

# HEALTH + DISEASE

NURSES

1983

JAN. — DEC.

# Influx of nursing trainees

Star  
6/1/83

**Pretoria Correspondent**  
The number of trainee nurses who registered this week at Pretoria's training hospitals is considerably larger than last year's intake.

A spokesman for the HF Verwoerd Hospital said 245 trainee nurses had registered, of whom 196 were doing the diploma course, 39 the degree course and 10 the two-year course.

There were 50 more new trainees than last year, he said, adding that the girls had come from all over South Africa, as well as from Malawi and Zimbabwe.

Dr H S C Malan, superintendent of the Pretoria West Hospital, said 32 trainee nurses had registered there, compared with only nine last year and about 40 in each of three preceding years.

95 D. Dispatch 21/1/83

# Temporary nurses might make way for students

EAST LONDON — Some nurses on the temporary staff of Frere Hospital here had been warned they might have to leave later this year so that students can take over posts, the hospital's medical superintendent, Dr R. M. Newbery, confirmed yesterday.

Dr Newbery was reacting to inquiries about claims that some black staff nurses — some occupying temporary posts for more than ten years — had been warned their services might be terminated at the end of March.

In a statement issued yesterday Dr Newbery said: "It has come to my

attention that considerable alarm has been caused by a notice to certain members of the staff of the hospital that their services might have to be terminated later this year."

He said the facts were:

- Frere Hospital was a training institution for nurses and certain paramedical staff, and as such students had priority;
- Over the past few years there had been "a dearth of students applying for training";
- In order to keep the service going, certain classes of nursing staff

had been employed in a temporary capacity in vacant posts; and

- With the increase in applicants for training this year, some of the temporary staff might have to leave, so that students could again occupy the posts.

He did not know how many would be affected.

"But we have felt it only fair to warn certain temporary staff members that this might happen," he said.

He apologised for the alarm but added he felt it was kinder to warn people than abruptly end their services. — DDR.



DR NEWBERY

95  
E. Post  
31/1/83

# Nurses should 'stick to their communities'

By GARTH KING

DESPITE the fact that nurses of all race groups received the same training, it was "undesirable" to have nurses treating patients not of their race.

This is the opinion of the new head of the University of Port Elizabeth's Department of Nursing Science, Prof Wilma Kotzé.

The former head of the University of Pretoria's Nursing Science Faculty said in an interview published in an Afrikaans newspaper that that because of the relatively high ratio of white nurses to the white population and the low ratio among "non-whites", it was clear that more black nurses were needed for black patients.

This was reflected in South African Nursing Association statistics.

In 1970 there was one white nurse for every 145 whites, one black nurse for

every 782 blacks and one "coloured" and/or Asiatic nurse for every 832 people in these groups.

In 1975 there was a white nurse for every 175 whites and among "non-whites", a nurse for every 111.

People of the same background readily understood each other, she said.

A spokesman for Port Elizabeth's non-racial St Joseph's Hospital said they experienced few problems although there were isolated incidents stemming from the prejudices of white patients who objected to black care.

"The nurses are all similiarly qualified and a nurse is, after all, a nurse whatever her cultural background. Normally things run very smoothly here," he said.

The chief superintendant of the Provincial Hospital, Dr Leon Cilliers, said he had "no comment" to make

# Many nurses under-qualified, says Sana president

95) By SUE OLSWANG *Post*  
MANY South African nurses are not properly qualified, according to Professor M C van Huyssteen, president of the South African Nursing Association.

The professor was addressing a full-day symposium held today at the Sharley Cribb College for Nursing in Port Elizabeth.

The symposium was organised by the Eastern Cape region of the South

African Nursing Association (Sana) and is discussing new trends in nursing education.

5/2/83  
"When training nurses," Prof Van Huyssteen said, "the accent should be on teaching and learning for service. Our nurses have certain skills but there is very little time to become a mature professional nurse."

She said that in September 1982 the South African

Nursing Council had approved changes in the training programmes for nurses.

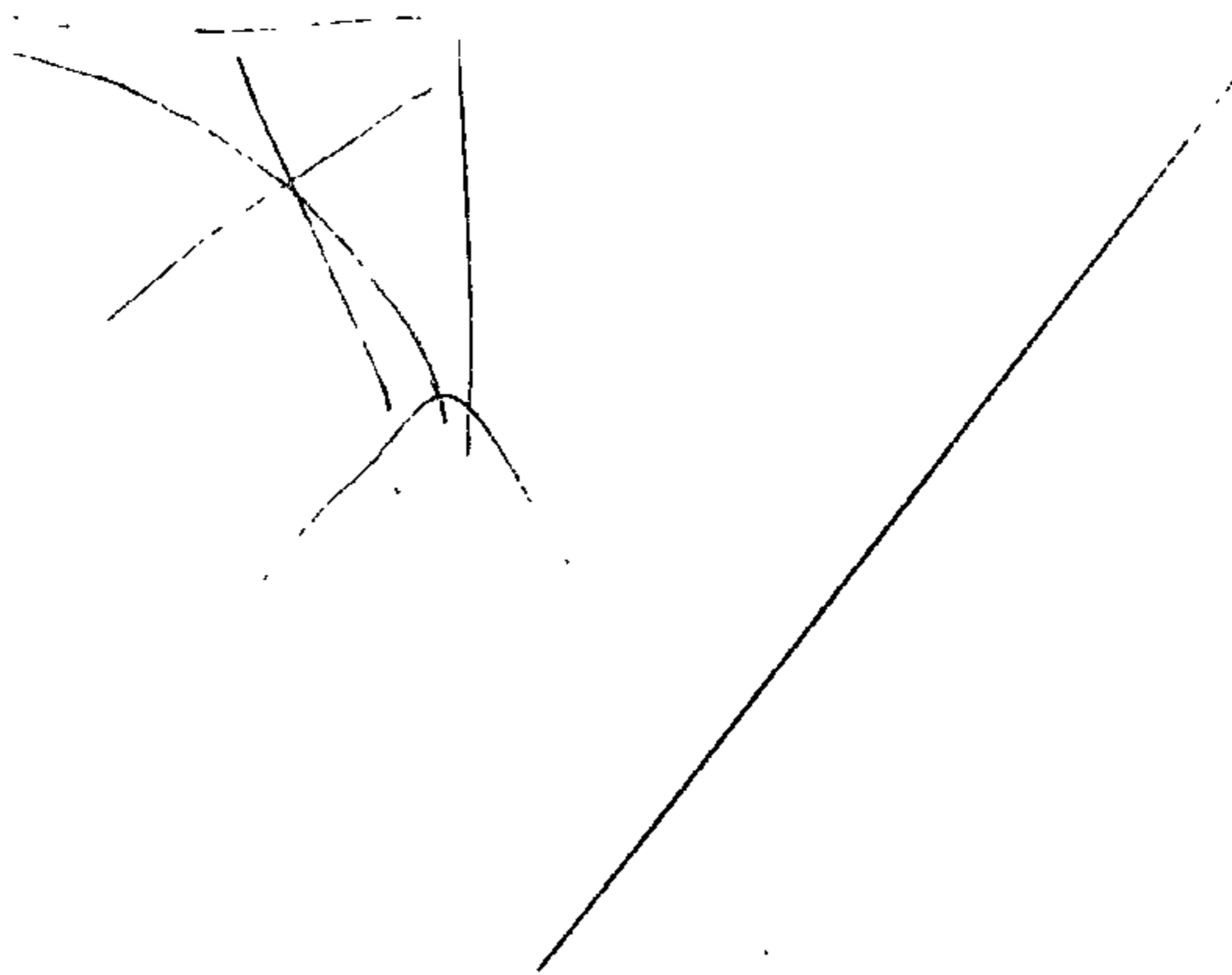
Training will in future consist of one comprehensive basic course which will be run over a minimum of four years. At the moment such training can take up to six years.

The long basic courses will be phased out but the short one-year courses — which include courses in

psychiatry and community health — will continue to operate.

The practical training could be shortened, Prof Van Huyssteen said, so long as it had a good educational content.

She added that training must take place at approved educational institutions — training colleges and universities — and said that hospitals were "not approved educational institutions".



9/2/83  
Registered  
nurses (95)  
Mercury  
wait for posts  
at hospitals

Mercury Reporter

HOSPITALS have waiting lists of registered nurses wanting to don their white uniforms again as the women return to the profession in their droves.

According to an article in the South African Nursing Association's journal, the new salary scales, the economic climate and better recruitment campaigns have all played a part in the improved position.

Natal's Deputy Director of Nursing Service, Miss Joyce Maguire, said that there was an improvement in staffing positions at only some hospitals in Natal.

'Hospitals such as Grey's and Addington usually attract their full complement.

'It seems, however, that the economic recession is encouraging the registered nurse back to the profession.

'Many school-leavers found jobs hard to get when they left school and turned to nursing,' she said.

A considerable influx of ex-Zimbabwean nurses wanting to carry on with their careers in Natal is another reason for the improvement, said Miss Maguire.

### Disappointed

Not all is rosy, however, as both Miss Maguire and the Chief Nursing Service Manager of Durban's Addington Hospital, Mrs R A de Goede, feel that the new salary structures have caused dissatisfaction, especially among the promotion grades.

They said that many nurses were disappointed at salary increases, after the big build-up, and it was difficult to motivate senior sisters to apply for promotion.

'The fact that all posts are filled is not indicative of a well-staffed hospital, because many hospitals do not have adequate nursing posts to provide quality nursing service,' Mrs de Goede said.

She added that many posts had been frozen because of the recession.

CAPT. TIMES 10/2/83 ~~200~~ (95)

# Bigger budget after wage rise for nurses

By JANE ARBOUS

LAST year's salary increases for nurses, which cost the Provincial Administration R17 million, is one of the main reasons for an additional budget application of R83,6 million to balance the current financial year's books, the Administrator, Mr Gene Louw, said this week.

In an interview on the eve of next week's brief interim budget session of the council before the May budget announcement, Mr Louw said the administration's main problem would be to find money to cover rapidly-rising costs. A major factor had been the expense of drought-relief measures.

Mr Louw warned of having to resort to the administration's only three main local sources of income to meet "drastic expenses".

Raising money was an annual "tug-of-war" between betting tax, hospital fees and motor-vehicle

licences, he said, but to say which was going to be increased would be "letting the cat out of the bag".

In his opening speech on Tuesday next week, Mr Louw will comment on developments during the past year.

In terms of the day's order paper, he will ask the council to approve additional expenditure of R83,6 million to balance the provincial books for the 1982/83 financial year, which closes at the end of March.

### 'Odd expenses'

Mr Louw, who originally budgeted for R1 313 million for the current financial year, said the additional budget — about six percent more — was to meet "odd expenses" such as the October salary increases for nurses.

Last year, the additional budget was less than half — R33 million — and was mainly due to price increases on a wide front.

In terms of the Part Appropriation Draft Ordinance, Mr Louw will also ask for R510 million — the estimated funds needed to tide the province over from the beginning of the 1983/84 financial year in April to the end of June when the budget funds start flowing.

This amount is part of the total May budget.

Much of the taxpayers' fate depends on what Mr Louw managed to obtain in the way of government subsidies at a recent meeting with the Minister of Finance, Mr Owen Horwood.

As for the session itself, the leader of the National Party, Mr Piet Loubser, is likely to spark off lively debate with his motion that the council endorses the government's constitutional initiatives.

The leader of the opposition Progressive Federal Party, Mr Herbert Hirsch, said the party would bring up the Congo Caves race "fiasco".

CANDIDATE MUST enter in (1) the number of each question d (in the order in which it has answered); leave columns (2) and k.

All an

Nurr

Nurr

Surna

First

Date

Degr

you

Subj

	Internal	External
	(2)	(3)
	21	
Exami-ners' Initials	J.W.	

(to be copied from the heading on the Examination Paper)

Paper No.....

(to be copied from the heading on the Examination Paper)

### NOTE CAREFULLY

- The answers only on the right hand pages will be marked. The left hand pages may be used for rough work, but no credit will be given for such work.
- Enter at the top of each page and in column (1) of the block on this cover the number of the question you are answering.
- Blue or black ink must be used for written answers. The use of a ball point pen is acceptable. Red or green ink may be used only for underlining, emphasis or for diagrams, for which pencil may also be used.
- Names must be printed on each separate sheet (e.g. graph paper) where sheets additional to examination book(s) are used.

### WARNING

- No books, notes, pieces of paper or other material may be brought into the examination room unless candidates are so instructed.
- Candidates are not to communicate with other candidates or with any person except the invigilator.
- No part of an answer book is to be torn out.
- All answer books must be handed to the commissioner or to an invigilator before leaving the examination.

Any dishonesty will render the candidate liable to disqualification and to possible exclusion from the University

# Nurses want to return to old jobs, says paper

CAPE Times 10/2/83 95

Staff Reporter

FOR the first time in many years nurses are waiting to return to the profession, according to the latest edition of Nursing News.

But many nursing posts have been frozen because of the economic slump, the paper said.

"Although excellent nurses are applying for jobs they cannot be employed at some hospitals until posts are re-instated," Nursing News said.

It points out, however, that the nursing situation has improved dramatically at those hospitals which have continued recruitment.

A slight improvement in the situation at the Cape was reported by Miss Mathie Hattingh, deputy director of Nursing Services. She said that she believed this was because of the intensified recruitment campaign launched last year.

"I am overjoyed by the fact that the incentive is not, apparently, the increased salary scales, but a genuine desire to nurse and an interest in nursing as a profession," she told the paper.

She said 30 student nurses had applied for posts this year at Uitenhage Hospital, which last year drew only five students.

In Kimberley there had been an increase from five to 15 and in Grahamstown five students had applied this year as opposed to one last year, she said.

In Port Elizabeth, where applications were received daily, there were 95 student nurses, a sharp rise from the 68 reported last year.

Miss Hattingh said recruitment at Groote Schuur Hospital and at hospitals in Paarl and Queenstown was still causing concern.

"We will really only be picking the fruits of this intensive recruitment campaign in about two years," she said.

CANDIDATE MUST enter in 1) the number of each question (in the order in which it has answered); leave columns (2) and (3).

	Internal	External
	(2)	(3)
	4	
	4	
	3	
	11	
Examiners' Initials	DM	

All

Si

Fin

Date..... 28-10-74

Degree/Diploma/Certificate for which you are registered (e.g. B.A., B.Sc.)..... B.A.

Subject..... ECONOMICS 1A  
(to be copied from the heading on the Examination Paper)

Paper No.....  
(to be copied from the heading on the Examination Paper)

## NOTE CAREFULLY

1. The answers only on the right hand pages will be marked. The left hand pages may be used for rough work, but no credit will be given for such work.
2. Enter at the top of each page and in column (1) of the block on this cover the number of the question you are answering.
3. Blue or black ink must be used for written answers. The use of a ball point pen is acceptable. Red or green ink may be used only for underlining, emphasis or for diagrams, for which pencil may also be used.
4. Names must be printed on each separate sheet (e.g. graph paper) where sheets additional to examination book(s) are used.

## WARNING

1. No books, notes, pieces of paper or other material may be brought into the examination room unless candidates are so instructed.
2. Candidates are not to communicate with other candidates or with any person except the invigilator.
3. No part of an answer book is to be torn out.
4. All answer books must be handed to the commissioner or to an invigilator before leaving the examination.

**Any dishonesty will render the candidate liable to disqualification and to possible exclusion from the University**



# DON'T DEGRADE

# US! Angry nurses slam public searches

95  
City Press  
20/2/83

**EAST LONDON** — Black nurses at East London's Frere Hospital are furious about the "degrading and humiliating" security searches in front of the public, while their white counterparts walk in and out untouched.

The nurses say they are sick and tired of being harassed and humiliated by searches at the hospital entrance.

"This is going to put us in a bad light with the public who might jump to the conclusion that we are a bunch of thieves," said one disgruntled nurse.

"It's strange that we should be searched and yet this does not

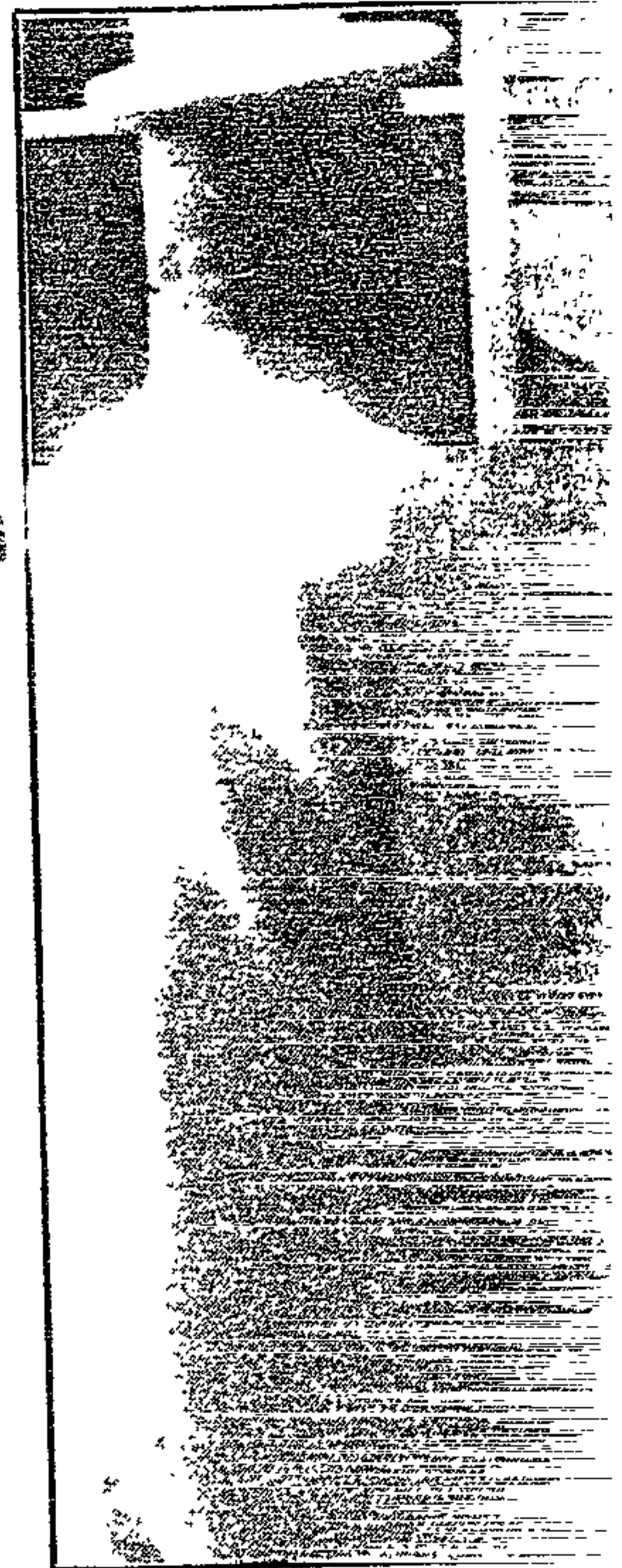
By **BENITO PHILLIPS**

happen to the white nursing staff," she added.

Community leader and management committee chairman Francis Barlow has taken the matter up with the superintendent and a spokesman for the nursing associations said they would be holding a meeting soon to discuss the issue.

The superintendent, Dr R M Newberry, said the hospital was fully entitled to search staff "irrespective of rank and colour".

He said the question of embarrassment caused to staff by the public searches would be investigated and put right shortly.



●A Frere Hospital nurse flees

## Dr K may step into bucket dispute

CP Reporter

THE Duduza township council will ask Dr Piet Koomhof to intervene in the deadlock between it and the East Rand Adminis-

tration Board over the bucket toilet system in the area.

This was disclosed by the council's deputy chairman, Mr Kebane Moloi, who complained that the township's 3 729 families have been living in filthy conditions since the 60s.

Mr Moloi said his council began negotiations with the East Rand Administration Board (Erab) for the laying out of water-borne sewerage in the township in 1981. He said the matter was shelved when his council and Erab reached a deadlock.

"We are now planning to ask Dr Koomhof, Minister of Co-Operation and Development, to come into the picture and solve the problem," said Mr Moloi. "After all, the laying out of such a service is the responsibility of the authorities."



**DAMAGED HAIR**

## Aging, ailing faces judgment

CITY PRESS Correspondent

**CAPE TOWN** — The trial of trade unionist Oscar Mpetha and 17 others, in which more than 100 witnesses have testified in the past two years, has been adjourned for argument to March 28 in the Supreme Court.

The witnesses who testified this week were

the last to give evidence before Mr Justice Williamson gives judgment.

Their evidence brought to a close the first section of the case, which began on March 3, 1981, and has covered more than 10 000 pages of re-

cord. Mr original Terror counts 18 you One men, rotholi dischar

## SHACK TOWN DESTROYED

**CAPE TOWN** — Only hours after ordering the destruction of an entire shack village of 600 homes, Western Cape Chief Co-Operation and Development Commissioner Timo Bezuidenhout told reporters: "This is a lesson to us all that accommodation is badly needed for

had sprung up at Among the shacks longing to families hout had promise in the Western Ca Shortly before the into action, angry women WCAB's Nyanga they had been i

D. Dixakhi 20/4/83

# Ciskei nurses being trained in Cape Town

148  
95

CAPE TOWN — A medical team from the Red Cross War Memorial Children's Hospital is training nurses in Ciskei to provide primary and advanced health services for children according to a Cape Town newspaper

The team has already trained more than 40 nurses from rural clinics and the Cecilia Makiwane Hospital in Ciskei in primary paediatric care. This includes the screening of children for deficiencies of hearing and vision and assessment of their development.

"The training course has resulted in a considerable drop in infant mortality rate in Ciskei," said Dr J Ireland, senior specialist at the Red Cross Hospital, who is a member of the Remote Medicine training team.

"In Ciskei, there is a shortage of doctors, par-

ticularly in the rural areas. Clinic nurses are required to provide health care beyond the scope of their original training. The training course is giving them additional skills which were the exclusive preserve of doctors in the past

Two of the nurses who qualified in primary care, have gone to Cape Town to qualify in advanced paediatrics clinical nursing, a year-long diploma course, after which they will return to Ciskei as tutors in the primary course.

"The advanced care course is an intensive course which enables the nurse to cope competently with 80 per cent of common paediatric problems such as malnutrition, gastroenteritis, pneumonia, infections of the skin, ears and upper respiratory tract," Dr Ireland said.

— DDC.

# Reprieve for illegal Stanger residents

~~Mercury~~  
Mercury Reporter

homes.

THE Port Natal Administration Board has granted a second reprieve to blacks living illegally in the backyards of Indian-owned properties in Stanger, the director of employment services of the board, Mr H J Venter, said yesterday.

The board had now given the blacks, mainly nurses at the Stanger Provincial Hospital, until mid-April to leave their

Initially they had been told to leave by the beginning of February.

A month's reprieve was given following representations by a six-man advisory committee, headed by Mr Simeon Goba.

Mr Venter said the board had granted the second reprieve to give Hospital Services the opportunity to suggest alternative accommodation.

95

125

2/3/83

# Nursing results

RESULTS for final-year student nurses who wrote exams in November last year have been released.

Of over 1 000 student nurses who wrote throughout the country, nearly 70 percent passed the exams.

Results of eight black hospitals on the Witwatersrand, Pretoria and the Vaal showed an average pass rate of 60 percent with only two nurses obtaining distinctions.

At Baragwanath Hospital, which had the highest number of students writing, 61 out of 94 student nurses passed the exams with only one student obtaining a distinction pass.

It was not yet clear yesterday whether the newly-qualified nurses at Baragwanath Hospital would get posts there. A hospital public relations officer, Mrs A Clear, said the nurses would have to apply to the hospital. She could not say whether applicants would be offered jobs.

Last year many final-year student nurses were left stranded when Baragwanath authorities said they would not employ most of the nurses who had trained there. The authorities said there were no posts available.

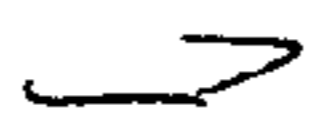
*Handwritten scribbles and lines on the left side of the page.*

*Handwritten notes:*  
allocate in private grade  
social grade  
with grade  
social cat } ex-kennel  
private units

95 ~~110~~ Hansard Q. 61.575-  
Nursing of patients of other races 576  
9/13/83

\*16. Mr. K. M. ANDREW asked the  
Minister of Health and Welfare:

Whether it is the policy of the Govern-



9 MARCH 1983

576

ment to permit nurses to nurse patients of  
other races in (a) State, (b) provincial and  
(c) private hospitals; if not, why not; if so,  
under what conditions?

†The MINISTER OF HEALTH AND  
WELFARE:

It is Government policy that patients be  
nursed by nurses belonging to the same  
population group.

# Greetings — Sash style

g on the year's ac-  
to delegates at the  
nal conference of  
Black Sash at the  
end.

Christmas cards  
people to remem-

families of those of  
—d in detention.

Those in resettle-  
camps.

● Those who been ren-  
dered landless and with-  
out work.

● Those 8 500 000  
South Africans who have  
had citizenship taken  
away from them.

● Those who are mi-  
grant workers and the  
families from whom they  
are separated

The Transvaal region

also reported that they  
sent a letter inviting the  
West Indies cricketers to  
the advice office. With  
the invitations they in-  
cluded the Sash maga-  
zine which contained re-  
settlement information.

"The letter was not ac-  
knowledged by the crick-  
eters", Mrs Coleman's re-  
port said

# Silent minute for deaths in detention

Staff Reporter

A MINUTE of silence for  
people who have died in  
detention in South Africa  
was observed at the  
opening of the Black  
Sash national conference  
in Cape Town.

Fifty-four black sash  
members filed on to a  
platform each wearing  
the name of one of the  
dead on their sashes.

Opening the confer-  
ence yesterday, Dr Allan  
Boesak, president of the  
World Alliance of Re-  
formed Churches, said  
the eighties had brought  
the slow but sure evolu-  
ment of South Africa into  
a national security State.

## HUMAN RIGHTS

"At almost every level  
we are taught to accept  
the security of the State  
is supreme. All other  
things — human rights,  
freedom and democracy  
are of secondary impor-  
tance

"Even worse, some  
give the impression that  
to hold on to these values  
is in itself a dangerously  
subversive activity which  
the State dare not toler-  
ate.

"In the national securi-  
ty State there is a com-  
pulsive desire to control  
all of life and to make as  
much as possible in soci-  
ety subject to the dic-  
tates of the dominant  
ideology"

Mrs Sheena Duncan,  
national president of the  
Black Sash, said the past  
year had brought them  
face to face with the  
harsh realities of the na-  
tional security State.

"The shape of the total  
strategy has become  
clear as the concept of a  
total onslaught is created  
for us, requiring also the  
creation of the image of  
an enemy."



Dr Allan Boesak

# Black nurses 'rejected'

ARGUS  
14/3/83  
95  
~~100~~  
~~105~~

Labour Reporter

IT WAS impossible for  
African women to train  
as nurses in the Western  
Cape, said Mrs Di Bishop,  
Progressive Federal Par-  
ty MPC for Gardens and  
delegate to the national  
conference of the Black  
Sash

Addressing delegates  
on the effects of the col-  
oured labour preference  
policy in the Western  
Cape, she said that de-  
spite the shortage of  
nurses in the Cape, there  
had been a "sustained re-  
fusal" to admit African  
women for training in  
Cape Town, even if they  
had residential rights

## 165 REJECTED

Of the 165 African resi-  
dents who applied for  
training as nurses at  
Cape Provincial hospitals  
in the first half of 1982,  
none was accepted

● Dr Margaret Nash,  
of the Western Cape re-  
gion of the Black Sash,  
said economic stagnation  
in the Western Cape was  
forcing skilled coloured  
workers to seek jobs  
elsewhere.

# -up'

ew, "there should  
need for a massive  
y establishment"

conscripted army  
then necessary, it  
be because of fail-  
respond to the de-  
of South African

ther resolution  
ned the Progres-  
ederal Party for  
ning the recent  
raid into Maseru.

