

SUID-AFRIKAANSE INSTITUUT VIR RASSEVERHOUDINGS (Ingelyf)

37 JUL 1940

P.O. Box 97,
JOHANNESBURG,

July 30th, 1940.

TO MEMBERS OF THE MEDICAL WORK COMMITTEE OF THE CHRISTIAN
COUNCIL OF SOUTH AFRICA:

The grave financial difficulties which many Mission hospitals are experiencing as a result of the War situation have necessitated appeals to the Government for immediate help, and the representations have been receiving very sympathetic consideration from the Native Affairs Department. Help has already been given from the South African Native Trust in a few instances.

This crisis has also made it necessary to consider how Mission hospitals are to be financed in future, and to decide what representations should be made to the Government to ensure the continuance and development of Medical Mission services.

In response to requests from members of this Committee I have decided to ask the members to meet at my home, GLANDWR, FOURTH AVENUE, FLORIDA (Near Johannesburg) on SUNDAY MORNING, AUGUST 11th, 1940 at 9.30. to discuss the position of Medical Missions and to decide on the actions to be taken on their behalf. The date and place of the meeting seem to be the only possible ones in the near future for some members of the Committee, and I hope that the other members will find it possible to attend. As the meeting may be prolonged into the afternoon luncheon will be provided.

Material for a memorandum on the position of Medical Missions has been collected, and Dr. R.D. Aitken of the Donald Fraser Hospital, Sibasa, has very kindly undertaken to draft the memorandum in time for the meeting.

Will those members who cannot attend please let me have, in writing, any information and suggestions they can supply before the meeting.

J.D. Rheinallt Jones

CONVENER

NMSD.
July 30th, 1940.

P.O. Box 97,
JOHANNESBURG,

July 30th, 1940.

TO MISSION HOSPITALS:

As Convener of the Medical Work Committee of the Christian Council of South Africa, and in other capacities, I am concerned with the maintenance and development of Missionary medical work among the African and other Non-European peoples in South Africa. The grave situation in which Christian Missions now find themselves as a result of the War makes it necessary for all who care for the welfare of this country to bestir themselves to save the work of the Missions. Medical Missions are in the gravest danger, and I have convened the Medical Work Committee to consider the situation and to decide what joint action should be taken.

The Native Affairs Department has already helped a few Mission hospitals out of the funds of the South African Native Trust, but this help can only meet the most immediate needs: the future of Mission hospitals and their auxiliary services must be ensured. The time has come to press urgently upon the Government the claims of medical Missions to regular and adequate grants from the Provincial or Union Government. The material which Mission hospitals have recently supplied me in response to a questionnaire is being used to prepare the case to be submitted to the Government; but if there are new facts arising out of the present War situation to be considered I shall be glad to receive the information in time for the meeting of the Committee which will be held on AUGUST 11th. Any arguments or other suggestions for the case to be submitted to the Government will be welcomed.

J.D. Rheinallt Jones

NMSD.
July 30th, 1940.

Charles Bourquin
son of Ch. Bourquin ^{of Swiss origin} has just
been appointed A. Commissioner
for the Orancho.

He is a thorough Christian
and all out for doing good.

Rev. Ch. Bourquin } could furnish
Valderzia } his address
P. O. Louis Trichardt }

Senators

In view of the great shortage of Nurses in South Africa, ^{especially for Natives,} would it not be possible for Parliament to come to some agreement with the South African Medical Council whereby Missions may introduce Nurses trained & registered as qualified in their own country, to be registered by the S.A.M.C. for the time they are ~~also~~ in the employ of the Mission?

Similarly for Mission Medical Practitioners

Miss Elizabeth Steinhoff, Aliwal North
Known as Sr. Marguerite Marie: 2 years training in children's section of Cologne University Clinic (1800 beds, 700 for children), lectures at Cologne University.

1 yr. St. Hedwig Hospital Berlin
Registered in Germany as a general & surgical nurse.

"the Nursing Committee is not prepared to register her as either a medical & surgical nurse or sick childrens nurse."

sgd Ewald Herbert
9th Dec., 1934.

THE CHRISTIAN COUNCIL OF SOUTH AFRICA.

NOTICE OF TWO IMPORTANT MEETINGS.

- (1) Meeting of Conveners of Sectional Committees of Council.
- (2) Meeting of Executive Committee of Council.

