GRADUATION ADDRESS

As I stand here today, with 87 years of life in me, I encourage you all to take a moment to appreciate your wonderful present, but also to look back at your years as students, and glance forward to your bright futures. I am honoured to be standing here with you as a fellow alumnus of this wonderful university as you start your journey into your professional lives. Actually, I am delighted just to be standing at all!

The great South African poet Mongane Wally Serote wrote a poem:

"for sisters and brothers who may be weary". He said

"*so you keep looking back*
even when the darkness is so thick it could touch your eyeballs…
… don't you hear the songs
they can live in the present if we let them
these songs have a prowess of our mother's back
and the eloquence of our grandmother's foresight
….
child
feel the wall while you walk and hold, hold
glue your eye into the distance and keep walking
move, child, move
. . . "

This poem is about listening to the past, staying in the present and moving into the future. Which is where I meet you today, at the precipice of one part of your lives ending and one beginning. It is a daunting task to inspire you with the lessons I have learnt through a long life, but I will attempt to do that today as I take you through my journey. Wits University's motto is Scientia et Labore, Knowledge and Work, two pillars that I have strived to embody throughout my life.

I grew up in a poverty-stricken mixed-race suburb at the edge of the Johannesburg's Central Business District. My father died when I was a young teenager and my mother raised as us as a solo parent, making sure that we were spared from being taken to the local orphanage. Although we were disadvantaged, we had firm friends, and neighbours always helped each other. A small percent of us completed Matriculation, which I managed to do with some luck and my older brother's cheat notes.

University education was never taken for granted and the idea that I would do something as rigorous and ambitious as Medicine seemed preposterous, but I was determined, largely because, the longest course available at that time also came with the longest holidays. So I started off in first year, a few years older than the other students, and with a lot less education.

To supplement my studies, I worked as a commercial-traveller, selling pharmaceutical products – one of which was the then taboo "French letter" – now knowns as a condom - in small country towns. Having the door slammed in my face by country wives, only to be met at the back door by their husbands who bought boxes of condoms from me, helped me learn that if you can't get in the front door, the back door is always an option. That may have sparked my love of the medical version of the back door, which is why I later chose gastroenterology.

During the university holidays I met a girl playing tennis and invited her to join our game of mixed doubles. She was a great sport, friendly with a buoyant personality and a serious streak. I was immediately attracted to this fascinating girl. In order to impress her I took her to plays, dance, theatre, art exhibitions, cinemas and any activity that was unusual and interesting. We established a mutual bond that quickly developed into love, lasting our entire lifetime. My wife Arlene is here today as we enjoy our 60th year of marriage. She is a walking lesson in

patience and perseverance. So students, if you can find your Arlene, your path forward is going to be a lot smoother.

The only downside of my new lovesick state was that I missed lectures and didn't follow up on papers. I had oxytocin, who needed more chemistry? My results that term were 13% for Anatomy and 11% for Physiology! The poor boy had done what everyone expected and failed spectacularly. I was called to the Dean's office and advised to give up Medicine.

I knew it was time for immediate action! So I put Arlene and my best friend on the task. He took notes for me, Arlene hand-copied the notes, passed them on to me to study and I began attending lectures. Lesson number two – build a team around you. Medicine is a challenging, collaborative career so we need the support and respect of our colleagues. Your classmates today are your future colleagues. Treasure them, nurture your relationships with them. If you work for the government, buy them a beer, or if you work privately, buy them a car.

My new work regime involved 17-hour days studying, with breaks to eat and take a short run or go to the gym. My third lesson was to look after my body and exercise, a habit that helped me survive the stress of hospital life.

<u>After the end of year's exam, I was running up the steps of the Old Medical School in Hospital Hill to see the results and Prof. Tobias spotted me saying 'Whoa slow down Segal' ... a sign I had passed into third year medicine</u>

After graduating in 1962, I became a General Practitioner [GP] in a small ramshackle consulting room, close to the railway line, in Kliptown. Each time a train passed by, the whole room shuddered and my nurse, my patient and myself; held our breaths', relieved when the train passed and the room was still standing!

My practise in Kliptown was often regarded as a place of refuge. We heard that there was an impending police raid for the dreaded passes; carried by adult African males that embodied racism and bigotry. Anyone without a valid pass would be jailed. The residents of Kliptown soon got wind of the raid and hid themselves. Many men managed to squeeze into my consulting room standing closely erect: the small room was jam-packed! The police approached and shouted... 'Hey! What's happening here?

'Careful [I replied]... we've got a seriously contagious and rare epidemic underway.' Save yourselves! The policemen turned around and ran off, and the men packed like sardines laughed loudly on them as they went.

In 1969 I was accepted for specialist training, as a Physician at Chris Hani Baragwanath Hospital. Why did I choose gastroenterology? A Professor of mine suggested that I was so adept at speaking "crap' that a career involving examining "crap" would most suit me.

