

## The Legal Union of Same-Gender Couples Act

**Dear JP:** Thank you for letting me see your very sound and acceptable viewpoint [p. 131], and for asking me to comment before publication.

Having been in a same-gender partnership for 39 years myself, I have been mulling over this issue for some time now and have come to the conclusion that 'gay marriage' is not the right term to use for a same-sex union. In South Africa traditional and Muslim 'marriages' as defined in the Bible of Christian and Jewish religions were not legally acknowledged until the promulgation of the Recognition of Customary Marriages Act No. 20 of 1998, which in fact still allows more than one wife according to tribal and traditional custom.

In a radio interview Cardinal Napier of Durban reemphasised the Roman Catholic Church's position that condoms are not allowed for contraception, and not even to prevent HIV transmission. When challenged about the fact that this country has a Deputy President who has at least three wives, he replied that it was acceptable according to the Deputy President's traditional customs. Even here 'marriage' though named as such does not conform to the biblical definition of marriage. Although legally correct in the above examples, it is therefore in my opinion the wrong term to use by persons who wish to apply strict biblical criteria.

It is my opinion that a new Act, which could be termed 'The Legal Union of Same-Gender Couples Act', would resolve much of the emotional response to the idea of 'gay marriages'. Nothing, however, would prevent such couples from celebrating their union in a 'gay wedding ceremony'. It is however imperative that some firm legal pathway be created to ensure the position of these couples of same gender (including where one of the couple has undergone a sex change operation), to prevent the sort of tragic situations that have occurred so frequently in the past after the death of a long-term partner; in a recent case in Cape Town, for example, the relatives of the deceased challenged the existence of a committed long-term same-gender partnership in the Supreme Court and claimed to be the sole heirs of the estate.

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# Miracles in the land of non-accountability

**To the Editor:** I read the recent report by Chris Bateman¹ with interest, having done my community service in the Eastern Cape. In terms of patients, colleagues and social life I had a wonderful year. However, I would caution anyone thinking of

the Eastern Cape to seriously reconsider. You don't get paid! Bisho is truly unaccountable.

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1. Bateman C. Miracles in the land of non-accountability (Izindaba). S Afr Med J 2004; 94: 940-943.

## Doctors — new migrant workers?

**To the Editor:** 2004 represents a watershed year for the medical profession. We have been forced to take a long hard look at our profession, our method of practice, our lifestyles and indeed, ourselves.

We see a profession that is more battered and marginalised than ever before and that appears to be haemorrhaging badly. One only has to note the 2 200-odd medical professionals who have been removed from the HPCSA lists for non-payment of their 2004 fees. I deduce that these people did not bother to renew their licences because they are no longer here and do not intend returning. Why have our medical leaders not come to the same conclusion? What is of even more concern is that this represents doctors who left in 2003 or earlier, that is before the tide of negative changed in 2004.

After looking at the 16-odd pages of foreign medical adverts in a recent *SAMJ* I am of the opinion that we will lose 1 in 5 doctors in the next 6 months. It saddens me to see how 'normal' it has become to pop over to the UK for a short period to earn some extra money — we have become the new generation of migrant workers!

This is only one of many changes impacting negatively on our great profession. We face the openly antagonistic and clearly incompetent health department, which has made its opinion of our profession very clear. We are thought of as 'rich thieving fat cats' who simply need a scolding — their actions in dealing with the dispensing debacle and the 'certificate of need' are obvious to see.

They see a profession that has no unity and no pride, and these views are often enhanced by the medical funders to suit their own ends. It is advantageous to the funders to perpetuate the idea among the public that all doctors are rich, greedy, dishonest and self-interested. Without fail all articles put out by the industry include (in paragraph 3) a short description of the massive fraud perpetuated by doctors. We never hear about the more widespread abuse and bullying of patients (and doctors) by these funders who, incidentally, recorded exceptional profits in the past financial year.

Yes, we already know all of this, you may say. Why am I writing this article?

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