# Death in detention: Laws come under fire

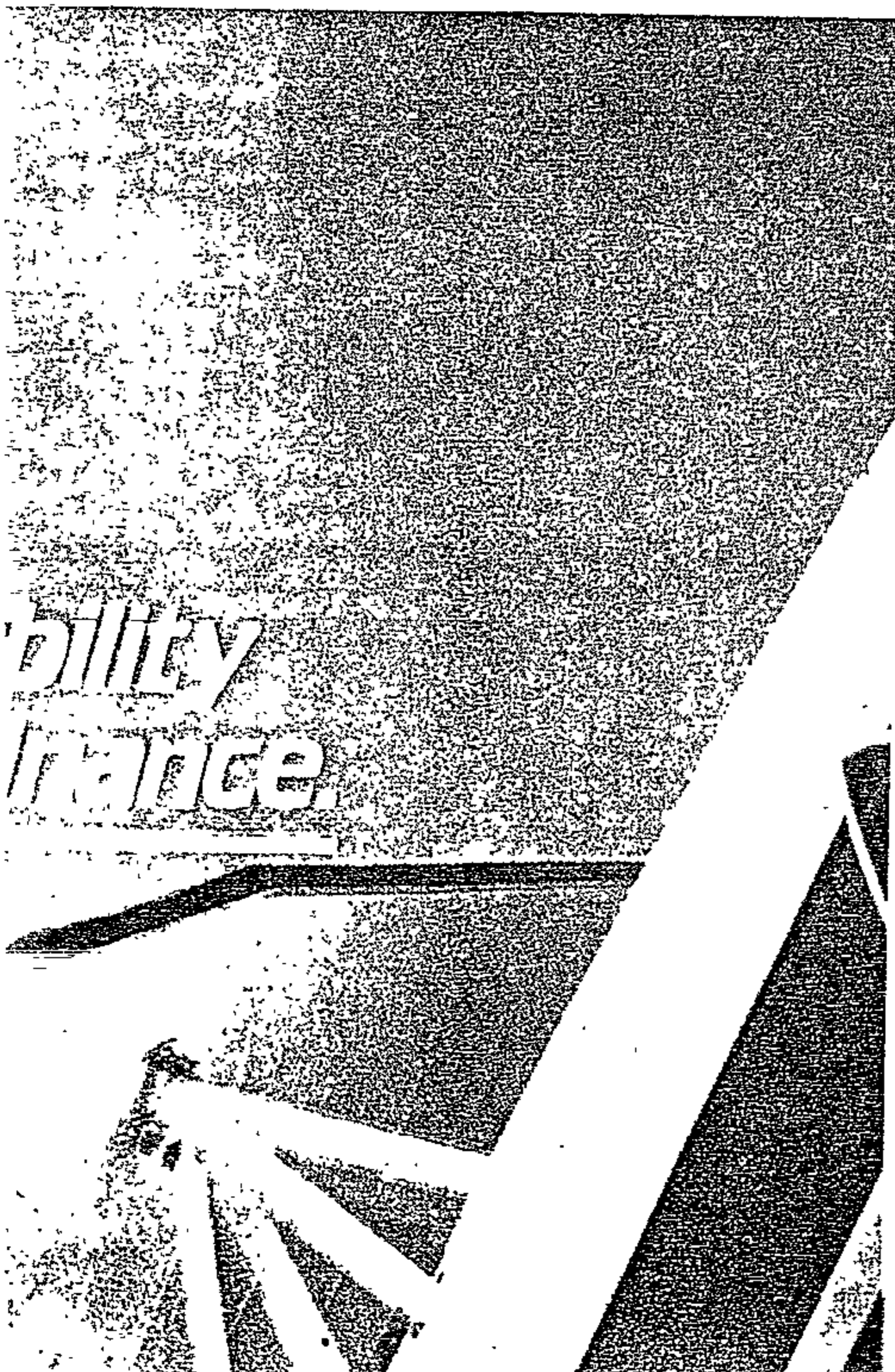
Staff Reporter

THE death in detention  
of Mr Thembuise Simon  
Mndawe had once again  
exposed the brutality of  
the security laws, said  
Mrs Audrey Coleman,  
chairman of the Trans-  
vaal region of the Black  
Sash.

Mrs Coleman was pro-

posing a motion at the  
national conference of  
the Black Sash held in  
Cape Town over the  
weekend.

The motion, which was  
unanimously adopted,  
called for the abolition of  
all security laws and the  
unconditional release of  
detainees.



# Just sit back — and save rands with The Argus

IT'S NOT OFTEN you  
can sit back, put your  
feet up — and save



# Problems facing black nurses

Labour Reporter

IN SPITE OF an acute shortage of African nurses, it was impossible for Africans to train as nurses in the City, Mrs Di Bishop told the Black Sash national conference held in Cape Town this weekend.

Mrs Bishop, a Cape delegate to the conference and MPC for Gardens, said that not only were African women prevented from training as nurses in the area, but the number of posts available had been severely restricted.

This discrimination against African nurses was based on the official coloured labour preference policy in the Western Cape.

"At the same time, official hospital policy is that each population group must nurse members of her own population group."

Mrs Bishop said that in 1980, 24 317 African in-patients and 357 607 out-patients were treated at seven large hospitals in the City.

At the same seven hospitals, there were 39 full-time African nurses and 38 nursing assistants, with no black clerical assistants.

"These hospitals do not



Mrs Di Bishop



Mrs Sheena Duncan

employ translators. Use is commonly made of domestic staff as translators," she said.

African women from Cape Town wanting to train as nurses had to apply to other hospitals in the Cape, where preference was given to training local residents.

"In the first half of 1982, 165 African residents of Cape Town applied for training as nurses at Cape Provincial hospitals."

Of the total number of such applications received in 1982, none were accepted.

"At present it would seem possible for applicants from Cape Town to gain admission only at the Cecilia Makiwane Hospital in Mdantsane, Ciskei.

"Many African residents of Cape Town choose not to take out the required Ciskeian citizenship in order to qualify for admission there."

Mrs Bishop said that while the coloured labour preference policy was being rigidly implemented, thousands of whites from SWA/Namibia and Zimbabwe were settling in the Cape without restriction.

# Better training facilities for black nurses urged

ARGUS 24/3/83

95

Argus Correspondent  
PRETORIA. — The number of nurses registered in South Africa increased by more than 5 000 last year over 1981 but there was a proportional decrease in trained nurses.

This was reported at the six-monthly meeting of the South African

Nursing Council in Pretoria.

The council heard that the number of registrations had increased from 102 108 in 1981 to 107 498 last year.

The vice-president, Professor M C van Huyssteen said, however, that these figures were not so

impressive if seen against the background of the "enormous" number of matriculants.

"In the black group there is a proportional decrease," she said, "and there is also a poor distribution of trained nurses in rural areas."

It was imperative that

the authorities gave attention to improving training facilities for black nurses.

Several members of the council complained that trained nurses were not prepared to move to rural areas as there was "nowhere for them to live".



**T**

**ES**

**OSIT**

**OVERS**

payments  
R2,46

**OSIT**

3 payments  
of R4,94

**OSIT**

# New rules for nurse training<sup>95</sup> approved

ARGUS 28/3/83

Argus Correspondent  
JOHANNESBURG. — New regulations which stipulate a minimum of four years' comprehensive training for nurses have been unanimously approved by the SA Nursing Council in Pretoria.

The regulations will be sent to the Department of Health and Welfare for approval and publication in the Government Gazette, after which they will become law.

In terms of the new rules, trainee nurses will be required to undergo a minimum of four years' training, including compulsory courses in general, psychiatric and community nursing as well as midwifery.

## Specialise

Nurses wishing to specialise further in any of these four disciplines will be able to do so at post-graduate level.

At present nurses undergo a minimum of three years' training and do not do all four disciplines.

Under the present system, a nurse's training requires courses in three basic disciplines and one post-registration qualification before the nurse can function comprehensively.

The SA Nursing Council has recommended the last intake of students allowed to follow the current general nursing (three years), midwifery (two years), psychiatric nursing (three years), integrated nursing (3½ years) courses, be on January 1 1986.

After that all new recruits will have to comply with the new regulations.

## Recognised

The council has given its assurance however that all existing nurses' qualifications will continue to be recognised.

It has also ensured that shortened courses in

general, community and psychiatric nursing and midwifery, be continued at training institutions for those qualified nurses wishing to upgrade their qualification.

The details of the new regulations include: "The main nursing subjects will be introductory nursing science, general nursing science, psychiatric nursing science, community nursing science, midwifery and ethos and professional practice of nursing.

"A minimum of 1 480 hours of lectures. A minimum of 5 000 hours for practical learning experience which must include a minimum of 2 720 hours of general nursing, 800 hours midwifery, 800 hours psychiatric nursing and 320 hours of community nursing.

## Allocated

"The 360 hours left over may be allocated as the training institution sees fit.

"A minimum of 640 hours and maximum of 960 hours of clinical practical at night. This maintains the same proportion of night training as the present regulations.

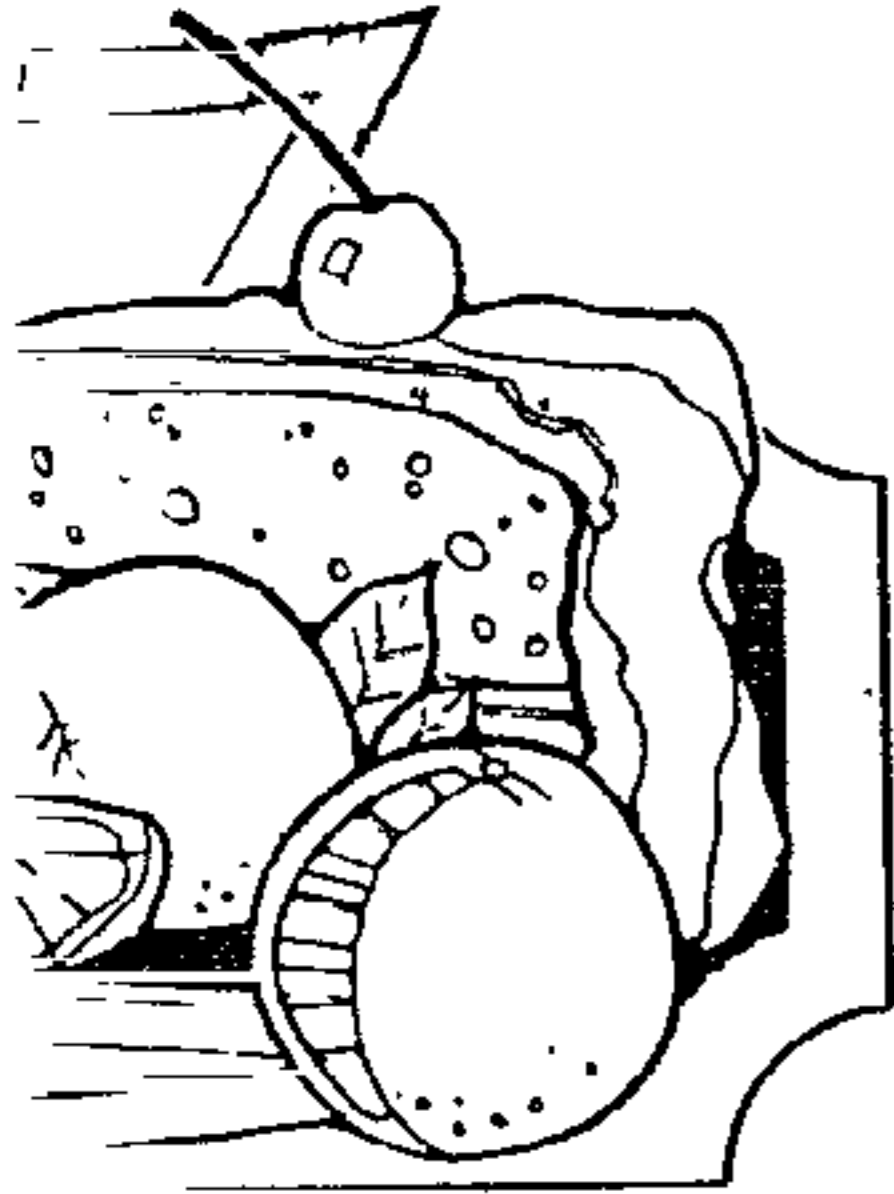
"To be approved as a nursing school, a training institution must be either a department or sub-department of nursing at a university or a nursing college in co-operation with a university.

## Private

"All nursing colleges will set up a College Council in conjunction with their affiliated university.

"Private hospitals which offer basic nurses' training will have to become affiliated to a training college or university."

The new regulations constitute the first major step to ensure a far larger and more comprehensive role in the provision of health care for all sections of the community.



When skinning  
it your fingers from  
...  
... yolks for glazing  
... it spreads.  
...  
... on your savoury  
... a piece of grease-  
... to serve. Sweet  
... with a light coating  
...  
... as close to the end  
... as it loses potency  
...  
... always wanted to  
... food at the  
... Fair.



# 'Attractions of private practice pose threat to medical care in SA'

W/L ARGUS 9/4/83 95 277

Weekend Argus Reporter

SOUTH AFRICA faces a serious deterioration in standards of medical education and patient care, a top doctor warns in the latest edition of the SA Medical Journal.

"The Medical Association of South Africa and the South African Medical and Dental Council should take note that all is not well in the academic dovecote," writes Professor J W Downing, head of the department of anaesthetics at the University of Natal, in a letter to the journal.

He says provincial and State teaching hospitals and university departments of

anaesthetics are suffering from a chronic and critical shortage of anaesthetists "dedicated to public, as opposed to private, practice".

"The training of future doctors in the RSA rests in the hands of a few dedicated individuals whose patience with the notion that the private practitioner is worth two to three times the full-time consultant is fast running out.

"Recently-qualified specialists in many fields, but particularly in anaesthesia, with the potential to undertake a successful full-time or academic career, have taken note of this disparity, and many are going into

private practice, or emigrating.

"The final outcome will be a serious deterioration in standards of medical education and hence patient care in this country as we continue to lose many of our best and finest anaesthetists to greener financial pastures."

Professor Downing, recently returned from 13 months' sabbatical leave in the United States, says anaesthetic teaching departments there bill individual patients, raising considerable funds which are paid directly to the departments.

Further funds, running to millions of dollars, come

from research grants, "interaction" with the pharmaceutical industry and the state.

The money is used to subsidise salaries in the teaching departments, to buy equipment and for book and travel allowances.

Professor Downing suggests a similar system would be feasible in South Africa. The necessary funds could come from salaries paid by the provinces or the State, research funds, donations from pharmaceutical companies and service organisations and fees charged to medical aid and Workmen's Compensation Act patients.

## Patrols organised to stop 'queer bashing'

# Gay vigilantes

By DIRK VAN ZYL Weekend Argus Reporter

CAPE TOWN's only gay rights organisation, 6010, has called on members to form vigilante patrols to protect themselves from "queer-bashing".

Evidence of physical assault on homosexuals by men picked up as casual lovers has emerged recently in a number of court cases in the city.

In its latest newsletter, 6010, which has about 400 members, refers to the formation of the "Pink Panthers" vigilante group in San Francisco "in the early days of gay lib when they were at the rough end of American

bashing' is an amusing pastime".

It asks: "Surely it is time for us to show these dreary men that brute force can be a two-way thing?"

The newsletter continues. "There are people at 6010 who would like to see our own vigilante force patrolling and our members trained in the art of self-defence so that next time some thug thinks he can practise for a world title fight on you, you can show him what the real meaning of Bella Bash is." (The term is gay slang for fighting)

### Publicity

A 6010 founder member, Mr Richard Griffith, salesman in a city book-

licity the gay community gets, the more homophobic reaction there is, like with AIDS" (the immunodeficient condition which has spread in gay communities).

Mr Griffith, who has been assaulted three times, said the biggest problem facing gays was "lack of education and outdated, misconceived ideas in the 'normal' community, although to a degree there is now more tolerance, which, however, I find condescending".

According to Mr Griffith, "you get the situation where well-respected members of the community are not able to operate normally sexually and are beaten to death in their homes" be-

perately needs to relate to someone in physical terms."

Being beaten up was "a basic fact of life for gays".

Mr Griffith continued: "The law in South Africa is ridiculous. It is not illegal to be a homosexual, but just illegal to do something about it. You are virtually condemned to celibacy."

The "biggest battle" facing gays was "their own apathy, which is a form of fear".

According to Mr Barry Kantor, media spokesman for 6010, the organisation "discourages members from 'cruising' - we try to alert them to the dangers involved and to what they are legally entitled to do in case of difficulty".

Case Tmb: 11/4/83  
**17 nurses  
asked to  
resign** 95

Staff Reporter

SEVENTEEN Groote Schuur Hospital nurses have been asked to resign because they had not paid their R15 subscription fees to the SA Nursing Council.

According to the hospital's superintendent, Dr H Reeve Saunders, the hospital had been told by the council that because of their non-payment the 17 assistant nurses had been removed from the nurses' roll.

However, it is understood the issue is a result of a technicality and the hospital will hold the nurses' posts open till outstanding payments are made to the council.

Minister of Foreign Affairs and Information shortly

X  
 95  
 32A  
 984  
 Howard A. Col.  
 Cape Peninsula: nurses 983-984  
 15/4/83  
 \*10. Mr. K. M. ANDREW asked the Minister of Co-operation and Development:

- (1) Whether any Black nurses applied in 1982 for permission to work in the Cape Peninsula; if so, how many applications were granted;
- (2) whether any applications by such nurses were refused; if so, (a) how many and (b) why?

The DEPUTY MINISTER OF CO-OPERATION:

- (1) Applications received—5.  
Applications approved—5.
- (2) (a) None of the applications received has been refused.  
(b) Falls away.

*Note:* Twenty-one applications, all of which have been approved, were received to enter the Peninsula for purposes of training in midwifery at St. Monica's Home.

Cape Peninsula: nurses

\*11. Mr. K. M. ANDREW asked the Minister of Co-operation and Development:

- (1) Whether any Black nurses applied in 1981 for permission to work in the Cape Peninsula; if so, how many applications were granted;
- (2) whether any applications by such

nurses were refused; if so, (a) how many and (b) why?

The DEPUTY MINISTER OF CO-OPERATION:

- (1) Applications received—2  
Applications approved—2.
- (2) (a) None of the applications received has been refused.  
(b) Falls away.

*Note.* Twenty-five applications, all of which have been approved, were received to enter the Peninsula for purposes of training in midwifery at St. Monica's Home

Cape Peninsula: nurses

\*12. Mr. K. M. ANDREW asked the Minister of Co-operation and Development:

- (1) Whether any Black nurses applied in 1980 for permission to work in the Cape Peninsula; if so, how many applications were granted;
- (2) whether any applications by such nurses were refused; if so, (a) how many and (b) why?

The DEPUTY MINISTER OF CO-OPERATION:

- (1) No such applications were received.
- (2) (a) Nil.  
(b) Falls away.

*Note:* Twenty-six applications, all of which have been approved, were received to enter the Peninsula for purposes of training in midwifery at St. Monica's Home.

(95) *Hansard* Q. 61. 1101  
Nurses 26/4/83

697 Dr M. S. BARNARD asked the Minister of Health and Welfare.

- (1) How many (a) applications to train as nurses were received from and (b) vacancies at institutions for the training of nurses existed for (i) Whites, (ii) Coloured persons, (iii) Indians and (iv) Blacks in 1981 and 1982, respectively;
- (2) how many (a) White, (b) Coloured, (c) Indian and (d) Black nurses completed their training in each of these years?

The MINISTER OF HEALTH AND WELFARE:

- (1) (a) (i) 978.
- (ii) and (iii) 3 440.
- (iv) 7 576.

figures are only available as from 1982

	1981	1982
(b) (i)	4 307	4 154
(ii), (iii) and (iv)	1 264	963

the posts are interchangeable for students and pupils and for Coloureds, Indians and Blacks.

	1981	1982
(2) (i)	2 882	2 329
(ii)	983	769
(iii)	304	191
(iv)	3 627	2 918

these figures exclude the Transkei.

*[Handwritten signature]*

The Star Friday April 29 1983

By Pamela Kleinot

Half of those who apply to train as nurses leave before they complete the course, according to Ms Meryl Hammond (26), of the department of community health at the University of the Witwatersrand.

Ms Hammond had reached this conclusion after a three-year probe into South Africa's nursing crisis — the theme of the Master of Arts degree in sociology which she obtained with distinction at the University of the Witwatersrand last night.

These are the drop-out rates at the Johannesburg Hospital for 1980 and 1981, but the nursing shortage has been going on for as long as organised nursing has existed, she said.

She said the standard of education for the nursing diploma was "far too high" and inappropriate for the work.

"Nurses drop out like flies," she said. "Many leave without putting a foot in a ward or ever seeing a

95

## Education standards driving nurses away, says academic

patient — they become disillusioned with the science subjects like physics and chemistry, which are very rarely applied to basic nursing," she said.

Ms Hammond said the root of the problem was that a group of nurses — especially those in the South African Nursing Association (Sana) — were trying to "professionalise" nursing with an academic slant.

"There is a clash of interests between the Sana group and the matrons in the hospitals who need hands to staff the wards," she said. "While the one group is concerned about academic subjects, the other is concerned about sick and dying people."

Although concentrating on Johannesburg Hospital,

she also conducted a nationwide survey which found:

- While half the white nurses were dropping out before completing the diploma, the majority of black applicants were turned away before doing the course.
- Ninety-four percent of nursing posts were filled at black hospitals compared to 79 percent at white hospitals.
- While there was an over-supply of black nurses in urban hospitals, some rural hospitals were relatively understaffed.
- At Johannesburg Hospital in January 1980, 68 percent of nursing posts were filled but this dropped by 16 percent in the writer only 52 percent of posts

were filled. In January the following year, 58 percent of posts were filled. A month later this had already dropped to 52 percent.

● Of those who dropped out, 67 percent did so in the first year.

The main thrust of Ms Hammond's thesis was that the nursing educational system was inappropriate. The high level of education required was not commensurate with the work involved and the entire nursing educational system needed to be revamped.

"Instead of striving for professional status it may be more appropriate to organise trade unions to fight for a fair day's wage," she said.

She believed the moment for a union was ripe during the crisis in 1979, when many nurses — disgruntled with their salaries during the economic boom — took up jobs in commerce and industry.

Ms Hammond, who matriculated at Potchefstroom Girls High School, earned her Bachelor of Social Science degree at Natal University.



Ms Hammond . . . education standard "too high".

D. DISPATCH - 5 May 1983  
95

# UCT doctor is running health care courses

MDANTSANE — A senior paediatrician at the Red Cross War Memorial Children's Hospital and the University of Cape Town's department of paediatric and child health, Dr J. D. Ireland, has come to assist Ciskei in training nurses in primary health care for children.

Since 1979, the University of Cape Town has run a number of paediatric and child health courses for nursing sisters in Ciskei. Teaching is done at Cecilia Makiwane Hospital.

The present course which started on Monday, will run for four weeks. Each of the first three weeks, a tutor from the Department of Paediatric and Child Health of the University of Cape Town will fly out and do teaching for that week.

Professor H. de Vil-

lers Heese, of the University of Cape Town will conduct an examination. This time, there are 17 students from all over Ciskei, a spokesman Dr D. J. Power said.

Dr Power said Ciskei has two nursing sisters from Cecilia Makiwane Hospital training in a more advanced course under Dr Ireland. They are Sister Funeka Nkula and Sister Linda Mzilikazi.

The course, Dr Power said, has made a huge difference in all Ciskei Hospitals. Nursing staff that has done the course saw 50 to 60 per cent of paediatric patients and did full consultation, conducted a full examination, took a full history of the patients previous illnesses, inoculations and recommended treatment, he said. — DDR

95 Hammond 27/5/83  
Student nurses

896. Dr. M. S. BARNARD asked the Minister of Health and Welfare:

How many persons registered for the first time as student nurses in 1982?

The MINISTER OF HEALTH AND WELFARE:

5 318.

Senior Certificate examination

908. Mr. S. S. VAN DER MERWE asked the Minister of Internal Affairs:

(a) How many (i) Coloured persons and (ii) Indians entered for the Senior Certificate examination in 1982 and (b) how many entrants in each of these race groups (i) passed, (ii) failed and (iii) obtained matriculation exemption?

The MINISTER OF INTERNAL AFFAIRS:

(a) (i) 10 207.

(ii) 6 492.

	Coloureds	Indians
(b) (i)	6 868	5 453
(ii)	3 339	1 039
(iii)	1 696	2 411



D. DISPATCH 4/4/83

## 16 nurses <sup>(95)</sup> at EL hospital given one month's notice

EAST LONDON — Seven sisters and nine staff nurses on the Frere Hospital staff have been given notice that their services end on June 30, the medical superintendent, Dr R. Newbery, said in a statement.

Dr Newbery said the staff concerned had been informed in January that since they had been on the temporary staff their services might be terminated to make room for staff to be trained.

He said that in spite of the fact that they were on 24 hours' notice they had been given a month's notice apart from the warning given earlier.

Dr Newbery said the step was regretted.

"No one, certainly not the Cape Provincial Administration, likes discharging personnel at this period of unemployment and financial stress," Dr Newbery said.

He added a statement clarifying the position about the hospital's status and policy on staff.

The position was that

- Frere hospital is a training institution for nurses and certain classes of paramedical staff, and as such, students have priority;

- Over the past years due to the dearth of students applying for training, in order to keep the services going, the hospital employed certain categories of staff on a temporary basis;

- At the time of their engagement it was made quite clear to them in writing that their employment was temporary;

Dr Newbery said that since 1974 only coloureds, white and Indian nurses were accepted for training at the hospital, but the hospital still had a large number of black nurses it could not do without.

"Since the improvement in nurses salaries, and in the present economic climate, this situation will, I am sure, arise again, unless Frere Hospital expands its beddage thus increasing our number of available posts," he said. — DDR

# Understaffed hospital axes black nurses

City News  
5/6/83

**EAST LONDON** —  
Frere Hospital's black  
nursing staff are an-  
gry because 16 col-  
leagues have been fir-  
ed in spite of a shor-  
tage of nurses.

They regard the  
move as discrimination  
as only blacks were  
fired.

Seven sisters and  
nine staff nurses got  
the axe. Some have  
been at the hospital  
10 years.

Non-white nurses at  
the hospital are second-  
ed to tend white pa-  
tients because of the  
shortage of nurses.

The medical superin-  
tendent, Dr R New-  
bery, said: "We regret  
having to take this  
step.

"Due to the large  
intake of trainees, we  
have to give some tem-  
porary nurses a month's  
notice."

# 'Brutal' doctors rapped by hospitals chief

AM695  
6/6/83

By BRIAN STUART  
Provincial Reporter

DOCTORS, matrons and nursing sisters who are "brutal and rude" to student nurses and assistants are causing resignations from hospitals, according to Mr Piet Loubser, MEC in charge of hospital services in the Cape

Doctors, matrons and sisters humiliated nurses in the presence of patients and public, Mr Loubser said in disclosing the finding of a special Cape hospitals committee set up to examine nurses' grievances.

Mr Loubser said the grievances were being studied and corrected. The committee would probably be a permanent structure.

"The committee was disturbed to hear of unsympathetic and undiplomatic acts and remarks, especially by senior personnel such as doctors, matrons and sisters towards students, trainee nurses and assistants, Mr Loubser added.

## Part-timers

"The behaviour and actions of doctors is sometimes brutal and rude.

"Part-time and private doctors are the worst offenders.

"Junior nurses are not always treated with the necessary respect, sympathy and tact.

"As in the case of doctors, juniors are sometimes chewed out and even humiliated in the presence of patients, the public and fellow personnel members.

"The attitude and actions of doctors and senior nursing staff towards their juniors, especially students and trainee nurses, often plays a decisive role in determining whether or not they remain in the service and whether they continue with their training and career or not," said Mr Loubser.

"As a result, hospital managements have, where it is applicable, been given instructions to put the matter right."

Another grievance which the special committee was considering was the "injudicious" admission of patients without considering the availability of nurses.

# Number of nurses quitting <sup>75</sup> 'same as those returning' <sup>2/6/83</sup>

## Post Reporter

JUST as many registered nurses return to nursing as those who resign from the profession, the Human Sciences Research Council (HSRC) found during an investigation into certain aspects of the work situation of about 3 000 registered nurses.

It also found the shortages in the profession were mainly due to the extension of services and to the decrease in the number of young entrants into this profession.

An incorrect impression had, therefore, been created previously that more and more registered nurses were leaving nursing permanently.

There was an alarming trend that fewer young persons were entering the profession, which was being practised mainly by older, married people.

The average age of nurses was relatively high (38 years) if it was compared with that of other occupations practised mainly by women.

If this trend continued,

problems could crop up in future in replacing those who retired with younger persons.

This investigation into the work situation of registered nurses was carried out by Mrs G Cilliers, of the HSRC's Institute for Manpower Research, and formed part of a research programme into nursing to be finalised over five years.

The report just released is the second in a series of five reports in which the profession and possible problems are being examined.

According to the data in this investigation nurses are, on the whole, satisfied with their work — 65% indicated that they were satisfied in their work.

It was rendering a service, especially, and the opportunity to work with people that gave nurses job satisfaction, the report said.

Matters that were less acceptable were irregular working hours, night service and administrative duties.

Only one in every five re-

spondents regarded poor salaries as the most important source of dissatisfaction.

Regarding interest in specialised nursing fields, community nursing and maternity nursing enjoyed high priority among all population groups but especially among Asian respondents.

One in three black respondents revealed a more-than-average interest in medical, surgical, paediatric, psychiatric, out-patient and day-hospital nursing and nursing administration.

The vast majority of the respondents had at some or other time worked in Government institutions and the average work experience of nurses in the test group was 10.7 years.

More than two-thirds of the group resigned once or more than one time from the profession, especially because of pregnancies and to care for young children.

Membership of the South African Nursing Association is compulsory for practising nurses.

# Bullying 'a reason for nurses leaving'

95 Mercury 8/6/83

Mercury Reporter

**BULLYING** of student nurses and assistants by senior hospital staff was one of the causes of resignations in the profession, Miss Ralie du Plessis, executive director of the South African Nursing Association, said yesterday.

She was commenting on a report in which the MEC for Hospital Services in the Cape, Mr Piet Loubser, stated that a committee set up to investigate nurses' grievances found doctors, nursing sisters and matrons were 'brutal and rude' to student nurses and assistants.