These two meetings will be held in the Voortrekker Gedenksaal, 224 Visagie Street, Pretoria, on Tuesday, 8th August, 1939, as stated:

9 o'clock a.m. sharp - 10 a.m.: Conveners of Sectional Committees meet. Any member of the Executive Committee is welcome to attend.

Agenda:

1. Each Convener will report briefly on the work of his Committee.
2. Each Convener will submit in writing, with a copy for each member, (see foot note), what he conceivesto be the scope of the work of his committee, and its terms of reference.
3. Each Convener will make definite suggestions regarding the possibilities of greater efficiency of his committee, taking into account the work of the other committees.
4. Each Convener will submit an estimate of the Financial requirements of his committee, indicating the most important items.
5. Discussion, and comparison of scope and fields, with a view to a) eliminating any overlapping, and b) increasing activity.

10.15 o'clock a.m. - 10.30 a.m.: Tea Interval.

10.30 o'clock a.m. - 12.45 p.m., 2 - 3.45 p.m. & 4 p.m. till close:

The Executive Committee will meet. Conveners of Sectional Committees are requested to attend.

Agenda:

1. Devotions.
2. Apologies and Roll Call.
3. Minutes, and matters arising from Minutes.
4. Sectional Committees: a) Report by the Secretary of the Meeting of Conveners held earlier in the day.
b) Reports by Conveners of Sectional Committees on the work of their Committees. (See foot note.)
c) Discussion and mandates to Committees.
5. Finance: a) Report by Treasurer.
b) Report by Temporary Committee on Finance.
c) Proposal: Formation of Sectional Committee on Finance.
d) Proposal: Formation of Book Fund or Books Department.
e) Discussion.
6. Publicity, and Report by Temporary Committee on Publications.
7. Correspondence submitted by the Secretary.
8. Post Madras Work.
9. Other matters submitted in writing by 31st July.
10. Urgent matters sanctioned for discussion by the Meeting.

(Note: 25 copies of reports and other documents from Conveners for circulation to members of the Executive should reach the office by 31st July. The Secretary is willing to duplicate any MS submitted by 25th July.)

152, Nicolson Street,
Brooklyn,
Pretoria.
12th July, 1939.
c9e2.

J. Murray du Toit.
SECRETARY OF COUNCIL.

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TO THE MEMBERS OF THE MEDICAL WORK COMMITTEE OF THE
CHRISTIAN COUNCIL OF SOUTH AFRICA .

My dear Colleagues,

The Commission on National Health Services is commencing its work. It is desirable that a Statement should be made to the Commission in the name of the Christian Council on behalf of the medical missions in the Union.

After the 4th of November when the election campaign is over, Senator and Mrs. Rheinallt Jones will be available to help us should a meeting then be desired. In the meantime I put before you the suggestion that you might be able to meet representatives of other medical missions in your neighbourhood to discuss with them some of the chief points that are likely to arise. If you are able to convene such local meetings, will you please let me know the conclusions arrived at, minority opinions included, if any. If you find it impossible to hold such meetings, will you please let me have your own views. One should add that, while the opinions of medical missionaries working in the High Commission Territories might be very helpful, the Commission is purely a Union body and its recommendations will have applicability to the Union only. As centres for local meetings I am thinking of such places as King William's Town, Umtata and Maritzburg, but it may be more convenient to meet at one of your own hospitals. The questions I suggest for discussion are the following, but I shall be glad to receive also the views of yourselves and your local colleagues upon any other aspects of the subject that occur to you.

(1) Should maintenance grants for mission hospitals be derived (a) from general revenue or (b) from Native taxation?

(2) Do you consider that mission hospitals should be classed (a) with private nursing or maternity homes conducted for gain, (b) with public hospitals, or (c) in a class by themselves?

(3) In the event of a proposal being made for mission hospitals to be fitted in to the framework of a National Health Service, and guaranteed adequate maintenance grants, would your mission be prepared to agree to your hospital, in terms of a simple constitution, being placed under the control of a local board of management, upon which Government would have representation, which would prepare and work to estimates as approved by Government, the hospital being open to inspection by government medical inspectors and the books subject to audit by government auditors,

ON CONDITION

that the Christian and missionary character of the work shall be secured by the mission authorities being entitled

(a) to appoint the Medical Superintendent, subject (? or not) to the approval of Government, it being understood that considerations other than professional competence shall not be a bar to appointment,

(b)....

