FROM **HOPE** TO **ACTION** THROUGH **KNOWLEDGE**

The Renaissance of the
University of the Western Cape

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Editors

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Overcoming the Dentistry Divide: The Role of Brian O’Connell

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Introduction

Literature on the impact of leadership on the successes and failures of mergers in higher education abounds. The process to incorporate the School of Oral Health Sciences of the Stellenbosch University (SU) into the Faculty of Dentistry at the University of the Western Cape (UWC) is hailed as a success story largely attributable to the inspirational leadership and future-oriented visionary approach of the Rector and Vice-Chancellor of UWC, Prof Brian O’Connell. For him the incorporation was never merely about successfully joining two entities. Instead, it formed part of a much larger strategic initiative to mark the “*dawn of new possibilities, ’n nuwe begin, isiqalo esitsha*” (O’Connell, 2005).

Incorporation and merger

On the 9th of December 2002, the Minister of Education announced Cabinet’s decision to incorporate the School of Oral Health of SU into the Faculty of Dentistry at UWC with 1 January 2004 as the preferred implementation date. This announcement followed the respective written acceptance by both universities in support of the proposed incorporation. In accordance with the Merger Guidelines (2003: p. 94), “All institutions involved in a merger or incorporation are required to produce an

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institutional operating plan for the new entity, for the short-term future of three to five years.” In order to give effect to this decision, the two universities appointed negotiation teams comprising three senior officials from each to constitute the Joint Merger and Incorporation Task Team (JMITT). Prof Tyrone Pretorius (Deputy Vice-Chancellor Academic), Prof Hanief Moola (Dean of the Faculty of Dentistry) and Mr Larry Pokpas (Institutional Planner and Executive Assistant to the Vice-Chancellor) represented UWC. SU was represented by Prof Russel Botman (Vice-Rector Teaching), Prof Usuf Chikte (Associate Dean of the Faculty of Health Sciences) and Prof Jan Botha (Director, Division for University Education). A Memorandum of Understanding set out a framework to facilitate the incorporation. It outlined the spirit and sense of cooperation within which JMITT approached the process.

At the very outset, in his capacity as Rector and Vice-Chancellor of UWC, Prof Brian O’Connell established the rules of engagement for his UWC colleagues to set the tone to forge new relationships. The process was of strategic significance for UWC and should therefore be respectfully handled, not as a celebratory take over, but rather as a necessary part of the national rationalisation to optimise the country’s resources in its reconstruction and development. Therefore, he articulated that an opportunity was being presented to develop something special with the combined resources and expertise available from both institutions – a leading dental faculty to serve the citizens of the Western Province and South Africa, and in so doing overcoming apartheid-created fragmentation and inequalities. He also reminded his UWC colleagues that the transition to UWC may not be easy for the SU students and staff. Therefore, in the merger and incorporation discussions there was a need to be sensitive and accommodating, while remaining firmly focused on the bigger picture. He was particularly excited at the prospect of the much larger dental faculty expanding its community service to a larger part of the marginalised and previously disadvantaged communities, as well as expanding its capacity development programmes within the country and beyond its borders into Africa.

As one of its early tasks JMITT developed a plan of action document that was endorsed by the Councils of the two universities. Whilst both institutions acknowledged that the process was legally an incorporation, agreement was reached that the process would be treated as a merger of equal partners to increase the chances of engagement and mutuality of decision-making. This approach was endorsed by the Department of Education in May 2003.

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The incorporation was based on several key principles which JMITT developed from their understanding of the higher education environment and the relevant internal and external influencing factors. The process was not viewed as a rationalisation exercise, but as a combining of the strengths of the two entities. The consequent set of recommendations which JMITT presented to the respective Councils was as follows:

- o All teaching, training and service sites would be retained;
- o Given the above, no voluntary severance packages would be offered;
- o All the service contracts of existing staff of the School of Oral Health Sciences at SU would be transferred to UWC;
- o The students who were initially enrolled at the School of Oral Health Sciences at SU would form part of the new Faculty of Dentistry as UWC students;
- o The process would result in the establishment of the leading Faculty of Dentistry in South Africa;
- o The new Faculty of Dentistry would be internationally competitive;
- o The merger and incorporation processes would address historical and existing inequities in education and training in Oral Health Sciences in the Western Cape Province; and
- o The incorporation should take place on the Minister's preferred date.

