

Consulting Rooms:

Board of Executors' Buildings,  
4, WALE STREET,  
Telephone 889.

26, Kloof Road,  
Cape Town.

10.4.1

Consulting Hours:

9-10 a.m.; 12-1 p.m.,  
2.30-3.30 p.m.

Telephone No. 949.

Y. V. 32.

Dear Mr Rheinallt Jones,  
The Nation of St. Monica  
Home, (of which I have been  
Honorary Medical Officer  
for the last 12 years)  
has handed me the  
circulars you have issued  
concerning a Conference on Medical  
Services. I think this is an  
excellent idea, & I wd. much  
have liked to attend it,  
but as I have just returned  
from a five months' trip to  
Europe, I regret that I  
cannot get away.  
I feel sure that, in the answers  
which the Nation has given  
to the questions put and also  
in the Report of the Home

which I have asked her to send  
You, you will find all  
the information necessary  
about this little institution  
which has been the pioneer  
~~of~~ in the training of native  
& coloured women as midwives.  
About 70 have passed the  
full S.A. Medical Council exam.,  
and I am strongly in favour  
of this examination being the  
standard for all who aim  
at being midwives.  
Some of those who have passed  
have also taken, at Lovedale,  
the full general nurses  
training & the time ofis now  
past for querying whether they  
are able to take their exams  
or not.  
With regard to the proposed

agenda. I am in favour of a full training of natives in medicine in S. Africa but this seems further off than ever. The number of European medical men trained in S. Africa seems already to exceed the needs. At the same time the idea of training native doctors must be kept in view.

11. (a) I do not think there should be any difference for training for rural & urban work.
- (b) The 6<sup>th</sup> standard is, I think demanded before entrance for the training as a midwife. In a few cases we have had probationers who had not actually passed this low standard, who by means of night classes etc have been able to get through. The higher the stage of education before training commences, the better.
- (c) A special nursing certificate might be considered but there is a danger that,

as this will be probably on a lower standard, that the full training will be neglected.

A number of those trained as midwives are doing the duty of a public health nature (eg

Monica nurses are employed at Pretoria, Windhoek, Bloemfontein <sup>Locations!</sup> etc, on public health as well as maternity duties).

There is a need for a public health training as well.

(iii) This question needs careful consideration as Hation informs me, several fully trained coloured midwives have difficulty in getting suitable work. This is partly due to the fact that they do not wish to leave, in this case, Cape Town for some unknown country district where their services are not appreciated or properly paid for.

Many other points might be mentioned. Kindest regards,  
Yours sincerely  
A. Simpson well

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10. 1111. 32

Dear Rhemallt Jones,  
Thanks for your letter with kind references, and also for papers relating to the Proceedings at Blomfontein Conference. Maffat has asked me to join the Committee re training of nursing aids & I have agreed to do so & have had a talk with him over matters. I am coming round to the view that there will be necessary but I foresee great difficulties in preventing these from being mistaken for the real thing in the way of trained nurses & midwives, and also great difficulty in giving them a training in midwifery which will be of any practical use. As it is no find it difficult to get the fully

trained & certificated nurses  
i.e. midwives to undertake  
the necessary responsibility.

I do not however see much  
hope of a large number of  
coloured natives nurses & midwives  
being trained in the  
near future as the  
hospitals with means of  
meeting the medical  
essential requirements are  
few & seem to be mostly  
using the available cases  
for this purpose at  
present, whilst the  
demand for patients on  
which to train  
European nurses is  
increasing.

We have recently had  
a report from a native  
fully trained midwife  
who has returned home  
to the Kanakei that  
she cannot get work to  
do - This emphasises the

need for organising the method  
of employing these women.  
I notice that Dr Taylor trains  
married women in the hope  
that they will do some  
maternity work near their  
homes, but this will never  
meet the widespread need  
for trained midwives.

Another matter, I have just  
read the 2<sup>nd</sup> Report of the  
I. R. R. I notice that you  
state that the incidence  
of syphilis amongst natives  
has been much exaggerated.  
This is what the Union  
Health Dept. has stated, but  
it is still open to question.  
In connection with the St.  
Thomas Home work, I have  
published the results of 1000  
Wassermann Tests (routine)  
which gives a positive result  
in 28% of pregnant women  
These are mostly coloured but

include a number of natives too.  
The Union Health Dept's figures  
were made on clinical  
examination only, and are not  
considered of value by authorities.

When I was at Robert's  
Heights during the war, heard  
at a meeting of V.D. that there  
is a great deal of syph. amongst  
the house boys in Pretoria.  
The late  
D. Howell Davies, then District  
Surgeon told me that in the  
kwaals, from which these  
boys are drawn, there is wide  
spread infection from women  
& children.

Excuse these hurried  
notes

Yours sincerely  
A. Simpson Wells

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13 Welgemeend St  
Cape town

August 4. 1932.

Dear Dr Wilmot,

With reference to our conversation this afternoon re the resolutions of the Conference held at Bloemfontein last month with regard to the proposed institution of a second grade certificate for non-European nurses, I now write to you in order that I may be in a position to report to my Committee which meets next month at Johannesburg.

The following Resolution was passed at the Conference called by the Institute of Race Relations,-

"That a Subcommittee be appointed to draw up a scheme for training non-European ~~nurses~~ nurses, male and female, on a lower grade curriculum and examination than those of the South African Council, those so trained to be termed "Health Workers", and that the Committee approach the Royal Sanitary Institute with the object of the Institute being the examining and registering body."

It was suggested that there should be a three years course of training which small hospitals could give efficiently, that this should comprise a practical training in medical and surgical work, with special application to first aid, an elementary knowledge of midwifery and the elements of sanitation. ~~At present small hospitals give a hospital certificate at the end of three years training.~~  
The object the Conference had was to introduce some uniformity of training, a registration of those qualifying; but this was not to interfere in any way with those non-Europeans able and anxious to take the Medical Council's diplomas.

X It would not be practicable to add to the three years training by work elsewhere.

MEMORANDUM.

Telegraph Office:—LOVEDALE.  
Railway Station:—ALICE.  
Telephone:—41 ALICE.

LOVEDALE, C.P.

23-8-1933

From

DR. MACVICAR,  
VICTORIA HOSPITAL,  
LOVEDALE.

To: J. H. Beckett Jones & Co. Ld.  
P.O. Box 426  
J. Beckett Jones

Dear Mr Beckett Jones,  
Thank you for your letter to the Cape Town meeting  
of the Medical Committee of the Anniversary Conference. I am not going  
to the Medical Congress & am sorry I shall not be able to attend the  
meetings of the Medical Committee. Please convey my apology to the  
meeting.

Yours very sincerely,  
W. Macvicar

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