

THE ACADEMY AND THE COLLEGE

A SHORT HISTORY OF ACADEMIC GENERAL
PRACTICE/FAMILY MEDICINE IN SOUTH AFRICA
1958 – 2000

by

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FOREWORD

Family Medicine in South Africa in the year 2001 is a well-developed, strong and growing discipline. There are Departments of Family Medicine at all eight Faculties of Health Sciences, teaching extensively at undergraduate levels, and running a large number of postgraduate programmes for family/general practitioners. There is a growing body of research supporting the discipline, with new projects initiated continuously. Family practitioners are leading the profession on medico-political, policy making, academic and statutory levels. The extraordinary successful 16th WONCA World Congress for Family Doctors held in Durban in May 2001 and the election of Prof Bruce Sparks as the WONCA President-Elect (World Organisation of National Colleges and Academies of Family Doctors) demonstrate South African family practice's prominent role in Family Medicine.

All of this however neither happened overnight nor by itself. The history of academic family/general practice in South Africa has been a long and uphill struggle to receive recognition for Family Medicine as a discipline in its own right. Many people devoted their lives to this cause, notably Dr Basil Jaffe. After graduating at the University of Cape Town in 1946, Dr Jaffe did three years of postgraduate training in Britain obtaining the DCH (RCPS). He became involved in academic general practice in South Africa in 1962 when he was elected member of the Cape of Good Hope Faculty of the College of General Practitioners. From this day onwards Dr Jaffe worked tirelessly towards the development of Family Medicine. One of his major achievements was to become the founding Chairman of the SA Academy of Family Practice/Primary Care from 1980 - 1984, and President of the

organisation from 1984 - 1988. He delivered a number of important papers and published amongst others on the content and attitudes of general practice. Dr Jaffe was extensively involved in teaching and received a number of honorary awards including Elected Fellow of the RCGP, Honorary Life Member of the NGPG, Distinguished Family Practitioner Medal of the University of Cape Town, and Honorary Life Member of the SA Academy of Family Practice/Primary Care.

Dr Jaffe has now made yet another valuable contribution to the family practice community by compiling this fascinating history of academic family/general practice in South Africa from 1958 to 2000. He tells the story from his personal perspective and with individualised emphasis, which makes it a very interesting piece of work. In this format the document contains important insights into the intricacies of family/general practice as it stands in South Africa in the year 2001.

I want to thank Dr Jaffe for this huge task. This document provides family practice in South Africa with a valuable resource on its history, and events to keep in mind in the mapping out of our future.

*Prof Marietjie de Villiers
National Chairperson
SA Academy of Family Practice/Primary Care
2001*

THE EARLY YEARS

Many members of the Academy are puzzled by the existence of two academic organizations of general/family practice in our Country. Even stranger may appear the fact that some of our older practitioners in addition belong to a third body - the Royal College of General Practitioners. This apparent anomaly requires an explanation, which leads us to the beginnings of academic family medicine.

The College of General Practitioners came into existence in Britain in 1952 in the face of opposition from the three specialist Royal Colleges¹. It came about through the efforts of a group of outstanding general practitioners led by John Hunt who believed that the growth of specialization had heightened the need for the well-trained generalist.

Specialization was the inevitable consequence of the avalanche of knowledge and technology which had gathered momentum during the 20th Century. However, it had induced unintended consequences for the patient, society and the profession. Specialist medicine with its technical armoury is expensive for any society as is the shift from the home to hospital care. Specialism also tended to fragment medical care with its emphasis on disease rather than the patient. For the GP there was a growing frustration at the erosion of his traditional role. Nowhere was this process more serious than in the United States and it was here that practitioners first got together to form the American Academy of General Practice in 1947, later to be renamed the American Academy of Family Physicians.

Here, in South Africa the state of general practice was relatively healthy. Our problems were largely of maldistribution, geographic and socio-economic, but there were a number of outstanding doctors practising in urban and rural areas. They included ex-servicemen who had delayed their studies and careers to take part in the 2nd World War, men of maturity, authority and idealism. Developments in Europe and North America were being observed and communication was set up with the young colleges, particularly the British College, in view of our traditional links with British medicine.