Mr Loubser was reported to have said that the

grievances were being studied and corrected.

Miss du Plessis explained that there were similar findings following surveys conducted recently by the nursing association.

## Stand up

'I am unable to say to what extent resignations are due to this bullying, but it certainly is a cause for nurses leaving the profession,' she added.

Miss du Plessis appealed to nurses to stand up for themselves when their superiors constantly and unnecessarily bullied: 'I was a nursing sister myself and always gave back what I

got when I was messed about unnecessarily.'

She said it was probable many nurses were afraid to speak back to their superiors, 'but there's no reason for nurses to bottle up abuse and resign'.

Miss du Plessis added: 'Nurses should speak up for themselves when the occasion warrants it and report any problems to the medical superintendents of their hospitals.'

'Nurses are not hand-maidens to a doctor, but practitioners in their own right and should they disagree with a superior they should state their case.'

# Conditions at PE college 'a disgrace'

95

Post Correspondent E. Post

10/6/83

CAPE TOWN — Conditions at the Sharley Cribb Nursing College in Port Elizabeth were a "shocking disgrace" and buildings had to be improved immediately, Mr E W Trent (PFP, Port Elizabeth Central) told the Provincial Council.

The buildings were dilapidated and the "primitive" classrooms were icy cold in winter. Heaters had to be used sparingly because the electrical wiring was in such poor condition.

There were only four toilets and only two washbasins (with cold water) for the 100 students and up to 11 lecturers. In the nurse's home section, the roof leaked and nurses

often woke up at night to find their beds soaking wet.

Anthracite steam kettles used to heat the water were inefficient and polluted the air. The ceiling in the domestic workers' quarters was falling down "piece by piece".

"Under these conditions student nurses, who fulfill such an important service to the community, have to live and learn," said Mr Trent yesterday.

Tracing the college's 13-year battle with the Provincial Administration for better facilities, Mr Trent said: "I am not asking for excuses and explanations — I am asking for action."

A spokesman for the Sharley Cribb Nursing College refused to comment.

ARGUS 14/6/83

# Race law stops matron getting West Cape post

## Education Reporter

A CITY grandmother, Mrs Patricia Ntombomzi Ngcelwane of Langa, aged 51, has become one of the Western Cape's first black nursing sisters to be awarded her B (Cur) degree from the University of South Africa.

Her degree qualifies her to take a post as matron of a hospital.

But the joy and pride of her family has been marred.

Because of the Government's coloured labour preference policy, Mrs Ngcelwane, a widow for 14 years, cannot hold any position in the Western Cape higher than that of a senior nursing sister — because she is an African.

Mrs Ngcelwane received her examination results last year and her certificate earlier this year.

The hospital where she has been a nursing sister for many years was informed of her achievement.

However, she has since then received no promotion or increase in salary

## All my life

"If I want to take a position as a matron, I will have to leave the Western Cape," Mrs Ngcelwane said.

"I cannot do that. It is my home. My elderly mother is here, my children are here and I have lived all my life in this street," she said, pointing through the window of her modest Langa home which she shares with two of her five children and a grandchild.

"The few times I have left Cape Town for a short while, I have been homesick. I am the same as my name, Ntombomzi (The one who stays at home)."

She would like to work at Groote Schuur Hospital, she said.

"I know of a number of cases where black patients have not understood instructions for taking their medicine because of the language difference.

"To prevent mistakes like this, which can be fatal, it is imperative that people involved in the treatment of patients should be fluent in their language."



Mrs Patricia Ngcelwane.

But as a black nursing sister Mrs Ngcelwane cannot hold a position there.

After excelling in school and obtaining her matriculation, she married at the age of 19 and was a housewife until she took up nursing in 1959.

After her husband died 15 years ago, Mrs Ngcelwane, a modest, soft-spoken woman, raised her children singlehanded.

"It was quite a struggle, but I don't regret a minute of it. I love my studies with a passion and would love to go on to do honours.

"But that is not possible. After all these years there is no money left for such a luxury

"The South African Council for Higher Education helped me with books for my final year.

"Without their help I would not have been able to afford to carry on this far. I am truly grateful to them.

"I have encouraged some of my young colleagues to take the same degree, so they will be able to make good use of those books."

# Nurses complain about racist insults

By MONK NKOMO

NURSES at the Ga-Rankwa Hospital near Pretoria, who have been staging a food boycott since last Wednesday, are called "kaffir meide" by certain hospital officials, The SOWETAN was told yesterday.

Some of the more than 500 nurses including matrons and student nurses staying at the nurses home yesterday launched a scathing attack on the hospital authorities and accused them of "practising apartheid and baasskap" at the hospital.

The nurses also complained about the stale and sometimes rotten food and filthy conditions at the dining-hall which prompted them to launch the boycott.

Some of the nurses, who refused to have their names published for fear of reprisals, said: "The dining-hall is filthy and the tables are not dressed. The place is a health hazard."

Dr L van Heerden, chief superintendent for the hospital, yesterday said: "The nurses have

reasons for being dissatisfied and we are battling hard to improve the conditions and to build a new dining-hall. I am not accusing them."

Dr van Heerden said he met the nurses yesterday morning and that they had agreed to end the boycott. The conditions in both the black

and white dining-halls, he added, were the same.

Asked to comment on the claims by nurses that they were called "kaffir meide" by certain white officials, Dr van Heerden said: "I know nothing about that but we will launch an investigation."



# Nursing in Cape Flats misery

John Dwani comes from Fort Beaufort in the Eastern Cape. He is 75 and lives in a row of de-caying rooms at Nyanga near Cape Town.

There is the odour of urine and waterlogged wood, and trodden mud around the cold-water tap outside.

Mr Dwani is one of Sister Nomalanga Mosala's patients. She is the St John Ambulance community health sister working in Nyanga, Crossroads and New Crossroads.

"He's got cardiac trouble and maybe a cataract in one eye. We've organised visits in the St John ambulance to the Guguletu Day Hospital — that's the nearest one — several times but then he returns to this place..."

"What chance does he have of anything else? The old age home run by

the (administration) board in Nyanga houses only 20 people," Sister Mosala said.

"So the old people live on about R96 every two months — the ones who get pensions. There's a group at Crossroads who'll only qualify for pensions after they've been in Crossroads for five years with permits.

"Now they've got permits but they're still waiting. Some get groceries from the Nyanga welfare when I refer them."

Mrs Eleanor Tom's extended family lives at Nyanga too. The red sticker next to the front door says: "This is a Catholic home"

They moved here after their shack was burnt down during fighting at Crossroads on April 10.

They lost everything —

## Sister Nomalanga Mosala of St John Ambulance attends to a multitude of needs in Nyanga, Crossroads and New Crossroads. MARY ROBINSON reports from Cape Town on the conditions faced every working day in these poor communities.

furniture, cooking pots, a sewing machine — and her husband's hands were smashed.

Says Sister Mosala: "Getting this house from the board was just luck. I'm a sort of liaison between people and the hospital or the authorities — so I approached the board for this house."

"In this job you're closer to people and understand them more than when you work in a busy hospital. There doctors need a bed and that's that — you simply discharge patients."

Mrs Martha Tolie is 112. Born in Beaufort West in 1870, she now lives with her son's family. Their neat concrete house has wind worn plants outside and the remains of a hardy hedge.

passing vegetable vendors.

Volunteer health worker Ms Beauty Goba frames Mrs Tolie's face with her hands and strokes her cheeks — teasing gently in Xhosa.

She's Sister Mosala's oldest patient. "She's remarkably healthy though, so I just visit with volunteers and talk."

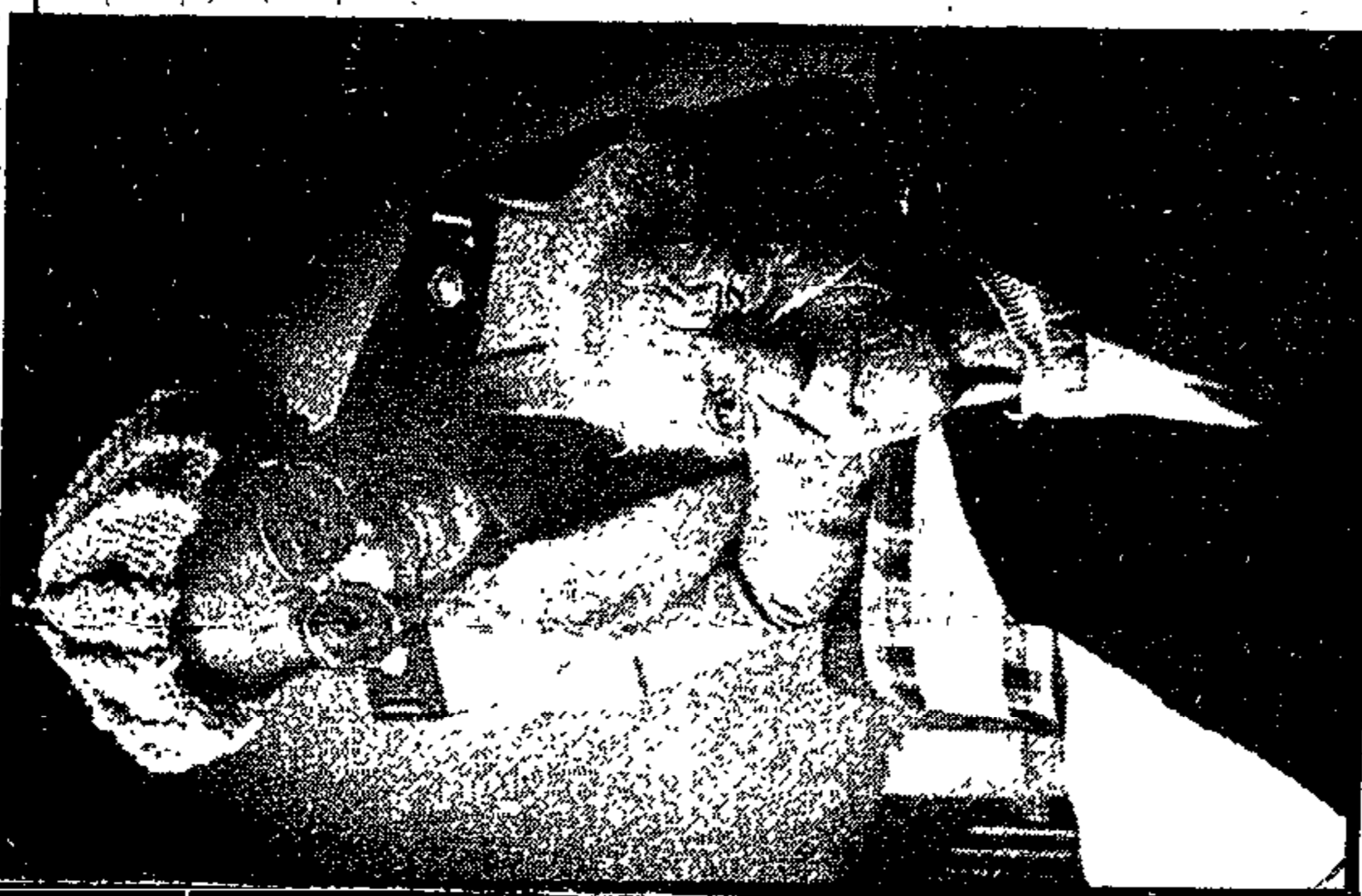
"At the moment we've got 13 working volunteers and 29 doing St John's training course — they'll do home visits, give information on nutrition, contraception and so on, and refer more serious cases to me."

Many of the KTC "bed people" are now in a cavernous corrugated iron shed at New Crossroads — subdivided with blankets and plastic stretched across Port Jackson wattle sticks.

"We live in Cape Town and they tell us we must go to Transkei."

There's coffee in Sister Mosala's office. Now she must take two volunteers on further afternoon visits and later there's supper to cook at home at Langa and night-time studying.

Tomorrow the multitude of needs once more



AMONG THE SQUATTERS — Sister Mosala with 112-year old Martha Tolie, her oldest patient.

95

95 2004 10/8/83

# Nurses will pay higher registration fees

## Pretoria Bureau

THE South African Nursing Council has increased its annual registration and enrolment fees from R15 to R25, according to its newsletter, Nursing News.

The council says the increase is to provide a better service and because it receives no Government subsidy.

"General increases in running costs, which have been fairly high during the past year include telephone charges, postage and salaries. The costs involved

in, and the number of disciplinary enquiries held, have also increased." According to Nursing News, the council could not develop its staff establishment or equipment because of the shortage of funds in past years.

Lack of promotion opportunities had resulted in a high staff turnover and lower productivity.

"New developments include additional senior positions, also in the professional department, and a new computer.

These will enable the council to provide more efficient service regarding, for example, the examination system, updating of records and improved statistics to assist training and employment authorities in future planning."

The Nursing Council has also reminded nurses that though fees are due by January 31, they should be paid as soon as possible.

Should nurses fail to pay by that time they may be removed from the register or rolls of the council.

# No probe into dismissal of <sup>E. Post</sup> ~~the~~ <sup>10/8/83</sup> ~~the~~ <sup>95</sup> nursing sisters

By SHIRLEY PRESSLY

THE Director of Institutional Care of the NG Kerk in the Eastern Cape, Mr T J Barnard, said today there was definitely no investigation at circuit or synodal level into the dismissal of three nursing sisters from a home for the aged run by the church in Humansdorp.

The dismissed nursing sisters were Mrs Ina van Onselen, Mrs Ilona Ferreira and Mrs Annie van Rooyen.

Mr Barnard said as far as he was concerned the matter was closed.

He said the post of matron of Ons Tuiste had been advertised and processed in the normal way and he was satisfied the recently-appointed matron was the best applicant for the position.

Mr Barnard said he had appointed Mrs Bets du Toit as matron on the recommendation of the governing board for Ons Tuiste, the chairman of which was Ds Pieter van Taak.

Mr Barnard said none of the three sisters had applied for the position of matron. Nor had any of them approached him with any complaints about the appointment of Mrs Du Toit as matron.

He said he was unaware that black staff members had been made to strip to be searched for stolen goods.

"If staff at any of our institutions have any complaints they are welcome to direct their complaints in writing to me," he said.

Mr Barnard said he would furnish the Board of Nursing with a report on the behaviour of the sisters, which he did not consider to have been in the interests of the profession.

They could have registered complaints through the normal channels and contacted him before expressing their views to Sunday newspapers.

# 30 000 aspirant nurses apply to Bara — 121 to Johannesburg hospital



● Nursing is becoming a growing profession for blacks and a dying profession for whites, say doctors.

# Whites stay out, blacks queue up

THERE is a long waiting list of people applying to train as nurses at Soweto's Baragwanath hospital, while at the white Johannesburg hospital, every one of the small number of applicants is automatically accepted.

"We take everyone who

Reports by ANNE SACKS

applies," said a senior manager at the Johannesburg hospital this week.

Nursing is a dying profession among whites and a growing profession among blacks, says Dr Chris van den Heever, superintendent of Baragwanath.

This disparity has emerged in the light of the crisis in Transvaal hospitals in which almost all black hospitals are overloaded with patients while white hospitals have an average bed occupancy rate of 59%.

This week, Professor John Gear, head of the department of community health at the University of the Witwatersrand's Medical School, added his support to the idea of opening the J G Strijdom Hospital in Auckland Park to blacks to help ease the overcrowding at Baragwanath.

Opposition politicians have backed the idea of rationalising white health care facilities in central Johannesburg by absorbing the J G Strijdom's 542 beds into the half-empty, 650-bed Johannesburg hospital.

Prof Gear said: "The ideal would be an integrated health service.

"However, no stone must

be left unturned in the effort to rationalise the health service so that the maximum number of beds can be used. There is enough merit in the idea of opening J G Strijdom hospital to set up a working committee to look into it as a matter of urgency."

The Johannesburg hospital cannot be filled because of the shortage of nurses to care for patients.

Only 127 people applied for its three-year nursing course. Baragwanath received up to 30 000 applications.

Dr van den Heever said 1 166 applicants were accepted this year. At the Johannesburg hospital, all the white applicants were appointed automatically, said Ms Merryl Hammond, a lecturer at the Wits community health department, who has studied the white nursing crisis.

Dr van den Heever pointed out that many of the black applicants did not have the necessary matriculation qualification. Only between 500 and 2 000 could seriously be considered.

The director of the provincial hospital services, Dr Hennie Grové, said his department was unable to provide nursing statistics this week.

# Black patients and the MEC



● Mr Kirstein ... under fire

A STATEMENT by Transvaal politician Mr Dean Kirstein that blacks stay in hospital longer than whites because they like the food has unleashed a storm of protest in Johannesburg medical circles.

"Such a racist statement cannot go unchallenged," said Soweto doctor Abu-Bakr Asvat, head of the Azanian People's Organisation (Azapo) national health secretary.

And Dr Chris van den Heever superintendent of Baragwanath Hospital, and Professor John Gear, head of the Department of Community Health at the University of the Witwatersrand's medical school — this week rejected Mr Kirstein's view.

Mr Kirstein, MEC in charge of hospitals in the Transvaal, said last week cause blacks feared they would lose their jobs if they took sick leave.

Only the chronically ill could be admitted. Black hospitals were so overloaded it took longer to process patients.

Dr Asvat said in black hospitals such as Baragwanath, patients were discharged as soon as they showed the slightest signs of recovery.

Prof Gear said nowhere were patients admitted to special rehabilitation centres.

# Food strike ends

THE food boycott — which lasted almost five weeks — by more than 500 student nurses at the Ga-Rankuwa hospital has ended.

Dr J Liebenberg, deputy superintendent, at the hospital yesterday confirmed the strike was over and that "everything is back to normal". A few things, he added,

<sup>SOWETAN 17/8/83</sup> "have been re-organised and everybody is happy".

The student nurses staged the boycott on June 31 in protest against the alleged stale and sometimes rotten food served at the dining hall. They also claimed they were referred to as "kaffir meide" by certain white hospital officials.

# NURSES TOLD: NO UNIONS!

**TRADE UNIONISTS** have slammed an attempt by the South African Nursing Association (Sana) to prevent nurses from joining unions.

They reacted strongly this week to the association's warning, saying it was a "blatant attempt to steer nurses away from unions"

Tini Skosana, general secretary of the SA Chemical Workers' Union, said. "It seems Sana has been

## CP REPORTER

approached by a union on the question of organising, and wants to warn nurses in advance.

"Otherwise why the hysteria? There must be something somewhere..."

Nurses and other unionists were angered by the Sana warning, which was issued by its executive director, R J du Plessis.

She told a symposium in Durban the as-

sociation was "aware of the pressure being brought on nurses to join trade unions".

The warning was echoed soon afterwards in the Sana newsletter, Nursing News, which said: Trade unions cannot act as spokesmen for nurses when it comes to conditions of service or what professional acts a nurse may perform.

This is the function of Sana and the SA Nursing

Council.

"In the Nursing Act the nurse is clearly prevented from going on strike. Furthermore, a patient may sue a nurse for anything that goes wrong while the nurse is on strike."

Manoko Nchwe of the Black Municipal and Allied Workers' Union commented: "This confirms what we have always said - that nurses have no control over their lives."

"This applies particularly to black nurses. We sympathise with them, as they have so many laws which have put their lives into a bottle."

A number of nurses who spoke to City Press said there was "distinct unhappiness" at the way the nursing authorities handled their problems.

They said it was "only a matter of time" before nurses started allying themselves with unions.

**THE MONSTER STRIKES AGAIN ON SUMMER FASHIONS AT THE POORMAN'S FACTORY SHOP**  
2 PAIR SHOP — 2 PAIRS FOR THE PRICE OF 1



## MAN'S FRIEND FACTORY SHOP

flat, corks and wedges. All colours in genuine leather, 2 pairs for R6,99

sandals in wood and weave. 2 pairs for R15,99

slippers and imported espadrilles (made in Spain) R9,99

ladies sandals in all colours R24,99.



Ladies top fashion in genuine leather high heels 2 pairs R39,99



## MAN'S FRIEND FACTORY SHOP

we dare not name, current summer range in genuine

low, Lady Di colours and top fashion shoes will not mention their price R49,99



Mens genuine leathers in brogues, mocs, slip-ons and lace-ups in all colours. 2 pairs R49,99



Met and Jones, Barkers, Raffello in boots, slip-ons and lace-

# I begged for prayer, convict tells court

WHILE being severely beaten with a rubber baton by Chief Warden Gert Louis Joubert Smit, long term prisoner Barry Bloom begged to be allowed to pray, the Witbank Supreme Court heard this week.

"While I was on my knees the Chief Warden asked me 'Finished?' and then beat me on my back and on my arms," said Mr Bloom.

He was giving evidence in the Barberton heat exhaustion trial in which four white and four black prison warders, are charged on three counts of murder and 34 counts of assault with intent to do grievous bodily harm on black and coloured convicts.

Mr Bloom told a horrifying tale of assault by Barberton farm prison warders on 44 convicts. They were forced to push heavy wheelbarrows full of gravel in a non-stop circle for hours, without water or rest, in blazing heat on December 29 last year.

nurses were assured they would not be returned to Barberton and Nelspruit jails.

Mr Bloom said that prisoners who had been transferred to Barberton from Durban Point the night before were taken to a farm prison dam and were made to work with the "help of rubber batons known as donkey speels."

They were told to urinate in a basin. When they arrived at the Barberton prison they were cuffed and kicked by warders.

At Pretorius Dam, "I couldn't cope because I had not done much work or much exercise in Durban jail, and was soon out of breath.

He asked the Chief Warden for water.

"I was told by Smit that if I didn't work I wouldn't get water or food at lunchtime. Smit also assaulted me with a baton."

"I told him if we are going to get hit like this, how can we work?"

7/10/83

ry

hospital rub-  
there.  
I thought  
playing a  
...t, when I  
...g and saw  
...s, I got a

someone  
for me."  
...t said he  
... how the  
... the boot

ooks  
eath

by  
Bureau  
... - Police  
...ting the  
...-month-old  
...olande Du-  
... she was  
...spital with  
...res.  
...on whether  
...laid is to  
...the post-  
...een done in

it appeared  
... been in-  
...ember 26  
...ited to the  
...last Friday  
... difficult

conscious-  
transferred  
... hospital,  
...rs found  
...her body,  
... was then  
...nesburg's  
...Hospital in  
...ion where  
...rday.



**OCTOBER 5**

Rainfall on this day  
over the past ten years,  
measured at Joubert  
Park, Johannesburg:

1973	Nil
1974	Nil
1975	Nil
1976	Nil
1977	Nil
1978	2,3 mm
1979	Nil
1980	1,6 mm
1981	Nil
1982	Nil

**Still no  
rain in  
sight**

No rain is expected on  
the Reef today or to-  
morrow, a spokesman  
for the Weather Bu-  
reau said in Pretoria  
today.

The cloudy and cool  
conditions will clear up  
tonight and it will be  
warmer tomorrow, he  
said.

Temperatures in  
Johannesburg reached  
20 deg C today and  
23 deg C in Pretoria.

**Destitute  
family  
now has  
refuge**

By Fiona Macleod  
Numerous callers offer-  
ing help to an ex-Zimbab-  
wean family of five,  
stranded in the Johannes-  
burg Station waiting  
room for four days, tele-  
phoned the station's in-  
quiry desk yesterday.

The inquiries official  
said he had received  
more than 21 calls from  
well-wishers after an  
Afrikaans newspaper had  
reported on the destitute  
family's plight.

"One family drove  
from Ventersdorp to re-  
scue them, others arrived  
here with two cars to  
pick them up. We have  
had calls offering accom-  
modation, bedding,  
money and food," he said.

But the family were  
not able to respond to  
this generosity as they  
had already been given  
refuge in a Krugersdorp  
home.

**POSSESSIONS**

Mr and Mrs Freddy  
Stratford and their five  
daughters, aged between  
two and eight, had been  
living in the waiting  
room with their few pos-  
sessions in cardboard  
boxes since Saturday.

They left Bulawayo  
three months ago and are  
destitute as Mr Stratford,  
a former railway truck  
inspector, could not find  
a job.

The official said a wel-  
fare officer took care of  
the children yesterday  
and their parents had  
been given a temporary  
home in Krugersdorp. He  
could not disclose the ad-  
dress.

**95 000 more  
nurses needed  
by year 2000**

By Sue Leeman, Pretoria Bureau

South Africa must train another 95 000 nurses by the  
end of the century in order to keep up with the health  
care needs of the country's growing population, the  
Minister of Health and Welfare, Dr Nak van der  
Merwe, said last night

Opening an exhibition at Milner Park showgrounds  
entitled "The Image of the Nurse", he said a further  
47 692 blacks, 39 304 whites, 6 559 coloured people and  
1 487 Indians must be trained as nurses by 2000.

He added that nursing  
staff were making it a  
priority to further their  
training, pointing out that  
more than 3 000 had en-  
rolled this year at Unisa.

Of these 2 465 were  
busy with a bachelor's  
degree in nursing while  
462 were studying for an  
advanced diploma.

In addition there were  
57 honours students and  
26 working towards mas-  
ters and doctorates.

Dr van der Merwe said  
the present nurse/popula-  
tion ratio was 1:148 for  
whites, 1:549 for coloured  
people and 1:707 for  
blacks

Indians were the worst  
off with only one nurse  
for every 745 members of  
the community.

**Gerrie's  
trainer  
attacked**

Own Correspondent

DURBAN — Willie Lock,  
chief trainer to new  
world boxing champion  
Gerrie Coetzee, was beat-  
en up and robbed of  
about R300 at Durban's  
Louis Botha Airport ear-  
lier this week.

Lock, who is in Durban  
to assist heavyweight  
Mike Koranicki in his  
twice-postponed fight  
against Robbie Williams,  
said he was attacked  
after an argument about  
Gerrie.

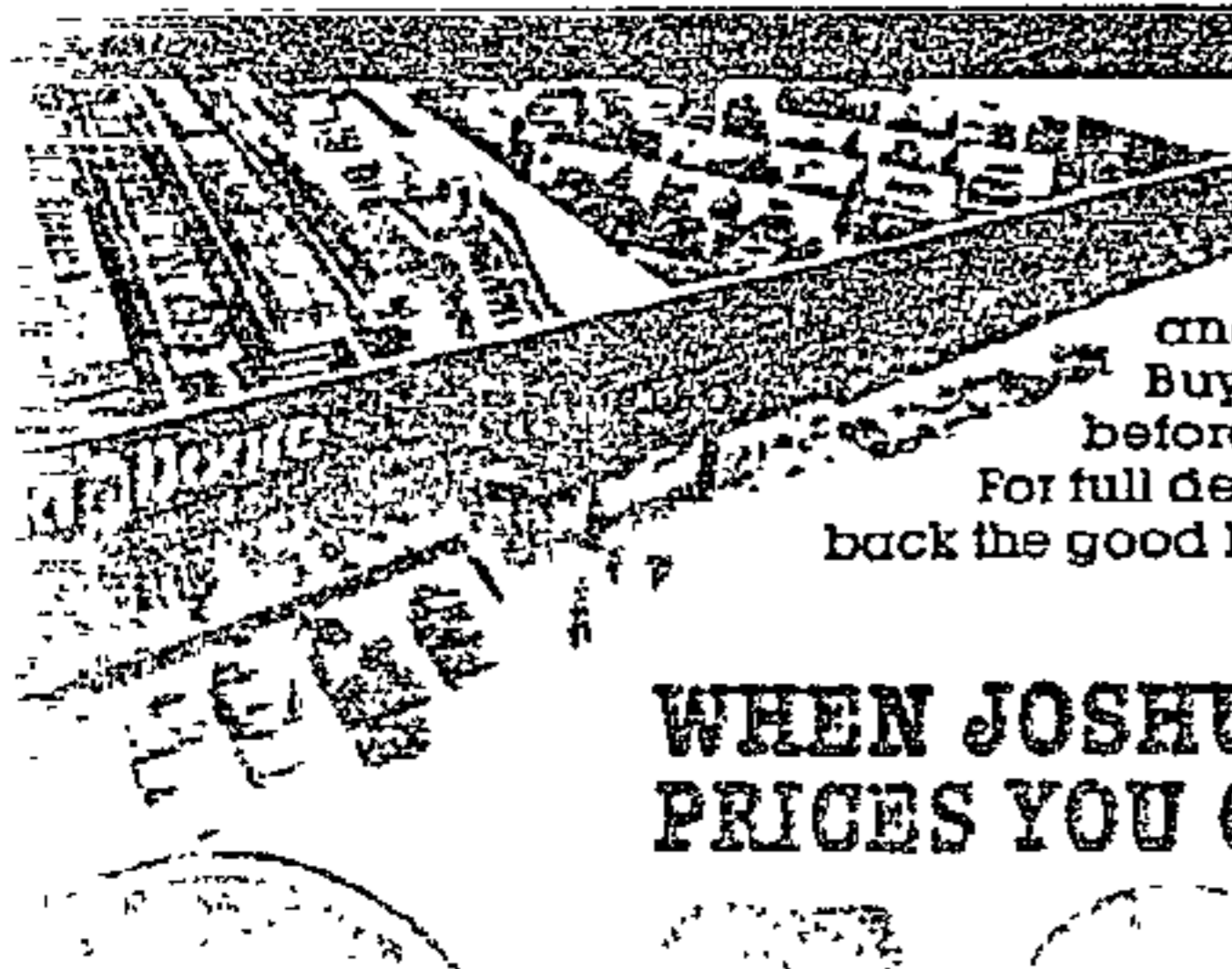
**Six die, 30 injured  
in Natal ravine crash**

Own Correspondent

MARITZBURG — Rescuers used ropes and winches  
to retrieve dead and injured passengers from a bus  
which crashed into a deep ravine in the Sweetwaters  
location near here last night

Six people died and about 30 were injured. Ambu-  
lances ferried the dead and injured to Edendale Hos-  
pital.

