BOOK REVIEWS

Troubled Children – Poems of Contemplation
By Joan Westaway and Mick Leary.

‘How many times have I stood
with my ear to your shell
listening for an echo …’

The American author Joan Didion once commented that she writes to discover what she thinks and feels. We all possess a creative capacity that can help us to expand our understanding of our inner and outer worlds. Insight into who we are and what drives us helps us to be more effective in all areas of our lives.

Medicine is particularly challenging, in that practitioners are up close and personal with the difficulties of mind, body and spirit. We are affected by our patients, even though we might try to detach by donning the white coat of technical expertise and scientific fact. Too often we tuck our feelings away to cope with a demanding job.

Joan Westaway is an experienced child psychiatrist who turned to the pen to explore her observations. Her poems often have the quality of a debriefing, as she lets loose the frustrations, heartaches and pleasures of working with children and adolescents who are emotionally troubled or do not fit in with society’s expectations of ‘normal’.

‘In my mirror we are trapped;
the attacker and the attacked,
like two cobras interlocked and trading venom
in a windowless prison’

Some poems are from the perspective of the patient, others from that of the therapist. Joan does not stay on the surface of the matter, but immerses herself and the reader in the world of the disturbed. Her poems are occasionally hard to understand, as she mirrors and is pulled by the emotions of her patients.

I thought this could be a weakness, but later saw it as a strength. The reader is confronted with confusion, not unlike that which the psychiatrist initially encounters when working with patients. Each poem is then contextualised by Joan’s colleague Mick Leary, a paediatric neurologist.

Through her brave, thoughtful writing, Joan challenges us to be honest about our responses, to develop a critical attitude to ways in which medical practice falls short of the goal to heal, and to grow empathy with our patients.

‘See these sockets,
they were my eyes;
now they are dongas,
the waterholes of flies –’

Dawn Garisch
Author of Eloquent Body (Modjaji, 2012) and Dance With Suitcase (Tiber Tree Press, 2013), Cape Town, South Africa
dawn.garisch@gmail.com

The Primary Health Care Approach and Restructuring of the MB ChB: A Case Study of the Faculty of Health Sciences, University of Cape Town
info@lap-publishing.com

In the late 1990s, the Faculty of Health Sciences (FHS) at the University of Cape Town caught the ‘wave’ of educational curriculum reform, responding to several imperatives. The context was post-1994 democratic South Africa (SA), and the government’s efforts to establish a primary healthcare (PHC)-led national health system requiring (since health professionals would receive service-based training within such a system) congruent curriculum reform.

The Primary Health Care Approach and Restructuring of the MB ChB is the distillation of Dr Nadia Hartman’s research into the extent to which alignment was achieved between the PHC philosophy, espousing a biopsychosocial approach to patients, and the reformed MB ChB curriculum that was implemented in 2002. Dr Hartman is an educational scientist – my term for the colleagues usually termed educationists – and founding director of the Educational Development Unit in UCT’s FHS, which became the ‘engine room’ of educational reform as curriculum restructuring began. Given the strength of her case history, and the scientific method deployed, my term is apt and deserved.

At UCT’s FHS, the dominant ‘habitus’ (Hartman’s word) was the traditional biomedical (diagnose and treat) approach to illness, in the context of an increasing burden of disease, shrinking health and tertiary educational budgets and reliance on secondary and tertiary hospital-based service learning and ‘apprenticeship’ training. All conspired to bring about an imperfect, as yet unrealised, biopsychosocial habitus that is the ideal of the PHC holistic/comprehensive approach.

Dr Hartman’s case study meticulously records the processes as they evolved towards realisation of a ‘blueprint’ developed in the opening phases of development of the reformed curriculum that was launched in 2002.

In the words, echoed by the Health Professions Council of South Africa, of an external report: ‘it would appear that much of the excellent theoretical input and emphasis