Institutional Working Groups (IWGs) were then set up to focus on the different aspects of the process. Each IWG consisted of two members from each institution. The issues identified by JMITT were categorised and assigned to the respective IWGs. With the assistance of an independent Project Management Team and two institutional coordinators, these groups identified the full range of issues and developed recommendations for submission to JMITT. In this process the IWGs ensured that interest groups within each institution were adequately consulted.

Transitional organisational structure and operations

The School of Oral Health Sciences at SU and the UWC Faculty of Dentistry both had proud histories of dentistry and oral health offerings and quality service provision to the community. The incorporation and merger afforded the integrated faculty the opportunity to pool resources and so strengthen its response to regional, national and continental needs, and to ensure that the platforms for teaching and learning, research and community service are enhanced under the academic aegis of the University of the Western Cape. However, the ministerial mandate that the oral health services delivered at all service sites by both entities

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must not be compromised in any way, introduced an element of urgency into determining the future of the new combined Faculty of Dentistry housed at UWC. This was taken a step further by Prof O'Connell by virtue of his strong commitment to, and passion for, community development by reminding the Dean of the Faculty to use the strength of the pooled resources of the two merging dental entities not only to advance the academic programmes, but equally to strengthen both the quality and reach of UWC's community dental services.

The then existing academic organisation of the respective School (SU) and Faculty (UWC) in 2003 influenced the way the interim organisational structure of the new Faculty of Dentistry at UWC was established. The purpose of the structure was to acknowledge the academic leadership positions of staff members and not to disadvantage them in the transitional phase. The UWC Council, with the consent of the Provincial Government of the Western Cape (PGWC), extended the joint appointment of Prof Hanief Moola as Dean of the Faculty in 2004 for a further two years to stabilise the new entity. In addition to the two Deputy Deanships for Academic Affairs and Clinical Affairs held by ex-UWC staff, on the recommendation of the JMUTT, Council established a third position of Deputy Dean for Research to ensure that the ex-SU staff were represented in the faculty leadership. The decision of the Associate Dean of the Faculty to remain at SU eased some of the faculty leadership issues, although his substantive post in the School of Oral Health moved to UWC. To demonstrate goodwill, the existing departmental chairs and deputy chairs were initially rotated to provide for an equitable distribution of both ex-SU and ex-UWC academic leaders in each department. The new faculty initially operated from three campuses: the UWC main campus and those at Tygerberg and Mitchells Plain.

With regard to the academic programme, UWC agreed to combine the five departments at the SU School of Dentistry with the eight departments of UWC's Faculty of Dentistry to arrive at the following Faculty structure, comprised of six departments:

- o Department of Maxillofacial and Oral Surgery
- o Department of Oral Hygiene
- o Department of Community Dentistry
- o Department of Diagnostic Sciences
- o Department of Restorative Dentistry, and
- o Department of Orthodontics and Paediatrics.

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To impose UWC's curriculum onto the new entity would have been counterproductive and demotivating. To increase academic integration, the curricula of the two merging entities were fully incorporated into the new curriculum, but some transitional arrangements had to be made in 2004 for cases in which the module offerings of the former entities were out of synergy. In its due diligence exercise, the newly formed Faculty recognised the need to strengthen its research and postgraduate education profile under the leadership of the Dean and the Deputy Dean for Research.

Towards a single unified faculty

The consolidation of the Faculty of Dentistry was of strategic significance to the University and therefore received top priority in the preparation of UWC's IOP: 2005-2009. The primary challenge for the new Faculty was to maintain its reputation of excellent teaching and patient care with the now larger number of students and staff. The integrated Faculty of Dentistry in 2004 differed vastly from its UWC equivalent in 2003. It had almost tripled in size (the student body of the faculty grew from 344 in 2003 to 899 in 2004, including diploma and postgraduate students), and its staffing complement grew from 26 staff members in 2003 to 86 in 2004. Other changes included a more complex functional location and a student body with a very different demographic profile and cultural experience.

