## SPEECH AT THE DEDICATION SERVICE FOR NURSE GRADUANDS

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The Matron, the Medical Superintendent, medical and nursing staff, Reverend Sirs and Reverend Sisters, Graduands, distinguished guests, ladies and gentlemen.

It is indeed cause for great joy for me to be here at St. Mary's Hospital as guest speaker on such an important day in the calendar of this institution. I have a long association with St. Mary's Hospital as one of our Diocesan institutions in the Diocese of Zululand. This hospital was amongst the concerns of the Diocese of Zululand whose affairs came before us when I was a member of the Diocesan Standing Committee, and of the Diocesan Trust Board during the Episcopacy of both Bishop Thomas Savage who is buried here, and Bishop Dr. A.H. Zulu.

I thank the Matron for inviting me because I regret the fact that my involvement with my leadership role in the KwaZulu Legislative Assembly, in INKATHA and the South African Black Alliance, has distanced me to the extent it has done so from the affairs in which I was so intimately involved more than 10 years ago.

I am grateful to be a guest speaker on this occasion both as a Black leader and as a Christian. This is not the first time I have spoken here on graduation day, and although this is the case, I was quite happy to accept the Matron's invitation to be here today as guest speaker, as I regard this as a very important assignment that has been given to me on what is a happy day not only for both staff and graduands, but also for African parents, many of whom skimped and sacrificed to educate their children who are graduating today, because we Blacks are by and large an economically deprived section of

the population of South Africa. So this is not just a day for our nurse graduands alone. This is as much a day for their parents and guardians who sacrificed to get them where they are, as much as it is a day for the African community in general.

Throughout the world, a hospital is a place which is deeply respected. It is a place where the weak and helpiess are cared for. The importance of the work done at a hospital is shown by the Hypocratic Oath which guides the ethics of the medical profession. No other profession has such high ideals as the medical profession. It is also highlighted by the Florence Nightingale pledge which the nurse graduands take on graduating as nurses.

In one sense the medical profession in general and hospitals in particular are the pinnacles of human advancement. It is a place where people, ravaged by disease or smashed in accidents, can give themselves over to others, entrust themselves to others and believe in others.

In the harsh world of reality, there are very few places as trustworthy, as duty-bound and as devoted to alleviate human suffering as hospitals. We as laymen are awed by the skills of doctors and nurses. We obey their commands and even the most hard-headed of us subject ourselves to their discipline.

In times of warfare, the medical profession is free to go about its humanitarian work even among the enemy lines. The red cross on an ambulance, or painted on the roof of a building, is a shield against aggression.

These high ideals are, of course, subject to human failure as are all the endeavours of man. Even though none are perfect, the ideals of the medical profession stand high above most other professions.

These ideals could not be served if they did not have the back-up service of the other hospital staff. Those who serve to support the doctors and nurses at work in a hospital, serve a noble cause themselves. The administrative services and the maintenance services are part and parcel of the medical care which patients receive. Those who clean the wards are part of the same team. When one has a functional whole in which one part depends upon another, each has a vital role to play.

Man has vital organs such as a heart, lungs and kidneys, but in the development of the human body it was the human hand which as much as anything else enabled man to rise to the heights of human achievement. Had man had paws like an animal, he would have got nowhere. The human hand is as much a miracle of development as is the human brain.

The services rendered by back-up staff are as vital as the intricate operations performed by the surgeons. A hospital is judged as a whole. It is a corporate entity performing a complex task. Everybody in this hospital is the custodian of resources and skills which when brought together bring back people from the very doors of death, heal people and make them whole again.

The KwaZulu Government is deeply aware of how desperately short of medical facilities Black South Africans are. The doctor-patient ratio is appallingly high. Hospitals are overcrowded through Black South Africa; there is a shortage of skilled, trained and experienced staff wherever one goes. Some hospitals have to use equipment which should long since have been replaced.

The desperate backlog in the field of medical and para-medical services creates in all those who care for their fellow human beings a deep sense of despeir.