General practitioners were influential in the Medical Association (MASA) at the time and persuaded the Association to use some of the profits of a recent congress to invite the President of the British College to South Africa. Thus in 1958, Dr Ian Grant undertook a tour of this country and encouraged our colleagues in the main centres to create faculties affiliated to the British College. So the first academic organization of our discipline was set up as the Cape of Good Hope & Witwatersrand Faculties of the College of General Practitioners in 1958. The Orange Free State, Eastern Cape and Natal Faculties followed shortly. Most

of the leading figures at the time were active members of MASA. Drs N Levy and FE Hofmeyr in the Cape and W Miller in the Transvaal were prominent in setting up the new faculties which followed closely the British pattern. The central aim of the College was to raise and maintain the standard of general practice/family medicine through education. Dr Rex Wilson was prominent in the early years in the exposition of the philosophy and in the teaching of family medicine, maintaining close links with teachers abroad. Visiting lecturers included John Hunt, Founder of the College who later became Lord Hunt of Fawley and Prof van Es of Utrecht, Holland where the creation of academic university departments took place early. Donald Rice, Secretary General of the Canadian College was another early visitor.

Continuing medical education had hitherto been conducted by MASA and the existent medical schools, i.e. Cape Town, Witwatersrand and Pretoria. This activity was gradually taken over by the Faculties of the College and the choice of subject matter, format and lecturers became our responsibility. To meet the needs of our rural colleagues, Upjohn provided a yearly grant to take teams of lecturers into rural areas. Sponsorship was also obtained for the audio-visual unit which was initiated by Dr Paul Oates. The unit was based on the British model that had been created by John and Valerie Graves of Essex whom he visited. Tape recordings were made of relevant lectures and slides were copied. This proved to be a highly successful learning tool and was particularly useful for rural colleagues.

From the beginning it was recognised that undergraduates should gain some insight into the work and values of the general practitioner. Dr HRB (Rex) Wilson was a pioneer of this aspect of our work. Contact was made directly with the student body at the University of Cape Town (UCT) and students were offered a period of attachment to a practitioner in Cape Town or in the adjacent rural area. In the latter case they were accommodated in the doctor's home or the local hospital. The student attachment scheme proved highly successful and stimulated much enthusiasm from the students who appreciated the warmth of the doctor-patient relationship and the consultation atmosphere. It was felt, however, that there should be some official recognition of family medicine and from an early stage approaches were made to the medical school for the establishment of a

professorial department. These approaches fell on deaf ears but we were invited to give lectures and seminars in various departments at UCT.

Meanwhile, during the nineteen-sixties major events were occurring which influenced the development of our discipline. In 1963 Richard Scott was appointed Professor of General Practice in Edinburgh - the first such appointment anywhere.

In 1966 The Lancet published the seminal article by Ian McWhinney, "General practice as an academic discipline"². He defined the criteria for acceptance as a discipline "a unique field of action, a defined body of knowledge, an active area of research and a training which is intellectually rigorous". McWhinney, who visited our shores on two occasions, was appointed to the Chair of Family Medicine at London, Ontario, the first such appointment in North America.

In 1968 The Royal Commission on Medical Education published its report also known as the Todd Report³. It recommended a period of "general professional training" followed by a further specialist training for all doctors including those choosing to enter general practice.

In 1967 the College was granted a Royal Charter and in the same year Drs FE Hofmeyr, N Levy and W Miller were elected Fellows of what was now The Royal College of General Practitioners, in recognition of their pioneering effort. In South Africa, Howard Botha was appointed the first Professor of Family Medicine in 1967 at Pretoria University. Later an independent Department was established which offered a Master's degree in family medicine. Graduates of this Department provided some of our early academics.

In 1968 the UCT Medical Students' Council invited the Cape of Good Hope Faculty to present a three day conference on general practice. Professor H Botha was the guest speaker at a successful meeting - possibly the first of its kind in this country. Abdul Barday was the student organizer, thus started a long association which has seen him become a leading family physician, active in academic bodies, in the Medical Association and on the Health Professions Council of South Africa. Two additional activities warrant mention - research and publications. General Practice

lent itself to collective research i.e. a number of doctors coming together to obtain information collectively. Dr M Silbert was Chairman of the Research Committee and the Convenor of the Cape Morbidity Survey in which 15 doctors recorded the initial and final diagnoses of each patient's illness observed over a 12 month period (1966-1967). Although there had been notable individual and collective surveys abroad, this was the first by a group of general practitioners in South Africa. It was published as a supplement to the South African Medical Journal in 1970 as "The Cape Morbidity Survey and its Significance in the Training for General Practice"⁴. Dr Silbert continued to make a contribution with teaching and writings notably on depression⁵, the care of the elderly^{6, 7, 8} and the terminal patient⁹.