At Baragwanath, I found the second love of my life. The hospital in Soweto is where I spent the core of my life, almost 40 years at the hospital. I loved working with the doctors and patients; who were courageous, trusting and cheerful often with a deep sense of irony and appreciative of the humour of life, despite difficult circumstances.

With approximately 6000 beds it was the largest hospital in the world at that time and stood strong in the fight against apartheid. Soweto and surrounding informal shanty towns filled the hospital to capacity and informal arrangements had to be made to deal with overcrowding. As there were insufficient beds patients had to sleep on the floor or underneath beds for very sick patients.

Ward rounds were difficult because of the large daily intakes. People walked in complaining of headaches, which made sense when you noticed they had a giant knife wedged into their heads.

Baragwanath was unique and ahead of it's time in its ability to integrate Western with Traditional medicine. Part of my work involved having a consultant sangoma in appointments with patients who did not want surgery, bowel resections, or any organs taken out as they wanted to be returned to their ancestors in with their bodies intact. To alleviate their concerns, sangomas negotiated with patients to have the surgery that was necessary.

We went through two critical periods - the 1976 protest against apartheid and in the early 1980's the spread of HIV to epidemic proportions.

In the 1976 riots, staff were inundated with casualties resembling a war zone. Police and troops were hunting down young African protestors and the medical and surgical teams worked long hours to cope with the damage. During this dangerous time staff dealt as best, with the perilous conditions, upholding the principles of the Hippocratic oath i.e. **I will respect the hard-won scientific gains of those physicians in whose steps I walk, and gladly share such knowledge as is mine with those who are to follow.**

The AIDS epidemic was recognised once patients arrived at the Admissions Unit with bizarre symptoms and signs found in the late stage of the disease. The hospital offered no treatment, except compassion and Bara doctors were prohibited from using drugs, under threat of dismissal. Here lies my fourth lesson. When you have no access to medicine, keep fighting, keep humanising your patients and treating them with the care and respect, and also, keep yourself safe. We are no use to others if we are sick too.

Baragwanath is an incredible frontline learning hospital and I soon saw there was a need for a specialised unit for Gastroenterology. In 1973, I established the Gastroenterology Unit. During this period, the apartheid Government enacted a decree in which education of Africans was aimed at training the children for the manual labour and menial jobs that the Government deemed suitable for Africans. Africans were not to be taught Maths and Science as they were not capable of doing these subjects. In order to counter this absurd and xenophobic decree we established the African Institute of Digestive Diseases, with the key purpose being to train African Doctors of Colour to specialise in digestive diseases.

We invited Doctors of Colour from all over Africa to train at the Institute. We provided Board, Lodging and Tuition. The governments of the trainees payed their airfares, so trainees had no financial barriers to becoming world-class specialists. The response was delightfully overwhelming. Doctors came from the Ivory Coast, Kenya, Uganda, Zambia, Zimbabwe and Maputo. It was a symbiotic learning experience for the visitors and our own doctors who thoroughly benefitted from the interaction. The program had a positive domino as when the trainees returned to their respective countries they then trained their doctors in GIT Diseases and a learning succession plan was created. We wanted knowledge to spread in the way we had seen viruses spread, and we took great joy at seeing the seeds we had planted growing all over Africa.

The World Organisation of Gastroenterology recognised what we were doing and used the Soweto Model as a Train The Trainers Programme, a project that is still spreading knowledge to this day. What started as an exploratory outreach into Africa gained in momentum. Research, both clinical and investigational has mushroomed in sub-Saharan Africa. To date there are 24 units in all parts of the world, including: The Middle East, North Africa, South America, Europe and Asia. Trainees

not only gained clinical skills but also achieved academic success in research. The unit published over 300 seminal publications.

Yes, As I stand here today, with 87 years of life in me, I am so delighted to look out at you with your many years of life still ahead of you. I encourage you all to take a moment to appreciate your wonderful present – look around at this hall, these colleagues who surround you, the teachers and mentors who have guided you. Look back at your years as students, and glance forward to your bright futures.

My experience has shown that from humble beginnings it is **determination** which separates the impossible from the possible. My final lesson to you is you have the ability and opportunity to achieve anything you want in life. As our great President Nelson Mandela said**:**
It is through education that the daughter of a peasant can become a doctor; that the son of a mineworker can become the head of the mine; that a child of farm workers can become the president of a great nation. It is what we make of what we have , not that we are given, that separates one person from another.

Congratulations to all our graduands and your families for your hard work and perseverance. You stand on the threshold of an exciting life. Live, explore, find an Arlene and discover.

And remember the words of the great South African poet Mongane Wally Serote that entreat you to stay present and keep progressing:

“feel the wall while you walk and hold, hold
glue your eye into the distance and keep walking
move, child, move…