If ever there were a non-political reason for the abolition of apartheid, it is the suffering of the people's health. Apartheid has never been and will never be author to separate but equal development. If there was to be equality before the law, equality of opportunity and equality in essential services, there would be no need whatsoever for apartheid. We have apartheid because there are the privileged and the underprivileged, the haves and the have-nots, the affluent and the destitute. We have apartheid in this country because white society in general want to look after themselves first at the level of affluent Western industrial standards of living. They want then the residue of human needs among the great majority of the population to be solved in typically Third World circumstances.

The struggle for liberation we wage in this country is not simply a struggle against political oppression. It is that, of course. The refusal to give Blacks a vote is plainly and simply political oppression. It is not only that though. It is just as importantly a struggle against economic oppression and against poverty, want and disease.

Those who labour in this country against the ravages of poverty in this country know just how unforgivable the costly duplication of medical services are. They also know where services are duplicated that White services are duplicated on one level and Black services are duplicated on another level.

We Africans who have some education must never forget that it is our poor communities which have sacrificed to have us educated through cheap labour

which has made South Africa the industrial wonder of Africa. We Africans who have some education must never forget that it is the sales tax which even the poorest amongst us pay, which paid for our education. Let us remember that the money which is paid for the buildings we use is money from the pockets of the poorest amongst us. We must never forget that money used to pay the salaries of our teachers who taught us comes from the poorest amongst us. So that from this I hope that you do appreciate that this is a day for our entire African community, in which we have come to rejoice with you.

Our parents and the community which has sacrificed so much to get us where we are expect nothing in return. All they expect of us is to serve and to serve with humility. Our education must never be viewed as a ladder to eminence and hauteur. St. Mary's Hospital is one of the few institutions of this kind which remains under the great Christian environment of the Church. who graduate from an institution of this kind are expected to understand that Christ was a friend of the poor and the despised. He was despised and rejected by those who considered themselves to be eminent and righteous. was despised as someone who degraded Himself in their view. For them He did so when He never hesitated to mix with sinners and those who were despised by eminent people in the society in which our Lord lived and worked. To be trained in this kind of hospital is not something that should just be taken for granted. It is a privilege to be exposed for so many years to the Christian atmosphere of this Christian institution. For you it must be clear more than it may be for those who are trained in hospitals which are entirely secular, that nursing is much more than just a profession which you must use to line up your pockets and to live high off the hog. It is indeed ministry. You must see yourselves when treating and succouring the sick as carrying out our Lord's healing ministry.

I, however, must be bonest and say that in a country such as South Africa where Blacks have limited opportunities, we can not gainsay the fact that there are people who go into the nursing profession not necessarily motivated by the lofty ideals of Florence Nightingale, or the pursuance of Christ's healing ministry, but who go into nursing just to have a job and to earn money. This is a situation forced on some of our people by limited opportunities which Black people have for earning a decent living as I have said.

I must reiterate Professor Hilda Kuper's tribute to the manner in which our nurses acquit themselves in a difficult job and a difficult environment. In a study authored by her husband, Professor Leo Kuper entitled: 'An African Bourgeoisie (Race Class, and Politics in South Africa 1965) in a chapter on nurses, she states:

"In a sharp contrast are the status and role of the Western-trained African nurse who functions primarily in an alien institution, the

hospital, and whose relationship with her patient is structurally depersonalised. Yet the treatment required from the nurse may be both more intensive and physically more intimate than that involved in fulfillment of most kinship obligations. Moreover, the position of professional nurse in itself confers in itself an authority that overrides formalities imposed outside the hospital by differences in age and sex... Nursing bestows on African women new opportunities for freedom of individual development, but carries the burden of added responsibilities."

