

When conflicting interests challenge relevance: History of the development of Public Health at Walter Sisulu University

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Background

Understanding and addressing the ever-changing factors influencing health outcomes across different populations is important for all stakeholders, inclusive of governments, higher education institutions and communities. Public health can be better understood as the comprehensive evaluation and enhancement of the overall population's health.^[1] Understanding the population's viewpoint, and knowledge of the ecology of health and the interdependence of the biological, behavioural, physical, and socioeconomic and environmental factors that affect it, are essential to comprehending and eventually enhancing the health of a population.^[2] Improved health literacy is also considered to be essential in finding, understanding and utilisation of health information towards prevention of ill-health.^[3]

Evolution of Public Health at Walter Sisulu University

Rural and population health has always been at the centre of health sciences curricula at Walter Sisulu University (WSU), dating back to the establishment of the Faculty of Health Sciences in 1985. The geographical landscape of the Eastern Cape province of South Africa (SA) positions populations as pockets between mountains and in predominantly hard-to-reach areas. Inequity in the distribution of health resources is glaringly obvious in sparsity of health facilities and shortages of health professionals, resulting in a high disease burden that is difficult to manage, especially in situations of limited resources. This situation is in part due to the negative impact of pre-democracy policies that saw many people being relocated to inaccessible areas in homelands.

Being part of the only university in Transkei, and the only medical school in the Bantustan, established to address health access in this area, the Faculty of Health Sciences at the University of Transkei established the two departments of Community Medicine and Health Promotion in 1989. Community Medicine was first formed in combination with Family Medicine as the Department of Family and Community Medicine. Two professors were employed at the same time in 1988, one a family physician and the other a community medicine specialist. These two departments were run smoothly and

without interference with each other except for monthly meetings for sharing, support and reporting purposes. The faculty soon realised that Family Medicine and Community Medicine should be separated into two departments, and this was done amicably.

Community Medicine as part of medical training (Bachelor of Medicine and Bachelor of Surgery) was established to achieve two main goals: (i) to improve access to medical training for the marginalised population; and (ii) to emphasise community health, epidemiology and health systems management in medical training. At around the same time, the Transkei homeland government recognised that its geographical landscape and poor access to health services was depriving its population of optimal health, resulting in high morbidity and mortality. The Transkei government approached the then University of Transkei to develop an academic programme that would improve health literacy to help prevent the onset of diseases and maintain good health at the community level, mitigating the ever-rising burden at health facilities. The faculty then established the Department of Health Promotion, which offered a Diploma in Health Education and Promotion. This was the first of its kind in Transkei and remains the only programme of this nature in the whole of South Africa to date, offered at an undergraduate qualification level. Later, the Department of Community Medicine developed a Master of Public Health programme to improve skills of the health sector managers in managing the health system.

Reconfiguration for alignment

In 2015, the departments of Community Medicine and Health Promotion were merged to form the Department of Public Health to realign focus and streamline operations. This resulted in three divisions: Community Medicine; Preventive Medicine and Health Behaviour; and Health Systems, Policy and Planning. These had redefined roles and clarified relevance in the dispensation of population health training and service. This action was key in aligning to key functions of public health. The department maintained its mandate of offering Community Medicine for the MB ChB programme, together with Bachelor of Science in Health Promotion, Postgraduate Diploma in Health Promotion, Master of

Science in Health Promotion, Master of Public Health, and Doctor of Philosophy in Health Sciences.

Relevance and conflicting interests

While WSU has continued to offer its academic programmes, its mandate with regard to service was not implemented to maximum capacity. Inadequacies of capacity in Epidemiology, Biostatistics, Public Health Medicine, and Health Systems and Policy were glaring in the performance of its immediate partner, the Eastern Cape Department of Health. These challenges were further exacerbated by the approaches to the prevention and management of the province's disease burden, with a medical approach preferred instead of a comprehensive client-centred approach with more focus on prevention, as had been intended during the inception of the Department of Health Promotion in the late 1980s. In response to this situation, a further reconfiguration of the department for relevance and impact was done, resulting in five globally competitive and locally relevant divisions: Health Policy and Global Health, Epidemiology and Biostatistics, Community Medicine, Clinical Governance, and Preventive, Behavioural and Societal Health. This growth resulted in the rebranding of the Department of Public Health as the School of Public Health in 2025. The WSU School of Public Health has also built sufficient technical expertise in the form of specialists in Public Health Medicine who are registered as such with the Health Professions Council of South Africa and are Fellows of the Colleges of Medicine of South Africa. At the time of writing this article, the school was in its final stages of accreditation of the registrar training programme for Public Health Medicine specialists in order to train home-grown and community-engaged specialists. Furthermore, increased technical expertise has resulted in the establishment of three institutes, namely the WSU Global Centre for Human Resources for Health Intelligence, the WSU Society and Health Research Institute, and the WSU Institute for Clinical Governance and Healthcare Administration. Overall, these

institutes will strengthen the health system and capacity for epidemic and outbreak response. We have made strides in developing global partnerships, and have appointed international scholars as honorary academics at our institution. We now work much more closely with communities and traditional leaders (Figs 1 and 2). All in all, WSU Public Health continues to evolve to ensure relevance and enhance its impact in terms of sustainable health services and longer and healthier lives for the people it serves. Starting in 2024, the school has committed the month of October to public health engagement through weekly symposia with communities, policy-makers and academics/experts from across the world on matters of public health importance, ranging from vertical programmes, e.g. non-communicable disease management and control, mental health awareness, cancer awareness, etc., to broader health services (Fig. 3) and health systems strengthening programmes. We run rolling programmes every Friday (Public Health Fridays), where school staff exercise around the Mthatha area (Fig. 4) and East London campuses, and create awareness on matters of public health importance (Figs 5 - 7) among the public and the WSU community through radio talks (we have a fixed slot on the campus radio station) and through visibility campaigns on campus. We participate in local (Fig. 8) and international conferences, and contribute positively to matters of national and global interest to ensure attainment of the Sustainable Development Goals. The team is dynamic, youthful, willing to learn and mostly female. The future therefore looks bright.

1. Samet JM, Hussein S. Population health and population health metrics. *Popul Health Metr* 2024;22(1):19. <https://doi.org/10.1186/s12963-024-00339-9>
2. Institute of Medicine (US) Committee on Assuring the Health of the Public in the 21st Century. *The Future of the Public's Health in the 21st Century. 2: Understanding population health and its determinants*. Washington, DC: National Academies Press, 2002. <https://www.ncbi.nlm.nih.gov/books/NBK221225/> (accessed 25 April 2025).
3. Liu L, Qian X, Chen Z, He T. Health literacy and its effect on chronic disease prevention: Evidence from China's data 2020. *BMC Public Health* 2020;20(1):690. <https://doi.org/10.1186/s12889-020-08804-4>

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Fig. 1. Community engagement activity on public health matters with a community and its traditional leadership at the Royal House of AmaMpondo aseNyandeni.



Fig. 2. The WSU Public Health team with community members, frontline health workers and policy-makers at a symposium.



Fig. 3. Symposium on Clinical Governance in September 2024.



Fig. 4. Public Health physical activity through Mthatha.



Fig. 5. WSU students being activated on cancer awareness at the Potsdam Campus (East London) by the Public Health team.



Fig. 6. Members of the Public Health team preparing for a cancer awareness campaign in East London.



Fig. 7. Public Health team members preparing for a cancer awareness event in Mthatha.



Fig. 8. WSU Public Health delegates at the 2025 Public Health Association of South Africa Conference.