The bus plunged off a steep winding section of the  
gravel road near the kwaZulu bus depot high up in  
the location.



Everybody gets a discount and it could be as high as 50%. That's Joshua Doore's way of celebrating 10 years of offering South Africa's biggest selection of quality branded furniture, appliances, curtains, carpets, TV and sound equipment under one roof.  
Buy anything you like and you'll draw a mystery year discount card. Right before your eyes you could see prices go back in time, all the way to 1973.  
For full details and even bigger savings hurry to Joshua Doore where we're bringing back the good buys from 26 September to 25 October.

**WHEN JOSHUA DOORE CELEBRATES 10 YEARS OF LOW  
PRICES YOU COULD GET 1983 MERCHANDISE AT:**

**THE Medical University of Southern Africa (Medunsa) rises out of the arid, dusty landscape as high-rise grey blocks that accommodate the training of the country's black doctors.**

Sealed off by a double security fence, the university is flanked on the one side by a railway line and on the other by the squat, box-like houses that belong to Ga-Rankuwa. Beyond that, the shanty town of Mmakau.

Tarred roads disappear into the dry brown bushveld that makes up the sprawling 337ha site. The campus is still not finished.

When the Government excised this land from Bophuthatswana for the ultra-modern university, hundreds of people were resettled to make way for it.

Now four residential hostels — costing R8,5-million — and a central kitchen complex, at another R1,5-million, cater for the 900 students who study at the university.

Medunsa is geared towards correcting the severe shortage and bad distribution of black doctors to patients in Southern Africa.

Last year the five-year-old university produced its first graduates in the medical and dental faculties.

And, as if proving itself as a fully-functioning university, this year Medunsa saw the first two incidents of student unrest on campus. The first was this March, when more than 700 students boycotted the university food for four days. And in June the entire undergraduate student body was dismissed for protesting at the suspension of two student leaders.

Medunsa's acting rector, Professor Thomas Dunston, claimed that they had intimidated first year students.

The student leaders were reinstated after a disciplinary committee hearing, but the underlying issues of student agitation for political autonomy have not yet been resolved.

Students have rejected the version of the Medunsa Students' Council (MSC) constitution amended by the university authorities. There is now no MSC, and students are not allowed to hold mass meetings on campus.

Last week a subdued atmosphere prevailed on the campus... and the few students milling about were reluctant to be seen talking to the Press.

But whatever the grievances of students at the university, the quality of facilities is not part of them. By the time Medunsa has been completed, it will have cost R100-million.

Medunsa has been building at a rate of R1-million a month for the past six years and is designed to finally educate 3 500 students each year.

The campus boasts a basic medical sciences building costing R5-million.

When the decision was taken to start the university, not more than 25 black doctors were graduating from South African universities each year... about 20 from Natal and the remainder from the University of the Witwatersrand.

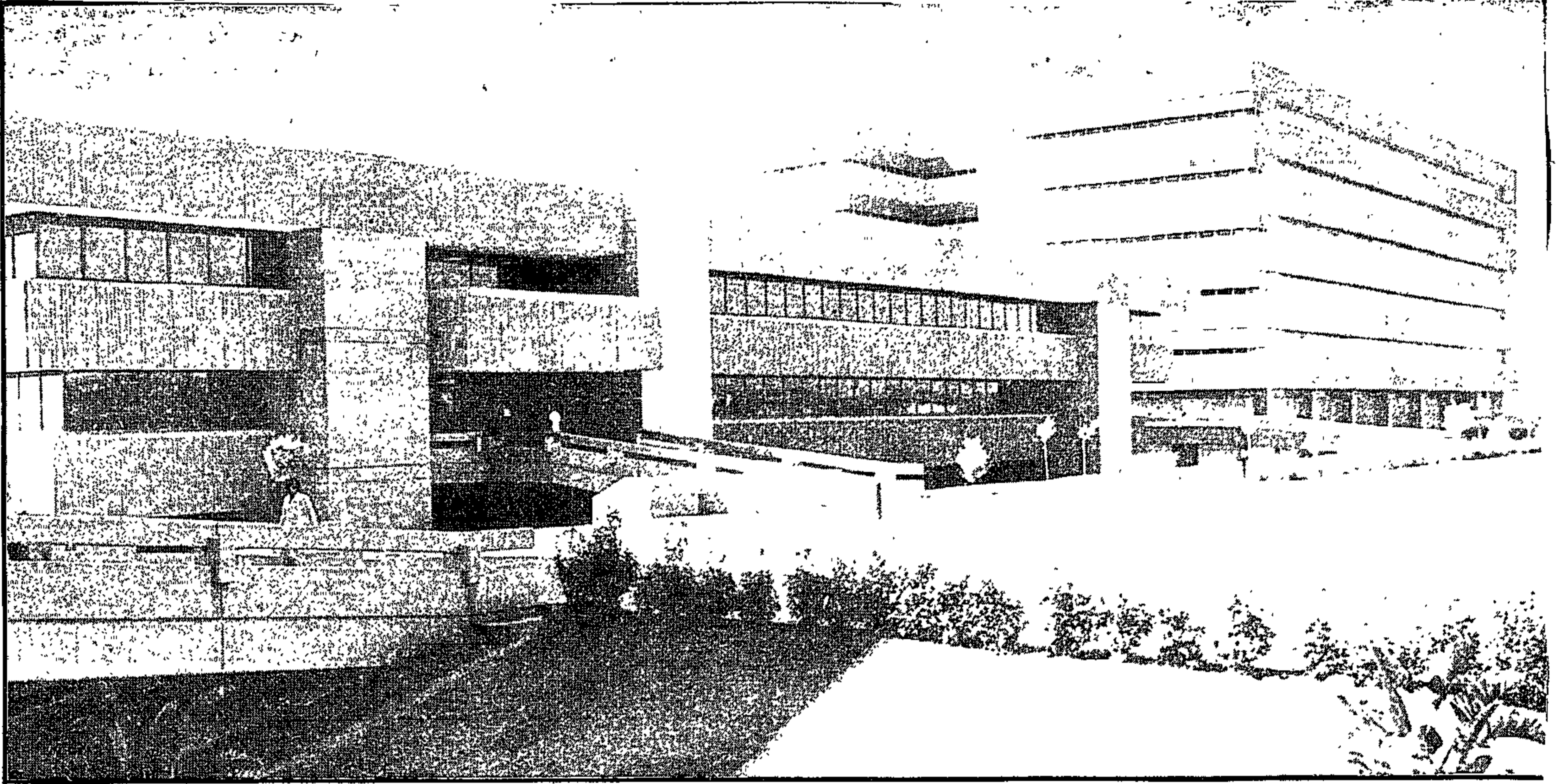
The university was added to the Ga-Rankuwa Hospital — which has beds for 1 600 patients — and the institutes for paramedical training in occupational therapy, physiotherapy, laboratory technology and dental therapy were added later.

The emphasis at Medunsa is for comprehensive health science training, where the focus is on providing for community health care... especially in the rural areas.

"There are four other medical schools in the country producing enough doctors for the whole of South Africa," Prof. Dunston says.

But the distribution is wrong and the black rural population is largely neglected.

"We need to concentrate on training more black doctors for treating black patients, especially if we want to avoid foisting ad-



View of the Medunsa campus... the first year's building is in the background and the library in the foreground

Pictures: ROBERT TSHABALALA

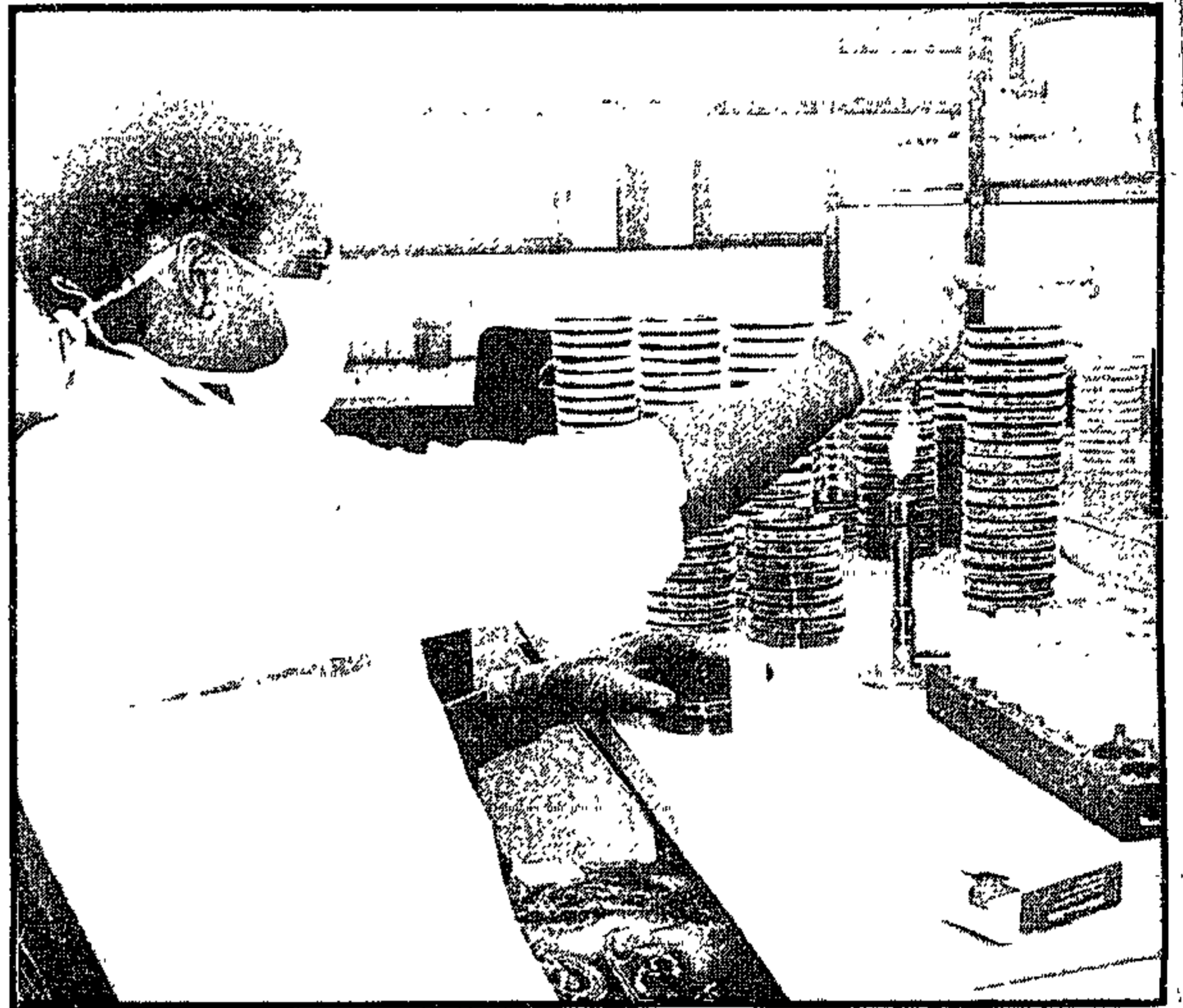
12/0/81 (93) MTR  
27/8/83

# Are these separate but equal doctors?

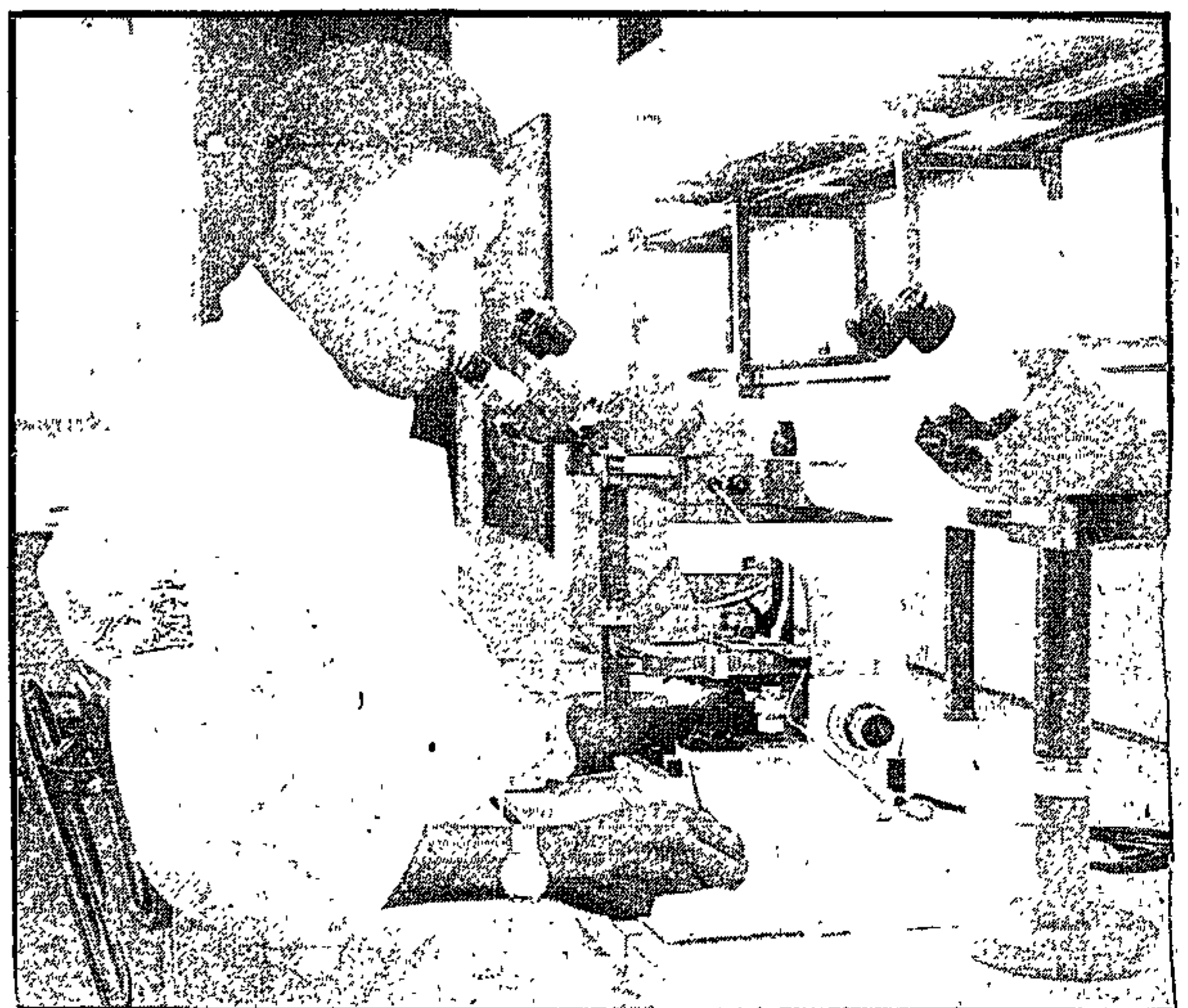
By HELENE ZAMPITAKIS



PROFESSOR THOMAS DUNSTON... "the black rural population is largely neglected"



A Medunsa student at work in the microbiology laboratory



Students have a high pass rate at the university



advanced curative medicine on a community." Just as Western medicine must be made relevant to the general black community, so medical sciences must be made more accessible as a profession to black matriculants.

The average pass rate of matriculants accepted into the faculty of medicine for last year was 55%, with an average pass rate of 48,75% for dentistry students and 45,48% for nursing students.

To bridge the gap between the inadequate secondary education and the high standards of tertiary education, first year students take a course known as

"Teaching and Learning". The main aim of this subject is to teach students a command of English.

But the university has a high pass rate ... at an academic standard determined by the South African Medical and Dental Council.

"It just shows that, while primary and secondary education at black schools is below par, with the right education these students can catch up to their white counterparts," Prof Dunston says.

"It also indicates that students who haven't done science as a subject for matric do not necessarily make worse doctors."

For example, 72,5% of first year medical students passed last year, and 90,9% of third year medical students passed.

Responding to criticisms leveled at racially exclusive universities, Prof Dunston argues that "a tremendous number of blacks who would make good doctors would be excluded from open universities with admissions based on academic merit".

The university also has a low drop-out rate. This may be because the majority of students are classified as

"mature students" ... they are 25 years and older. Students fees can amount to R3 000 a year, including the tuition fee of R1 000, residence fees of R1 250, deposits, books and other expenses.

But although the university has no problem finding heads of departments and senior lecturers (most of them are recruited from white universities), the university suffers from a shortage of part-time and junior lecturers.

While 204 of the 549 members of staff are lecturers, 149 of the academic staff are white, 50 are black and five classified as Asian.

The "brain drain" by the country's seven universities and by private practice has drawn junior staff — the backbone of a university — from the campus, Prof Dunston says. But several of Medunsa's senior lecturers are world renowned.

Medunsa "rationalises Western medicine to fit into the environment" by directing health care to the rural black population, Prof Dunston says.

Two departments — family medicine and community health — work from opposite ends of the same problem to adapt the teaching of medicine to Southern Africa's most basic needs.

While these departments will not make "a big splash" in international academic circles, they have "extreme local value" and will make the greatest contribution to the basic medical needs of the country.

Gradually, researchers in the department of community health record incidents of tuberculosis, cholera, malnutrition and other socio-political diseases.

The university authorities want to know when and where these diseases occur, so that they can send qualified people to the areas to deal with them.

"Something must be done to attract doctors out to rural clinics and yet keep them in touch with the progress of medical science," Prof Dunston says.

"We are working along these lines."

997

95

WEDNESDAY, 3

Non-White nurses at hospitals for Whites

3/18/83  
Kensard Q. 601, 1997

\*10. Dr. W. J. SNYMAN asked the Minister of Health and Welfare:†

- (1) Whether it is the Government's policy to employ Non-White nurses at hospitals and other institutions for Whites which fall under his Department; if so, what provision is or will be made for such nurses in respect of (a) conditions of service and (b) eating, toilet and accommodation facilities;
- (2) whether his Department intends providing separate facilities for Whites, Coloured persons and Indians at the proposed community health centres; if not, why not; if so, what will be the nature of such facilities?

†The DEPUTY MINISTER OF WELFARE:

- (1) Departmental hospitals employ Non-White nurses for White patients only if no White personnel can be recruited. The nurses are only employed on a temporary basis.
  - (a) conditions of service as applicable for all public servants in temporary employ.
  - (b) eating, toilet and accommodation facilities are provided for the relevant population groups.
- (2) community health centres are planned for a specific community, separate facilities are provided for patients and personnel.

Mr. H. D. K. VAN DER MERWE: Mr. Speaker, further arising out of the hon. the Minister's reply, does he intend furnishing the public with any information concerning the Constitution after the conclusion of the Third Reading of the Constitution Bill?

†The MINISTER: Mr. Speaker, I said a moment ago that it will depend on the Department having adequate funds at its disposal, the way in which it will be done and how quickly it can be done. However, I should like to repeat that, if it is done, the Department will adhere, as in the past, strictly to what has happened, the final Act which will then have been approved by Parliament and factual information about it.

24/9/83  
Khayelitsha 95  
319113  
\*17. Mr. K. M. ANDREW asked the Minister of Co-operation and Development:

(a) What is the (i) nature and (ii) extent of the health services provided at Khayelitsha, (b) how many (i) doctors, (ii) nurses and (iii) community health workers are there at this township and (c) since what date have these services been provided in each case?

The DEPUTY MINISTER OF CO-OPERATION:

(a) (i) Clinic services.  
(ii) Nursing services daily by Day Hospital Organization the Child Health Unit of the Red Cross Hospital.

(b) (i) Nil.  
(ii) Three nurses.  
(iii) Nil.

(c) All services commenced on 16 May 1983. Every endeavour is being made to establish and adequate medical infrastructure in the shortest possible time.

Persons shot: killed/wounded  
2040  
2040  
2/9/83

\*18. Mr. P. C. CRONJÉ asked the Minister of Transport Affairs:

Whether any persons were shot by the South African Railways Police in the first six months of 1983; if so, how many were shot and (a) killed and (b) wounded in that period?

The MINISTER OF TRANSPORT AFFAIRS:

Yes, 33.

(a) 7.

(b) 26.

24/9/83  
Hansard  
Flats; Black-employees  
2/9/83  
\*19. Mrs. H. SUZMAN asked the Minister of Co-operation and Development:

(1) Whether, with reference to his reply to Question No. 31 on 16 February 1983, he has received any representations concerning the formulae in respect of Black employees in blocks of flats; if so, (a) from whom and (b) what was (i) the nature of and (ii) his response to each of these representations;

(2) whether he intends to effect changes to these formulae; if not, why not; if so, (a) when and (b) what changes?

The DEPUTY MINISTER OF CO-OPERATION:

(1) (a) Various instances.

(b) (i) The requests were that the formulae be revised with a view to accommodating more *bona fide* domestic servants on flat premises.

(ii) I instructed that proposals regarding the revision of the formulae be submitted to me by the Department of Co-operation and Development for consideration.

(2) (a) and (b) The matter is still under consideration.

Mrs. H. SUZMAN: Mr. Speaker, arising out of the hon. the Deputy Minister's reply, will he tell us when he expects finality in this matter? It has been dragging on now for many months. As he is aware, a number of employers in this free enterprise society are put to great inconvenience by having permits withdrawn and then having to submit applications to the Administration Board, accompanied by medical certificates, to say why they require a domestic to live on the premises.

The DEPUTY MINISTER: Mr. Speaker, the matter is being expedited. I have no idea when it will be concluded.

Questions standing over from Wednesday, 31 August 1983:

Dignitaries: means of conveyance

\*4. Mr. A. FOURIE asked the Minister of Defence:†

(1) Whether, with reference to his reply to Question No. 33 on 17 August 1983, any restrictions have been placed on the use of means of conveyance by dignitaries; if so, why;

(2) whether he will make a statement on the matter?

†The MINISTER OF DEFENCE:

(1) Yes, on the recommendation of the security departments it was decided to place restrictions on the means of transport of the State President and other dignitaries to protect them against incidents such as that in which a former Prime Minister was murdered in this Chamber, the armed attack on the home of the hon. the Leader of the Opposition and the placing of a bomb in a building in which the State President was to officiate. The restrictions are applicable at all times and also covers government transport including the use of aircraft of the SA Air Force for designated dignitaries

whose movement creates a security risk for them.

(2) Yes. It is common knowledge that the Republic of South Africa is being threatened by *inter alia* terror attacks on targets with the highest publicity value for terrorists. With respect to attacks against persons, dignitaries are obviously prestige targets and the present situation in which the Republic of South Africa is practically in a state of war, necessitates that precautions be taken for the safety of designated dignitaries. This does not only apply to government leaders, but can, as the situation demands, likewise be applied to opposition and other politically prominent figures and important persons. In fact, in the past it was applied in this manner. I therefore wish to appeal to hon. members and the media to approach this matter with discretion and in a responsible manner and not to make statements with a view to political gain which our enemies may use to endanger human lives. What the uninformed may consider to be unnecessary actions or malpractices, may be essential precautions for the protection of a person. Hon. members will, I am sure, agree with me that we will be playing into the hands of our enemies if we disclose our security measures.

Mr. B. R. BAMFORD: Mr. Speaker, arising out of the hon. the Minister's reply, can he tell us what question he was replying to?

†The MINISTER: Mr. Speaker, this question, standing over from Wednesday, 31 August 1983, arises out of Question No. 33 of 17 August 1983. While the question was being replied to, certain interjections were made which I regard as sensitive in respect of security and precautionary measures for the use of Air Force aircraft.

Mr. H. H. SCHWARZ: Mr. Speaker, arising out of the hon. the Minister's reply, have I understood him correctly that the

Cancer: 95

# Aid for black patients

C. Times  
15/1/73

Staff Reporter

FOR THE first time a fully qualified nurse — Sister Eunice Mroleli — has been appointed to work in helping black terminal cancer patients of the National Cancer Association of South Africa.

Soon after, a Mauerberger Foundation grant made Sister Mroleli's appointment possible, she organized a three-month training course in basic nursing techniques such as bed wash, care of pressure areas and feeding for 20 housewife volunteers from the townships.

The volunteers, who will provide terminal care in patients' homes, were presented with badges at the recent inauguration at the NCA's Cape Western branch of the new community cancer-care service.

Sister Mroleli said there had been a growing concern about terminally ill patients discharged from hospitals to their homes, where little or no care was given to their emotional, physical, social and spiritual needs.

Ciskei (9:1)  
15/9/83 (106)  
nursing  
D. Raphael  
pay rises

EAST LONDON —  
Nurses employed by the  
Ciskei Government —  
who have not received  
their increases due  
since last October —  
would get them from the  
end of this month, the  
Director General for  
Health and Welfare, Dr  
Leslie Mzimba, said  
yesterday.

But the increases  
would be made avail-  
able in three phases Dr  
Mzimba added.

He said there had  
been problems with  
effecting the increases  
and these had now been  
ironed out. He did not  
say what they were.

Dr Mzimba said the  
first phase would be  
adjustment of salaries to  
new levels from the end  
of September.

At the end of October  
the nursing staff would  
receive back-pay dated  
from March to August,  
1983.

The third phase would  
be effected at the end of  
November when they  
would be paid incre-  
ments covering the time  
from November, 1982 to  
February, 1983, Dr  
Mzimba said.— DDR

825 410/83

The Star

# Nurses are divided on the real value of their 'major' increases in salary

In October last year nurses excitedly received news of the major salary increases promised by the Government. Now the turmoil of change has subsided and they can assess their situation, do nurses feel things have improved?

There were widely varying reactions to this question — many of them forcefully expressed.

"They promised us the world, but when the salary increases came I only got R40 a month more and at the same time they doubled my accommodation fees," says one nursing sister.

Mrs Susan du Preez, deputy executive director of the South African Nursing Association (SANA), says some nurses were dissatisfied with the increases because the reduction of salary categories meant some nurses got a larger increase than others.

"The number of categories was reduced from 33 to 12. Those nurses who moved into higher categories as a result got larger increases than nurses who did not move," says Mrs du Preez.

Regarding accommodation, she says that even when increases in fees are taken into account the fees remain ridiculously low.

Opinion is divided as to whether nurses can live on their salaries. Many nurses feel they are not paid adequately when their degree of training and years of experience are considered.

"Perhaps we are paid a living wage, but I feel we need more reward for the years of training — at least four years — and the invaluable work we do," says one nursing sister.

Have nurses really benefited from the last round of salary increases? Some feel the extra pay is undercut by increased accommodation fees; others insist they work for the love of the profession, not the money.

**KATE MCKINNELL reports.**

They say the South African idea of "Florence Nightingale mopping fevered brows" is far from the competent and professional image they have in Britain.

But South African nurses feel it is their duty to educate the public by their example and gain public respect. In the same way doctors, who treat them merely as "skivvies", must be made aware of their calibre.

"Doctors often treat us like this because they feel threatened by our ability. They must realise that if we work as a team we can achieve far more," a nurse says.

It is clear many nurses are dissatisfied with their position. What can they do about this and are they doing enough?

Sana is the official body to which nurses can complain and it has a direct channel for negotiating with Government departments.

"The association does a good job of obtaining a better deal for us," says one nursing sister. But another says: "The people at the top are quite happy in their positions and they don't feel the hardship so they don't bother to fight as they should. If we try to complain we are just shut up."

Sana has a responsible task — it is the only vehicle nurses have for change. As public servants they may not form independent bodies or trade unions for negotiation.

Ultimately nurses are dependent on the policies and quotas granted by the South African Government.

They say the South African idea of "Florence Nightingale mopping fevered brows" is far from the competent and professional image they have in Britain.

But South African nurses feel it is their duty to educate the public by their example and gain public respect. In the same way doctors, who treat them merely as "skivvies", must be made aware of their calibre.

"Doctors often treat us like this because they feel threatened by our ability. They must realise that if we work as a team we can achieve far more," a nurse says.

It is clear many nurses are dissatisfied with their position. What can they do about this and are they doing enough?

Sana is the official body to which nurses can complain and it has a direct channel for negotiating with Government departments.

"The association does a good job of obtaining a better deal for us," says one nursing sister. But another says: "The people at the top are quite happy in their positions and they don't feel the hardship so they don't bother to fight as they should. If we try to complain we are just shut up."

Sana has a responsible task — it is the only vehicle nurses have for change. As public servants they may not form independent bodies or trade unions for negotiation.

Ultimately nurses are dependent on the policies and quotas granted by the South African Government.



