tsolekile L. Oral presentation: *Food Studies: A Multidisciplinary Menu.* International Food Studies Conference, University of Adelaide, Australia, 17-19 February 2014.

De Pinho H, Delobelle P, Lembani M, Zarowsky C, Ager A. Poster presentation: *Operationalizing a systems thinking approach: Using group model building to develop health systems interventions.* 3rd Global Symposium on Health Systems Research, Cape Town, South Africa, 30 September-3 October 2014.

Doherty T, Sanders D, Diaz T, Daviaud E, Zamasaya T. Oral presentation: *Community case management of childhood illness in Africa: Do people-centred delivery platforms contribute to the goal of universal access?* Special organised session and panel presentation at the 3rd Global Symposium on Health Systems Research, Cape Town, South Africa, 30 September-3 October 2014.

Doherty T, Sanders D, Zembe W, Daviaud E, Daniels K, Oliphant N, Rohde S, Besada D, Loveday M, Muniz M, Ngandu N, Kerber K, McKinney M, Van Damme W, Leon N, Nsiband D, Manda S, Zimasika T, Jackson D. Oral presentation: *Community case management of childhood illness in Africa: Do people-centred delivery platforms contribute to the goal of universal access?* 3rd Global Symposium on Health Systems Research, Cape Town, South Africa, 30 September-3 October 2014.