It is these added responsibilities suddenly thrust on a young African woman which have created problems in the past for nurses operating in this strange environment and in a racist society. A lot of changes have taken place. Whereas the 1944 Nursing Act made the registration of practising nurses and midwives of all races compulsory and required them to be members of the statutory association, the apartheid ideologues in Pretoria have done a lot in recent years to separate African nurses from their colleagues of other race groups. They have attempted to separate members of this noble profession along racial lines by splitting up the nursing association to conform to their apartheid ideology. Even today, the White patients are deprived of nursing care because Black nurses are still not allowed to nurse White patients. So one can give a whole lecture on the problems which Black nurses have encountered because of the racist orientation of our society. For example, in order to add more mystique to apartheid, a Black doctor in the past could not give orders to a White sister and a Black sister could not give orders to a White nurse and so on and so forth. Professor Hilda Kuper makes the point in her chapter on nurses when she states:

"A sister tutor at a nursing Conference said that nursing as Europeans know it did not come naturally to non-Europeans, that they seemed unsympathetic, and that their attitude to male patients was often cruel, because they were suddenly in a position to give orders to men. In opposition to these adverse criticisms is the evaluation by some White doctors that when African nurses are given responsibility and respect they respond well, but that when duties are arbitrarily imposed and there is persistent supervision, the self-reliance of the nurses is undermined. Generalizations of cruelty or neglect of patients have not been substantiated and undue publicity has been given to isolated incidents. The many different qualities of both patients and nurses are bound to produce some conflict, and the nurse as a public servant bears the brunt of blame. When the nurse is African, any failure on her part is racially interpreted".

So Black nurses have suffered blame as part and parcel of the problems which they encountered as Blacks in a race-torn society. But there have been Black sheep amongst our nurses as well. We still experience more problems amongst our nurses now as Black nurses have more responsible positions than in the

past 10 years, and they are going to shoulder more and more responsibility unsupervised by any Whites as time goes on, particularly in our KwaZulu hospitals. Some of our professional nurses have admirably risen to the occasion and are a source of pride to all of us. But there have been others who have not really played ball. What is worse, it is no longer possible when there are no Whites to use in apportioning blame to, as the nursing care in most of our hospitals is today entirely under Black supervision.

Professor Kuper in her study stated 18 years ago that:

"The nurse's relationship to patients are affected by reciprocal status positions, and vary with factors of age, sex and education. Many said that they preferred to work with children, both because of their love of children and because they could exercise their authority without challenge. They have difficulties with uneducated women and with uneducated townsmen as the following comments illustrate:

Women patients are spiteful and sensitive to orders by other women.

Uneducated women are the worst patients. If they are older than we are, they don't like us for telling them what to do, and if they are our age, they are jealous of our position.

It is easiest to deal with educated patients. The uneducated men from the country are also all right. They know what respect means. The greatest trouble comes from the tsotsis, who respect nobody.

One must accept the fact that there will always be odd nurses like in any other professional group. But some things that happen now are important for us as Black people. They are very important for our Black image. It is not a pleasant thing to hear people saying that this and that was not so bad, when Whites were in control. I know about this accusation, for it is thrown at me as well very often. But one can shrug it off if one is operating honestly and to one's best ability. But when Black people in responsible positions give these sort of accusations some validity by their conduct, they let us all down for we are judged harshly by what they do. We have had odd cases where, for example, in one of our hospitals some nurses ridiculed an elderly male patient for wetting his bed so much so that he was driven into committing suicide. We have had a case where ward supervision was so poor in one of our hospitals that children were able to go into the bathroom, opened bath taps and drowned another child.

We have had greed amongst some of our nurses who think of nothing except the golden products. I am not against the golden products operation at all, but I am perturbed by the number of nurses, civil servants and many people in responsible positions who get high salaries in their professions and yet who neglect their jobs because they are so obsessed with the salesmanship in the golden product sales campaigns. The KwaZulu Government had to pay a few thousand rands recently because one of our sisters in one of our hospitals did not give a patient his tablets for epilepsy and instead gave the patient golden product tablets. The patient died. I do not say that it was because of the golden product tables, but there was a strong feeling that if the patient had been given his tablets he most probably would not have died. The money the KwaZulu Government paid on being sued is money we can least afford.