Our first publications took the form of newsletters which included original articles and continuing educational material, becoming mini-journals. Dr Seymour Dubb was Editor of the Cape of Good Hope Faculty Newsletter. In the North, Dr George Davie of Pretoria was Editor of Elan.

Dr John Smith was a foundation member who gave up his thriving practice to become the Superintendent of the Day Hospital Organization in 1969. The term "hospital" is a misnomer; the Organization consists of a number of primary health care units, situated mainly in under privileged areas in the Cape. Dr Smith recognised that the standard of care provided could be substantially elevated by education and training of the staff in the principles and practice of family medicine, that the centres could provide a suitable milieu for undergraduate teaching of the discipline and for post-graduate vocational training. Much of this vision was realised in subsequent years but was initially frustrated by limited resources - only 4% of the Cape Provincial health budget was allocated to primary care at the time.

In 1969 Dr John Stevens visited South Africa in the course of his Nuffield Travelling Fellowship. John was an old school friend at Rondebosch who spent the war years in the Royal Navy and went on to study medicine at Cambridge and St Bartholomew's. He became a GP in Aldeburgh, Suffolk and was a pioneer of vocational training. His Ipswich Vocational Training Scheme was launched in 1970 and became one of the models for the UK. I have written a memoir of this exceptional and charismatic family

physician in SA Family Practice, June 1994¹⁰. He paid us a further visit in 1975 as the Upjohn Lecturer.

As the first decade of academic general practice drew to a close, it was felt that the time had come for the establishment of the South African College of General Practitioners and this took place formally on 1st June 1969. This was no "unilateral declaration of independence"; it took place with the full support of the Royal College. The first ten years had been a period of intellectual stimulation and enlightenment, of collegiality and friendship. In mentioning the names of some of the prominent figures involved, there were several others who made important contributions.

Mention must be made of Dr BM (Boz) Fehler, who was extremely active in the Transvaal. A gregarious and warm personality, he did much to build the Witwatersrand Faculty and the subsequent academic structures. He taught undergraduates at Witwatersrand University for 20 years. He was responsible for our admission to WONCA (The World Organization of Colleges, Academies and Academic Associations of General Practitioners/Family Physicians) and held executive positions on that body from 1972-1982. Dr Guy Daynes came to this country from Britain in 1960. He had been in general practice in Brighton and was a Foundation Member of the Royal College. He came to work at St Cuthbert Mission Hospital in the Transkei where he spent several years. He was the Provost of the Eastern Cape Faculty and was elected a Fellow of the Royal College in 1975. In the same year he was awarded the C.B.E. He is still active at the age of 84, now working in Kwa Zulu, Natal. [He passed away early in 2005 the 25th year of the Academy – Editor.]

The SA College of General Practitioners existed for one year, 1969-1970. During this period negotiation was taking place to amalgamate with the Colleges of Specialists to form the College of Medicine of South Africa. The concept was admirable, i.e. the recognition by the academic establishment of general practice/family medicine as an equal partner in the family of medical disciplines. Moreover, the College, primarily an examination body, would create an examination to assess competence in our field. Sadly, the reality did not live up to our expectations - but more of this later.

In 1970, we became the Faculty of General Practice of the College of Medicine of South Africa. Administratively we had a national Faculty Committee with a number of Regional Committees similar to our previous structure. Prof Howard Botha was the first Convenor (Chairman). All members of the SA College of General Practitioners were admitted to the College of Medicine as Associate Founders with the right to vote for College Council. However, unlike other disciplines, we were restricted to a maximum of one member on Council. We were able to continue all our activities but it soon became apparent that we were placing a disproportionate burden on the College administration. To meet our needs we were permitted to set up a general purposes fund to collect limited amounts from our members and from pharmaceutical sponsorship. The fund was boosted by a generous donation from the William & Elizabeth Smith Trust, courtesy of their son, John.