Nurses were excited when salary increases were announced last year. But now their reactions to them vary widely.

**DOUGLAS COMMUNITY DEVELOPMENT PROJECT**

**Traditional beadwork.**

**Objectives:**

Kingwilliamstown  
5600  
P.O. Box 324

**Address:**

**DIMBAZA BEADCRAFTERS**

**Contact:** Norman Bromberger

**Telephone:** (033) 63320 Ext. 313

**Address:** University of Natal  
Pietermaritzburg  
3200

**Objectives:**

(i) Research on incomes, form Unemployment project  
(ii) Cattle project.  
(iii)

"The public has a very poor image of nursing and the media are largely to blame. On television we only see witless, giggling nurses and the newspapers are full of negative reports."

Nurses agreed with Professor van Huysteen, saying people were not made aware of the extensive training and high calibre of nurses in South Africa.

"I think it is only when people are helped by us that they realise how important and demanding our work is. They forget all registered nurses have to have a matric and undergo three to four years of training," said a nursing sister.

"Also, if a nurse has enough drive there are no limits on her career. There are countless areas in which she can specialise and achieve promotion and responsibility."

A male nurse said: "The pay is so bad any recruits are accepted and there are really below-standard nurses giving the profession a bad image."

Mr Pienaar, of Sana, says there have been problems with nursing assistants, who are required to have a Standard 6. The association is currently negotiating for this to be graded.

Nurses from Britain find South African attitudes very outdated.

"We are also not paid any extra to work unsociable hours — at night, over weekends and on public holidays."

Says another nursing sister: "We are encouraged to do specialist study courses, but the increase in salary we get for each new qualification doesn't make it worth the work."

Mrs du Preez says the dispensation introduced in October last year stipulated a bonus for each qualification and not an increase in monthly salary. Sana is at present negotiating for this to be changed and for unsociable-hours payment to be increased.

She emphasises the perks which supplement nurses' salaries. They include:

- A 100 percent housing loan and housing subsidy calculated according to salary.
  - The "best pension scheme in the country".
  - A comprehensive medical aid scheme.
  - 46 days' leave a year.
  - 120 days' fully-paid and 120 days' half-paid sick leave over a cycle of three years.
  - Study leave.
- A male nurse says the salary might be adequate for a married woman, but a man cannot support

## DEVELOPMENT STUDIES RESEARCH GROUP

874 5/10/83



**OCTOBER 5**

Rainfall on this day over the past ten years, measured at Joubert Park, Johannesburg:

1973	Nil
1974	Nil
1975	Nil
1976	Nil
1977	Nil
1978	2,3 mm
1979	Nil
1980	1,6 mm
1981	Nil
1982	Nil

### Still no rain in sight

No rain is expected on the Reef today or tomorrow, a spokesman for the Weather Bureau said in Pretoria today.

The cloudy and cool conditions will clear up tonight and it will be warmer tomorrow, he said.

Temperatures in Johannesburg reached 20 deg C today and 23 deg C in Pretoria.

## Destitute family now has refuge

**By Fiona Macleod**  
Numerous callers offering help to an ex-Zimbabwean family of five, stranded in the Johannesburg Station waiting room for four days, telephoned the station's inquiry desk yesterday.

The inquiries official said he had received more than 21 calls from well-wishers after an Afrikaans newspaper had reported on the destitute family's plight.

"One family drove from Ventersdorp to rescue them, others arrived here with two cars to pick them up. We have had calls offering accommodation, bedding, money and food," he said.

But the family were not able to respond to this generosity as they had already been given refuge in a Krugersdorp home.

### POSSESSIONS

Mr and Mrs Freddy Stratford and their five daughters, aged between two and eight, had been living in the waiting room with their few possessions in cardboard boxes since Saturday.

They left Bulawayo three months ago and are destitute as Mr Stratford, a former railway truck inspector, could not find a job.

The official said a welfare officer took care of the children yesterday and their parents had been given a temporary home in Krugersdorp. He could not disclose the address.

## 95 000 more nurses needed by year 2000

By Sue Leeman, Pretoria Bureau

South Africa must train another 95 000 nurses by the end of the century in order to keep up with the health care needs of the country's growing population, the Minister of Health and Welfare, Dr Nak van der Merwe, said last night.

Opening an exhibition at Milner Park showgrounds entitled "The Image of the Nurse", he said a further 47 692 blacks, 39 304 whites, 6 559 coloured people and 1 487 Indians must be trained as nurses by 2000.

He added that nursing staff were making it a priority to further their training, pointing out that more than 3 000 had enrolled this year at Unisa.

Of these 2 465 were busy with a bachelor's degree in nursing while 462 were studying for an advanced diploma.

In addition there were 57 honours students and 26 working towards masters and doctorates.

Dr van der Merwe said the present nurse/population ratio was 1:148 for whites, 1:549 for coloured people and 1:707 for blacks.

Indians were the worst off with only one nurse for every 745 members of the community.

## Gerrie's trainer attacked

Own Correspondent

DURBAN — Wilhe Lock, chief trainer to new world boxing champion Gerrie Coetzee, was beaten up and robbed of about R300 at Durban's Louis Botha Airport earlier this week.

Lock, who is in Durban to assist heavyweight Mike Koranicki in his twice-postponed fight against Robbie Williams, said he was attacked after an argument about Gerrie.

## Six die, 30 injured in Natal ravine crash

Own Correspondent

MARITZBURG — Rescuers used ropes and winches to retrieve dead and injured passengers from a bus which crashed into a deep ravine in the Sweetwaters location near here last night.

Six people died and about 30 were injured. Ambulances ferried the dead and injured to Edendale Hospital.

The bus plunged off a steep winding section of the gravel road near the kwaZulu bus depot high up in the location.

ry  
Principal rubber there I thought playing a bit, when I got and saw I got a someone for me." ri said he how the the boot  
books  
death  
ry  
bureau  
— Police  
ating the  
-month-old  
lande Du-  
she was  
pital with  
to whether  
e laid is to  
the post-  
on done in  
it appeared  
been in-  
tember 26  
ted to the  
last Friday  
g difficul-  
conscious-  
transferred  
it hospital,  
s found  
her body,  
was then  
mesburg's  
Hospital in  
tion where  
rday.

Everybody gets a discount and it could be as high as 50%. That's Joshua Doore's way of celebrating 10 years of offering South Africa's biggest selection of quality branded furniture, appliances, curtains, carpets, TV and sound equipment under one roof. Buy anything you like and you'll draw a mystery year discount card. Right before your eyes you could see prices go back in time all the way to 1973. For full details and even bigger savings hurry to Joshua Doore where we're bringing back the good buys from 26 September to 25 October.

**WHEN JOSHUA DOORE CELEBRATES 10 YEARS OF LOW PRICES YOU COULD GET 1983 MERCHANDISE AT:**

# SA needs additional 95 000 nurses

AKG 7/10/83 Argus Correspondent

PRETORIA. — South Africa needs an additional 95 042 nurses to provide for the population growth and maintain the current nurse-patient ratio by the year 2000.

Speaking at the opening of an exhibition here called "The Image of the Nurse", the Minister of Health and Welfare, Dr C V van der Merwe, said the current average ratio was one nurse to 408 people.

Dividing this into race groups meant: whites 1:148; coloured 1:549; Indians 1:745 and blacks 1:707.

"To provide for the population growth and to maintain the present ratio by the year 2000 means that an additional 39 304 white nurses, 6 559 coloured nurses, 1 487 Indian nurses and 47 692 black nurses are needed," Dr van der Merwe said.

He praised the exhibition, presented by the Witwatersrand and Vaal Triangle regional board of the South African Nursing Association as looking to the country's future nursing needs.

u  
a  
t  
s  
fi  
tr  
ho  
fo  
se  
De



# 200 nurses stage protest

By J MANUEL CORREIA  
ABOUT 200 black nurses staged a protest at the Hillbrow Hospital yesterday over what they described as insensitivity by their superiors over their working conditions and over uniforms. The nurses said dissatisfaction had been rampant for some time, particularly over the issue of different-colour uniforms. "We were told we would have to go to Pretoria on this and 38 nurses sent a petition to the Director of Hospital Services."

But at a staff meeting yesterday the 38 nurses had been "forced to apologise", a nurse said.

187 95  
nurses 7/10/83  
Another nurse said: "We did not have a strike because we are responsible professional people and we will not go on strike. But we are very unhappy about the whole situation

"We feel we are oppressed by our superiors. They do nothing about our complaints. We are overworked

"If they don't want to give us another colour uniform we want an extra white uniform, which we feel is not too much to ask for."

Nurses complained about the attitude adopted by two matrons, one white and one black.

A third nurse said: "We

want Pretoria to know about this"

The superintendent of the Hillbrow Hospital, Dr J Nach, said yesterday: "I met a representative of the nurses and the matter has been amicably resolved. The 38 nurses were asked to apologise because they short-circuited the normal channels and wrote directly to Pretoria.

"The 38 wanted a maroon uniform, which is the uniform of senior staff.

"We have an open-door system here at the hospital for complaints and we will look into any other problems the nurses may have."

# Nursing a grievance?

NRG vs S  
13/10/83  
95

IN October last year, nurses excitedly received news of major salary increases promised by the Government. Now the turmoil of change has subsided and they can assess the situation. Do nurses feel things have improved?

There were widely varying reactions to this question — many of them forcefully expressed. "They promised us the world but when the salary increases came I got only R40 a month more and at the same time they doubled my accommodation fees," said one nursing sister.

Mrs Susan du Preez, deputy executive director of the South African Nursing Association (Sana), said some nurses were dissatisfied with the increases because the reduction of salary categories meant some nurses got a larger increase than others.

"The number of categories was reduced from 33 to 12. Those nurses who moved into higher categories as a result got larger increases than nurses who did not move," said Mrs du Preez. Regarding accommodation, she said that even when increases in fees are taken into account, the fees remain ridiculously low.

Opinion is divided as to whether nurses can live on their salaries. Many nurses feel they are not paid adequately when their degree of training and years of experience are considered.

"Perhaps we are paid a living wage, but I feel we need more reward for the years of training — at least four years — and the invaluable work we do," said one nursing sister.

"We are also not paid any extra to work unsociable hours — at night, over weekends and on public holidays."

Said another nursing sister: "We are encouraged to do specialist study courses but the increase in salary we get for each new qualification doesn't make it worth the work."

Mrs du Preez said the dispensation introduced in October last year stipulated a bonus for each qualification and not an increase in monthly salary. Sana is negotiating for this to be changed and for unsociable-hours payment to be increased.

## Supplementary perks

She emphasised the perks which supplement nurses' salaries. They include:

- A 100 percent housing loan and housing subsidy calculated according to salary;
- The "best pension scheme in the country";
- A comprehensive medical aid scheme;
- 46 days' leave a year;
- 120 days' fully paid and 120 days' half-paid sick leave over a cycle of three years;
- Study leave.

A male nurse said the salary might be adequate for a married woman, but a man could not support a family on a nurse's salary.

Mr Danie Pienaar, professional officer at Sana, said the young people of today are too materialistic.

"The country is in a recession so we cannot ask for increases now. Nurses must realise they have a duty to the people of our country as professionals," he said.

He stressed that nurses do not work only for their salaries, but also for the satisfaction their jobs give them. Some nurses supported this.

"It is the quality of my work that matters to me, not the payment," said one nursing sister. Professor M C van Huyssteen, director of Sana, said salaries were not the cause of the nursing shortage.

"The whole situation needs careful research because only some hospitals have shortages. There is also a lack of recruits, but there are enough trained staff," she said.

## Poor image

"The public has a very poor image of nursing and the media are largely to blame. On television we see only witless, giggling nurses and the newspapers are full of negative reports."

Nurses agreed with Professor van Huyssteen, saying people were not made aware of the extensive training and high calibre of nurses in South Africa.

"I think it is only when people are helped by us that they realise how important and demanding our work is. They forget all registered nurses have to have a matric and undergo three to four years of training," said a nursing sister.

Nurses feel it is their duty to educate the public by their example and gain public respect. In the same way doctors, who treat them merely as "skivvies", must be made aware of their calibre.

"Doctors often treat us like this because they feel threatened by our ability. They must realise that if we work as a team we can achieve far more," a nurse said.

It is clear many nurses are dissatisfied with their position. What can they do about this?

Sana is the official body to which nurses can complain and it has a direct channel for negotiating with Government departments.

It has a responsible task — it is the only vehicle nurses have for change. As public servants they may not form independent bodies or trade unions for negotiation.

Ultimately nurses are dependent on the policies and quotas granted by the Government.

Nurses are divided on the real value of their "major" increases in salary. Have nurses really benefited from the last round of salary increases? Some feel the extra pay is undercut by increased accommodation fees; others insist they work for the love of the profession, not the money. KATE MCKINNEL, in Johannesburg, reports:

TODAY'S WOMAN



12/10/93

# Night pay storm

OS By MONK NKOMO *Sowetan*

KALAFONG Hospital in Atteridgeville, Pretoria, has been rocked by yet another controversy — the hospital has now decided to withdraw the night duty allowance it paid its nursing staff.

Irate nurses at the weekend informed The SOWETAN that they had been told by the hospital's authorities that they would no longer receive the night duty allowance.

According to information received from the nurses, they were also told they would now work four months on night duty — an increase of two months on the previous shift.

Nurses also informed us that they had been

told they would now have a week off after working a week on night duty. Previously nurses were off for about four days after working night duty — which was about seven days or sometimes less.

Authorities at the hospital refused to comment on the issue.

The authorities claimed it was a domestic issue and had nothing to do with the Press.

Director of Hospital Services in the Transvaal, Dr H Grove, referred The SOWETAN to the Commissioner for

Administration in the Public Service.

According to this office, the payment of night duty allowances was at the discretion of individual hospitals. Some had increased the number of days off for the night duty nursing staff, others had increased leave days, while others paid night duty allowance.

As Kalafong Hospital officials have refused to comment on the issue, it is not known how nurses at this hospital are compensated for night duty services.

But two hospitals,

GaRankuwa and Eugene Marais, have said nurses are paid a night duty allowance. Eugene Marais is a white hospital in Pretoria.

Nurses at Kalafong Hospital are angry at the decision to discontinue the night allowance as it means an income they have become used to is now cut off — and without consultation.

The non-consultation aspect is "more hurting", the nurses said.

"We are regarded and treated like a bunch of irresponsible human beings and are expected to swallow everything we are told without chewing," they added.

According to our information the allowance was about 15 percent of nurses' salary, about R75 for a nurse earning R500 per month.

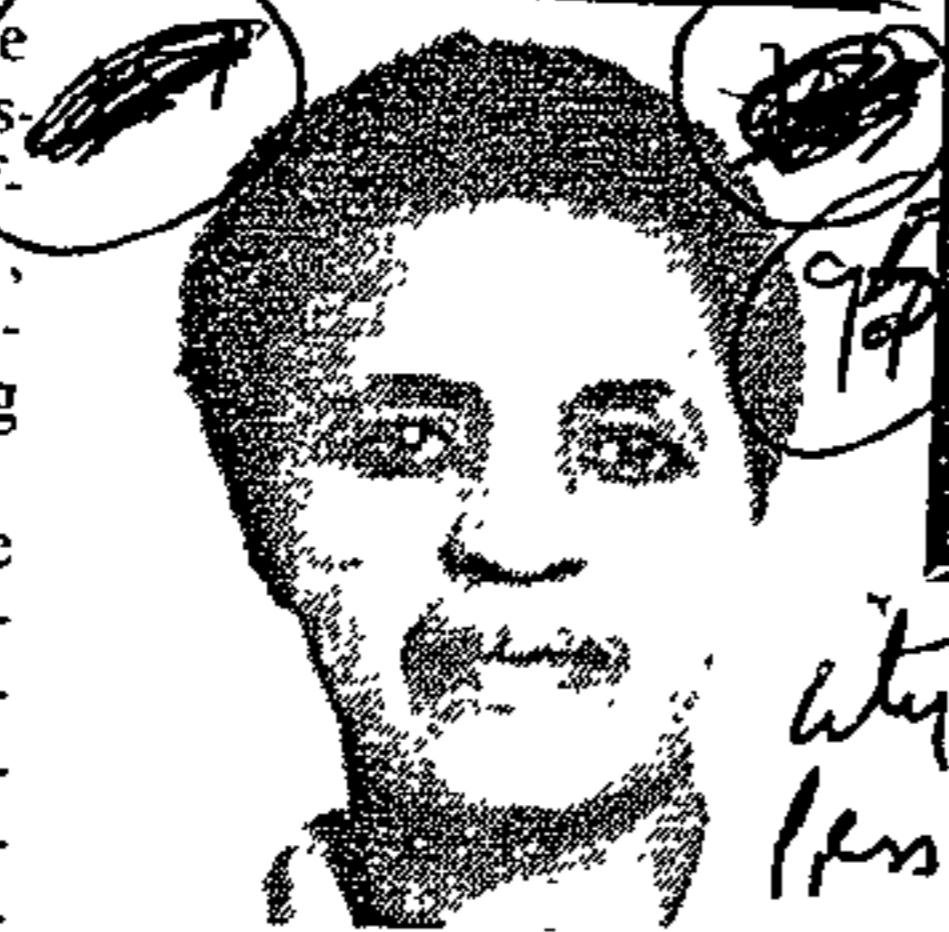
# STAMPED OUT OF HOSPITAL

FOUR senior Mdantsane matrons including Ciskei's Chief Nursing Officer, Matron N G Xesi, have been fired - without any reasons being given.

Matron Xesi and three senior matrons at Mdantsane's Cecilia Makiwane Hospital all received immediate dismissals from Ciskei's director-general of health, Mr H M Mdleleni.

No reasons were given - and Mr Mdleleni flatly refused to discuss the sackings when contacted by City Press this week.

Matron Xesi said she and senior matrons P N Ralana, Constance Tsipa



● Also fired: Matron Beauty Qambata.

and Beauty Qambata were all baffled by the action, as there had been no suggestion of them doing anything wrong.

"All the good work we've done has been thrown back in our



By BENITO PHILLIPS

faces," said Matron Xesi, who was honoured by the homeland last year when a photo of her and a student nurse Jongilanga was used on a Ciskei postage stamp.

"Not being told why I was fired makes me feel like a criminal. If I've

● Matron N G Xesi's fondest memory . . . the photo of herself and a student nurse used on a Ciskei postage stamp. She's now lost her job.

12/11/83  
committed an offence, why wasn't I brought before the disciplinary committee?"

Matron Qambata - Hospital superintendent Dr P E Pistorius one of the pioneers of the Mdantsane hospital - refused to discuss the sackings, and said she had been slapped in the face by the authorities. Ciskei Health Minister Dr J Beukes was overseas, according to his secretary.

"I would have accepted it if charges had been brought against us," she said.

*D. D. D. D.*  
**Six nurses promoted** *1/17/83* *AS*

BISHO — President Lennox Sebe announced the promotion of six senior nurses to higher ranks this week.

Mrs S. N. Sonjica, an assistant organiser has been promoted to Deputy Chief Nursing Officer.

Mrs T. K. T. Njikelana and Miss V. P. Ntuli, assistant organiser of Nursing Services and Senior Tutor, respectively have been promoted to posts of organiser of Nursing Services.

Mrs C. N. Mfunda (tutor), Mrs L. E. Geleba (senior tutor) and Mrs V. N. Tsheke (principal matron) have been promoted to assistant organisers of Nursing Services. — DDR.

HEALTH AND DISEASE — NURSES

1984

JANUARY — DEC.

# Intake of <sup>99</sup> student nurses nearly doubles

By Pamela Kleinot,  
Medical Reporter

The intake of student nurses at the Johannesburg Hospital has nearly doubled this month compared with last January. A total of 177 matriculants have already enrolled at the hospital.

This January's intake has been the highest since 1979 when 179 students joined the profession. There was a massive drop to 105 in 1980 and to 93 for each of the next three years.

Dr Reginald Broekmann, superintendent of the Johannesburg Hospital, said he was pleased with the high intake.

"If future intakes show a similar pattern this could have major implications on the nursing shortage," he said.

The critical nursing shortage has been the hospital's major problem since it opened in December 1979.

Some wards in the 2 000-bed hospital had to be closed as many nurses left the profession. Many wards have never been used. At present only 1 062 beds are open.

In the past few years hospital authorities have expressed concern about the alarming trend of fewer young people entering the profession.

The position applied countrywide, according to a Human Sciences Research Council survey, which showed that the personnel shortage was due mainly to the expansion of services

and a decrease in the number of young entrants.

Dr Broekmann said the reasons for the influx of nurses this year "remained obscure at this stage" but the hospital would be circulating a questionnaire among the nurses to find out why they had opted for the profession.

"The high number of enrolments seems to be part of a trend at a lot of other hospitals, which have had a considerably higher than normal intake for this year."

Dr Broekmann said he believed the recession had played a part in it because it was always easy to find employment in the nursing profession.

A senior matron at the hospital said she believed the higher intake was due to the improved image of the nurse.

● Two students yesterday said they had decided to take up nursing after working at the hospital for two weeks on a "scholar programme".

Vicki Landman (17), who matriculated at Potchefstroom Girls' High School, said: "It is a very exciting job; you meet a wide variety of people and it's a great feeling when you see a patient recover."

Noelle Mackie (18), who matriculated at Waverley Girls' High School, said she had wanted to nurse since she was a child.

"There's a lot of heartbreak involved in the work but there's also a great deal of job satisfaction," she said.

191

# Patients 'the victims of health care system'

CASE TAKEN 30/1/84

95

Staff Reporter

THE patient was the real victim of the present health care system which rewarded its primary workers, the nurses, with poor pay for long hours and a heavy workload, a group of University of Cape Town Summer School students was told on Friday.

Ms Hester van der Walt, a trained nurse who recently completed a Masters Degree in adult education and community development at Manchester University, said a group of workers as dissatisfied as nurses could not render an efficient service.

"Almost all nurses, from senior sisters to nurse aids and auxilliary nurses, feel they are paid too little," she said.

"Everyone I have spoken to rejects pay discrimination on the grounds of colour, they all feel the 12-hour 7am to 7pm shift is unnecessary and the black nurses in particular are unhappy with the heavy workload they have to cope with because of overcrowded wards."

Ms Van der Walt said nurses were also disillusioned with the South African Nursing Association (Sana).

"Sana is a statutory body and membership is compulsory for nurses, but most nurses say the organization means nothing to them and they are unconvinced about its capabilities to secure them a better deal."

"Unfortunately, few nurses realize that there is nothing to stop them from organizing outside Sana, and those who do are reluctant to do anything for fear of victimization."

"In the August issue of the official Sana magazine, Nursing News, Sana admits that nurses could form another representative body, but discourages this on the grounds that nurses would have to pay two subscriptions fees, because they would have to belong to Sana anyway, and by implying that membership of a trade union goes against the service ethic of nursing."

"As soon as anyone challenges the system, they are accused of not caring for their patients."

"The rigid rules by which wards are run breeds arrogance, pettiness and an atmosphere in which people are played off against one another," she said.



# 1 800 nursing posts unfilled in Transvaal

*95*  
*Star 9/2/84*

Pretoria Bureau

More than 1 800 of the Transvaal's 9 700 posts for registered nurses were vacant at the end of last year with qualified teaching staff and matrons being in particularly short supply.

This emerged from statistics given during yesterday's session of the provincial council by the MEC for Hospital Services, Mr Daan Kirstein.

His figures revealed that the shortage of nurses was most serious in the coloured and Indian communities, where nearly two out of every five posts were vacant. The province needs a total complement of 537 coloured and Indian nurses.

One third of the 4 800 posts for black nurses in the provinces had still to be filled at the end of last year.

However the number of white posts still vacant was relatively moderate, with 3 480 of the 4 318 posts being filled.

Only 12 of the 22 teaching posts in coloured and Indian hospitals had been filled while 91 black nursing teachers had been found to take up some of the 148 available positions.

In white hospitals, 141 out of 224 posts were occupied.

More than one third of posts for black, coloured and Indian matrons were unfilled at the end of 1983.

Other figures given by Mr Kirstein showed that the intake of new student nurses at some hospitals during 1983 was well below the maximum.

At the Johannesburg Hospital, which can accept 335 new trainees a year, only 204 were enrolled.

At Baragwanath Hospital near Soweto, 302 trainees were enrolled instead of the maximum intake of 389 and at Tembisa 78 out of 99 student places were filled.

At Pretoria's H F Verwoerd Hospital, however, last year's intake of 241 students exceeded the hospital's annual quota by 24.

# More nurses a matter of urgency

AGU 27/2/84

Provincial Staff

ABOUT 35 000 more registered nursing sisters would be needed by the year 2000 if South Africa is to maintain its present ratio of nurses to population, according to Dr J Sonnenberg (PFP Green Point).

During a Provincial Council debate on improved training for nurses and midwives, Dr Sonnenberg said about 24 000 of the 35 000 nurses would have to be black.

This meant about 2 000 more nurses would have to be trained annually, and the provision of the required manpower required "urgent attention".

The new ordinance was approved at its third and final reading. It enables nurses and midwives training colleges in the Cape to be linked with universities.

# 35 000 more nurses needed by year 2000

95  
E. Post  
2/2/84

## Post Correspondent

CAPE TOWN — About 35 000 more registered nursing sisters would be needed by the year 2000 if South Africa is to maintain its present ratio of registered nurses to population, according to Dr J Sonnenberg (PFP, Greenpoint).

Speaking during a Provincial Council debate on an ordinance on the improved training for nurses and midwives, Dr Sonnenberg said about 24 000 of the 35 000 nurses would have to be black nurses.

This meant about 2 000 more nurses would have to be trained annually and the provision of the required manpower called for "urgent attention".

"Nursing colleges will thus be faced with a daunting challenge and this legislation will facilitate and streamline their task," he said.

He said the legislation, which made it possible to upgrade the theoretical and academic side of nursing

while retaining the equally important practical aspect of professional training, had been an ideal sought for many years.

The new ordinance, which was supported by all parties in the Provincial Council, was approved at its third and final reading.

It enables all the eight colleges for the training of nurses and midwives in the Cape to be linked with universities in a process which is expected to be completed by January next year.

In introducing the second reading of the ordinance last week, Mr Piet Loubser, MEC in charge of Hospital Services, said he felt it was "a new era in the training of nursing specialists in the Cape".

Mr Loubser gave full details of the staffing of the 10 surgical wards at the Port Elizabeth Provincial Hospital and the 13 at Livingstone Hospital.

He was replying to questions by Mrs Molly Blackburn (PFP Walmer).

The Provincial Hos-

pital's 10 surgical wards have 403 beds and are staffed by 47 sisters, 13 part-time sisters, 14 staff nurses, 27 nursing assistants and 12 B Curr students.

Dr John Sonnenberg asked Mr Loubser how many posts there were for student nurses at various hospitals and the number of vacant posts (given in brackets).

Groote Schuur 1 045 (94), Tygerberg 1 343 (259), Victoria 131 (9), Somerset 394 (12), Conradie 208 (nil).

Provincial Hospital (Port Elizabeth) 404 (87), Livingstone 535 (20), Frere (East London) 280 (56), Kimberley 195 (30).

Vacant posts for staff nurses and professional nurses (sisters) are:

Provincial Hospital, seven staff nurses, five sisters (semi); Livingstone, no staff nurse vacancies, one sister (semi); Frere, five staff nurses and 35 sisters (semi); Kimberley, one staff nurse and four sisters.

RDM 29/2/84 (95) (418)

## Nurse shortage is critical

### Mall Correspondent

CAPE TOWN. — Less than half of the Department of Health and Welfare posts for whites were filled permanently at the end of last year.

The department's annual report, tabled in Parliament this week, shows that of 6 955 authorised posts, only 3 332 are permanently filled. A total of 1 559 actual vacancies existed, while 1 736 were filled temporarily and 328 part-time.

Of 2 070 posts for professional nurses, only 1 143 were

filled permanently while 528 vacancies existed. Of 447 posts for staff nurses, only 134 were filled permanently, and there were 129 vacancies.

There were 40 vacancies for student nurses out of 55 posts, only two of which were permanently filled. Out of 45 posts for student male nurses, 38 were vacant, and two filled permanently. Forty posts for pupil nurses were vacant out of a total of 58, and 13 were filled permanently.

95 Hansard Q. Col 4/7  
Nurses 29/2/84

278. Dr M S BARNARD asked the Minister of Health and Welfare:

- (1) How many (a) applications to train as nurses were received from and (b) vacancies at institutions for the training of nurses existed for (i) Whites, (ii) Coloureds, (iii) Indians and (iv) Blacks in 1983;
- (2) how many (i) White, (ii) Coloured, (iii) Indian and (iv) Black nurses completed their training in that year?



The MINISTER OF HEALTH AND WELFARE:

- (1) (a) (i) Whites—3 999.  
(ii) and (iii) Coloureds and Indians—3 569.  
(iv) Blacks—31 301.
- (b) (i) Whites—3 463.  
(ii), (iii) en (iv) Coloureds, Indians and Blacks—1 275.
- (2) (i) Whites—2 146.  
(ii) Coloureds—739.  
(iii) Indians—707.  
(iv) Blacks—2 780.