- Engebretsen IMS, Nankabirwa V, Diallo AH, **Doherty T**, Nankunda J, Fadnes LT, Ramokolo V, Ekström EC, **Jackson D**, Tyllieskar T, Sommerfelt H, Meda N, Tumwine JK. Oral presentation: *Early infant feeding practices in three African countries: Results from the Promise EBF trial promoting exclusive breastfeeding by peer counsellors*. International Council of Nurses, Granada, Spain, September 2013.
- Fatti G, Shaikh N, Eley B, **Jackson D**, Grimwood A. Poster presentation: *Adolescent and young pregnant women at increased risk of mother-to-child transmission of HIV and poorer maternal and infant health outcomes*. 20th International AIDS Conference, Melbourne, Australia, 20-25 July 2014.
- Hofmeyr GJ**. Oral presentation: *Evidence and global health: constraints and ethical dilemmas*. African Cochrane indaba, Cape Town, South Africa, 6-8 May 2013.
- Hofmeyr GJ**. Oral presentation: *Feasibility of a randomized trial of hormonal contraception and HIV*. North American Forum on Family Planning, Seattle, USA, 4-6 October 2013.
- Hofmeyr GJ**. Oral presentation: *Postpartum IUCD insertion*. TOGSICON International Conference on Evidence and Excellence in Obstetrics and Gynaecology, Thrissur, Kerala, India, 15-17 November 2013.
- Hofmeyr GJ**. Oral presentation: *Prolonged labour*. Pre-EMPT meeting, New Delhi, India, 11-14 November 2013.
- Hofmeyr GJ**. Oral presentation: *The unusual ectopic pregnancies*. TOGSICON International Conference on Evidence and Excellence in Obstetrics and Gynaecology, Thrissur, Kerala, India, 15-17 November 2013.
- Hofmeyr GJ**. Oral presentation: *Tricks of delivering the difficult shoulder*. TOGSICON International Conference on Evidence and Excellence in Obstetrics and Gynaecology, Thrissur, Kerala, India, 15-17 November 2013.
- Hughes G, **Puoane T**. Oral presentation: *Complementary and Alternative medicine utilization among stroke patients in Western Cape, South Africa - PURE cohort study*. American Public Health Association, New Orleans, USA, 15-19 November 2014.
- Jackson D**, **Doherty T**, Besada D, Daniels K, Daviaud E, Kerber K, Leon N, Loveday M, Manda S, McKinney M, Muniz M, Ngandu N, Nsibandé D, Oliphant N, **Rohde S**, **Sanders D**, **Van Damme W**, Zembe W. Oral presentation: *Case management and care-seeking for malaria, pneumonia and diarrhoea in six African countries after an integrated health systems strengthening Intervention*. American Public Health Association Conference, New Orleans, USA, 15-19 November 2014.
- Jackson D**, Singh Y, Goga A, **Doherty T**, Ijumba P, Hartley M, Friedman A, Tomlinson M. Oral presentation: *mHealth for maternal and child health (MCH) monitoring, evaluation and research*. American Public Health Association, Boston, USA, November 2013.
- Knight L**, Van Rooyen H, Lim J, Peck R. Oral presentation: *"I think it is right": Acceptability of an HIV self-test by lay users in KwaZulu-Natal, South Africa*. 20th International AIDS Conference, Melbourne, Australia, 20-25 July 2014.
- Knight L**, Yamin AE. Poster presentation: *Intergenerational impacts of maternal mortality in South Africa*. 20th International AIDS Conference, Melbourne, Australia, 20-25 July 2014.
- Knight L**. Oral presentation: *The links between poverty and maternal mortality in South Africa*. Colloquium on Poverty and Human Rights in Africa, Cape Town, 27-28 November 2014.
- Kruger A, **Puoane TR**, Chifamba J, **Igumbor E**. Oral presentation *Use of low-cost secondary prevention drugs in middle and low income countries in Southern Africa*. 141st American Public Health Association (APHA) Annual Meeting, Boston, USA, 2-6 November 2013.
- Lehmann U**. Poster presentation: *Researching people-centred health systems: the reward and challenge of co-production*. 3rd Global Symposium on Health Systems Research, Cape Town, South Africa, 30 September-3 October 2014.