It is a natural phenomenon in a merger situation for those who are personally affected to be concerned, if not apprehensive. The students and staff of the School of Oral Health Sciences of SU were no exception. In fact, for them it meant moving to another University with its own leadership and modus operandi. For UWC Dentistry staff, on the other hand, the return to the Tygerberg campus as their new seat was a vivid reminder of the human indignity they had previously experienced as "second-class citizens" restricted to the fourth floor, designated for people of colour. To avoid the daily indignity, they relocated to the Mitchells Plain campus in 1992. As the head of UWC, Prof Brian O'Connell was fully attuned to the emotional reactions of both sides, as well as the importance of his personal role in allaying any fears and anxieties. He understood the human dimension and that a merger was a more complex process than simply placing staff with different cultural experiences and mindsets in a single entity. For him the task at hand was clear: his leadership approach would determine the success or failure of the incorporation.

Allaying SU staff concerns

It was Prof O'Connell's direct involvement in swiftly resolving the tensions and impasses that convinced the SU staff to accept the harmonisation and transfer to UWC's conditions of service. He did not let niggling issues smoulder and disintegrate into bickering. He reassured them that they would not be personally disadvantaged in terms of their benefits in moving over to UWC. In addition, he explained to the UWC staff the need for understanding and acceptance of the situation, as well as to welcome the SU staff and pledged his support to help them to settle into the new Faculty. He emphasised, once again, that it was not a win or lose situation, but more one that was in the best interests of the country. In the end, it was the Vice-Chancellor's ability to communicate a sense of purpose that inspired staff and convinced them that their combined size gave them sufficient scale and capacity to be the best resourced dental faculty in the country and they therefore offered the University the potential for greater achievements.

Allaying SU student concerns

Prior to the effective date of the merger, Prof O'Connell was able to engage SU students and aggrieved parents via telematic mode, using the SU facilities. These one-on-one question and answer sessions played a key role in their acceptance of the merger. January 2004 saw the coming together of 299 undergraduate dental students who had registered in the previous years at SU and 256 who were registered at UWC. For the latter the change had little or no impact in terms of degree status. As for the SU students, they were regarded as the 'pipeline' students. On registering in their first year they had hoped to have received their qualification from SU. In addition, some students felt that their families had historical links with SU and they would be losing that link. In his 2004 welcome address to the Dentistry students he acknowledged their "wish to see Stellenbosch recognised for the part it has played is not a challenge to our standards but is a wish to honour your present Alma mater and to proclaim for you a valued connection". Consequently, agreement was reached that any pipeline student who originally registered at SU, upon graduation from the merged UWC Faculty of Dentistry in 2004 and 2005 would receive joint certification of their degrees by SU and UWC in recognition of their period of study at SU. The outcomes of these negotiations appeased both staff and students from SU. Instead of dwelling on the past, he invited the combined student body to help make the new Faculty of Dentistry great,

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saying: "It will give you more pride than anything that you have ever done to know that you were not just another student at another university, but that you were critical to the creation of a giant" (O'Connell, 2004).

With the unwavering support of the leadership of the two Universities and the staff of the respective SU School of Oral Health Sciences and UWC Faculty of Dentistry, the new Faculty of Dentistry eventually rose to the challenge to maintain focus and not let impeding challenges, concerns, fears and apprehensions divert focus from the task at hand. With Prof O'Connell playing a direct hand at every step of its evolution, under the leadership of Dean Prof Hanief Moola the focus was shifted to strengthening the teaching and clinical components of the academic programme, as well as community outreach services and human capacity development. In moving forward, the Faculty was inspired and guided by the compelling vision of Brian O'Connell and emerged wiser out of the process.

Upgrading teaching and training infrastructure

To ensure that the students are clinically competent, adequately experienced and knowledgeable to address the health needs of the community, they have to be trained in the laboratories and for this reason the preclinical laboratories were targeted as the first part of 'Project Upgrade'. Under the leadership of Prof O'Connell, the University raised the necessary funding through the Department of Education's Recapitalisation Fund and the redirecting of the Clinical Training Grant to facilitate this process. Until this stage (2006) the preclinical laboratory was a basic bench-style laboratory with no resemblance to the clinical situation. After researching what was available internationally, a 46-seater state-of-the-art Phantom Head Laboratory was designed that would become a Simulation Laboratory comparable to the best in the World. Today, this Laboratory provides the students the closest experience of being in a clinical environment. Each work station is equipped with a life-sized torso and head of a Phantom patient, which enables the students to develop their clinical skills within the context of a real-life clinical environment. Each station also has a desktop computer which is connected to the UWC ICT network and allows students to view demonstrations at the chair-side, but more importantly to be in a position to review previous tasks and access additional material from the intranet and the internet (Figure 15.1). Prof O'Connell believed that to be a world-class facility the Faculty had to offer the best training opportunities, "so that our graduates can