# Private nursing: Medical aid call

*CME Times* Medical Reporter 17/3/84

SOUTH African nurses want medical aid societies to repay patients for the services of private nurses — and have drawn up a plan of action to achieve this.

The South African Nursing Association (Sana) stated at their central board meeting yesterday that the legislation should provide for the recognition of private nurses by medical aid societies.

The first phase of their plan is to educate other nurses, the medical profession and the general public.

They decided it was too soon to approach the Department of Health and Welfare at this stage.

It was also suggested that, as most nurses belonged to a medical aid society, they should lobby for this within their own societies.

The work of private nurses was extremely important, especially that done by midwives and those nursing the elderly.

Nurses should be accepted as independent professionals who did not have to rely on doctors to prescribe when they were needed.

Opening the meeting yesterday, the president of Sana, Professor Retha van Huyssteen, said many people held a low image of nursing, in spite of the fact that it was an independent profession with a proud history and a well-defined ethical code.

LE  
HE  
S

Compact new course for health

95 Star 21/3/84  
**Shortage of nurses: Nak speaks out**

Pretoria Correspondent

There are at present not enough trained nurses to meet South Africa's needs, the Minister of Health and Welfare, Dr Nak van der Merwe, said in Pretoria yesterday.

But he expressed confidence that the profession would be able to increase its numbers not only to keep pace with the population increase, but to exceed it.

Dr van der Merwe was speaking at a banquet after a meeting of the South African Nursing Council.

Over the past five years, 62 085 people had undergone some form of nursing training, the Minister said.

He had been struck by the attitude of preparedness and planning which the nursing profession, through the SANC, had shown towards the growing health needs of the country.

"The SANC was the first multiracial nursing council and this has been of mutual benefit to all population groups because it deepened insight into cultural differences and attributes."

A new course for nurses to qualify for professional registration is replacing the present ones.

The president of the SANC, Miss Iris Roscher, said at the meeting that the new comprehensive basic training was in line with national and international developments in health care systems.

Nurse used to do general training, followed by midwifery and psychiatric and community health nursing. These four courses were now combined in the basic training.

Miss Roscher said many would benefit from the change. These would be the nurse herself — who could practise with confidence in any field and have a comprehensive approach to the health needs of the patient — and the family and community.

Patients could be sure that they would be correctly cared for, and the health needs of their families would also be considered.

Taxpayers' money would also be more sensibly spent and the nurse would be able to move more freely within the health care system, said Miss Roscher.

**Bravery praised**

Pretoria Correspondent  
The courage of nurses many of whom risked their lives to help others during the recent floods was praised by the former president of the South African Nursing Council, Professor Charlotte Searle.

"Those nurses swam to help marooned people, kept hospitals going without food or drugs," Professor Searle told the meeting of the Council yesterday.

"Few people realise just what they did," she said.

"I would like to move that this Council expresses its appreciation to those nurses who were true to the highest traditions of nursing during the floods in the Pongola and Zululand areas."

97 Star 21/3/84  
**Tvl hospital fees more than double for some patients**

Pretoria Correspondent  
Transvaal provincial hospital fees have more than doubled for some categories of patients.

Part-paying hospital patients who used to pay R10 a day will now pay R20 a day.

The increase will come into effect on April 1.

Private full-paying pa-

part-paying patients, will pay between R5 and R7 per attendance compared with R2 previously.

Welfare cases and pensioners will still be treated free of charge.

Another change to the tariff scales has been the condensing of patient categories

Discrimination against

pay the same daily fees as those on medical aid

The Administrator of the Transvaal, Mr Willem Cruywagen, who announced the higher tariff structure last week, said "drastic" increases in the price of medicines, equipment, foodstuffs and services had necessitated the increases

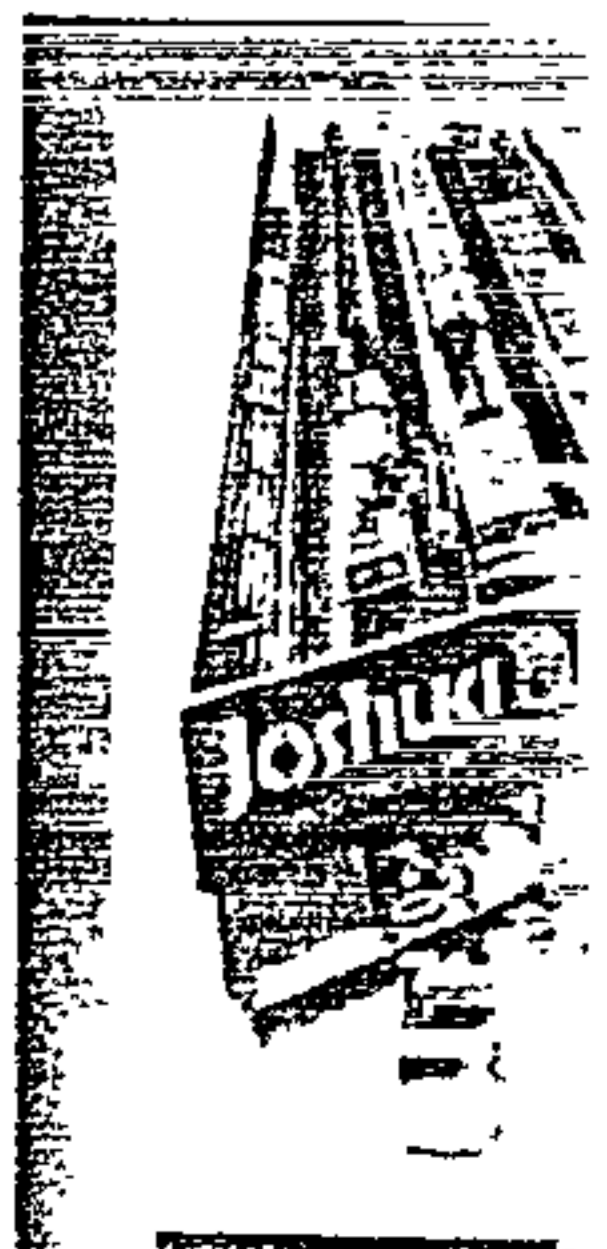


These Berea, Johannesburg, nursery school children, at a festival of Purim which marks the downfall of a : wipe out the Jewish nation. The festival, which : fun, is an annual event and lasts for six days. Th : Monday and listened to stories about the evil H---

**Soccer clash live on TV**

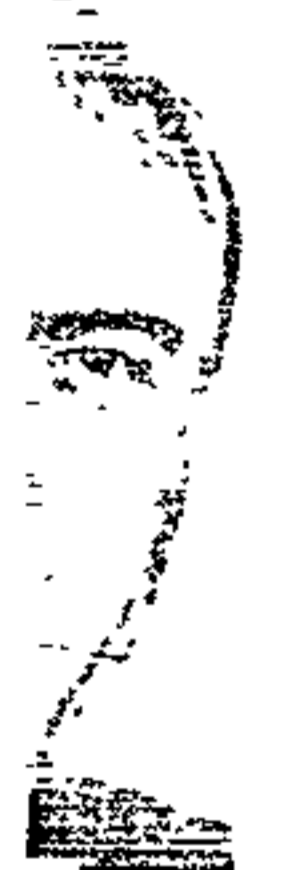
Soccer fans can look forward to watching the Manchester United-Barcelona second leg European Cup Winner's Cup soccer quarter-final clash live on TV2 and TV3 tonight at 9.30 pm.

The match will be re-shown at about 11.10 pm on TV1 after tonight's scheduled programmes are finished



SS  
r  
Ameri-  
ialites,  
pp was  
g - so  
lessons  
positive

a pas-  
e (38).  
nd-the-  
small  
a jet-set  
y.  
oday!



er's  
age

mana-  
of All-  
Dods,  
- socie-  
more

ment,  
cultural-  
ntages  
- street  
ng be-  
p to  
lect of  
inter-

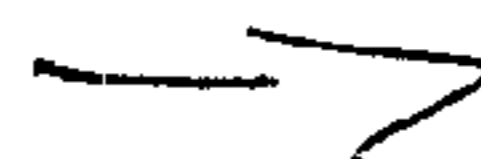
95 Howard Nurses Q. 601. 779  
28/3/84

\*20. Dr M S BARNARD asked the Minister of Health and Welfare:

- (1) Whether there is a shortage of nurses in the Republic; if so, what was this shortage as at the latest specified date for which figures are available;
- (2) whether his Department intends to increase the facilities available for the training of nurses; if not, why not; if so, (a) when and (b) what additional number of nurses will be accommodated in these facilities?

†The MINISTER OF HEALTH AND WELFARE:

- (1) Yes; comparative figures of vacant posts as on 31 December 1983 are:
  - (a) Department of Health and Welfare ..... 26,20%;
  - (b) Transvaal Provincial Administration ... .. 21,60%;



3 MARCH 1984

780

- (c) Orange Free State Provincial Administration ..... 21,40%;
- (d) Cape Provincial Administration ..... 9,79%;
- (e) Natal Provincial Administration ..... 3,58%.

- (2) Yes;
  - (a) part of the new nursing training course started at beginning of 1984;
  - (b) unknown, depends on applicants.

Mr Speaker, I can also tell the hon member that after an interview with the Association for Private Hospitals I informed them that I will lay it down as a requirement at future registrations of new nursing homes that they will have to take part in the training of nurses. I am negotiating further with the existing hospitals also to take part in the training of nurses.

Mr W V RAW: Mr Speaker, arising out of the hon the Minister's reply, does he intend doing anything about the fact that the Natal hospitals are only able to have a post ratio of from 50% to 70% of the other provinces because they cannot get the necessary money from the Government, as a result of which there is not a shortage of nurses, but a shortage of posts because the posts cannot be created? Is he aware of that, and what is he prepared to do about it?

The MINISTER: That aspect does not fall under my Department, but under the Provincial Administration of Natal.



# SA nursing body to be restructured

Argus Correspondent

ing are already in process.

PRETORIA. — The South African Nursing Association is to be restructured "to meet the demands of modern nursing" and "to serve its 115 000 members better in the new constitutional dispensation".

Proposed changes will affect the management and running of the association; and its services and facilities, Professor Retha van Huyssteen, president of the association, said recently.

"In the past years nursing has changed significantly," she said. "And with the introduction of the new constitution our profession will stay in the lead with the rendering of services to the community."

A register of all nursing research done in South Africa had been completed and the results were "surprising", said Professor van Huyssteen. A research fund had also been established.

The association will this year publish its three-yearly report on nursing education and services and recommendations for nursing train-

The association's Florence Nightingale committee, which administers donors' bursary funds, has awarded 37 bursaries totalling R9 000 for further study by nurses this year.

Top medals of the association were awarded recently to the three nurses who achieved the highest points in last year's final examinations for general nursing.

They were Miss Moira Page of Victoria Hospital, Wynberg, Cape, who won the E C Lotz Medal, Miss Janey Mellville of Tygerberg Hospital, who won the Georgina Judson Medal, and Miss Zandile Mngomezulu of Edendale Hospital, Maritzburg, who won the Cecilia Makiwane Medal.

Four representatives of the association have been included in the reconstituted South African Nursing Council.

They are Professor Retha van Huyssteen, president of the association; Miss Odelia Muller, the vice-president; Professor Petra van Niekerk of the University of Pretoria; and Mrs T M Bendile of the Pelonomi Nursing College, Bloemfontein.

95 Nurses 29/3/84  
Hansard Q. 61. 801

546. Dr M S BARNARD asked the Minister of Health and Welfare:

- (1) With reference to his reply to Question No 278 on 29 February 1984, how many (a) White, (b) Black, (c) Coloured and (d) Indian persons who applied to train as nurses in 1983 were accepted;
- (2) whether the applications of any of these persons were refused; if so, (a) how many in each race group and (b) why?

The MINISTER OF HEALTH AND WELFARE:

- (1) (a) Whites..... 3 625
- (b) Blacks ..... 3 671
- (c) Coloureds } ..... 1 306
- (d) Indians }

(2) Yes;

- (a) Whites..... 374
- Blacks ..... 27 630
- Coloureds } ..... 2 263
- Indians }

(b) Statistics are not kept of the reasons for refusal.

# Nurses: Rejection figures

Cape Times  
30/3/84  
(95)  
Political Staff

HOUSE OF ASSEMBLY,  
— Applications by 27 630 black people to train as nurses were refused in 1983, the Minister of Health, Dr Nak van der Merwe, said yesterday.

Only 3 671 black applications were accepted, he said in reply to a question by Dr Marius Barnard (PFP, Parktown).

During the same year, 3 625 of the 3 999 white applications were accepted, as were 1 306 of 3 569 coloured and Indian applications.

Asked why the applications had been refused, Dr Van der Merwe said: "Statistics are not kept of the reasons for refusal."

Earlier this year, Dr Van der Merwe told Dr Barnard that 2 146 whites, 739 coloureds, 707 Indians and 2 780 blacks completed their nursing training in 1983.

# 'Serious shortage of training facilities for African nurses'

AKG 45  
30/3/84  
95

Political Correspondent

A SERIOUS shortage of training facilities for black nurses was the main reason for the large number of applicants being turned down, Dr Marius Barnard, the Opposition's chief spokesman on health matters, said today.

## RFU will vote for SA rugby tour: Fleet Street

Argus Foreign Service

LONDON. — Fleet Street rugby writers are convinced that the England Rugby Football Union will vote overwhelmingly today in favour of the tour of South Africa.

One commentator, Tony Bodley of the Daily Express, says he expects a "whacking 3-1 majority" from the 54 members when the vote is counted.

Ian Wooldridge, in the London Daily Mail, believes the members will disregard the avalanche of petitions from anti-apartheid campaigners because they "simply don't care".

### FOR AND AGAINST

The Guardian devotes half a page to two of its rugby commentators, who argue both for and against the tour.

Frank Keating chastises the RFU for saying the survival of the Olympic and Commonwealth games is no concern of theirs and urges the members to vote against.

David Frost, on the other hand, believes in the creed that says: "Play the game."

David Miller of The Times says the RFU is probably right to tour but for the wrong reasons.

● Size of majority on tour only uncertainty. — Page 32.

## Mount St Helens is rumbling again

VANCOUVER (Washington). — Spitting sparks and dust, Mount St Helens is rumbling again and superheated, glowing rock is sliding down the dome of the volcano.

An ash plume rose about 1 800m over the 2 530m peak, said Mr Steve Brantley, a geologist with the US Geological Survey. — Sapa-AP.

He was commenting on figures given by the Minister of Health, Dr Nak van der Merwe which showed that only 3 671 out of 27 630 black applications for nursing training were accepted last year.

In the same year 3 635 of the 3 999 white applications were accepted and 1 306 of 3 569 coloured and Indian applications.

Dr van der Merwe said a record of the reasons for refusal were not kept.

Dr Barnard today blamed the "scandalous" shortage of training facilities for blacks

He pointed out that, in terms of the Government's coloured labour preference policy for the Western Cape, there were no training facilities for blacks here. The nearest were in Port Elizabeth.

More black nurses were urgently needed for primary health care in the local community and for a campaign to curb the population explosion through proper guidance.

● There was an overall shortage of nurses in South Africa and salaries would have to keep pace with inflation to attract suitable candidates into the profession, Matron V Russel-Jones, chairman of the Western Cape regional board of the South African Nursing Association, said today.

She said the SANA had predicted that there would be a "dire shortage" of nurses in the future unless many more nurses of all race groups were trained.

"At the moment there is a surplus of nurses in some of the urban areas, but there is a great shortage of nurses in many rural areas.

"It is very difficult to get nurses to go to the rural areas as many do not want to go to the platteland and there is also an accommodation problem because none of the rural hospitals provide hostels," she said.

Matron Russel-Jones said many of the applications were probably turned down last year because there were not enough training posts or the applicants did not have suitable educational qualifications or symbols.

● 8 602 to be nurses. — Page 15.

# City/Govt small-craft

Municipal Reporter

A MORE detailed scheme for the proposed Granger Bay waterside development is to be prepared jointly by City Council officials and Government planners, who will incorporate the historic Victoria and Albert basins in the project.

Co-operation between the Government and the council has been agreed in the wake of an offer by a private company to develop the projected small-craft harbour and waterside recreation project.

Reference to the offer appears in a report by city engineer Mr Jan Brand on a meeting last month between the Minister of National Education, Dr Gerrit Viljoen, who has responsibility for sport and recreation; the director-general of his department, Dr P S Meyer, Cape Town's Mayor, Mr Sol Kreiner, and the city engineer.

## Tentative offer

Mr Brand said: "Dr Viljoen mentioned that his department had received a tentative offer from a consultant representing a utility company who may be interested in undertaking the whole development on behalf of the department."

But the council agreed yesterday that city officials would help the Department of National Education prepare a more detailed plan.

Mr Brand says the Government department had not had experience of dealing with the private sector on developments such as the Granger Bay project and at last month's meeting Mr Kreiner had offered the city's assistance.

Mr Brand says he believes Granger Bay and the adjoining historic Victoria and Albert basins would provide a vital new public link with the sea and become a unique and vibrant part of the city.

## Record satellite

PARIS. — The European Space Agency's Ariane rocket has put the world's largest civilian telecommunications satellite into orbit from a launchpad in French Guiana. It can handle 12 000 simultaneous telephone calls and two colour TV channels. — Sapa-Reuter.



Power company work flattened when a large across

## Shultz calls

Argus Foreign Service

WASHINGTON. — The United States today called for change in South Africa as "an act of partnership among all its peoples".

Only in this way would South Africa find peace with itself, said Secretary of State Mr George Shultz, in a major definition of US policy.

"If a true partnership is going to develop, black South Africans have to be more able to compete politically and economically with whites," he said.

Mr Shultz said the ability of the US to sustain a productive relationship with South Africa was limited as long as political and economic power remained overwhelmingly in the hands of whites and meaningful political participation was denied to the majority on the basis of race.

### "WESTERN FAMILY"

"When meaningful change takes place we are prepared to accept South Africa in the Western family of nations."

Mr Shultz was speaking at a State Department luncheon in

# Operation upgrade

## For education of nurses

**NURSING** education is to be limited to universities, bringing it in line with the practice in most countries. Present hospital training centres are to be upgraded to fully fledged educational colleges specialising in nursing education.

These are the far reaching changes regarding the training of nurses that come into effect in 1986 and follow top level investigations and representations by nursing authorities in the country.

Officials have assured The SOWETAN that nurses in training would still be paid and this would not change. This assurance follows widespread fears in the nursing profession that trainees may now be expected to pay for tuition as in other professions.

### Course

This assurance was given by Mrs Iris Roscher, president of the South African Nursing Council. She also said the present basic learning system is to be replaced by a more comprehensive system.

The course will take four years and will be offered by only two types of institutions, universities and nursing colleges linked to universities.

The decision on nursing education was taken by the National Health Policy Council, the highest policy-making author-



**NURSES IN TRAINING: Now fully fledged educational colleges.**

### By SELLO RABOTHATA

ity in the health field, and accepted by the Minister of Education and the Advisory Committee of Universities, the highest policy-making authority in the field of education.

The new system in nursing education is to come into effect from January 1986 and the last intake for the present system is January, next year. The move is a culmination of a century long battle by the South African Nursing Association after an examination of the education and training of our nurses.

The South African Nursing Council has in-

### Policy

The president of the South African Nursing Association, Ms Charlotte Searle, said the decision constitutes a policy for nursing education which has far-reaching implications. The most important aspects of the decision are that:

Both the SA Nursing Council and the SA Nursing Association recommended that students on all basic nursing courses should be given the same status as other students.

The students should register with the college and not with the hospital and throughout the duration of the course they would be under the control of the college and under the supervision of the associated university.

### System

Among some of the requirements for the new system are:

- A nursing college be established within the enabling legislation of the authority responsible for its establishment;
- The college should have its own budget and be financed in full by the authority concerned;
- The college should have a college council and a faculty board or even a senate equal to that of the teacher training college in the particular province;
- Only basic and post basic professional nursing education be linked to the university;

Professional nurse training at diploma level belongs squarely in the post-secondary stream of education, and is being accorded its rightful status in this regard;

The State and provincial health authorities would continue to finance nursing education from funds appropriated from tax revenues both in regard to the financing of the colleges and the financing of student nurses;

The nursing profession is entering a new era in professional education and development and the profession has, as an additional dimension, been accorded the recognition it so justly deserves.

Maj R SIVE: Mr Speaker, further arising out of the hon the Minister's reply, does he not believe that, in view of the new constitutional system, this law should be repealed before the system comes into operation?

The MINISTER: Mr Speaker, I said during an earlier debate in this session that there are facets of this Act which are receiving attention, and I have now again indicated it in reply to the question. The new dispensation is fundamentally based on the recognition of the difference between the groups. It is also based on separate voters' lists, where persons from a particular population group must elect members of that own chamber. That is why I regard the existence of separate voters' lists and therefore also the existence of separate parties as a fundamental prerequisite for the new dispensation.

Handwritten: *Harward Q. 61, 763*  
*Msinga area: Tribal clashes*  
*13/4/84*  
\*20. Mr M A TARR asked the Minister of Law and Order:

- (1) Whether any persons died in tribal clashes in the Msinga area (a) in 1979, 1980, 1981, 1982 and 1983, respectively, and (b) from 1 January 1984 up to the latest specified date for which figures are available; if so, how many in each case;
- (2) whether the South African Police have taken any preventive steps in this regard; if not, why not; if so, what steps and (b) when;
- (3) whether any further steps are contemplated; if not, why not; if so, what steps?

The MINISTER OF JUSTICE (for the Minister of Law and Order):

- (1) Yes.
- (a) 1979: 55

1980: 7  
1981: 20  
1982: 16  
1983: 43

(b) 1 January 1984 to 3 April 1984: 35

(2) Yes.

(a) and (b) Patrols, including special weekend patrols are being carried out in the area on a continuing basis, while use is from time to time also being made of helicopter support. Discussions with tribal heads are held regularly, the latest of which took place on 14 March 1984, but owing to the unpredictability of the warring impi's, it is not always possible to defuse an explosive situation or to avert the deep-rooted friction.

During the past four years approximately 2 400 arrests had been effected, while the special fire-arm squad operating in the area has already confiscated 2 169 fire-arms during the same period.

(3) Yes. During the past few weeks a comprehensive investigation into the policing of the area has been instituted. It is intended to establish a special unit in the area as soon as possible. In the meantime the Pietermaritzburg reaction unit has been deployed in the area.

Indicates translated version.

For written reply:  
*Harward Q. 61, 964*  
*Public servants: salary increases*  
*13/4/84*  
450. Mr S S VAN DER MERWE asked the Minister of Internal Affairs:

(a) How many public servants received salary increases as a result of the salary adjustments effected in July 1983 and (b) what was the (i) average percentage of the increases received and (ii) highest percentage received by any public servant in terms of the said adjustments?

The MINISTER OF INTERNAL AFFAIRS:

(a) No general salary adjustment as such was effected on 1 July 1983. The service dispensations of certain occupational classes were however adjusted on a market related basis with effect from 1 July 1983 as a result of occupational specific investigations. The classes and the number of personnel involved are as follows:

Social Worker	2 691
Orthopedic Bootmaker	30
Clinical Technologist	50
Medical Technologist	1 231
Medical Orthotist and Prothetist	185

(b) (i) and (ii)

In order to give an accurate indication of what the actual average and highest adjustment were will mean that particulars in respect of individuals will have to be obtained from each file in each department.

The reason being that normative requirements for translation to the new dispensations were set by the Commission and implemented by the departments concerned.

Individual as well as average percentage improvements depend on the degree to which the officials concerned comply with the new requirements.

Handwritten: *Harward*  
*Maize: consumer prices*  
*Q. 61, 965*  
*13/4/84*  
559. Mr E K MOORCROFT asked the Minister of Agriculture:

(a) What were the consumer prices of

maize in the (i) Transvaal, (ii) Eastern Cape and (iii) Western Cape as at the latest specified date for which figures are available and (b) what is the breakdown of each of these figures in respect of (i) railrage, (ii) storage, (iii) production and (iv) any other specified costs?

The MINISTER OF AGRICULTURE

(a) (i), (ii) and (iii) Maize is sold by the Maize Board to all buyers (among others, millers, feed manufacturers, feed lots, dealers, farmers etc.) in the Republic (including the B.L.S. and T.B.V.C.-countries, and South West Africa/Namibia) at fixed selling prices on a free on rail basis. The Maize Board's selling price was fixed at R187.05 per ton as from 1 January 1984 for the best grades of white and yellow maize in bulk quantities of 190 t and more.

(b) (i) Railrage differs according to the distance from the production area to the buyer.

(ii) The Maize Board's storage costs on maize sold for local consumption is normally covered by a State subsidy and is consequently not recovered from buyers

(iii) The cost of production is only one of several factors taken into consideration for the purpose of fixing the producer prices of maize and can therefore not be isolated from the other factors

Handwritten: *Harward*  
*National states: health services*  
*Q. 61, 966*  
*13/4/84*  
758. Dr M S BARNARD asked the Minister of Health and Welfare:

(1) (a) How many (i) doctors, (ii) dentists, (iii) physiotherapists, (iv) occupational therapists and (v) nurses are there in each specified national state

whose government has not yet taken over health services and (b) in respect of what date are these statistics furnished;

- (2) whether the Department keeps statistics on the above professions in respect of the other national states; if not, why not; if so, what are the relevant statistics in respect of each of these national states?

#### THE MINISTER OF HEALTH AND WELFARE

- (1) (a) Doctors—22.  
 (ii) Dentists—1.  
 (iii) Physiotherapists—1.  
 (iv) Occupational Therapists—0.  
 (v) Nurses—565
- these statistics are in respect of Kangwane, the only national state whose Government has not yet taken over health services.

- (2) No; no statistics are kept in respect of the other National States as they administer their own Departments of Health and Welfare.

#### Flat for General Manager

808. Mr D J N MALCOMESS asked the Minister of Transport Affairs:

- (1) With reference to his reply to Question No 735 on 2 April 1984, (a) what is the address of the flat purchased by South African Transport Services for the General Manager, (b) from

whom was it purchased, (c) who was the agent in the sale, (d) who paid the agent's commission and (e) how many nights per annum is it estimated that this flat will be occupied;

- (2) whether any money has been spent on (a) alterations and (b) repairs to this flat; if so, (i) what amount, and (ii) what was the nature of the alterations or repairs, in each case;

- (3) whether rental is paid for this flat; if not, why not; if so, what is the monthly rental?

#### THE MINISTER OF TRANSPORT AFFAIRS:

- (1) (a) Flat 73, Milton Manor, Sea Point.

(b) Bernini Holdings (Pty) Ltd, C.M. and L.G. Investments (Pty) Ltd, New Fairfield Village (Pty) Ltd and J. P. A. Investors (Pty) Ltd.

(c) Pam Golding Properties, Sea Point.

(d) The seller.

(e) The flat is occupied for the full duration of the Parliamentary session, as well as during visits when Parliament is in recess.

- (2) (a) and (b) No.

(i) and (ii) Fall Away.

- (3) Yes. In accordance with the rental structure for personnel performing seasonal duties the direct rental is R120 per month. In addition, considerable savings which cannot be accurately assessed are effected by SA Transport Services as the flat is also utilized for the official reception and entertainment of guests.

### QUESTIONS UNDER NAME OF MEMBER

#### Andrew, Mr K M—

Community Development, 542  
 Constitutional Development and Planning, 792  
 Co-operation and Development, 88, 316, 400, 511, 517, 531, 674, 686, 814, 873, 931, 943  
 Defence, 477, 518, 519, 711, 713, 715, 785, 893  
 Education and Training, 89, 169, 192, 259, 260, 301, 397, 398, 407, 426, 623, 793, 830, 832, 884, 904, 945  
 Finance, 794  
 Foreign Affairs, 300, 332, 781  
 Internal Affairs, 540, 541, 671, 733  
 Justice, 301, 438, 662  
 Law and Order, 318, 413, 541  
 Mineral and Energy Affairs, 821  
 National Education, 548, 683  
 Posts and Telecommunications, 221  
 Transport Affairs, 513, 514, 685, 687, 789

#### Aronson, Mr T—

Agriculture, 495  
 Constitutional Development and Planning, 593, 594  
 Community Development, 462  
 Energy Affairs, 827  
 Finance, 719, 802  
 Industries, Commerce and Tourism, 663, 664  
 Manpower, 597  
 Transport Affairs, 430, 494, 632

#### Bamford, Mr B R—

Community Development, 735, 822, 824  
 National Education, 739

#### Barnard, Dr M S—

Agriculture, 71, 132  
 Constitutional Development and Planning, 182  
 Co-operation and Development, 602  
 Defence, 516  
 Education and Training, 547

Environment Affairs and Fisheries, 907

Health and Welfare, 35, 86, 149, 163, 165, 267, 307, 364, 368, 417, 445, 460, 535, 539, 540, 566, 592, 635, 636, 779, 801, 806, 840, 844, 966

Justice, 470

Law and Order, 50, 175

National Education, 478

Posts and Telecommunications, 621

#### Barnard, Mr S P—

Community Development, 109, 229, 845  
 Environment Affairs and Fisheries, 845  
 Foreign Affairs, 432  
 Health and Welfare, 286, 287  
 Prime Minister, 104

#### Blanché, Mr J P I—

Posts and Telecommunications, 496, 497

#### Boraine, Dr A L—

Agriculture, 577  
 Co-operation and Development, 144  
 Education and Training, 547  
 Environment Affairs and Fisheries, 84  
 Foreign Affairs, 283, 579  
 Health and Welfare, 85, 201  
 Internal Affairs, 373  
 Law and Order, 86, 201, 351, 355, 411  
 Manpower, 15, 32, 33, 34, 36, 134, 260, 267, 271, 273, 274, 438, 439, 477, 598, 665, 812  
 National Education, 211, 276  
 Posts and Telecommunications, 108

#### Burrows, Mr R M—

Education and Training, 710  
 Health and Welfare, 877  
 National Education, 784, 895

#### Cronjé, Mr P C—

Community Development, 324, 434, 567, 596, 681, 932  
 Constitutional Development and Planning, 188

# 'Restructuring' of health system needed

Staff Reporter

A FUNDAMENTAL restructuring of the entire medical system is needed to alleviate the current health-care crisis in South Africa, according to a study prepared for the Carnegie conference on poverty which opens in Cape Town tonight.