- (b) to nominate two-thirds of the members of the hospital board, including the Medical Superintendent, who shall be a member ex officio, and
- (c) to accept such grants or loans for capital expenditure as Government may sanction, the buildings in each case remaining the property of the missionary body concerned, but subject to the condition that, should the buildings at any time through default of the missionary body cease to be used for the purposes of a hospital for Africans, the missionary body shall refund to the Government such proportion as shall be agreed upon or determined by arbitration of any building grants or loans received from Government subsequent to the coming into force of the proposed hospital constitution?

I may here explain that the four mission hospitals of the Church of Scotland, at Lovedale (Cape), Sulenkama (Transkei), Tugela Ferry (Natal) and Sibasa (Transvaal), are all working under constitutions drawn up by the missionaries and approved by Government, and following generally the above lines; and the arrangement has been found, not merely workable, but very helpful. No obstacles have been, or indeed could be, placed in the way of religious work in these hospitals.

It is clear that a stipulation about refunding can be entered into only by missionary bodies that are in a position to implement the stipulation. Such bodies must have a permanent existence in law and be financially strong. Most of the mission hospitals of British origin have such backing. Would it be possible in your opinion for hospitals not so fortunately situated, or those with bases abroad, to arrange for local committees to be established with boards of trustees?

It is most difficult for mission hospitals to develop sufficiently to meet the needs of the populations - some very large - which they have set out to serve, unless substantial help is got from Government for both the erection of buildings and current expenditure, and, if our mission hospitals are unable to develop adequately, we cannot complain if some large scheme is put forward in which our hospitals are disregarded or pushed aside in favour of more ambitious purely government undertakings.

On the other hand, substantial grants cannot be looked for unless arrangements are made by which government can be satisfied that efficiency is established and maintained, and that mission hospitals are so managed that healthy development can be expected.

(4) It has been suggested that we should put forward in our united Statement a recommendation that the greatest single advance which can be made at the present time in the Native areas would be the provision of a well-organised Public Health Service, mainly concerned with the initiation and maintenance

of....

of preventive measures, and working in close co-operation with mission and other hospitals. Do you agree?

(5) In the event of a proposal being made to fit mission hospitals into a Union-wide scheme, with Government assistance on a substantial scale, would missions give an undertaking not to compete against each other but rather, if necessary, to combine? What area, or what population should one hospital attempt to serve?

(6) What should be the relation of clinics and nursing stations to hospitals?

I am sending you herewith part of a memorandum Dr. Aitken of the "Donald Fraser Hospital" has sent to the Commission. This memorandum gives a full and very interesting account of the work of one mission hospital. If other medical missionaries could do the same, the cumulative effect would, I believe, be valuable.

I enclose also a memorandum on the registration of mission hospitals as nursing homes.

This is only a preliminary enquiry. I am planning to communicate further with the members of this committee, and also to send out a questionnaire to all medical missions in the Union. Every effort must be made to prepare for the Commission a complete account of the work now actually being carried on by these missions.

I shall be glad to hear from you as soon as you are in a position to give me a reply; and will you please say if you feel that a meeting of this Medical Work Committee should be held, and, if so, about what date.

Yours sincerely,

NEIL MACVICAR.

46, Seventh Avenue,
Parktown North,
Johannesburg.
21st October, 1942.

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Misc. 27/39

CHRISTIAN COUNCIL OF SOUTH AFRICATo Members of the Committee on Medical Work

The following matters are brought to the notice of members of the Committee:-

1. GOVERNMENT GRANTS:

It will be remembered that as a result of representations from the Committee, the Transvaal Provincial Administration agreed to include in an amending Ordinance on hospitalisation matters, provision for the grants to Mission hospitals being placed upon the basis of 2/6 per patient per day. Unfortunately, the whole question of the responsibility for the hospitalisation of Natives has been raised between the Provinces and the Union Government and the Transvaal Provincial Administration has held up the new provision.

During the last session of Parliament the Minister of Finance said in the Senate that the Union Government has accepted in principle responsibility for helping with the hospitalisation of Natives but that the extent of this responsibility and the method of its application have still to be considered.

I am apprehensive lest this service also may be imposed upon the Native Trust Fund.

I hope soon to circulate to all Missions a memorandum detailing the various sources from which financial help can be secured for medical work among Africans.

