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THE INTERNAL RECONCILIATION PROCESS AT WITS

To the Editor: In your July editorial¹ you suggest that the Wits Internal Reconciliation Commission conducted in 1998 and 1999 was 'too timid and too inward looking, and lacked the wholehearted support of the Faculty'. You suggest that people such as Dr Inderlal were not touched by this process, and you contrast this with a process at the University of Natal which 'sought to track down and gather as many old graduates as it could find'.

Unfortunately your analysis is based on ignorance both of the process at Wits and of its impact. The process involved the appointment of external commissioners, two of whom were black Wits medical graduates from the 1940s and 50s and one of whom was a Human Rights Senior Counsel. We sent e-mails and letters to every alumnus for whom we had an address, going back to 1940. We advertised in the SAMJ inviting any past graduates or staff to make submissions relating to racial discrimination or human rights abuses that could in any way be related to the Wits Faculty of Health Sciences.² All current staff and students were also invited to make submissions and to attend the hearings.

The final report was extensively discussed by the Faculty and formally adopted by the Faculty Board without opposition. Having adopted the report, the Faculty Board formulated an apology which was presented at a public assembly of the Faculty, in the presence of the Press, past students and staff. At the assembly, the apology was signed by the present and four previous deans of the Faculty. We therefore challenge the suggestion that the process lacked wholehearted internal support. The apology and a commemorative statue are on permanent display at the Medical School entrance and in order to further publicise the findings of the report, it was published and distributed in large numbers and is also available on the Faculty's website at the following address:

http://www.wits.ac.za/fac/med/medfac.html.

Regarding its impact, the process at Wits has been particularly important in helping us address what was perceived by black students and staff to be a hostile and alienating environment within the university.

Many white staff had viewed Wits as an island of liberalism within the oppressive apartheid state, presenting academic freedoms and opportunities for which black academics should be appreciative rather than critical. This complacency was shaken by the Internal Reconciliation Commission, which brought to the surface the perceptions and experiences of black students and staff during the apartheid era. For example, the extent to which black staff had been denied opportunities to pursue research and gain promotion and the impact this had on their careers became much more widely appreciated. This change in perceptions regarding the University's track record

becomes the basis on which affirmative action policies can be built, with respect to both students and staff. We believe there is much greater acceptance within the Faculty of the need for redress as a result of the Internal Reconciliation Process.

Max Price Dean

Yosuf Veriava Chairperson, Equal Opportunities Committee

Faculty of Health Sciences University of the Witwatersrand Johannesburg

Ncayiyana DJ. Pain that will not go away. S Afr Med J 2001; 91: 530.

Professional Appointments/Services. S Afr Med J 1997; 88(5): 15. 2.

PS. A copy of the report is enclosed for Dr Inderlal, whose real name remains unknown to us.

A PLATFORM FOR GENOMICS IN SOUTH AFRICA

To the Editor: Since the beginning of the Human Genome Project, technological development has led to the sequencing of the genomes of a growing list of organisms. This has prompted a new approach to life sciences research which is large in scale and wider than traditional biology in its aims and scope. It provides fresh insights into important questions about the relationships between organisms, for instance why one strain of TB is resistant to drugs while another is not or why a particular plant is drought-resistant. Subsequently the best way to manipulate, eradicate or make vaccines for a specific organism can be identified. Technology is now sufficiently advanced, and affordable, that it is realistic to explore genomic systems within developing countries, as evidenced by the success of the innovative genomics initiative in Brazil. Although genomic projects and capacity have been established, South Africa currently has no concerted national genomics programme, and without one we are likely to become marginalised in the ability to utilise the new biology and make the best use of our natural resources.

As a nation, South Africa has significant social, health and economic problems. We do not have a large science or research budget, and yet have a pressing need for the ability to discover and implement findings that can be made using genomic tools and analyses. Discoveries that pertain to characterisation and exploitation of our microbial, animal and plant biodiversity (many genomes), human diversity (ancient populations), agricultural resources (desiccation-tolerant plants), to pressing health problems such as HIV (many genomes), malaria and TB (variant genomes) are powerful examples of areas that will

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benefit directly from application of genomics in South Africa.