Mr Pundy Pillay, of the South African Labour and Development Research Unit at UCT, says the training of more doctors, nurses and dentists will not ease the chronic shortage and poor distribution of medical personnel in South Africa unless it is linked to the provision of an effective primary rural health-care system.

## Pyramid-shaped system

He says the rural sector economy is unable to support a primary health-care system based on professional personnel and proposes a "pyramid-shaped" system, in which a broad base of non-professional community health workers will deal with 40 per cent of the demand for care and refer the rest to progressively smaller layers of specialized institutions.

Mr Pillay describes the current health structure in South Africa as

fragmented and poorly distributed in relation to health needs".

## 'Third World' structure

One sector of the population (urban and largely white) has a First World health system while the other (the homelands and rural areas, largely black) has a typical Third World health structure.

"The main failure of the health system is its inability to provide an adequate service to the population as a whole."

He says that only 5,5 percent of South African doctors practise in the rural areas where 50 percent of the population live.

## Change in 'political control'

The situation is particularly bad in the homelands where, in 1976, the doctor-population ratio was about 1:174 000.

In his conclusion Mr Pillay concedes that it is unlikely that a more equitable distribution of resources will occur within the health sector without fundamental changes in the mechanisms of economic and political control in South Africa.



# Nurse sacked over Mandela shirt

A CRADOCK nurse has been fired after being fined for wearing a "Free Mandela" T-shirt.

Mrs Sheila Calata — whose husband has been detained in connection with the town's school boycott — was sacked by the Cradock Provincial Hospital after a magistrate fined her R250 or three months' jail.

Mrs Calata has threatened to take legal action against the hospital, where she has worked since 1977.

Her husband Fort Calata, a teacher at Lingelihle High School, is being held at Modderbee Prison near

**By MONO  
BADELA**

Benoni with Mr Mbulelo Goniwe, in terms of the preventative detention clause of the Internal Security Act.

Mr Goniwe's brother Matthew, the central figure in Cradock's schools crisis, is being held in Pollsmoor Prison.

Cradock Residents' Association spokesman Mcebisi Makaula said Lingelihle

was "calm but very tense" yesterday after a brief flare-up early in the week.

This followed the death of a youth, Sebenzile Jacobs, who was stabbed after stones were thrown at the homes of two pupils who apparently refused to take part in the boycott.

Mr Jacobs will be buried this weekend.

Two houses were petrol-bombed later in the week — those belonging to Linge-

lible mayor Doris Hermaans and Cradock teacher Violet Nomavuka.

Six youths were arrested on Tuesday, bringing to 33 the number of people facing charges of public violence and intimidation.

The number of pupils attending classes dropped even lower this week, according to an education spokesman — out of the township's 4 000 pupils, only three attended class yesterday.



**SHEILA CALATA: Fined, then fired.**

City Press  
22/4/84

Sowetan 20/5/84

# Teachers, nurses have union rights

By JOSHUA RABOROKO

THOUSANDS of black school teachers and nurses throughout the country may join trade unions, The SOWETAN has established.

This disclosure was made by senior government officials, who said that there were no laws forbidding nurses and teachers from forming trade unions in terms of the Labour Relations Act.

The chief director of the Department of Manpower's Labour Relations, Mr M H van Nord-Wyk, said they may apply to his department after forming such organisations.

Black teachers employed in private schools have trade unions, but

they belong as employees, while those in government schools have to apply, he said.

A Department of Education and Training PRO said teachers could legally become members of a trade union, but permission would have to be obtained from the Minister.

The acting executive director of the South Af-

rican Nursing Association, Mrs S J du Preez, said many nurses were already union members, but they belong as employees and not nurses.

## Liability

However people in these professions have been warned to maintain their professional standards because industrial laws prevent

any essential services from any restrictive sections, including strikes and go-slow actions.

Mrs Du Preez said that unprofessional behaviour would not be accepted from nurses. They must have the interests of patients at heart. If a patient was found unattended because a nurse had sparked-off a strike, that nurse was criminally liable.

# Matron says PE hospital has sufficient nursing staff

95  
6/6/84

By WENDY FRAENKEL

THE Chief Matron of the Port Elizabeth Provincial Hospital has denied that the nursing staff at the hospital is "totally inadequate" and that even the most basic nursing care is sometimes absent.

Matron Leonie Stander was reacting to the shock report tabled in the Cape Provincial Council by Mrs Molly Blackburn, PFP MPC for Walmer, this week.

The report said that there was a lack of funds allocated to the Eastern Cape for nursing staff and medical equipment.

The main emphasis of the report was directed at the shortage of Port Elizabeth Provincial Hospital nursing staff, especially staff in the theatres and orthopaedic wards.

"There are sufficient registered nurses on the staff — in fact, there is even a waiting list," Matron Stander said. "We even had 123 students joining us between January and May this year."

Matron Stander did agree, however, that there had been an increase of almost 1 200 in-patients at the hospital between 1982 and 1983, without any increase in the staff complement.

"The junior nurses are not having to shoulder responsibilities as suggested by the report — there are three to four sisters per ward and the juniors are never left on their own,"

she said. "At night there is a sister present to support the nurses."

She also denied that there was also a high rate of absenteeism because of the exhausting overwork. She said that all absenteeism could be accounted for and that of the 51 nurses who were absent from work on Monday, 40 were ill and the rest had to take care of sick children.

She added that these nurses had not been replaced, but that the hospital had coped without them.

She also denied that work overloads resulted in "half-hearted" procedures, short-cuts and delegation of work to unskilled nurses.

She said that matrons doing ward rounds had never received complaints from patients.

"I agree that nurses often work five and six late nights consecutively, but they never complain and those who do work overtime often request to do so anyway," Matron Stander said. "Anyone working overtime is always reimbursed."

● The Medical Superintendent of the Provincial Hospital, Dr John Harvey, agreed that more funds were needed for additional nursing posts, equipment and facilities, but he felt that patient care had not suffered as a result.

He said the nursing situation at the Provincial Hospital had improved since last year.

We subsequently compiled a new set of conditions which will be made retroactive from 15 March 1984. There is no difference in principle between the two sets of conditions but the magnitude of the cancellation fees, and the times at which they become due, have been altered.

*Howard*  
*Teaching staff/hospital staff*  
*3/7/84*  
 1082. Mr H H SCHWARZ asked the Minister of Internal Affairs:

- (a) (i) Education profession (including top structure gradings) .....
- (ii) Administrative staff involved with the education profession .....
- (b) Household staff .....

Administrative staff attached to educational institutions were not included in the investigation into the education profession. They have already received an occupational specific dispensation separately from the education profession.

It is assumed that by "hospital staff" household staff is meant. Hospital staff as such include several occupational classes which have already received occupational specific dispensations separately from household staff.

**Cape fur seal**

1105. Mr E K MOORCROFT asked the Minister of Environment Affairs and Fisheries:

- (1) (a) How many breeding colonies of the Cape fur seal occur off the South African coast and (b) what is the total estimated population of these colonies;

- (2) (a) how many of these colonies are subject to culling and (b) what was the total pup quota awarded in respect of the latest specified period of 12 months for which figures are available?

What will be the total cost of the proposed salary increase for (a) the (i) teaching profession and (ii) administrative staff involved in this profession and (b) hospital staff in respect of the current financial year and a full financial year, respectively?

**THE MINISTER OF INTERNAL AFFAIRS:**

Total cost of proposed salary improvements:

Present Financial Year	Full Financial Year
(R million)	(R million)
260,7	710
None	None
3,3	10

**THE MINISTER OF ENVIRONMENT AFFAIRS AND FISHERIES:**

- (1) (a) 9.
- (b) 380 000.
- (2) (a) 1.
- (b) 4 500 for the period 1 January to 31 December 1983.

**Afforestation**

1106. Mr R W HARDINGHAM asked the Minister of Environment Affairs and Fisheries:

How many applications for permits in respect of afforestation were (a) received and (b) refused in each of the latest specified three years for which figures are available?

**THE MINISTER OF ENVIRONMENT AFFAIRS AND FISHERIES:**

	(a)	(b)
1 April 1981 to 31 March 1982 ..	139	14
1 April 1982 to 31 March 1983 ..	81	25
1 April 1983 to 31 March 1984 ..	108	3

*Howard*  
 Indicates translated version.  
*For oral reply*  
*4/7/84*  
*Prime Minister: D. C. 1877*

South West Africa: dump for nuclear waste

\*1. Mr B B GOODALL asked the Prime Minister:

- (1) Whether any person and/or body attached to the (a) South African Government and/or (b) Administration of South West Africa has received any requests, offers or representations concerning a dump for nuclear waste in South West Africa; if so, (i) when, (ii) what was the nature of these requests, offers or representations, (iii) to whom were they made and (iv)(aa) from whom and (bb) in respect of which countries were they received;
- (2) whether these requests, offers or representations have been considered; if so, (a) by whom, (b) when and (c) with what result;
- (3) whether a decision has been reached on the matter; if not, when is it anticipated that a decision will be reached; if so, what is the decision;
- (4) whether he will make a statement on the matter?

**THE PRIME MINISTER:**

- (1) Since 1979 a number of enquiries were received from certain bodies and individuals, originating from a number of European countries, regarding the possibility to establish a depository in South West Africa for radio-active waste.
- (2) When these offers were received they were referred to and considered by the then Atomic Energy Board (now

the Atomic Energy Corporation). These offers were declined.

- (3) and (4) It is not the policy of the South African Government to allow the storage of radio-active waste from abroad in either the Republic of South Africa or South West Africa.

**Ministers:**  
 Rosettenville post office

\*1. Mr H M J VAN RENSBURG (Rosettenville) asked the Minister of Posts and Telecommunications:

- (1) Whether the facilities in the present Rosettenville post office building (a) comply with the standards of his Department and (b) meet the requirements of the public; if not, why not;
- (2) whether any alternative rented accommodation is available in the immediate vicinity of this post office; if so,
- (3) whether his Department is considering making use of this rented accommodation; if not,
- (4) whether his Department intends to erect a new post office building for Rosettenville; if so, (a) what site will be used for this purpose, (b) how far will it be situated from the present post office building, (c) what is the total estimated cost of the land and the building, (d) when is the building expected to be completed and (e) what facilities are envisaged in respect of (i) the public, (ii) business undertakings and (iii) parking; if not, why not;
- (5) whether it is being or will be considered to use the present site for this purpose; if not, why not;
- (6) whether any agreement has been entered into in respect of the post offices in Rosettenville and Townsville; if so, what is the nature of the agreement;

414 - 10 890 x 570 -  
12 600/11 460 x 570 -  
16 020 x 12% P.A.  
(B) R6 846 x 312 - 8 406 x  
414 - 10 890 -  
11 460/10 476 - 10 890 x  
570 - 14 880 + 12% P.A.

Chief Dental Therapist  
(C) (I) (B) R16 020 - 16 590 x  
849 - 19 137 + 12%  
P.A.

95 Hayward Q. Col. 1971  
Nursing staff 3/7/84

1061. Dr M S BARNARD asked the Minister of Internal Affairs:

- (1) What are the salary scales payable to (a) male and (b) female persons of each race group employed in provincial hospitals as (i) student nurses, (ii) staff nurses, (iii) professional nurses, (iv) senior professional nurses, (v) chief professional nurses and (vi) chief nursing service managers;

- (2) (a) what is the estimated annual cost of raising the salary scales applicable to African, Coloured and Asian nurses to those applicable to White nurses and (b) when is it envisaged that parity will be achieved in respect of these salary scales?

The MINISTER OF INTERNAL AFFAIRS:

(1) Explanatory notes

(i) The salary scales indicated are Public Service scales which, as far as is known, are also applied by the Provincial Administrations.

(ii) Salary scales for the different population groups are specified up to the point where posts exist.

(iii) The salary scales of male and female employees in the Public Service are the same.

(iv) No rank or salary scale exists for a student nurse. Such nurses are employed against posts of Nursing Assistant and Senior Nursing Assistant. Student nurses on the salary scale of Nursing Assistant can progress to that of Senior Nursing Assistant by means of promotion after completion of the required period of time. After obtaining the required qualification a student nurse is appointed as a Professional Nurse.

(v) List of abbreviations/symbols used hereafter:

PA Pensionable Allowance  
(W) White  
(C) Coloureds  
(I) Indian  
(B) Black

Salary Scales: Nursing Staff

Nursing Assistant

(W) R2 691 - 2 886 x 249  
- 4 878 x 276 - 6 258  
+ 12% P.A.

(C) (I) R2 496 x 195 - 2 886  
x 249 - 4 878 x 276  
- 5 982 + 12% P.A.

(B) R1 674 x 144 - 2 106  
x 195 - 2 886 x 249  
- 4 629 + 12% P.A.

Senior Nursing Assistants

(W) R4 629 - 4 878 x 276  
- 6 534 x 312 - 7 782  
+ 12% P.A.

(K) (I) R4 131 x 249 - 4 878  
x 276 - 6 534 x 312  
- 7 158 + 12% P.A.  
(B) R3 135 x 249 - 4 878  
x 276 - 5 982 + 12%  
P.A.

Staff Nurse

(W) (C) (I) R5 982 x 276 -

6 534 x 312 -  
8 406 x 414 -  
9 234 + 12% P.A.

(B) R4 878 x 276 -  
6 534 x 312 -  
7 782 + 12% P.A.

Senior Staff Nurse  
(W) (C) (I) R7 470 x 312 -  
8 406 x 414 -  
10 890 x 570 -  
12 600 + 12%  
P.A.  
(B) R6 258 - 6 534 x  
312 - 8 406 x  
414 - 10 476 +  
12% P.A.

Professional Nurse

(W) (C) (I) R7 470 x 312 -  
8 406 x 414 -  
10 890 x 570 -  
12 600 + 12%  
P.A.

(B) R6 846 x 312 -  
8 406 x 414 -  
10 890 - 11 460  
+ 12% P.A.

Senior Professional Nurse

(W) (C) (I) R10 890 x 570 -  
16 020 + 12%  
P.A.  
(B) R10 062 x 414 -  
10 890 x 570 -  
14 880 + 12%  
P.A.

Chief Professional Nurse

(W) (C) (I) (B) R16 020 -  
16 590 x 849  
- 19 137 +  
12% P.A.

Nursing Service Manager

(W) (C) (I) (B) R18 288 -  
849 - 21 684  
+ 12% P.A.

Senior Nursing Service Manager

(W) (C) (I) (B) R21 684 x  
849 - 23 382  
+ 12% P.A.

Chief Nursing Service Manager

(W) R24 231 -  
25 080 -  
26 115 +  
12% P.A.

- (2) (a) The estimated annual cost to adjust the salary scales applicable

to Black, Coloured and Asian Nursing Staff to that applicable to White Nursing Staff, is R56.7 million.

(b) The implementation of a further phase of the programme to eliminate the salary gap will be considered in the light of available funds when occupational specific market related investigations are undertaken according to needs and/or general salary adjustments can be effected.

Blue Train

1065. Mr D J N MALCOMMESS asked the Minister of Transport Affairs:

What are the (a) procedures and (b) regulations laid down by the South African Transport Services for travel agents making bookings for the Blue Train?

The MINISTER OF TRANSPORT AFFAIRS:

(a) and (b) Travel agents may contract for all the accommodation on the Blue Train 18 months prior to the date of departure; make block bookings of 10 or more seats 15 months prior to the date of departure; or book up to nine seats 11 months prior to the date of departure, ie, when public bookings open.

Before 15 March 1984 the only condition was that payment for groups of 10 and more had to be made not later than one month before departure, and payment for smaller groups of individuals not later than 48 hours before departure.

As no cancellation fees were raised, the system led to abuse and conditions which include cancellation fees, as well as the furnishing of certain bank guarantees, were introduced with effect from 15 March 1984, after discussions with the organised travel trade.

It soon became clear that certain of the conditions would have an adverse effect on our overseas business in particular. Because of this problem we had extensive discussions with the organised travel trade as well as numerous private individuals.

# 'Disease palace' training rapped

(93) (C-1/unc)  
15/8/84

By CHRIS ERASMUS  
Medical Reporter

SOUTH AFRICAN universities produce wonderful doctors in the academic sense, but contribute little to fighting the country's major health problems.

This was said last night by a graduate of the University of the Witwatersrand, Dr Ian Kitai, now practising at a rural clinic in Matabeleland, Zimbabwe, during the second day of the 1984 Medical Students' Conference

Dr Kitai said his university training had not equipped him to deal with the realities of rural medicine and it was his extra-mural experiences as a student which had helped him cope.

He said it should be realized that the new Johannesburg General Hospital had an annual budget equal to the combined annual resources available to all the "African reserves" in South Africa.

"I was trained in a disease palace by people who seldom left this same palace," said Dr Kitai. The result was an education inappropriate to the needs of the rural majority who were in desperate need of health care.

Working in the southern Matabeleland mission hospital, which serves an estimated 38 000 people, he found malnutrition relatively rare. This was due in part

to the knowledge that the local people had of their own nutritional needs.

"I learnt that traditional diets in Matabeleland were considerably better than the nonsense diets being advocated by Western professors. The lesson is that rural people in general know very well how to survive in conditions where urban people never could."

## 'Arrogant'

Dr Kitai said research into rural nutritional needs had been "very arrogant" in this respect.

Saying that he left university with none of the vital knowledge of appropriate technology required for adequate rural health care — such as how to protect scarce water supplies and build fly-free waterless latrines — Dr Kitai said he suspected that medical students would also leave the University of Cape Town with none of this knowledge, or an awareness of the political economy of malnutrition.

He said the ultimate worth of medical education was the role it played in improving the health of all a country's people and that community health needs, not academic wants, should determine the direction of medical education.

This meant a balanced exposure of students to the communities where they were needed and adequate health facilities

to serve these communities. Also needed was at least one compulsory, examinable course in an African language at medical school.

Mr Julian Stern, a fifth-year medical student, spoke to the audience of more than 200 on "Who gets into UCT Medical School and Why". He found that in spite of assertions that admission to the course was unbiased, there was indeed a bias, in favour usually of white, young, upper-class, male, academic achievers, at least one of whose parents was involved in the medical field.

Of the 1 500 applications for admission to UCT Medical School in 1982, more than one in five of white applicants had succeeded, while none of the black applicants had succeeded and only 1,4 percent of Indian applicants had gained admission

Just more than half the successful applicants (55 percent) were male.

# Nurses call for inquiry as staff shortage worsens

95  
star  
11/10/84

Pretoria Correspondent

The South African Nursing Association (Sana) has called for an investigation into nursing education because of a major and increasing shortage of nurses in the country.

An article in the latest edition of *Nursing News*, issued by Sana, says that in developing countries at least two registered nurses are required for every 1 000 people to provide a basic health service.

In South Africa, which is partly a developed country, there are not enough nurses in the black, coloured and Indian groups to meet this norm.

To retain only the present ratios at least another 8 700 white, 1 500 coloured, 300 Indian and 23 500 black registered nurses must qualify by the year 2000.

Although all nursing education needs attention, it is of critical importance to increase the number of black registered nurses. The number in the profession must double to reach the proper ratio for the population, the article says.

Aspects that need attention are increased training facilities, including those for degree courses, better use of facilities on a decentralised basis, extension of facilities in the private sector and the financing of nursing education.

12/10/84 (95) (25)

# Freeze on nursing posts

THE Department of Health and Welfare is to freeze all vacant posts as part of measures to curb spending in the public sector.

Senior staff in the department have been asked to volunteer to work an additional 30 minutes daily to achieve higher productivity.

Top management of the public sector, including provincial secretaries, were called to a meeting on August 3 and told an average saving of at least 7,5% on the total budget for 1984/85 had to be achieved, according to the latest issue of Nursing News, organ of the South African Nursing Association (SANA).

However, conditions of service would not be affected at this stage, Miss O H Mull-

er, deputy director of the SANA, is quoted as saying.

It was unlikely, though, that there would be general salary increases next year.

Training posts would not be frozen because of the importance of nursing education as an "essential investment for the future", Miss Muller said.

The department would try to save 10% on running costs such as telephone calls and travelling costs.

A spokesman for the Transvaal Department of Hospital Services said every hospital had a savings committee to plan cuts in expenses and make staff aware of savings.

At this stage existing posts

which became vacant would not be frozen, but where new posts were created, they would only be filled with the permission of the executive committee.

In Natal, nursing posts would not be frozen because of a shortage. New posts which had been budgeted for would be created but not filled.

Savings would be made by cutting back on equipment and overseas trips and by avoiding overtime as far as possible.

All posts except training posts would be frozen in the Cape and in the Free State motivations would have to be submitted before posts could be filled. — Sapa.



# Nurses

# angry over no-pay overtime

~~95~~  
95  
S. K. van  
2/11/84

Staff at provincial hospitals in the Transvaal have been asked to work an extra 2½ hours a week — without pay.

This is just one of many stringent controls being introduced to beat the financial crisis in the Department of Hospital Services.

The Chief Superintendent of Johannesburg Hospital, Dr R J Broekmann, said in a circular letter: "The recent economic downturn, coupled with the severe drought, fall in the value of the rand against the dollar, and the present inflation rate, have precipitated an almost unprecedented economic crisis.

"Recently in the United States when a similar situation was experienced, public servants were forced to take unpaid leave, and in Australia public servants were subjected to cuts in salaries."

## Financial savings

Dr Broekmann said he believed jobs and salaries could be saved, but "every single staff member must make drastic changes to their present methods of work to ensure the necessary financial savings are made".

Nurses at the hospital are outraged at having to work the extra time without pay.

Said one: "We already work long hours for pitiful salaries, and now we are being asked to work even longer hours without pay.

"Our night duty hours are inhuman — we work 84 hours over a seven day stretch once a month."

Another asked: "Why can't the hospital cut back on their lavish functions and VIP lunches to curb spending?"

A lawyer told *The Star* last night that he was investigating the possible introduction of a nursing trade union — because nurses were furious about the extra 10 hours a month they will have to work without pay.

He said: "Nurses perform a very valuable function, and obviously patients will suffer if the nurses develop this kind of (contrary) attitude."

This week the Directorate of Hospital Services asked provincial hospitals to cut down on spending and implement drastic savings measures.

The lawyer said some nurses had approached the Nursing Association of South Africa for assistance.

# Doctors culpable

By Janine Simon

Negligence on the part of a Fellow of the Royal College of Surgeons and a Benoni general practitioner caused the death



tab  
g  
S  
o  
11  
lroom  
sma  
pay  
is e  
lectri  
pre  
ice,  
y cal  
acco  
sen o  
a ho  
Mr I  
r, "l  
es."  
nts  
e for  
a  
y  
fr  
d  
s  
a  
a  
l

and  
hare  
rfield  
Z  
once  
t Par  
t ask  
g tir  
it bu  
was  
t  
now  
Q go  
lipr  
nrai  
wth  
b p  
Fo n  
c  
o  
r  
to  
R  
tr  
K

ation was experienced, public servants were forced to take unpaid leave, and in Australia public servants were subjected to cuts in salaries."

### Financial savings

Dr Broekmann said he believed jobs and salaries could be saved, but "every single staff member must make drastic changes to their present methods of work to ensure the necessary financial savings are made".

Nurses at the hospital are outraged at having to work the extra time without pay.

Said one: "We already work long hours for pitiful salaries, and now we are being asked to work even longer hours without pay."

"Our night duty hours are inhuman — we work 84 hours over a seven day stretch once a month."

Another asked: "Why can't the hospital cut back on their lavish functions and VIP lunches to curb spending?"

A lawyer told *The Star* last night that he was investigating the possible introduction of a nursing trade union — because nurses were furious about the extra 10 hours a month they will have to work without pay.

He said: "Nurses perform a very valuable function, and obviously patients will suffer if the nurses develop this kind of (contrary) attitude."

This week the Directorate of Hospital Services asked provincial hospitals to cut down on spending and implement drastic savings measures.

The lawyer said some nurses had approached the Nursing Association of South Africa for assistance.

"The association said it was not interested in helping solve the overtime problem, and because of its attitude I am investigating the introduction of a nursing trade union."

"If this union is formed, it will ask for more reasonable working hours."

### Shopping

He said Johannesburg Hospital has done away with the 7 am to 1 pm shift. "This shift was popular with nursing staff as it gave them time to catch up on shopping and organise their lives."

"The new shifts do not leave the staff with much time for themselves or their families."

Dr Broekmann said today that all employees, including himself, had been asked to work a payless extra half-hour a day.

"I have no idea about a nursing trade union. No one at the hospital has complained to me."

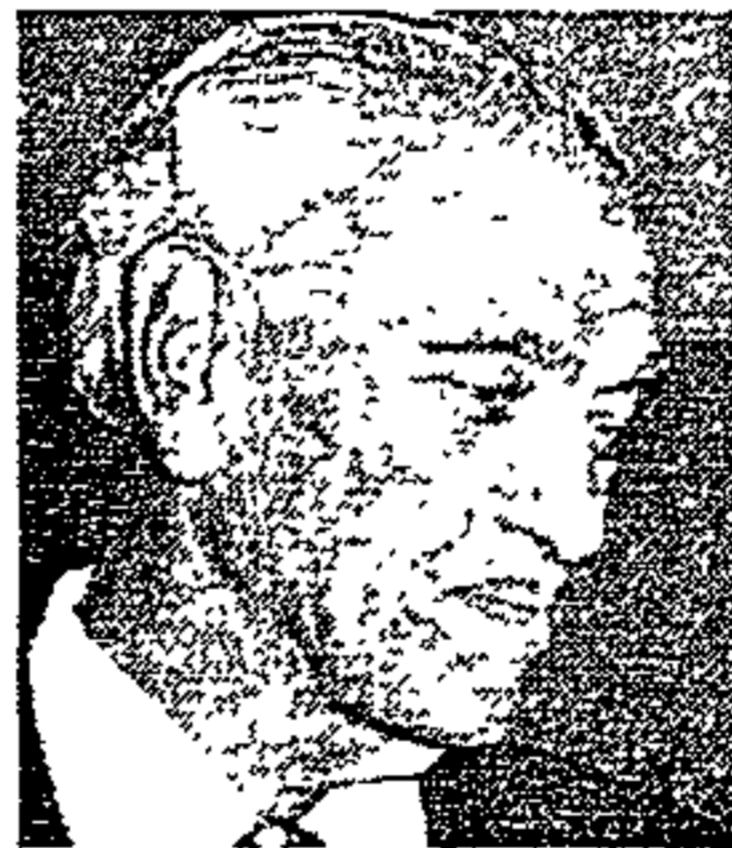
He said he felt the new hours should be accepted with "good grace".

● See Page 2.

## Doctors culpable

By Janine Simon

Negligence on the part of a Fellow of the Royal College of Surgeons and a Benoni general practitioner caused the death



Dr Michael Kramer (72).

### Congo fever sca

Own Correspondent

CAPE TOWN — The latest over.

A spokesman for Tygerberg that Mrs A Bothma of Worcester strict isolation.

The results of final plasma on Monday. If these prove negative preliminary tests, she will be released.

Mr J J Williams from Na leas from Gordonia hospital he definitely had not had Congo

## SPEAK

### Phone your on Zola's de

Should Zola Budd have tu international fame and on hōire-Britain? Did she make the r Jce was it a fair one? Telephone between 5 pm and 7 pm on 639td

# 'Racists are forcing nurses out'

AS C. P. 25/11/84

SEVERAL NURSES have left their jobs because they were humiliated for being black and not because of inferior qualifications, says KaNgwane Urban Representative Thamsanqa Khumalo.

Racist humiliation also made it difficult to rehabilitate black patients, who go through such mental anguish that doctors' efforts seem worthless, Mr Khumalo told the National Intensive Care Professional Society seminar in Johannesburg.

Mr Khumalo made a strong call on doctors to approach the Government about these problems.

Mr Khumalo also pointed out that many black patients are constantly exposed to biblical message of hell, fire and brimstone.

**By ZB MOLEFE**

"People are presently opposed to Christianity, partly because of such messages," he said.

Recalling a typical case of failed rehabilitation, Mr Khumalo referred to the example of a black patient who came from a family of 10 living in a three-roomed house.