The little we have we must preserve with great devotion and every bit of medical care given must be given with that much more painful care. Every one who labours in our hospitals should jealously guard the resources of the hospital.

In the realities of life, unfortunately, we have those in our midst who are not diligent in the devotion to their duty. There are those who treat the hospitals in which they work as a place of sheltered employment, and the hospital resources as a storehouse of goodles which are there for their filching whenever they can get away with it.

I strive with all my Christian commitment to run a clean and honest administration in KwaZulu. I eradicate graft wherever it rears its ugly head. I jealously guard over the honesty with which we serve our people. I feel personally betrayed whenever I come across dishonesty and careless attitudes to duty among KwaZulu civil servants.

The counterpart of this is that I am angered whenever Whites hint that Blacks are inherently untrustworthy and make a hash of running things. My experience is that people are people, and that graft increases as poverty deepens. It is also true that Blacks are not alone to blame.

The realities which face me are that we have a long way to go in this country to evolve a society in which Whites do not steal from the poor by institutionalised theft through laws and practices which result in inequality of opportunity and disparity of rewards for economic activity. We have a long way to go before Blacks experience the kind of social and economic justice which removes from them the feeling that the world owes them something for nothing.

I am not castigating Whites as racially inferior in one sense and Blacks as racially inferior in another sense. I am simply pointing to the fact that morality has to be encouraged and preserved by the State and that in South Africa the State has failed to do so.

We as Blacks have to accept the fact that we have to pull ourselves up by our own bootstraps. We have to accept the challenge of salvaging the next generation from poverty by the self-help philosophy and self-help development schemes which we mount right now in the span of our own lives. We will also have to preserve our morals in the same kind of self-help way. The State should be the guardian of people's morals. The State should be run by Godly people along Christian lines.

As a Black, I deeply appreciate the devotion to humanitarian pursuits which the Church has shown in setting up and running mission hospitals when they were allowed to do so. I have seen in mission hospitals moving devotion to humanity. I have seen among our priests, nuns, clergy and christian nurses, self-sacrifice and commitment to the poor which would not be easily matched. I have seen church congregations in more privileged areas scrape together the means to run a small hospital.

The South African Government's decision to take over mission hospitals has been widely debated. It is still discussed. For good or evil, it has happened and I am aware of the fact that different people tally up the balance sheet of pros and cons to get different answers.

In KwaZulu, faced as we are with the reality of the take-over, I personally accepted it as a challenge and fervently hoped that Blacks would be given a greater role to play and would take advantage of enhanced roles to serve their people. You can imagine how I now burn with shame when at times my own people, the poor in my constituencies, at times have occasion to remark to me that they were better off when Whites occupied key posts in the hospital in their area.

I give this background to remind all of us who hold responsible positions in our society to remember how we are often judged as a people because of the foibles of others in our community who act irresponsibly. We must remember that we are privileged compared with the vast majority of our people. That relatively speaking the salaries we get are high, and we should be satisfied with that, and not be so mercenary to the extent of forgetting that we serve humankind. Whereas we must be paid for the services we render, we are at the same time privileged to serve, and that in serving we walk in the footsteps of Our Lord. I know that many of my sisters will be angry with me for saying that they are highly paid, that is of course only relatively speaking, taking into account the fact that we are members of the pooreset section of the population of South Africa. We must always remember how privileged we are compared with millions of our people who do not know where to get the next meal. Nurses appreciate this more than anyone of us. They nurse malnourished children and adults every day. We must remember as we serve our

people that the money we are paid is in fact their money. The least that is expected of us is to serve them with the dignity they deserve as creatures of God's creation, made in the image of God.

I have come here to thank you, my sisters, for performing a wonderful job in the noble profession you have chosen. I have come here to congratulate you on your success. I have come here to wish you God's blessings in your great job as you continue to serve your people, God's people. I have come here to congratulate both the teaching staff and graduands. Thank you for inviting me.