I shall be glad if members in the various Provinces will inform me on what basis grants to their hospitals are being paid at the present time.

2. CRIPPLE CARE:

Dr. Guinness (of Victoria Hospital, Lovedale) and I were present at a Conference held at Cape Town on June 5th and 6th, 1939, to consider the steps to be taken to develop Cripple Care in the Union, having in mind, among other considerations, the offer of Lord Nuffield to the Union Government. I attach hereto a copy of the resolutions of the Conference.

The Conference also decided to initiate a National Council for the Care of Cripples and it is expected that the meeting to establish the Council will be held in October. The draft Constitution provides, amongst other things, for the membership of the Council to include "one representative of each such nationally organised bodies interested in Cripple Care as are approved by the Executive Committee", and in this connection it is expected that the Medical Work Committee of the Christian Council will be invited to appoint a representative on the National Council for the Care of Cripples.

Dr. Guinness originally attended the Conference on behalf of Victoria Hospital, Lovedale, but it seemed desirable that the Medical Work Committee of the Christian Council should be included among the nationally organised bodies represented at the Conference (I, myself, represented the South

African Institute of Race Relations), I arranged for Dr. Guinness to be registered as representing this Committee. I trust my action will have the approval of members of the Committee.

3. GENERAL:

I shall be glad if members will bring to my notice any other matter which should receive the attention of the Committee.

J. D. Rheinallt Jones

Convener

c/o South African Institute of Race Relations,
P.O. Box 97,
JOHANNESBURG.

August 5th, 1939.

/PBC

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c/o South African Institute of Race Relations,

P.O. Box 97,

JOHANNESBURG.

August 5th, 1939.

/PBC

CHRISTIAN COUNCIL OF SOUTH AFRICACOMMITTEE ON MEDICAL WORK

C/o S.A. Institute of
Race Relations,
P.O. Box 1176,
JOHANNESBURG.

December 10th, 1936.

To Members of the Committee

MEDICAL MISSIONS IN THE TRANSVAAL

Herewith I send a copy of the minutes of a Conference of Transvaal medical missions held at Pietersburg on October 27th under the auspices of this Committee.

Acting upon the instruction of the Conference, a deputation consisting of Drs. Aitken and Rosset and the undersigned attended on the Public Hospitals Committee (Transvaal) at Pretoria on November 19th. Unfortunately, the Bishop of Pretoria and Dr. Mathews were unable to attend. The deputation was given a sympathetic hearing by the Committee and many questions were asked indicating keen interest in the points raised. There is every reason to hope that the representations made will bear results favourable to medical missions.

REGISTRATION OF CONTINENTAL (EUROPEAN) AND AMERICAN
MEDICAL MISSIONARY DOCTORS AND NURSES

The introduction by the Government in April last, on the representations of the Union Medical Council, of a new regulation governing the registration of non-British medical practitioners and nurses, has imposed great hardship on certain missions. Under the regulation holders of non-British medical diplomas must spend three more years in a British medical training institution and qualify again.

The Executive Committee of the Christian Council authorised a deputation to wait on the Medical Council, in the hope that the hardships involved in the special cases under consideration would induce the Council to recommend some form of relief. Unfortunately, a personal interview failed to secure any modification of the regulation, and the Minister of the Interior has stated that he is unable to make any alteration except on the definite recommendation of the Medical Council.

MEETING OF THE COUNCIL

The Executive Committee of the Christian Council has suggested that the Standing Committees of the Council should meet before the Council meeting on January 21st and 22nd at Johannesburg. I shall be glad to know

- whether -

whether TUESDAY, JANUARY 19th, 1937 would be a convenient date for members of this Committee. Kindly tear off the slip at the foot of this circular and return it to me at your early convenience. You have already had sent to you a copy of the terms of reference of the Committee, and I shall be glad if you will let me know which of the items in the terms of reference you would particularly like to have placed on the agenda of the meeting.

J.D. Rheinallt Jones

CONVENER

To the Convener,
Medical Work Committee of
the Christian Council of South Africa,
C/o S.A. Institute of Race Relations,
P.O. Box 1176,
JOHANNESBURG.

I can/cannot attend a meeting of the Medical Work Committee
in Johannesburg on January 19th, 1937.

Signature

/LR.

Collection Number: AD1715

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