In 1972 the first examination for Membership of the Faculty of General Practice was held in Johannesburg. There was a large turnout of candidates including several established and competent colleagues. The paradox of these experienced practitioners being examined for competence in their own field by predominantly specialists in other disciplines appears to have escaped concern. Hereafter membership of the Faculty was by examination only.

In 1972, Dr BM Fehler represented the Faculty at the WONCA Congress in Melbourne and occupied executive positions on that body for the next ten years. WONCA is the acronym for the World Organization of National Colleges, Academies and Academic Associations of General Practitioners/Family Physicians.

In 1972 Dr Z Frame and I represented our Faculty at a Workshop in Family Medicine in Tel Aviv. The Workshop was organized by two South African Israelis, Drs Medalie and Polliack who had invited some of the leading figures in family medicine. Participants included Professor Pat Byrne who had recently been appointed to the Chair of General Practice in Manchester and who had been on a lecture tour of South Africa in 1970. Also present was Dr John Fry of Beckenham, whose epidemiological studies in general practice¹¹ have become classics in the field. He had also previously visited our shores and I was

asked to invite him to the forthcoming MASA Congress to be held in Cape Town in 1973. He happily accepted the invitation commenting that he "wanted to discover why the best Israeli family physicians came from South Africa".

In 1972 "The Future General Practitioner"¹² was published, written by a Working Party of the Royal College under the Chairmanship of Dr John Horder, a man of fine intellect and culture. The book opens with a quotation by Leonardo da Vinci, "Those who are enamoured of practice without science are like a pilot who goes into a ship without rudder or compass". It then deals with the scientific basis of the problem-solving diagnostic process which we use in general practice ; how it differs from the reductionist approach more suited to many specialist disciplines. It quotes the writing of Medawar¹³ to show how we make hypotheses on partial information which we then test. This book made a big impact and we invited Dr Horder to join John Fry at the MASA Congress in Cape Town.

At the same time Dr F Dornfest and I produced a booklet based on "The Future General Practitioner" entitled "A Guide to the Content and Attitudes of General Practice" which was published by the College of Medicine of South Africa. It was intended to give candidates for the MFGP (SA) some idea of the scope of the discipline and to help make the examination more valid and reliable. All College examinations are supervised by the Examinations & Credentials Committee and the content, form and the examiners for the MFGP (SA) became a bone of contention between the Faculty and The College. This was aggravated by the fact that new members, who had gained entrance by examination, had voting rights in the Faculty but not for College Council. This anomaly was partially corrected by the creation of a seat on Council elected by MFGP's. Dr BM Fehler was the first general practitioner to be thus elected. He served on College Council from 1977-1985, thereafter emigrating to England.

In 1975 Witwatersrand medical students held a conference entitled "The GP Dilemma". The title reflects the concern of the students about the role of the generalist in a society of growing specialisation. Prof JDE Knox, Head of the Department of General Practice in Dundee and Prof Moshe Prywes, Dean of the new University of the Negev in Israel, were invited guests. The

conference was also notable for the contribution of Ellen Kuzwayo, social worker and Helen Joseph, trade-unionist, who poignantly stated the case for the personal doctor. Both expressed an understanding of patient needs which was illuminating to the students.

In the same year (1975) Medical Association held its biennial Congress in conjunction with a WONCA Regional Congress in Johannesburg. Donald Rice came from Canada, Pat Byrne from Manchester and Wes Fabb from Australia. At a special ceremony, before the Congress commenced, the College of Medicine bestowed Honorary Fellowship on the three guests, citations being read by H Botha, B Jaffe and B Fehler respectively.

Byrne was an eloquent orator and master of the succinct quotation. To express the timeless need for the generalist he quotes Martial in the first century, "Cascellius extracts an aching tooth, Hyginus removes the hairs that hurt the eyes, Podalarius is a very Hermes at the repair of hernia. But tell me Gallus, where is he that may help my harassed person"¹⁴.

After the completion of the Congress a further ceremony took place at which Prof Byrne, who was President of the Royal College of General Practitioners, bestowed Fellowship thereof on Prof H Botha, Drs G Daynes, B Fehler, B Jaffe and J Smith. Shortly after joining the College of Medicine our two newsletters amalgamated and *Elan* became the Faculty journal under the editorship of Dr George Davie.

