

**Graduation Ceremony of the  
Colleges of Medicine of South Africa**  
Jameson Hall, University of Cape Town, 20 October 2011  
**Address by Prof H Russel Botman,  
Rector and Vice-Chancellor of Stellenbosch University,  
and a Vice-President of the Association of African Universities**

Thank you, [chairperson]. Good evening, everyone.

- **Prof [Anil] Madaree**, [President of the CMSA]
- Members of Senate and Officers of the Colleges of Medicine of South Africa
- Graduates and their family members and friends

... ladies and gentlemen, thank you for this opportunity.

As you can imagine, I attend a lot of graduation ceremonies, but the excitement never wears off. I always find it energising to be surrounded by talented and hardworking people who are passionate about their particular field.

It is also uplifting to be among people who value education, regardless of how many certificates already hang on their walls.

So, congratulations to all of you. I think you all deserve a round of applause!

There's another reason why I cherish this opportunity, and that is that health care is of vital importance to the welfare of society, as you well know. You have worked hard to obtain a specialist qualification in order to be of service to your patients. As you stand poised to enter this future, I want to take you back in time – more than two thousand years, to Ancient Greece.

I want to refer to one of the towering figures of that time – no, not Hippocrates, though a reference to a great physician would certainly have been appropriate at this event.

Instead, I want to quote a great mathematician and engineer – Archimedes, the man who explained the workings of levers. He is famously said to have remarked:

*Give me a place to stand on, and I will move the Earth.*

With this statement he demonstrated the power of science. He explained how it is that by using pulleys, we can lift objects far too heavy to move with brute force alone.

But he also set an agenda for science that remains relevant to this day – to move the Earth ... not literally, of course, but figuratively. In other words, to achieve the "impossible". He challenges us to use our theoretical and practical knowledge and apply it to go beyond our limits.

Is that not what you are doing as medical and dental specialists of various kinds? I think so.

Now, a particular challenge that we face in South Africa is to extend the limited resources at our disposal to everyone, especially those margins of society. Many people – far too many – fall into this category. But let me focus on one group – people who live in rural areas, far from better resourced urban centres.

Reaching out to them is certainly something that needs to be done urgently. Nearly half of South Africa's population, about 46%, live in rural areas, yet these areas are relatively underdeveloped compared to urban areas.

Despite romantic notions of the “simple, country life”, the harsh reality is that far too many people in rural areas suffer the burden of poverty – and everything that goes with it, such as limited access to crucial health care.

This is recognised in the government's Medium-Term Strategic Framework, which makes rural development a strategic priority.

To my mind, a rural focus falls well with the ambit of the Colleges of Medicine of South Africa, and by extension, its graduates. The CMSA states in its literature that it is “sensitive to changing health needs in the country”, and also that it is “committed to improving the health of all the people of South Africa”. I am certain most of you would agree with these sentiments.

At Stellenbosch University, we also support this approach. We have incorporated a rural focus into all facets of our key activities – be that research, teaching and learning, or community interaction.

This is in line with how we see the role of universities – and of science – in society. Like the Academy of Science for South Africa, we believe in “science for society”.

That means we have to go beyond excellence to also focus on relevance. We have to move from success to significance.

Let me give you a practical example. As you might know, we launched Stellenbosch University's HOPE Project in July last year. Two of its five themes are (1) the eradication of poverty, and (2) the promotion of human health and dignity. These themes find expression in a range of initiatives across the University.

One of these is the Ukwanda Rural Clinical School being established in Worcester by our Faculty of Health Sciences, in partnership with the Provincial Government of the Western Cape. Worcester is where the school's hub will be, but it will also have “spokes” in surrounding towns, such as Ceres, Robertson, Caledon, Hermanus and Swellendam.

The idea with the Ukwanda Rural Clinical School is to train more healthcare professionals by focusing on underserved rural sites. This will benefit local communities, and will also enrich our academic teaching and research.

Professor Hoffie Conradie, the Director of the Ukwanda Centre for Rural Health – of which our new Rural Clinical School forms part – conducted research on this matter. The rural clinical

school concept stems from experiences in Australia and Canada, where it was used to address the rural staffing crisis in the health system.

It was found that health profession students recruited from rural areas were more likely to return to settle down and work in rural areas after qualifying. And even those originally from urban areas were more willing to work in rural communities after prolonged exposure to such settings during their training.

Currently, our students studying to become health professionals do get rural exposure, but to a limited extent. They do part of their practical training in outlying areas for two to six weeks in five undergraduate categories – medical, physiotherapy, occupational therapy, human nutrition, as well as speech, language and hearing students.

In the expanded model, from this year, some students spent a year out there, doing their rotations in various specialist departments at the Worcester Regional Hospital. Others went to district hospitals situated in the “spoke” towns, where they did an integrated year with a family physician. At the same time, shorter clinical training rotations in various areas are continuing.

The benefit for the community is that through their experiential training, our students will be assisting local health practitioners to provide health services in hospitals, clinics, mobile health centres, schools, old age homes, private residences and the like.

As far as we know, this is a first in South Africa and possibly the rest of the continent as well. Construction of the R60 million Ukwanda Rural Clinical School’s hub in Worcester is almost finished, and we hope this will inspire similar initiatives elsewhere.

Research by the Department of Labour shows that South Africa has a shortage of medical doctors, particularly in the public sector and rural areas. Compounding this problem is the fact that enrolments at the country’s medical schools are growing too slowly.

Dr Frans Krige, the project manager of the new Ukwanda Rural Clinical School, tells me it will enable us at Stellenbosch to increase our intake of medical students by 30 a year. This year, already, we took in an additional 20 medical students, plus 20 more for professions allied to medicine.

Ladies and gentlemen, I hope you find what we are doing to improve health care in South Africa as inspiring as I find your commitment to this cause. Congratulations, again.

Let us now join hands to provide the people of our country – and continent – with the specialist health services they need. Let us find solid ground, dig in our levers and “move the Earth”.

I thank you.