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compete with their peers internationally.” The Faculty is now competing with faculties in the United States and Europe for postgraduate students. The upgraded facilities coupled with the existing huge burden of disease associated with oral health, especially in the Western Cape, has made the UWC Faculty of Dentistry an ideal training site for postgraduate students from the rest of Africa. In addition, this training takes place within the context of an African environment and also fits in well with the train-the-trainer mandate of the World Health Organisation (WHO) collaborating centre status that the Faculty has enjoyed since 1996.

Figure 15.1 The state-of-the-art Phantom Head Simulation Laboratory.

The Phantom Head Laboratory served one discipline in dentistry, namely Restorative Dentistry. The other preclinical laboratories also needed to be upgraded. The limiting factor in upgrading the laboratories is the associated costs as most of the equipment has to be imported. With the Department of Health of the PGWC as a partner in the training offered by the Faculty, the University Executive Management through the sharing of expenses managed to upgrade all the other laboratories, the clinical areas and the lecture venues.

The next laboratory to be upgraded as part of this project was the Prosthetics laboratory. Prior to the upgrade the laboratory had asbestos tables, which were a health hazard. To be compliant with the newest safety and health regulations, the upgrade resulted in a state-of-the-art laboratory with individual benches that have separate high-vacuum suction drawers

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for the dust emitted from the grinding of acrylic and plaster materials with which students work. This is also a 46-seater laboratory and by splitting the class into two groups of 46 students each, a class size of 92 students can be accommodated in the two laboratories in one session for the preclinical work in the new Faculty, making this the largest Dental Faculty in South Africa, if not on the Continent. Two Health Professions Council of South Africa (HPCSA) accreditation panels that reviewed the Faculty after the upgrades were envious and complimentary about the state of the preclinical laboratories.

Advancing postgraduate education

Prof O'Connell as a visionary wanted to establish the Faculty as a forerunner in Implant Dentistry. This included an investment by the University in the first Cone Beam CT scanner in the Radiological Department. Cone Beam CT scanners facilitate three-dimensional radiographic images of the jaw bones, which greatly assist in the planning and placement of dental implants. Having access to one of these scanners enabled the Faculty to expand its postgraduate training in Implantology, which has been oversubscribed every year since its inception. Implantology is today part of the oral medicine and periodontology specialty and is also part of the maxillo-facial and oral surgery specialty, but in its own right it is one of the most sought-after postgraduate programmes in Dentistry. In addition to the Cone Beam CT scanner, the Radiological Department is very well resourced as regards equipment and staff to now support the training of specialists in all disciplines of dentistry. Orthodontics and maxillo-facial and oral surgery, which are the most sought after specialties in dentistry, have been oversubscribed by at least 8 to 10 applicants for every post advertised. To address this huge demand for postgraduate training, the Faculty revised the postgraduate diplomas in all the disciplines of dentistry (PDDs). These diplomas equip practitioners to do more advanced clinical work in their practices and also give them an opportunity to explore specialisation fields in dentistry. One such diploma is the postgraduate diploma in 'Interceptive Orthodontics', which enables the practitioners to identify and provide reasonable treatment options early in the life of a child so that he/she would not need full blown orthodontic treatment later in life, which could be very costly and out of the reach of most patients. The postgraduate diploma in maxillo-facial and oral surgery enables the practitioner to shadow the specialists-in-training in the specialty of maxillo-facial and oral surgery and experience the rigour associated with this specialty.

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At the time of the merger the undergraduate postgraduate ratio was 85:15. Inspired by the vision of Prof O'Connell, this ratio changed to 80:20 and today stands at 70:30 with 139 students registered for a Postgraduate Diploma in Dentistry (PDD), 53 registered for a master's in Science in Dentistry (MSc), 24 registered for specialist training in dentistry (MDS) and 17 registered for a doctoral degree (PhD) in dentistry. The specialist training programmes require four years full-time training in most disciplines and five years in maxillo-facial and oral surgery. From humble beginnings and with the visionary leadership of Prof O'Connell the Faculty has developed into a leading training site for oral healthcare workers from within the country and the rest of the continent.