- Lerebo W, **Jackson D**, **Zarowsky C**, Temmerman M, Callens S. Oral presentation: *Multilevel modelling approach to identify factors affecting HIV testing and counselling among women who were attending antenatal care services in Ethiopia*. 3rd International conference on Biometrics and Biostatistics, Washington DC, USA, October 2014.
- Magadzire B**. Oral presentation: *Frontline health workers as brokers in access to medicines: Lessons from rural and urban settings in South Africa*. Access to Medicines in Africa & South Asia (AMASA) International Dissemination Conference, London, UK, 18 October 2013.
- Magadzire BP**, Matthys T, Ward K. Poster presentation (in absentia): *Improving medicine supply chain efficiency through centralized dispensing of ART and other chronic medicines: A South African model*. 20th International AIDS Conference, Melbourne, Australia, 20-25 July 2014.
- Mathews V**. World Cafe in HSR Symposium: *Emerging Leaders in Health Policy & Systems Research: Assuming leadership in Health Policy & Systems Research: Personal reflections and lessons*. - 3rd Global Symposium on Health Systems Research, Cape Town, South Africa, 30 September-3 October 2014.
- Mathole T**, Mohlala MG, **Sanders D**, Dambisya, YM. Oral presentation: *South Africa's perspectives on the migration of highly trained health personnel: A qualitative study*. 2014 Scientific Symposium on Destination and Source Country Perspectives on Health Worker Migration, Ottawa, Canada, 15-19 September 2013.
- Mathole T**, **Zarowsky C**, **Jackson D**, **Sanders D**. Oral presentation: *Health systems failure in Eastern Cape province, South Africa: The case of Nokwanda*. 3rd Global Symposium on Health Systems Research, Cape Town, South Africa, 30 September-3 October 2014.
- Menda DM, **Mathole T**, **Jackson D**. Oral presentation: *Impact of essential newborn care group motivational interviewing in a maternity waiting home setting on mothers' knowledge and practice in rural eastern province of Zambia*. 3rd Global Symposium on Health Systems Research, Cape Town, South Africa, 30 September-3 October 2014.
- Mogapi T, **Mathole T**. Oral presentation: *Exploration of experiences & factors that influence enrolment to the community based TB care program in a rural area in Kweneng East District in Botswana*. 3rd Global Symposium on Health Systems Research, Cape Town, South Africa, 30 September-3 October 2014.
- Mohamed S**, **Struthers P**, **Stern R**. Poster presentation: *Pupil participation in the development of health promoting schools: a case study of three secondary schools in Cape Town, South Africa*. 21st International Union of Health Promotion and Education conference in Pattaya, Thailand, 25-29 August 2013 (E-poster).
- Mugwaneza P, Umubyeyi A, Humuza J, Mwanyumba F, Shema N, Mutabazi V, Nsanzimana S, Ribakare M, Irakoze A, Mukabayire O, Mutaganzwa E, Lombard C, Tsague L, **Jackson D**, **Lyambabaje A**. Poster presentation: *Effectiveness of Prevention of Mother-to-Child Transmission (PMTCT) Program at six weeks postpartum in Rwanda within one year implementation of Option B/ B+*. AIDS Conference, Melbourne Australia, July 2014.
- Naik R**, **Doherty T**, **Jackson D**, Zembe W, Feeley F. Oral presentation: *Factors associated with client linkage to care following home-based HIV counseling and testing: a prospective cohort study in rural South Africa*. IAS, Kuala Lumpur, Malaysia, June-July 2013.
- Naik R**, **Doherty T**, **Jackson D**, Zembe W, Feeley F. Oral presentation: *Linkage to care following home-based HIV counseling and testing: Finding a way forward*. 3rd International HIV Workshop on Treatment as Prevention, Vancouver, Canada, April 2013.
- Naik R**, **Doherty T**, **Jackson D**, Zembe W, Feeley F. Poster presentation: *Client experiences and perspectives on the linkage to care following home-based HIV counseling and testing: A qualitative study in rural South Africa*. IAS, Kuala Lumpur, Malaysia, June-July 2013.