In 1972 Dr Joseph Levenstein became Convenor of the Faculty Research Committee and embarked on a number of important projects. Many of these were collaborative studies with much educational benefit to the participants. The most ambitious undertaking was the "Cape Emergency Coronary Care Project"¹⁵, in which 129 general practitioners participated over a period of 14 months. The objective was to respond promptly to patients with the symptoms of acute myocardial infarction and to administer therapy, according to a simple protocol with the emphasis on anti-dysrhythmic drugs. The results achieved compared favourably with any yet reported in the pre-hospital phase of this condition. Several publications followed ranging from natural history¹⁶ to research as a means of continuing education¹⁷. The teaching of family medicine at UCT which had

been taking place for several years informally was officially recognised with the creation of teaching sessions in 1976 leading to the establishment of a Unit of General Practice in 1978. The Unit consisted of 3 part-time lecturers and 40 tutors who took students into their practices. Dr Joseph Levenstein headed the Unit whose personnel were all members of the College Faculty of General Practice.

A series of teacher-training courses ensued under the auspices of the Faculty. Initially we sought the assistance of the UCT Education Department, but soon came to realise the limitations of conventional didactics in the unique teaching situation of the consulting room. Clearly, special techniques and skills were necessary. To meet this need an excellent three day Workshop was conducted by Wes Fabb of the Australian College in Cape Town in 1976. This provided the momentum for ongoing training of our teachers which was led by Joseph Levenstein.

Mention must be made of an interesting colloquium on "The Future of General Practice" which was held in 1977 under the auspices of the Witwatersrand Department of Continuing Medical Education. A number of family medicine teachers together with representatives of related disciplines from all our medical schools participated. A great bonus was the presence of Ian McWhinney who was on a teaching/lecture visit to South Africa, with his family, at the time.

The First General Practice Congress took place in Johannesburg in 1978. It was a joint effort of the Witwatersrand and Northern Transvaal Regions of the Faculty of General Practice, together with the Pretoria Department of Family Medicine and the National General Practitioner's Group of MASA. The Organizing Committee consisted of Drs BM Fehler (Chairman), G Davie, P Cusins, BLW Sparks and Prof D van Staden of Pretoria. Entitled "Standards and Responsibility", the Congress was a resounding success and a revelation to us all of the talent that exists in our own ranks. It was the forerunner of the biennial conferences which became the showpiece of academic general practice/family medicine. It generated a great deal of enthusiasm that helped us through the troubled times that lay ahead in our relationship with the College of Medicine.

Meanwhile, we continued with all our activities. Dr Joseph Levenstein, Secretary of the Faculty was highly productive at local, national and international level. He was accumulating an impressive list of publications ranging from cardiology to "The Basis and Content of General Practice in Relation to Training"¹⁸. He was particularly skilful in the preparation of protocols and the management of collaborative drug trials. These were usually third phase trials i.e. drugs not yet marketed, in which he observed strict ethical rules and scientific method. It was in connection with the trial of a new beta-blocker for hypertension^{19, 20} that the Faculty came into conflict with College Council. It was claimed that the trial was promotional and should not be published under the College name. This viewpoint was not shared by all Council members - some saw the irony of objection being expressed by academics who undertook such trials in their own wards.

This precipitated a confrontation with College Council on the issue of Faculty autonomy and the extent to which we could express our opinion and negotiate with outside bodies without Council permission. It had become apparent that we had not achieved the equality and autonomy we sought within the College. There was a perpetuation of the teacher-student relationship which expressed itself in limited voting rights and limited control over our own examinations, research and publications. Moreover, an inordinate amount of time and energy was being spent on conflict with the College hierarchy. Clearly our situation had become untenable and drastic action was indicated. After much discussion it was agreed that a new and independent body be formed. Admission would be open to all practitioners who accept our aims which are:

- to raise and maintain the standard of general practice in South Africa
- to achieve recognition of family medicine as an academic discipline in all spheres of medical education and practice
- to help provide a system of primary care for all the people of this country.