Strengthening clinical training

As regards clinical training, the new Faculty now had in excess of 200 dental chairs (units) for the screening and treatment of patients. As some of these chairs were older than 20 years, the availability of spares for these chairs had become a major issue for the Faculty. The University Management in cooperation with the Health Department of the PGWC developed a strategy for the replacement of eight to ten chairs on an annual basis starting with the most outdated chairs until all were replaced over time. Prof O'Connell's insistence on a world-class facility ensured that all aspects of both the Tygerberg and Mitchells Plain campuses were upgraded over a period of three to five years. This included all clinical facilities and lecturing venues as the new Faculty was committed to train between 80 and 90 undergraduate dental students a year and 25 to 30 oral hygiene students. Each year the four dental schools in South Africa together graduate 195 dentists, with UWC contributing at least 85 to this total, making it the largest training facility in the country for dentists. These student numbers did not include the postgraduate students.

Community service and development

The Faculty is today recognised for its achievements in community dentistry through its outreach activities, children's dentistry and prosthetic dentistry. Its historic strength lies in its patient care and support to children and families of low socio-economic status, who are not only more susceptible to poor oral health, but whose general health is compromised through inadequate nutrition, poor speech development, distorted facial

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appearance and low self-esteem. The social and emotional advantages of a pleasing face and smile often far outweigh dentists' strictly clinical achievements.

In the rationalisation process towards establishing the new Faculty, it was agreed that the entire sixth floor of the building in Mitchells Plain would continue as the service centre due to the huge patient load at this facility. There were in excess of a hundred new patients presenting at this facility on a daily basis for oral health care. The Faculty had over the years become a recognised centre for comprehensive oral health care in this previously marginalised community setting in Mitchells Plain. Prof O'Connell felt strongly that the community focus of the oral health programmes at UWC should not be compromised in any way. He wanted to expand the outreach activities so that more of the training could be accomplished in the context of the deserving community. The Community Engagement programme of the Faculty led to revamping of the clinic at the Gugulethu Day Hospital. This clinic is a unique case study and bears testimony to the fact that when stakeholders come together for the sake of the community, much more can be achieved. The premises where the clinic is located belongs to the City Council of Cape Town and also houses the HIV Clinic; the resident dentist is employed by the Health Department of PGWC, while the support staff, equipment and instruments are funded by UWC. On a rotational basis, Faculty staff members together with the resident dentist, who has an honorary appointment with the Faculty, are responsible for supervising the students that rotate through this clinic two mornings a week (Figure 15.2).

Figure 15.2 UWC dentistry staff and students treating patients at the Gugulethu Day Hospital.

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As a rule, all the Faculty's Community Outreach activities are designed to "address unique training opportunities for the students and are vital for addressing the existing health needs in the communities", thus making community engagement a win-win situation. This is in line with Prof O'Connell's vision that community engagement had to be integrated into the academic programme, as this will enable UWC to produce graduates who are "engaged, committed and accountable agents of social good" in accordance with the UWC Charter of Graduate Attributes (see Chapter 7).

This philosophy underpinned the involvement of the Dental Faculty in the Phelophepa Health Train, which is a twenty-coach train sponsored by Transnet to provide a primary health care service to the most marginalised communities in the country. The Train traverses the country for 40 weeks a year, spending a week at a station/siding providing basic primary health care in the remote areas of the country. The dates are publicised well in advance, with each of the health disciplines consulting in excess of a hundred new patients per day while the train is at the station/siding. All students from the Faculty spend two weeks living on the train in their final year providing a much needed service to these communities (Figure 15.3). Students are expected to prepare a reflective report on their experiences on the train making it a learning and service opportunity. Consequently, the Faculty's practical mandate complements the educational mandate. The extensive clinical care of patients is currently carried out at the Tygerberg and Mitchells Plain Dental Hospitals and the associated clinics at Tygerberg Hospital, the Red Cross Children's Hospital and Groote Schuur Hospital. The Faculty also has a mobile clinic that is used two evenings per week to service the neighbouring community, where people often have difficulty accessing oral health care in normal working hours for themselves or their children. The mobile unit is also used over weekends to reach areas that are far from dental service sites. Students participate in these weekend outreaches on a voluntary basis and benefit from peer learning in a community setting.