Neupane S, Odendaal W, Friedman I, Jassat W, **Schneider H & Doherty T**. Poster presentation: *Paper and phone based monitoring and evaluation systems to support community-based services, South Africa*. Poster presented at the Canadian Conference on Global Health, Ottawa, Canada, November 2014.

Neupane S, Odendaal W, **Schneider H, Doherty T**. Poster presentation: *Comparing a paper based monitoring and evaluation system to a mHealth system to support the national community health worker programme, South Africa*. Pegasus conference: Peace, Global Health and Sustainability, Toronto, Canada, 2-4 May 2014.

Okop K, Lambert, V, Mweete N, **Puoane T**. Oral presentation: *Prevalence of health promoting behaviours among adults with cardiovascular disease - analysis of the PURE study cohort*. CHS Faculty Research Day, University of the Western Cape, Cape Town, South Africa, 18 September 2013.

Okop K, Levitt N, **Puoane T**. Oral presentation: *Predictors of excessive body fat in black women and men in a rural community and an urban township of South Africa*. CHS Faculty Research Day, University of the Western Cape, Cape Town, South Africa, 16 September 2014.

Olickers P, Nqana N, Godlwana L, **Scott V, Schaay N**. Poster presentation: *Intervening to improve local programme implementation: the value of a governance lens*. 9th Public Health Association of South Africa (PHASA) Conference, in collaboration with the African Federation of Public Health Associations (AFPHA), Cape Town, 26-27 September 2013.

Puoane T. Oral presentation: *New public health training: South African's perspective*. American Public Health Association: Think Globally and Act Locally. Boston, USA, November 2013.

Puoane T. Oral presentation: *Reducing child mortality and empowering women through improving hospital management for severe malnutrition in poor resource settings*. SANORD. The role of Universities towards the achievement of MDGs. Malawi, 1-4th December 2013.

Puoane T. Oral presentation: *Use of drugs for secondary prevention of cardiovascular diseases in South Africa and Zimbabwe - findings from the PURE study*. American Public Health Association: Think Globally and Act Locally. Boston, USA, November 2013.

Puoane T. Invited speaker: *How does culture influence perceptions about body weight, image and health? Views of men, women and girls*. Physical Activity and Sport for Health and Development in Africa, Maputo, Mozambique, 25-29 March 2014.

Ramokolo V, Goga A E, **Jackson D, Chhagan M, Doherty T**, Van den Broeck J. Oral presentation: *Risk factors for low birth weight in infants attending 6 weeks immunisation clinics, South Africa, 2012*. 6th Africa Nutritional Epidemiology Conference Accra, Ghana, 21-25 July 2014.