The name of the new body was to be the SA Academy of Family Practice/Primary Care. Why did we choose this rather cumbersome name which combines an academic discipline with a level of care? The Alma Ata Declaration on Primary Care (1978) had recently drawn the attention of the medical world to this

neglected area of medical care. We wished to assert that family medicine is integral to the delivery of primary care although not the only discipline involved; that the **principles** of family medicine remain unaltered by the geographic region or the socio-economic situation in which the primary care is practised. We found ourselves completely in accord with the WHO-UNICEF definition of primary care:

"Primary Health Care is essential health care based on practical, scientifically sound and socially acceptable methods and technology, made universally accessible to individuals and families in the community through their full participation and at a cost that the community and country can afford to maintain at every stage of their development in the spirit of self-reliance and self-determination".

Alma Ata 1978

We would remain in the College of Medicine which would continue to be the examining body for our discipline as it was for all the other medical disciplines. The Faculty Committee would consist of the same personnel as the Council of the proposed Academy and would strive to make the Membership examination valid and reliable.

The plan to establish the Academy was received with enthusiasm when announced in the keynote address of the Second GP Congress held in Cape Town in March 1980. A Steering Committee was formed which included representatives of all sections of primary care, private, public and the academic departments of family medicine of which there were now three. Prof ADP van den Berg had succeeded Prof H Botha who had moved into Government Service in 1975. Prof GS Fehrsen had been appointed to the Chair at the newly created Medical University of Southern Africa (MEDUNSA) in 1977 and Prof GJ Pistorius to the first Chair at the University of the Orange Free State in 1978.

Legal formalities were completed and the SA Academy of Family Practice/Primary Care was registered on 11 August 1980. A series of inaugural meetings were held in main centres at which the objectives, structure and functions of the new body were explained. In addition to national and regional structures it was planned to form small groups to promote the widest participation of our members. At the inaugural meetings we showed a video-cassette on chest pain to illustrate the type of

educational material that would be made available to these small groups.

In spite of opposition from some individuals, College Council placed on record its support for the establishment of the Academy and approved the transfer of Faculty funds to the new body. We were free to continue with all our activities in the Academy. The one exception was the audio-visual unit to which Dr Paul Oates had been appointed professional Director and now catered for additional faculties.

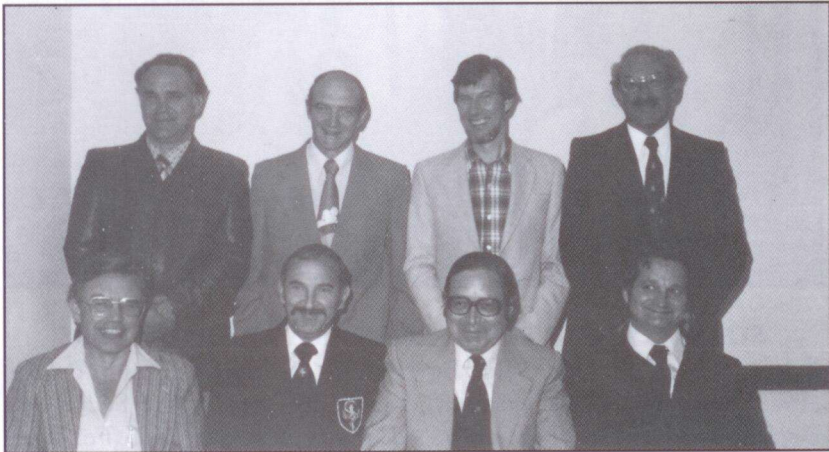
The first Academy Council elections were held in 1981 and were designed to ensure representation of all regions and to reflect our varied membership. Office bearers elected were : Drs BM Fehler (President), B Jaffe (Chairman), JH Levenstein (Secretary), GK Brink, JLL Bester, G Clennar, FD Dornfest, AB Baard, AJ Kgomo, MV Silbert, L Myers, MHH Ismail, S Levenstein, EL Murray, BA Michaelides, LI Robertson, BLW Sparks, Professors GS Fehrsen, GJ Pistorius, ADP van den Berg. During 1982 Dr N Naidoo of Natal Midlands replaced Dr FD Dornfest who had emigrated to the USA.

The function of Council has been to promote the objectives of the Academy in regard to education, standards and the provision of primary care to all the people of this country; to make representation to Government and educational institutions; to cooperate with organizations which share our aims; communicate with and support our regions; to supervise the financial affairs of the organization in terms of the Companies Act. Council has aimed to meet at least once a year and this is timed to coincide with a congress or workshop to minimise expense. An Executive Committee exists to deal with routine matters and conducts many of its meetings by telephone link-up between centres.