Figure 15.3 UWC dentistry students treating patients on the Phelophepa Train.

With an academic programme that integrates community service from the third year onwards, the Faculty provides relatively low-cost dental and oral health care services to more than 125 000 patients a year from the greater Cape Town and Overberg regions. It is also the only referral site for patients from the Western and Eastern Cape provinces requiring advanced tertiary and quaternary oral health care.

Reaching into Africa and beyond

Of significance at the time of the merger, the World Health Organisation (WHO) Collaborating Centre status of the University of the Western Cape had just been extended for another five-year period from 2002 to 2007. One of the mandates of this Collaborating Centre was to “train the trainer” (WHO, Education and Training), which is an integral component of WHO programmes. Up until this stage UWC was involved in the training of some staff from the rest of the continent but mostly in the public health domain. This opportunity of training dental clinical trainers for Africa on an expanded clinical training platform appealed to Prof O'Connell. He established a management team to rationalise the usage of the duplicated training facilities that had now become available as a result of the merger. The Mitchells Plain campus as the newer of the two facilities was identified as the first project after the merger to accommodate the expanded classes and to fulfil the mandate of “training the trainers”.

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The additional professionally qualified staff that had become available as a result of the merger were identified to support both the enlarged undergraduate classes and the expanded postgraduate programmes.

Amongst these postgraduate students are students who are part of a very successful “train the trainer” programme, with students enrolling from Kenya, Uganda, Tanzania, Ghana, Sudan, Libya, Mozambique, Mauritius, Nigeria, Zambia and Zimbabwe. There are even students registering from the Asian sub-continent and the Middle East as well. The most satisfying aspect of the early post-merger years is that some of the graduating students are today teachers and trainers in their home countries, thanks to the vision and support of Prof O’Connell. Consequently, amongst the long-term benefits of the “train the trainer” programme has been i) the independence acquired by these countries in Africa to now do their own training, ii) the networking that has been established on the continent and elsewhere, and iii) that staff from the Faculty of Dentistry at UWC are regularly invited to act as external examiners and to assist with curriculum development at those institutions where the UWC-trained trainers are now based.

With the notable success of the Faculty’s “train the trainer” programme, there has been a substantial increase in the number of international students wanting to come to train at UWC. The existing burden of disease associated with oral health, especially in the Western Cape, and the opportunities this presents for training purposes, as well as the access to state-of-the-art equipment and instruments that are comparable to the best in the World, makes the Faculty very attractive as a collaborative partner. Prof O’Connell was a strong proponent of international collaboration and with his support the Faculty now has links with the University of Missouri System, more specifically with the Kansas City campus. The Faculty also has links with the Universities of Oslo and Bergen in Norway, Ghent University in Belgium, Asahi and Meikei Universities in Japan, and with the national Health Services in Kuwait as one of seven preferred providers internationally for the postgraduate training of Kuwaiti nationals.

Conclusion

Faced with the daunting task of incorporating and merging the School of Oral Health Sciences of the Stellenbosch University into the Faculty of Dentistry at UWC in 2003, two entities having different political backgrounds and cultures, the University of Western Cape was fortunate

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to have Prof Brian O'Connell, Rector and Vice-Chancellor, as champion-in-chief to support and lead the project to success. With his direct hands-on approach as a caring humanitarian, he was able to allay the concerns and fears of staff and students, especially from SU. Moreover, his unfailing commitment to the critical role of universities in the country's reconstruction and development agenda, served as the guiding framework to inspire the staff and students of the new Faculty of Dentistry. It also assisted to align the efforts of the University leadership and the Department of Health of the Provincial Government of the Western Cape to build what is today the leading dental faculty in South Africa, if not the continent.

Prof O'Connell's articulation of the significance of the dentistry merger and associated recapitalisation is probably best summed up in his 2005 graduation address on the occasion of the exiting of the first group of graduands from the merged Faculty. He stated: "For the first time in many years UWC is now better able to ... attain a level of excellence, that is nationally recognised, in its missions of teaching and learning, research, and community service" (O'Connell, 2005). Linking UWC's overall sense of accomplishment with their graduation, he then turned to the graduands saying: "I wish, however, to focus on another dimension of the occasion: to see your graduation as a beginning, the dawn of new possibilities, 'n nuwe begin, isiqalo esitsha" (O'Connell, 2005).

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