Ramokolo V, Goga AE, **Chhagan M, Doherty T, Jackson D**, Van den Broeck J. Oral presentation: *Low birth weight risk factors amongst HIV exposed and unexposed infants attending immunisation clinics, South Africa*. 6th Africa Nutritional Epidemiology Conference, Accra, Ghana, 21-25 July 2014.

Sanders D. Invited presentation: *Building capacity in research for health equity in Africa: Key challenges, innovations and priority actions*. School of Health and Related Research, University of Sheffield, 11 March 2013.

Sanders D. Keynote address: *Global health in the context of neoliberal globalisation: What is being done and what is to be done?* Postgraduate International Development Conference 'Development Frontiers: Towards a post-2015 agenda', University of Sheffield, 12 March 2013

Sanders D. Invited presentation: *Global health in the context of neoliberal globalisation: What is being done and what is to be done?* 46th Middle East Medical Assembly, Beirut, Lebanon, 9 May 2013.

Sanders D. Invited public lecture: *Africa's health crisis in the context of neoliberal globalization - What is being done and what is to be done?* Community Working Group on Health (CWGH) and Peoples Health Movement (PHM) Zimbabwe, Harare, 10 July 2013.

Sanders D. Invited presentation in round table discussion on primary health care - with co-chairs of Bill and Melinda Gates Foundation, Bill and Melinda Gates Foundation, Seattle, USA, 18 September 2013.

Sanders D. Invited presentation: *Global health in the context of neoliberal globalisation: What is being done and what is to be done?* Health Poverty Action, London, UK, 23 September 2013.

Sanders D. Invited presentation: *Capacity development for sustainable, universal and integrated health systems*. 5th Annual Population Health Implementation and Training (PHIT) Grantee meeting of Doris Duke Charitable Foundation, Bolgatanga, Ghana, 15 October 2013.

Sanders D. Invited plenary presentation: *Global health in the context of neoliberal globalisation: What is being done and what is to be done?* Conference: 'Re-Claiming And Re-Imagining Public Services Perspectives from the Global South', United Theological College, Bengaluru, India, 24-25 October 2013.

Sanders D. Invited plenary presentation: *Strengthening leadership capacity for health workforce development in Sub Saharan Africa: Strategy to manage impact of globalization on health workforce?* Prince Mahidol Awards Conference, Bangkok, Thailand, 27 January-1 February 2014.

Sanders D. Moderator parallel session: *Designing for impact: Achieving a more integrated approach to health professions education through integrating policies, training strategies and institutional collaboration*. Prince Mahidol Awards Conference, Bangkok, Thailand, 27 January-1 February 2014.

Sanders D. Oral presentation: *The history and evolution of comprehensive primary health care: A global perspective*. Symposium 'Primary Health Care and Healthy Communities: Models, Practices, Policies, and Politics', Flinders University of South Australia, Adelaide, Australia, 21 March 2014.

Sanders D. Invited public lecture: *The struggle for health equity: The responsibilities and possibilities for health professionals*. Southgate Institute for Health, Society and Equity, Flinders University of South Australia, Adelaide, Australia, 25 March 2013.

Sanders D. Oral presentation: *The history and evolution of comprehensive primary health care: A global perspective*. Executive Management of Central Australian Aboriginal Congress, Alice Springs, Australia, 26 March 2014.

Sanders D. Invited plenary presentation: *South Africa's health crisis: Key actions for a people-centred health system based on primary health care*. Municipal Services Project International Conference: 'Putting Public in Public Services: Research, Action and Equity in the Global South', Cape Town, South Africa, 16 April 2014.

Sanders D. Invited presentation: *Global health in the context of globalisation: Challenges, opportunities and key curriculum issues*. International Conference on Global Health and Sustainable Development: Challenges, Opportunities and Implications for Higher Education, American University of Beirut, Lebanon, 2 June 2014.

