Stellenbosch University: Africa’s first WHO Bioethics Collaborating Centre

Stellenbosch University (SU)’s Centre for Medical Ethics and Law became Africa’s first World Health Organization (WHO) Bioethics Collaborating Centre in April this year, after several years of working with the global body in vital areas such as vaccine policies, bio-banking and research ethics.

It joins a prestigious international network of university bioethics centres in Toronto, New York, Zurich, Singapore, Miami and Melbourne which, among other things, informs the WHO’s ethical understanding and response to global humanitarian crises such as the recent Ebola outbreak in West Africa. The collaboration will be renewable and its academic staff served on various WHO advisory boards and on several working groups, the most prominent being paediatric and drug-resistant tuberculosis (TB).

The Centre began in 1997 when she was a postgraduate student and research assistant at the University of Medicine and Health Sciences in South Africa. The 1990s, with the current agreement being to stretch over many decades. Its academic staff served on various WHO advisory boards and on several working groups, the most prominent being paediatric and drug-resistant tuberculosis (TB).

It was established in 2003, was one of the oldest and most prestigious in Africa, having built an excellent global reputation for empirical and conceptual research and medical ethics teaching, including a postgraduate diploma in research ethics, funded by the US National Institutes of Health. Prof. Jimmy Volmink, Dean in the Faculty of Medicine and Health Sciences, said that SU had a ‘long and proud history’ of partnership with the WHO, stretching over many decades. Its academic staff served on various WHO advisory boards and on several working groups, the most prominent being paediatric and drug-resistant tuberculosis (TB).

The pivotal and founding local event for bioethics in SA was the death of Steve Biko in 1976, these deaths made it clear that the rhetoric of government leaders about the intended justice of the homeland system and other alleged justifications for apartheid were bogus and that the system was morally corrupt with its demise ‘a mere matter of time’. The Biko affair highlighted the importance of a moral orientation in the practice of medicine and directly contributed to a reorganisation of the institutionalised medical profession in SA. Greater attention to ethical responsibilities towards prisoners, detainees and hunger strikers ensued, while the public confession of guilt by the district surgeon who bore major responsibility for Biko’s medical care emphasised the need to maintain professional independence in the face of state security and other coercive pressures.

Van Niekerk told the gathering that bioethics, while not progressing equally across medical faculties, had increased profoundly in the past 20 years, particularly since it was introduced into healthcare worker undergraduate education in the late 1990s. HIV/AIDS had raised a ‘host’ of bioethical issues, not to mention TB and malaria, making SA a leading international destination for biomedical researchers. He paid tribute to the contribution of Ethics SA’s Prof. Willem Landman and his empirical research on the state of the medical profession in SA and the appalling conditions in several major hospitals, state of the medical profession in SA and the appalling conditions in several major hospitals, and said that Ethics SA had also changed the medical faculties, had increased profoundly in the past 20 years, particularly since it was introduced into healthcare worker undergraduate education in the late 1990s. HIV/AIDS had raised a ‘host’ of bioethical issues, not to mention TB and malaria, making SA a leading international destination for biomedical researchers. He paid tribute to the contribution of Ethics SA’s Prof. Willem Landman and his empirical research on the state of the medical profession in SA and the appalling conditions in several major hospitals, state of the medical profession in SA and the appalling conditions in several major hospitals, and said that Ethics SA had also changed the SA medical profession.

Volmink singled out philosophy professor Anton van Niekerk, Director of SU’s Centre for Medical Ethics and Law, as one of the most important figures in bioethics in SA, saying he played a leading role in teaching and mentoring several clinicians/bioethicists who contribute to teaching in the Centre.

Van Niekerk told the gathering that bioethics had (belatedly) come a long way since Chris Barnard’s heart transplant, which would have ‘failed dismally’ to clear today’s ethical hurdles (i.e. the definition of death). ‘Bioethics was not taken seriously before the 1980s [in SA]; the attitude was that it was important, but taught by the bedside with no serious need for the philosophical underpinnings – you could get around it by simply making it a practical subject.’ The pivotal and founding local event for bioethics in SA was the death of Steve Biko in December 1977.

Together with the Soweto uprising in June 1976, these deaths made it clear that the rhetoric of government leaders about the intended justice of the homeland system and other alleged justifications for apartheid were bogus and that the system was morally corrupt with its demise ‘a mere matter of time’. The Biko affair highlighted the importance of a moral orientation in the practice of medicine and directly contributed to a reorganisation of the institutionalised medical profession in SA. Greater attention to ethical responsibilities towards prisoners, detainees and hunger strikers ensued, while the public confession of guilt by the district surgeon who bore major responsibility for Biko’s medical care emphasised the need to maintain professional independence in the face of state security and other coercive pressures.

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Moodley said her journey to Director of the Centre began in 1997 when she was a
new consultant to Prof. Pierre de Villiers, then head of the Department of Family Medicine at SU. ‘He gave me a huge pile of folders and told me to prepare two ethics lectures for fifth-year medical students, unschooled as I was in medical ethics. I took it on as a challenge.’ By the following year she realised she needed ‘much greater depth of knowledge in ethics’ and studied philosophy under Van Niekerk, ‘thinking about value systems and morality’, before going to Columbia University in New York as a Fogarty Fellow. In the midst of the Twin Towers 9/11 tragedy, she studied public health ethics with Prof. Ron Bayer (who now chairs the global network of WHO collaborating centres in bioethics). He encouraged her to start working on her doctorate. Upon her return to SA she approached Prof. Wynand van der Merwe, then Dean of SU’s Faculty of Medicine, suggesting the establishment of a SU Centre for Bioethics. He and Prof. Barney de Villiers (now deceased) made the Centre into a reality. Together with Profs Willie Pienaar and Sharon Kling, Moodley has built a strong and dynamic undergraduate ethics programme, with several fifth-year medical students today regarding their ethics block as ‘among the most stimulating’ because it teaches them ‘to think and challenge’.

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DOI:10.7196/SAMJ.9748