The initial enthusiasm was reflected in our membership which rapidly reached a thousand. Offices with full-time personnel were opened in Cape Town and Johannesburg, soon to be followed by a third in Durban. There was a rapid increase in all our activities, publications and research and these will be discussed under their respective headings.



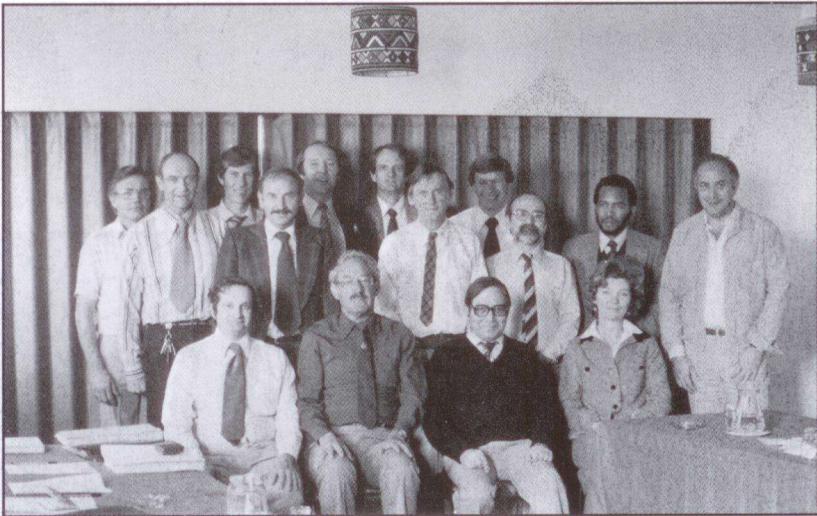
An early College Committee. Back L to R Drs. L Cooper, G Clennar, JH Levenstein, George Davie and in front J Smith, B Fehler and B Jaffe



The eight who formed the Academy not-for-profit Company in 1980. L to R, Front: Dr George Davie, Prof Gawie Pistorius, Drs Basil Jaffe and Joseph Levenstein. Back: Dr Attie Baard, Proff Andries van den Berg and Sam Fehrsen and Dr Boz Fehler



Dr Boz Fehler the first
Academy President



SOME OF THE FIRST ACADEMY COUNCIL 1981

Front (L to R): Drs JH Levenstein (Secretary), BM Fehler (President), B Jaffe (Chairman), Ms M Jonker(Office Secretary)
Back: Drs G Davie, Professors ADP van den Berg, GS Fehrsen, GJ Pistorius. Drs BLW Sparks, GK Brink, EL Murray, JLL Bester, BA Michaelides, G Clennar, AJ Kgomo, FD Dornfest, (Absent were: AB Baard, MV Silbert, L Myers, MHH Ismail, S Levenstein, LI Robertson.)

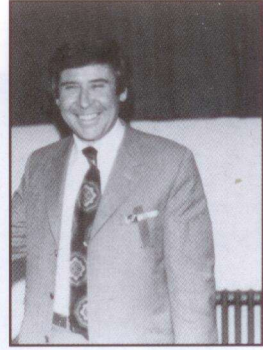


THE SECOND ACADEMY COUNCIL, 1984

Front (L to R): Drs AP Baard, IJ Robertson (Vice Chairman), B Jaffe (President), JH Levenstein (Chairman), BLW Sparks (Secretary Treasurer) and GK Brink (Vice Chairman). Middle: Drs G Parr, WF Seidel, E Murray, J Smith (National Coordinating Director for Vocational Training), Prof GS Fehrsten, Dr G Davie, Prof ADP van den Berg and Ms S McGuiness (Promotions Director)
 Back: Mrs R Jonker (National Office Secretary), Drs S Furman, B Michaelides, AJ Kgomoo, G Glenmar, N Naidoo, DP van Velden and S Levenstein.



Garth Brink (Chairman) and Mrs
Maureen Mc Bain (Secretary)
drawing a prize at a Congress



Dr Wes Fabb visiting
from Australia

Guy Parr and
Donald Rae from
Canada with Basil
Jaffe



Dr Roley Meyer a
pioneer from
Johannesburg