A meeting of a group of international and South African life scientists interested in genomics took place recently at the University of the Western Cape to explore possible responses of the South African scientific community to the emergent opportunities in the field of genomics. Participating scientists agreed that the establishment of a national genomics platform would be a necessary first step and that this platform should have as its mission: (i) to establish a national genome sciences group made up of scientists who perform genomics or who are moving in their work towards performing genomics; (ii) to link the institutions hosting group members by a formal agreement; (iii) to publish a listing of equipment and resources that are in use or have the potential for use in genomics; (iv) to develop capacity in genomics and bioinformatics; (v) to develop the basis for an integrated platform for genomics within South Africa by working together with local and overseas agencies; vi) to use the platform to platform large-scale studies on locally relevant diseases, crops, fisheries and biodiversity; (vii) to develop funding for the national platform; (viii) to explore and prioritise projects and candidate genomes for sequencing and analysis; and (ix) to promote the concept of genomics within the South African research community.

For more information or to be added to an e-mail discussion list please e-mail <u>cathal@sanbi.ac.za</u>, or write to GenomeAfrica, SANBI, University of the Western Cape, Private Bag X17, Bellville, 7535.

Win Hide, Valerie Mizrahi, B Venkatesh, Sydney Brenner, Andrew Simpson, Greg Blatch, Himla Soodyall, Katherine Denby, Mike Wingfield, Brenda Wingfield, Paul van Helden, Raj Ramesar, Rosemary Dorrington, Janet Kelso, Ekow Oppon, Elizabeth Goyvaerts, Michele Ramsay, Etienne de Villiers, Carel van Heerden, Basil Allsopp, Cathal Seoighe

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A PATHOLOGICAL SERVICE?

To the Editor: It is ironical that Professor Van Niekerk' refers to the proposed formation of the National Health Laboratory Service (NHLS) as 'de facto nationalisation', while the concern of the labour unions involved in the negotiations is that this process represents another example of *privatisation*. Could it be that one's background influences (and sometimes distorts) the way one views things? To allow you to assess my comments, here is my background. I am a pathologist working at Groote Schuur Hospital with a joint appointment at the University of Cape Town. I am not employed by, nor do I have any official standing with, the NHLS Task Team. My comments are offered as the personal views of one whose future is directly affected by the proposed changes. I also like to think that I have a sincere desire to see an improved laboratory service for this country while maintaining good teaching and research standards in the pathology disciplines. (My personal bias on the nationalisation/privatisation issue, by the way, is that I also tend to view nationalisation as a bogey word).

To deal with Professor van Niekerk's points one by one:

Process too rushed. This process has been dragging on for so long that I have difficulty remembering when it actually started. I certainly have formal discussion documents and minutes of meetings organised by the Provincial Administration of the Western Cape (PAWC) dating back to July 1999, and the process had been going for some time before those meetings were commenced. Is more than two years 'rushed'? The idea of a rationalised service is not new and was extensively discussed in the early nineties.

Forced monopoly. Perhaps Professor Van Niekerk would like to explain what choice the public health services have at present as far as pathology services are concerned. They either purchase these services from the South African Institute for Medical Research (SAIMR) or they run their own laboratories, in the latter instance often without any clear idea of what these services are costing. The NHLS will simply continue the existing practice — but this preferred provider status is not guaranteed forever and was granted to allow the new organisation to find its feet.

Provinces lose autonomy. This is really a political issue relating to the Constitution. The pathologists in the Western Cape have pushed for the greatest possible provincial autonomy within the NHLS since the beginning of negotiations and still feel this would be desirable.

Academic activities suffer. The academic (university) and service (provincial) staff are separated at present. This is not something new that the NHLS will introduce. While provincial staff enjoy joint appointments in universities, Professor Van Niekerk must surely be aware of the increasing pressure from provincial governments to credit staff only for hours spent on service work. There is also pressure to clearly separate service from teaching and research. This process is occurring quite independently of the NHLS. New agreements are being negotiated for both provincial and future NHLS employees. If these agreements are wisely constructed there need be no detrimental affect on academic activities.

Conditions of service not established. Everyone transferred to the NHLS will maintain their existing conditions of service until negotiations for new conditions are completed. Obviously these negotiations had to wait until there was an employer with whom to negotiate. The Board and executive staff of the NHLS have only recently been appointed. Yes, the negotiations are likely to be difficult, but that is not unusual when labour



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