

SHAWCO: THE STUDENTS' HEALTH AND WELFARE CENTRES ORGANIZATION OF THE UNIVERSITY OF CAPE TOWN

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SHAWCO is a registered welfare agency helping thousands of the Cape Peninsula's most desperately underprivileged people. It functions mainly in the Windermere slumland, 6 miles from central Cape Town, where a large community of Africans and Cape Coloureds has manifested every conceivable aspect of socio-economic failure. It also incorporates three separate clinics in other poverty-stricken areas. The unique feature is that the entire project, since its earliest days, has been the responsibility and achievement of students of the University of Cape Town. Staff members only participate as advisers or medical consultants, but in recent years the growing volume of work has necessitated the appointment of a full-time warden and social workers. Medical students initiated and established all the work of the 4 clinics and have promoted SHAWCO's formation on the framework of the first of these; non-medical students have done much of SHAWCO's other work. Students are largely responsible for the policy and general management, and this is en-

sured by their majority representation on all committees and governing bodies. It is the enthusiastic Rag effort of the whole student body that provides the bulk of the finances on which SHAWCO depends.

HISTORY OF THE STUDENTS' CLINICS AND SHAWCO

In 1943 a handful of medical students, with some essential drugs donated by the City Council and makeshift equipment, started the Students' Kensington Clinic from which all future developments stemmed. A few University doctors alternated as consultants; one of them was chairman, and a senior student was elected annually as clinic director. For the first decade the main work was a free medical service for poverty-stricken people of whom 80-120 crowded into each Friday night clinic held in the AME Church school on the fringe of Windermere. Facilities were primitive—the luxury of running water came only after 5 years! But from tenuous origins the clinic slowly strengthened as more students joined and the consultant roster enlarged. Welfare work was hopelessly handicapped in the 1940s; indeed, the civic authorities were only just starting to plan an approach to the enormous Windermere slum problems. However, the Clinic did act: it engaged a part-time social worker, subsidized some essential foodstuffs for starving people, collaborated with CAFDA, and began a fruitful association with the Union of Jewish

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Women (UJW) who ran a creche and feeding scheme at the school.

From the late 1940s the Rag, ever the potentiating ally, annually allocated large sums to the Clinic, which was thereby enabled to erect its own building on land given by the City Council in the heart of Windermere. This 'Windermere Centre', launched in 1952 in collaboration with CAFDA and the UJW, gave good facilities for clinical work and social welfare activities.

Then medical students pressed for a more comprehensive service and, winning the University's wholehearted approval, SHAWCO was formed in 1953 to take over the Windermere Centre and to develop medical, social welfare and educational work there. From then on the project became a commitment of the entire student body and it gave SHAWCO most of the Rag funds with a small allocation to three independent clinics which medical students had started in Retreat, Prince George Drive, and Elsie's River during the previous 7 years.

SHAWCO's advances thereafter included appointing a part-time medical officer (a member of the University's department of medicine who specializes in social or comprehensive medicine) and a full-time warden and social workers; the Centre's building was extended in 1959 and the 3 independent student clinics were incorporated in 1961.

THE WORK OF SHAWCO

All Rag funds (varying from R15,000-19,000 in recent years) now go to SHAWCO. In addition, there is an annual grant of R1,000 from the Cape Town City Council, and this year the Cape Provincial Administration has initiated an annual grant of R3,000. These, together with some individual donations, provide SHAWCO's entire budget for the medical care, social welfare and education of many thousands of indigent persons each year. In 1962, more than 15,000 patients were provided with free medical treatment at the 4 SHAWCO clinics. Routine medical care is also provided for the 120 babies who attend the Union of Jewish Women's creche. (The UJW provide the valuable service of a kitchen and staff for feeding 70 - 80 old, infirm and needy people every day.)

At present, the medical activities of SHAWCO at Windermere centres round 3 clinics. The largest is the 'open clinic' which is held on Thursday night. This is a continuation of the original 'free dispensary' type clinic with which SHAWCO started — but it is doubtful whether the pioneers of SHAWCO would recognize it as such. From 150 to 200 patients attend each session, and the clinic is entirely staffed by students; professional staff only attend as consultants. The work is divided among the students according to their seniority. Thus, the 2nd years take the temperatures and weights of all the patients on arrival, 3rd year students take blood samples for WR and other tests, and later dispense medicines, give injections and apply dressings. The 4th, 5th and 6th year students are divided into 3 'firms' and deal with the clinical and social problems of their patients. Each firm is in the charge of a student 'chief', and patients who return are always seen by members of the same firm; in this way continuity of care is maintained. The ancillary services are all available on Thursday nights: student technicians provide a simple laboratory service; physiotherapy students are of great help in dealing with the asthmatics, bronchitics and other physically disabled persons of whom there are a great many in Windermere; student radiographers operate the X-ray unit which was recently presented to the clinic; and student nurses add to the charm and efficiency of the surgery. Thus the clinic is

pretty well self-contained and since there are always consultants in attendance, very few patients need to be referred to the hospitals.

On Tuesday afternoons, the 'General Practice Clinic' is in action. This clinic was established in collaboration with the UCT Department of Medicine and the College of General Practitioners. Its purpose is primarily teaching, and it aims at providing students with some experience of the range of problems and conditions which are seen in general practice, in contrast to the selected, highly specialized problems which are usually found in teaching hospitals. The clinic is staffed by volunteer members of the College of General Practitioners and by the University Lecturer in Comprehensive Medicine. 4th and 6th year students attend in small groups, and they are introduced to those aspects of medical practice which cannot be dealt with at the hospitals.

Finally, there is the 'Family Health Promotion Clinic', which is a new and exciting experiment in medical training and practice. In 1962, 25 4th year students were selected for this scheme. Each student was allocated to a needy Windermere family to which he became the 'family doctor'. These students are responsible for the management of their families in the most comprehensive sense of the word. Apart from dealing with any illnesses which may arise, they are also concerned with health promotion, disease prevention and the social welfare of the persons in their care. Home visiting is a feature and students leave their telephone numbers so that they can be called for emergencies. Of course, they do not prescribe more than mild symptomatic treatment without professional advice, but they have often ensured that medical treatment is not delayed by taking their patient up to a hospital casualty department or to the SHAWCO clinic. Students have the opportunity of seeing expectant mothers throughout their antenatal period, of guiding small children through the various stages of feeding and immunization programmes, and of witnessing the effects of individual ill-health on the family as a whole. They advise on nutrition, and through the SHAWCO welfare service they help with clothing and blankets. Students have used their influence to find employment even for unemployables and those who want work, and they have helped shanty dwellers to establish themselves in better homes. On Wednesday afternoons a full consultative service — medical, sociological and nutritional — is available for the 'family doctors' at the Windermere Centre, and when special problems arise an expert is often invited to conduct a tutorial class on the subject. This scheme works in close collaboration with the SHAWCO nutrition service which makes skim-milk, fish, vegetables and other commodities available at very little cost. Largely as a result of the health-promotion activities of the medical students, 80 gallons of skim-milk are sold daily at SHAWCO.

Seventy five per cent. of the medical students participate in SHAWCO activities.

It is still too early to assess the effects of these activities on the students and on the Windermere community. However, very few will doubt that the health of the people will inevitably be benefited and that through SHAWCO the medical students of the University of Cape Town are more than ever being prepared for service to mankind.