Sanders D. Invited panellist in session: *Bending the curve in Africa's nutrition transition: Opportunities, actions and partnerships for mitigating looming public health risks*. International Food and Agribusiness Management Association (IFAMA) Conference, Cape Town, South Africa, 17 June 2014.

Sanders D. Invited plenary presentation: *Building capacity to address malnutrition in Africa: Challenges and experiences*. 6th Africa Nutritional Epidemiology Conference, Accra, Ghana, 23 July 2014.

Sanders D. Invited commentary on health system strengthening. 6th Annual Population Health Implementation and Training (PHIT) Grantee meeting of Doris Duke Charitable Foundation, Cape Town, South Africa, 26 September 2014.

Sanders D. Invited keynote presentation: *Primary health care, health systems and community health workers: History, evolution and revitalisation*. Annual Scientific Meeting of the Dutch Society for Tropical Medicine (NVTG), Amsterdam, Holland, 22 October 2014.

- Sanders D.** Invited presentation: *The political economy of health and health care in (South) Africa- with a focus on women.* Afrikagrupperna Regional Thematic Conference on HIV and Sexuality, Johannesburg, South Africa, 28 October 2014.
- Sanders D.** Invited presentation: *Building capacity to address malnutrition in Africa: Challenges and Experiences.* Symposium on Sustainable Indigenous African Diets for Food and Nutrition Security, convened by African Union Commission and FAO, Kinshasa, Democratic Republic of Congo, 2 November 2014.
- Sanders D.** Invited closing remarks: American University of Beirut, 60th Anniversary Scientific Conference "Public Health in Contexts of Uncertainty", Beirut, Lebanon, 5-6 December 2014.
- Sanders D.** Invited public lecture: *Health in South Africa since 1994: Achievements and challenges. Will current policy initiatives resolve the crisis?* Doctor of Public Health Programme, City University of New York, New York, USA, 10 December 2014.
- Sanders D.** Invited public lecture: *Global Health in the context of globalisation: Challenges and key actions necessary.* University of Missouri, Kansas City, USA, 11 December 2014.
- Sanders D.** Invited teaching session: *Global Health in the context of globalisation: Challenges and key actions necessary.* Cerner Certificate in Health Care Leadership in Partnership with UMKC Bloch School, Kansas City, USA, 12 December 2014.
- Sanders, D.** Invited presentation at roundtable convened by National Department of Health: *The South Africa health reforms 2009 – 2014: Moving towards universal coverage.* 3rd Global Symposium on Health Systems Research, Cape Town, South Africa, 30 September-3 October 2014.
- Schneider H,** Reid S, Dudley L, English R, Nxumalo N, **Schaay N,** Orgill M, Tabana H, Padayachee T. Poster presentation: *The governance dimensions of CHW programmes: Case studies of the provincial implementation of PHC Outreach Teams in South Africa.* 3rd Global Symposium on Health Systems Research, Cape Town, South Africa, 30 September-3 October 2014.
- Schneider H.** Invited seminar speaker: *Contemporary health sector challenges and reforms in a context of UHC.* Public Health Foundation of India, New Delhi, India, 28 July 2014.
- Schneider H.** Invited speaker: *Introduction to UWC SOPH and PHC Re-engineering,* ITM Seminar, Antwerp, Belgium, 3 May 2013.
- Schneider H.** Panellist: *The future of health policy and systems research in India: Knowledge for systems transformation.* Public Health Foundation, New Delhi, India, 31 July 2014.
- Schneider H.** Seminar: *The PHC in South Africa: Progress, challenges and directions of change.* Public Health Resource Network, New Delhi, India, 29 July 2014.
- Schneider H.** Oral presentation: *The Introduction to CHEPSAA, HPSR and related course development.* Keystone Workshop, Public Health Foundation of India, New Delhi, India, 31 July 2014.
- Schneider H.** Oral presentation: *The What has been overlooked in current dialogue on SDGs? A conversation among academic public health institutions around the post-2015 global agenda: are we working together globally?* American University of Beirut, Beirut, Lebanon, 8 December 2014.
- Scott V, Schaay N,** Olkers P, Nqana N, **Gilson L, Lehmann U.** Poster presentation: *Exploring governance at the level of implementation: managing relationships.* 3rd Global Symposium on Health Systems Research, Cape Town, South Africa, 30 September-3 October 2014.
- Scott V.** Oral presentation: *Information to support people-centred human resource management.* 3rd Global Symposium on Health Systems Research, Cape Town, South Africa, 30 September-3 October 2014.
- Stinson K, Mdebuka H, Coetzee D, Boateng M, Schneider H.** Oral presentation: *Strengthening routine data reporting decreased missed opportunities in the PMTCT cascade in the Free State Province, South Africa.* 17th ICASA Conference, Cape Town, South Africa, 7-11 December 2013.
- Stinson K, Van Zyl D, Mdebuka H, Zeelie JP, Boateng M, Colvin C, Johnson L, Coetzee D, Schneider H.** Poster presentation: *The Impact of community health workers (chws) and improved monitoring on PMTCT programmes in the Free State Province – A randomised control trial (RCT).* 17th ICASA Conference, Cape Town, South Africa, 7– 11 December 2013.
- Struthers P,** Moolla N. Poster presentation: *Building health promoting schools through whole school development.* International Union of Health Promotion and Education (IUHPE), Pattaya, Thailand, 25-29 September 2013.
- Struthers P.** Oral presentation: *Health promoting schools.* Inter-agency Task Team of (IATT) of UNAIDS (convened by UNESCO). University of the Western Cape, South Africa, 25 February 2014.
- Struthers, P.** Oral presentation: *Participatory approaches in working with the school community.* NCD workshop, International Union of Health Promotion and Education (IUHPE), Pattaya, Thailand, 25-29 September 2013.
- Swart C.** Oral presentation: *Health policy and politics in diversifying societies: Asian and Global Issues.* Ritsumeikan University, Kyoto, Japan, 28-29 November 2014.
- Swart C.** Oral presentation: *Contending interpretations of the rule of law in South Africa.* International Political Science Association World Congress 2014, Montreal, Canada, 19-24 July 2014.
- Tsague L, Mugwaneza P, Lyambabaje L, Umubyeyi A, Humuza J, Mwanyumba F, Shema N, Mutabazi V, Nsanzimana S, Muhayimpundu R, Irakoze A, Mukabayire O, Mutaganzwa E, Lombard C, Mbori-Ngacha D, Jackson D.** Poster presentation: *Option B in Rwanda: determinants of uptake of a complete PMTCT cascade in the national program (2010-2012).* AIDS Conference, Melbourne Australia, July 2014.
- Uwimana J.** Oral presentation: *Use of the Continuous Quality Improvement approach to enhance HIV/TB case finding, diagnosis and treatment in Maternal and Child health services in a rural district, South Africa.* 17th ICASA Conference, Cape Town, South Africa, 7-11 December 2013.
- Uwimana J.** Poster presentation: *Community-based intervention to enhance provision of integrated tuberculosis / HIV and prevention of mother-to child-transmission services in South Africa.* ADDRF Scientific Symposium for Emerging Scholars in Health, Nairobi, Kenya, 15-17 July 2013.
- Van Wyk, B.** Poster presentation: *Patterns of adherence: Implications for the massification of antiretroviral treatment rollout.* AIDS Conference, Melbourne, Australia, 20-25 July 2014.
- Van Wyk, B.** Poster presentation: *Effectiveness of the mobile HIV/ AIDS treatment teams in KwaZulu Natal, South Africa.* AIDS Conference, Melbourne, Australia, 20-25 July 2014.
- Zarowsky C.** Invited oral presentation: *HIV and AIDS Research in Complex Contexts of Inequality: Joining up, scaling up, or giving up?* CR-CHUM Seminar, Université de Montreal, 5 September 2013.
- Zarowsky C.** Invited oral presentation: *What's HIV Got To Do With It?* for IAS Satellite session, "Social Science and ART Scaleup". 17th ICASA Conference, Cape Town, South Africa, 7-11 December 2013.

Acknowledgements

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