"The congestion and lack of space - particularly sleeping space - made this patient feel more ill at home than when he was in hospital," he said.



**THAMSANQA KHUMALO:**  
"Reason forces nurses to resign."

Most patients in similar situations get very upset when doctors send them home, said Mr Khumalo.

# Woman of the Year

The Woman of the Year floating trophy was presented to Dr Erika Sutter by the Editor of The Star, Mr Harvey Tyson, at a gala luncheon in Johannesburg today. This is the 14th time the annual Woman of the Year search has been conducted by The Star. Readers selected Dr Sutter from 14 other candidates nominated for outstanding achievements during 1984. Dr Sutter will have her portrait painted by well-known South African artist Eileen Rogoff.

By Marika Sboros  
Women's Page Editor

In a medical missionary career spanning more than three decades in the remote Northern Transvaal bush, Dr Erika Sutter notched up one remarkable achievement after the other.

About 500 000 black children have Dr Sutter to thank for saving them from the blinding disease trachoma.

Through tireless, dedicated investigations, she uncovered the vicious chain of re-infection that left 95 percent of black people in northern Gazankulu infected with trachoma. Dr Sutter was then able to develop a method to break the ancient chain.

She trained the first black ophthalmic nurses to treat eye-disease cases.

And eight years ago she helped to launch the Care Group movement to help combat the impoverished conditions that sustain the high trachoma rate among rural blacks.

So far about 110 000 poverty-stricken black people have been helped by the movement.

Through the movement's developments she has saved thousands of northern Gazankulu children from the homeland's

main killers — gastro-enteritis and cholera.

She developed an oral rehydration programme, inexpensive weaning foods for children, mud stoves that save wood, pit latrines that limit the accumulation of trachoma-carrying flies, safe water and waterless food grown by a deep-trench method in semi-desert conditions.

The care group system has spread all over Gazankulu and Venda, with a small number of groups in Lebowa, kwaZulu and Qwa Qwa.

Her paper on Gazankulu care groups was applauded earlier this year when presented to the Carnegie Commission investigating rural poverty.

Dr Ron Ballard, the University of the Witwatersrand micro-biologist who worked with Dr Sutter, recalls that she spent part of her salary to buy essentials for the care groups.

"During her career she was the only source of expertise in her field in an area of two million people.

"Her financial rewards were sparse when compared with urban ophthalmologists. She had more impact on the health of people in this large area than anybody else," Dr Ballard says.



DR ERIKA SUTTER — broke the vicious chain of trachoma re-infection.

He pays tribute to her immense courage in overcoming what seemed at times to be "insuperable obstacles". Dr Sutter is very modest and unassuming about her spectacular achievements.

She pays tribute to the care group's first and senior group motivators, Mrs Sellinah Maphoro and Mr Andrew Radebe, "without whom care groups would not have come into existence.

"The sensitive approach of both towards the people in the villages, and their ability to

arouse enthusiasm, made it possible for my ideas of community involvement in blindness prevention to materialise," Dr Sutter says.

Dr Sutter feels that the potential of care groups in South Africa is severely limited by the socio-economic and political situation.

"Care groups can only do patchwork within the limitations of the prevailing poverty and the political system in which they function.

"Their main strength is to foster self-reliance among rural women," she says.

Dr Sutter, who retired in June this year, arrived in South Africa 32 years ago as a plant physiologist from her home town

in Basel, Switzerland, and spent some time at Elim Hospital in the Northern Transvaal.

She studied medicine at the University of the Witwatersrand, then trained as an ophthalmologist in London.

She has retired to Basel and flew out to South Africa for the Woman of the Year luncheon, unaware that she was the winner.

She is presently working on a book detailing her work.

She will work as a member of the World Health Organisation's (WHO) Expert Committee on Blindness and, as a world authority, has been invited to lecture to the International Institute for Eye Health in London, a body that collaborates with WHO.

R50 will be sent to Mrs Mosidi Alinah-Thamae, of 1883 Mapetla Extension, PO Moroka. The judges decided that her reason best summed up why Dr Erika Sutter deserved the award of Woman of the Year 1984. Mrs Thamae said of Dr Sutter: "In her seemingly thankless task, she is a symbol of man's selfless devotion to the plight of fellow men."

STAR  
27/11/84  
95  
D

# Hourly-paid nurses retrenched in hospital's cost-cutting drive

By Pamela Kleinot,  
Medical Reporter

Hourly-paid nursing staff are being retrenched from the Johannesburg Hospital as a cost-cutting measure to beat the financial crisis in the Department of Hospital Services.

This was confirmed yesterday by a spokesman for the Transvaal Provincial Directorate of Hospital Services in Pretoria.

The move could have major implications for the hospital, which has been in a state of crisis since it opened in December 1979.

It has been held back by a critical nursing shortage and only 1 062 beds in the 2 000-bed hospital can be used.

Many of the hourly-paid workers laid off include qualified nurses employed during a massive recruitment drive in 1982 when many part-time workers were used because the hospital needed all the manpower it could get.

Dr Neville Howes, superintendent of the hospital at the time, said: "If the hospital is to run smoothly, it needs more workers. It is important to get trained people back on our staff,

whether full-time or part-time."

Several other hospitals have also dismissed hourly-paid workers after a directive early last month when the Directorate of Hospital Services asked provincial hospitals to cut down on spending and implement drastic savings measures.

Stringent cuts in hospital spending included staff working an extra 10 hours each month without pay, the cutting of overtime pay and freezing of posts.

The superintendent of the Johannesburg Hospital, Dr Reginald Broekmann, who was not available for comment yesterday, told *The Star* last month that the country was in an economic crisis and every Government department would have to reduce expenditure.

"It costs R85 million a year to run the hospital. Our projected figures show that if we don't make major savings, we will be in trouble."

In a circular letter to hospital staff, he said: "The recent economic downturn coupled with the severe drought, the fall in value of the rand against the dollar and the present inflation rate has precipitated an almost unprecedented economic crisis."

# Health AND DISEASE — NURSES

1985

AREA A: Alberton, Bellville, Benoni, Boksburg, Brakpan,  
Durban, Germiston, Goodwood, Inanda, Johannesburg, Kempton  
Park, Krugersdorp, Kullisriver, Nigel, Oberholzer, Pinetown, Port  
Elizabeth, Pretoria, Randburg, Randfontein, Roodepoort,  
Sasolburg, Simon's Town, Springs, The Cape,  
Uitenhage, Vanderbijlpark, Vereeniging, Westonaria, Wonderboom and  
Wynberg;

AREA B: Bloemfontein, East London, Klerksdorp, Oendaaistrus,  
Paarl, Pietermaritzburg, Potchefstroom, Virginia and Welkom and  
Municipal Area of Witbank;

AREA C: Delmas, Heidelberg (TV1), and Highveld Ridge;  
Municipal Areas: Bethlehem, Harrismith, Kroonstad, Ladysmith,  
Middelburg (TV1), Newcastle, Pietersburg and Rustenburg;

Superseding w.d. no: 342

409 - COAL TRADE, CERTAIN AREAS

# Nurse shortage at new hospital

CAPE Town 1/1/85 (95)

## Staff Reporter

THE new Groote Schuur Hospital will stand on a site nearly three times the size of the Newlands rugby ground and will have cost approximately R200-million to complete over some six years or seven years — but planning is still plagued by a shortage of nurses to staff the new complex, and a lack of money for equipment.

Parking is also likely to be a problem at the new hospital. About 17 000 parking bays will be provided — but planners agree that “there can never be enough parking”.

These facts emerged at a press conference at Groote Schuur yesterday held by Dr Hannah Reeve-Saunders, chief superintendant of the hospital, heads of departments and representatives for the architects, Andrews and Niegeman, Colyn and Meiring and Francis Hawkins and Turner-Smith.

Dr Reeve-Saunders

again apologized to patients for the lack of parking during building operations. Every possible step was being taken to provide as much space as possible, she said yesterday.

The road between the old and new hospitals would be closed permanently from today. This would be the site of the new parking area.

Dr Reeve-Saunders told the conference that when the old Groote Schuur Hospital was opened in 1935 no money had been available for equipment, but the public had given generously to the project.

Asked about the shortage of nurses, Dr Reeve-Saunders said: “The number of posts in the hospital is fewer than the needs that are identified for it, which has been the case over the years.

“However, the situation is better right now than it has been for the past five years.”

The new hospital will create about 1 000 new

posts for nurses when completed. There are now 3 081 posts.

A new nurses' home in the Old Brickfield site, off Browning Road, was being planned to accommodate about 700-nurses and 100 domestic staff.

● The new four-year nursing diploma would, for the first time, be in the hands of the national educational system. Nurses would now register with the nursing council and their college, and no longer with the hospital they trained at.

“This entails agreements of association between universities and colleges of nursing,” said Miss L J du Preez, chief matron of the hospital.

“The agreements between the Carinus Nursing College and University of Cape Town and the Nico Malan Nursing College and UCT have been approved.”

The new diploma course was introduced at Groote Schuur on January 1 this year.

(95) Star 8/11/85

## Fewer want to be nurses

There had been a 14 per cent drop in the number of student nurses enrolling at the Johannesburg Hospital this year, a hospital spokesman said today.

Enrolments this year were 153 compared with 177 last year.

The drop follows last month's retrenchment of hourly-paid nursing staff at the hospital when

drastic savings measures were implemented.

As part of the drive to cut spending, nurses' working hours were increased without pay to an extra 10 hours a month. Overtime pay was cut and posts were frozen.

The move caused resentment, many nurses of whom felt they were already working long hours for inadequate pay.

Although provincial hospitals have cut back on staff, the Human Sciences Research Council (HSRC) and the SA Nursing Association have expressed concern about an increasing shortage of nurses.

A recent HSRC survey showed that 20 percent of the nurses who qualified in 1981 left the profession within three months.



# Nurses bitter over forced overtime

(95) (S) Medical Reporter *Star 1/2/85*

Nurses at Johannesburg Hospital are bitter over being forced to work overtime without pay because of the sweeping provincial austerity campaign to cut costs by R28 million.

The nurses deny a report that some of them were "asked" to work unpaid overtime and had responded "magnificently".

"We were all forced into unpaid overtime and do it reluctantly," a spokeswoman for a group of nurses told *The Star* yesterday.

In a statement earlier this week Dr van Wyk, the Director of Hospital Services, told *The Star* night

staff had been asked to work an extra two hours a week and the day staff an extra two-and-half hours a week. Head office staff had been asked to work four hours extra a week.

"Although there is no pay for this extra time the nurses and staff have responded magnificently," said Dr van Wyk.

The nurses' spokeswoman disagreed. "Nurses and all administration staff were not asked to work overtime, they were told by their matrons in November they had to work unpaid overtime."

She added that virtually all the nurses were extremely unhappy about the extra, unpaid hours.

What was the average number of passengers per South African Airways flight from (a) Johannesburg to Houston and (b) Houston to Johannesburg during the period 1 July 1984 to 31 December 1984?

The MINISTER OF TRANSPORT AFFAIRS:

- (a) 147.
- (b) 154.

Technikons: students

178. Mr K M ANDREW asked the Minister of Education:

How many (a) full-time and (b) part-time students were enrolled at technikons for Blacks as at the latest specified date for which figures are available?

The MINISTER OF EDUCATION:

(a) The hon member is referred to Table 7, page 235 of the 1984 Annual Report of the Department.

(b) None.

*Hansard Q. Col. 235*  
Std 10 examinations 25/2/85

179. Mr K M ANDREW asked the Minister of Education:

(a) How many Black pupils at schools on the Witwatersrand wrote Std 10 examinations in 1984 or during the latest specified period of 12 months for which figures are available and (b) how many of these pupils obtained matriculation exemption?

The MINISTER OF EDUCATION:

- (a) 6 574.
- (b) 486.

*Hansard*  
First-year students  
Q. Col. 235

181. Mr K M ANDREW asked the Minister of Education:

How many (a) White, (b) Coloured, (c) Asian, (d) Black and (e) other specified first-year students were registered at each university falling under the control of his Department in 1984?

The MINISTER OF EDUCATION:

	(a)	(b)	(c)	(d)	(e)
Fort Hare ..	5	5	1	1 291	—
The North ..	—	2	—	1 841	—
Zululand ...	—	2	—	1 534	—
Medunsa ...	—	—	—	254	—
Vista .....	—	11	—	4 837	—

*Hansard*  
Cahora Bassa scheme  
Q. Col. 236 25/2/85

187. Mr F J LE ROUX asked the Minister of Mineral and Energy Affairs:†

(1) Whether the Republic concluded an agreement in regard to the Cahora Bassa scheme on or around 2 May 1984; if so,

(2) whether the Cahora Bassa scheme has supplied any electricity to the Republic since this agreement was concluded; if so, (a) on what date did the supply thereof commence and (b)(i) what total amount of electricity has been supplied to the Republic since and (ii) what percentage of the Republic's electricity consumption in the corresponding period does this amount of electricity represent;

(3) whether any amounts have been paid to (a) Portugal and (b) Mozambique in respect of (i) electricity supplied and (ii) the use of powerlines and installations; if so, what amounts in each case?

The MINISTER OF MINERAL AND ENERGY AFFAIRS:

- (1) Yes.
- (2) Yes.

(a) The supply was partially restored at 02h16 on 27 January 1985 and was interrupted at 12h06 on 8 February 1985.

(b) (i) 152,5 GWh.

(ii) 4 per cent of the electricity sent out by Escom. The figure for the Republic as a whole is not known.

The MINISTER OF HEALTH AND WELFARE:

(3) No.

*Hansard*  
Q. Col. 237  
Joint Matriculation Board  
25/2/85

200. Mr K M ANDREW asked the Minister of National Education:

(a) How many (i) Black, (ii) White, (iii) Coloured and (iv) Indian (aa) private and (bb) other candidates wrote the matriculation examinations of the Joint Matriculation Board in 1984 and (b) how many such candidates (i) passed and (ii) failed their examinations?

The MINISTER OF EDUCATION:

	Black	White	Coloured	Indian
(a)	1 337	1 245	81	45

No separate statistics are available in respect of private and other candidates.

	Black	White	Coloured	Indian
(i)	200	1 156	63	26
(ii)	1 137	89	18	19

The above statistics only pertain to candidates who wrote examinations in six or more subjects.

*Hansard*  
Q. Col. 237  
Nurses 25/2/85

226. Dr M S BARNARD asked the Minister of Health and Welfare:

(1) Whether there is a shortage of nurses in the Republic; if so, what was this shortage as at the latest specified date for which figures are available;

(2) whether his Department intends to increase the facilities available for the

training of nurses; if not, why not; if so, (a) when and (b) what additional number of nurses will be accommodated in these facilities?

The MINISTER OF HEALTH AND WELFARE:

(1) Shortage of nurses is a relative concept and it is therefore not possible to give a meaningful figure in this regard

(2) Nursing training is only partly the responsibility of the Department of Health and Welfare.

Within the Department of Health and Welfare the training of nurses will be slightly increased.

(a) as soon as present negotiations with Provincial Hospital Departments regarding the new nursing curriculum and sharing of training facilities have been finalized;

(b) numbers not available at this stage

*Hansard*  
Q. Col. 238  
Cadet detachments 25/2/85

286. The LEADER OF THE OFFICIAL OPPOSITION asked the Minister of Defence:

How many (a) cadet detachments and (b) persons attached to these detachments were there in the Republic as at 31 December 1984?

The MINISTER OF DEFENCE:

- (a) 653
- (b) 2 885 officers and 178 240 cadets.

*Hansard*  
Q. Col. 238  
Notifiable diseases 25/2/85

316. Dr M S BARNARD asked the Minister of Health and Welfare:

How many cases of each notifiable disease were notified in respect of each race group in 1984?

What was the average number of passengers per South African Airways flight from (a) Johannesburg to Houston and (b) Houston to Johannesburg during the period 1 July 1984 to 31 December 1984?

The MINISTER OF TRANSPORT AFFAIRS:

- (a) 147.
- (b) 154.

Technikons: students

173 Mr K M ANDREW asked the Minister of Education:

How many (a) full-time and (b) part-time students were enrolled at technikons for Blacks as at the latest specified date for which figures are available?

The MINISTER OF EDUCATION:

(a) The hon member is referred to Table 7, page 235 of the 1984 Annual Report of the Department.

(b) None.

*Howard Q. 61. 235*  
25/2/85

179. Mr K M ANDREW asked the Minister of Education:

(a) How many Black pupils at schools on the Witwatersrand wrote Std 10 examinations in 1984 or during the latest specified period of 12 months for which figures are available and (b) how many of these pupils obtained matriculation exemption?

The MINISTER OF EDUCATION:

- (a) 6 574.
- (b) 486.

*Howard*  
First-year students

181. Mr K M ANDREW asked the Minister of Education:

HON

*25/2/85*

How many (a) White, (b) Coloured, (c) Asian, (d) Black and (e) other specified first-year students were registered at each university falling under the control of his Department in 1984?

The MINISTER OF EDUCATION:

	(a)	(b)	(c)	(d)	(e)
Fort Hare . . . . .	5	5	1	1 291	—
The North . . . . .	—	2	—	1 841	—
Zululand . . . . .	—	2	—	1 534	—
Medunsa . . . . .	—	—	—	254	—
Vista . . . . .	—	11	—	4 837	—

*Howard*  
Cahora Bassa scheme  
25/2/85  
187 Mr F J LE ROUX asked the Minister of Mineral and Energy Affairs:

(1) Whether the Republic concluded an agreement in regard to the Cahora Bassa scheme on or around 2 May 1984; if so,

(2) whether the Cahora Bassa scheme has supplied any electricity to the Republic since this agreement was concluded, if so, (a) on what date did the supply thereof commence and (b) (i) what total amount of electricity has been supplied to the Republic since and (ii) what percentage of the Republic's electricity consumption in the corresponding period does this amount of electricity represent;

(3) whether any amounts have been paid to (a) Portugal and (b) Mozambique in respect of (i) electricity supplied and (ii) the use of powerlines and installations; if so, what amounts in each case?

The MINISTER OF MINERAL AND ENERGY AFFAIRS:

- (1) Yes.
- (2) Yes.

(a) The supply was partially restored at 02h16 on 27 January 1985 and was interrupted at 12h06 on 8 February 1985.

(b) (i) 152,5 GWh.

(ii) 4 per cent of the electricity sent out by Escom. The figure for the Republic as a whole is not known.

(3) No.

*Howard*  
Joint Matriculation Board  
25/2/85  
200. Mr K M ANDREW asked the Minister of National Education:

(a) How many (i) Black, (ii) White, (iii) Coloured and (iv) Indian (aa) private and (bb) other candidates wrote the matriculation examinations of the Joint Matriculation Board in 1984 and (b) how many such candidates (i) passed and (ii) failed their examinations?

The MINISTER OF EDUCATION:

(a)	Black	White	Coloured	Indian
(i)	1 337	1 245	81	45

No separate statistics are available in respect of private and other candidates.

(b)	Black	White	Coloured	Indian
(i)	200	1 156	63	26
(ii)	1 137	89	18	19

The above statistics only pertain to candidates who wrote examinations in six or more subjects.

*Howard Q. 61. 237*  
25/2/85  
226. Dr M S BARNARD asked the Minister of Health and Welfare:

(1) Whether there is a shortage of nurses in the Republic; if so, what was this shortage as at the latest specified date for which figures are available;

(2) whether his Department intends to increase the facilities available for the

HON

training of nurses; if not, why not; if so, (a) when and (b) what additional number of nurses will be accommodated in these facilities?

The MINISTER OF HEALTH AND WELFARE:

(1) Shortage of nurses is a relative concept and it is therefore not possible to give a meaningful figure in this regard

(2) Nursing training is only partly the responsibility of the Department of Health and Welfare.

Within the Department of Health and Welfare the training of nurses will be slightly increased.

(a) as soon as present negotiations with Provincial Hospital Departments regarding the new nursing curriculum and sharing of training facilities have been finalized;

(b) numbers not available at this stage

*Howard Q. 61. 238*  
25/2/85  
286. The LEADER OF THE OFFICIAL OPPOSITION asked the Minister of Defence:

How many (a) cadet detachments and (b) persons attached to these detachments were there in the Republic as at 31 December 1984?

The MINISTER OF DEFENCE:

(a) 653

(b) 2 385 officers and 178 240 cadets.

*Howard*  
Notifiable diseases  
25/2/85  
316. Dr M S BARNARD asked the Minister of Health and Welfare:

How many cases of each notifiable disease were notified in respect of each race group in 1984?

*Howard*

(15) (15) Star

## Attention must be given to nurses, warns SANA 8/3/85

By Sue Leeman,  
Pretoria Bureau

Urgent attention must be given to nurses' salaries and conditions of service if a dangerous backlog of salaries is to be prevented, according to the South African Nursing Association (SANA).

This warning in SANA's latest newsletter comes in the wake of this week's announcement that nurses, along with other public sector employees, will have their 13th cheques cut by a third and other benefits curtailed.

SANA's *Nursing News* said it was vital that attention be given to the salaries of newly-

qualified nurses as well as those paid to lecturing staff, nursing assistants and the singly-qualified midwife.

Payment for work done during the "unsocial hours" at night and over weekends was also identified as a "problem area".

The article said that in future all trainee nurses would undergo the comprehensive four-year course now being offered by nursing colleges in conjunction with universities.

On the matter of difficult working hours, it said research had shown this was one of the main reasons nurses gave up hospital nursing.

## Lecturers must take cut in bonus cheques

Pretoria Bureau

University staff would have to accept a cut in their 13th cheques along with other public servants, the secretary of the Committee for University Principals, Mr W J du Plessis, said today.

The Government provided about 75 percent of all university funds, so universities were in the same position as other semi-State organisations, said Mr du Plessis.

The decision to reduce pay came as a "very great disappointment", the University Lecturers' Association said in a statement.

The effect on university personnel was aggravated by the earlier 13 percent cut in State subsidies, the statement said.

30 April .....	19 385
31 May .....	17 409
30 June .....	17 309
31 July .....	17 579
31 August .....	17 122
30 September .....	17 467
31 October .....	16 990
30 November .....	16 406
31 December .....	17 959

**Prisoners: cost**

391. Mrs H SUZMAN asked the Minister of Justice:

What was the unit cost per prisoner per day in 1984?

The MINISTER OF JUSTICE:

As the 1984/85 financial year has not been closed, it is not possible to calculate an exact figure at this stage. At present the estimated unit cost per prisoner per day is R8,65.

**Prisoners: deaths**

392. Mrs H SUZMAN asked the Minister of Justice:

(1) How many sentenced prisoners died of natural causes during the latest specified period of 12 months for which figures are available;

(2) how many of these deaths were due to pneumonia?

The MINISTER OF JUSTICE:

Figures for the period 1 January 1984 to 31 December 1984 are as follows:

(1) 181.

(2) 14.

Commissions/departmental committees

397. Mr K M ANDREW asked the Minister of Foreign Affairs:

(1) How many (a) commissions and (b)

departmental committees of inquiry were appointed in respect of his Department in 1984;

(2) whether any of the reports of such commissions and committees have been completed; if so, (a) how many and (b) of which commissions and committees;

(3) whether any of the reports of such commission and committees have been made public; if so, (a) how many and (b) of which commissions and committees;

(4) what is the total estimated cost relating to each of these commissions and committees?

The MINISTER OF FOREIGN AFFAIRS:

(1) (a) A Task group was appointed on 1 December 1984 to investigate the introduction of Subscription television and to submit recommendations to the Government in this regard.

(b) None.

(2) No. (a) and (b) Fall away.

(3) No. (a) and (b) Fall away.

(4) An amount of R5 500 has been budgeted for the present financial year. The Task group is not yet in a position to make a calculation of the estimated costs for the next financial year.

Commissions/departmental committees

410. Mr K M ANDREW asked the Minister of National Education:

(1) How many (a) commissions and (b) departmental committees of inquiry were appointed in respect of his Department in 1984;

(2) whether any of the reports of such commissions and committees have

been completed; if so, (a) how many and (b) of which commissions and committees;

(3) whether, any of the reports of such commissions and committees have been made public; if so, (a) how many and (b) of which commissions and committees;

(4) what is the total estimated cost relating to each of these commissions and committees?

The MINISTER OF NATIONAL EDUCATION:

(1) (a) None.

(b) None.

(2). (3) and (4) Fall away.

**Sporting facilities**

450. Mr M A TARR asked the Minister of National Education:

What was the total amount spent by his Department on the provision of sporting facilities in South Africa in the 1984-85 financial year?

The MINISTER OF NATIONAL EDUCATION:

An amount of R250 000 was allocated for the provision of sports facilities in rural areas. The administration of the project is done by the South African Rugby Board. The needs have been assessed and tenders are awaited before payment can be effected.

97 Hansen & Q. 601.697  
Nurses 18/3/85

502. Dr M S BARNARD asked the Minister of Home Affairs:

(1) What are the salary scales applicable to (a) male and (b) female persons of each race group employed in provincial hospitals as (i) student nurses,

(ii) staff nurses, (iii) professional nurses, (iv) senior professional nurses, (v) chief professional nurses and (vi) chief nursing service managers;

(2) (a) what is the estimated annual cost of raising the salary scales applicable to African, Coloured and Asian nurses to those applicable to White nurses and (b) when is it envisaged that parity will be achieved in respect of these salary scales?

The MINISTER OF HOME AFFAIRS:

(1) (a) and (b) The salary scales indicated are public service scales which, as far as is known, are also applied by the provincial administrations. The salary scales of male and female employees in the public service are the same. Salary scales for the different population groups are specified up to the point where posts exist.

(i) White

R2 691-2 886x249-4 878x276-6 258/4 629-4 878x276-6 534x 312-7 782 + 12% pensionable allowance.

Coloured and Indian

R2 496x195-2 886x249-4 878x 276-5 982/4 131x249-4 878x276-6 534x312-7 158 + 12% pensionable allowance.

Black

R1 674x144-2 106x195-2 886x 249-4 629/3 135x249-4 878x 276-5 982 + 12% pensionable allowance.

(ii) White, Coloured and Indian

R5 982x276-6 534x312-8 406x 414-9 234 + 12% pensionable allowance.

Black

R4 878x276-6 534x312-7 782 + 12% pensionable allowance.

lution Groups are therefore not kept separately.

(b) Falls away.

Veterinarians

540. Mr E K MOORCROFT asked the Minister of Agricultural Economics.

- (a) How many (i) White, (ii) Black, (iii) Coloured and (iv) Asian veterinarians are registered in the Republic at present and (b) in respect of what date is this information furnished?

The MINISTER OF AGRICULTURAL ECONOMICS:

- (a) There are 1 354 registered veterinarians in the Republic of South Africa. The records of the South African Veterinary Council do not distinguish between (i) White, (ii) Black, (iii) Coloured and (iv) Asian veterinarians.

- (b) The information is furnished as on 1 February 1985.

*Handwritten:* Howard Q. 601.70: Sheltered employment 18/3/85

554. Dr A L BORAINÉ asked the Minister of Manpower:

- (1) (a) How many facilities for sheltered employment are there under the control of his Department and (b) where are they situated in each case.

- (2) how many persons were employed in each such facility as at the latest specified date for which figures are available;

- (3) whether persons employed in sheltered employment facilities qualify for benefits available to Government employees; if so, for which benefits; if not, why not;

- (4) (a) what is the maximum hourly wage paid to such persons and (b) what (i) annual and (ii) sick leave are these persons allowed;

(iii) White, Coloured and Indian R7 470x312-8 406x414-10 890x570-12 600 + 12% pensionable allowance.

Black R6 846x312-8 406x414-10 890-11 460 + 12% pensionable allowance.

(iv) White, Coloured and Indian R10 890x570-16 020 + 12% pensionable allowance.

Black R10 062x414-10 890x570-14 880 + 12% pensionable allowance.

The MINISTER OF AGRICULTURAL ECONOMICS:

(v) White, Coloured, Indian and Black R16 020-16 590x849-19 137 + 12% pensionable allowance.

(vi) White R24 231-25 080-26 115 + 12% pensionable allowance.

- (2) (a) R56,7 million.

(b) The implementation of a further phase of the programme to eliminate the salary gap will be considered in the light of available funds when occupational specific market related investigations are undertaken according to needs and/or general salary adjustments can be effected.

*Handwritten:* Howard Milk-powder 18/3/85  
508. Mr D J N MALCOMESS asked the Minister of Agricultural Economics:

- (1) How many milk-powder was (a) produced and (b) sold in the Republic in 1984;

- (2) whether milk-powder was imported in this year; if so, (a) by whom, (b) from what country or countries and (c) at what price in each case;

milk in order to recover the loss; if so, (a) what amount (i) had been recovered and (ii) remained to be recovered as at the latest specified date for which figures are available and (b) when is it anticipated that this levy will be discontinued?

The MINISTER OF AGRICULTURAL ECONOMICS:

- (1) No.
- (2) Yes.

(a) 2 cents per litre on fresh milk and industrial milk.

(i) R36 million was recovered and spent on the disposal of surpluses until 28 February 1985.

(ii) R60 million remains to be recovered during the period 1 March 1985 until approximately 28 February 1987 to dispose of present surpluses and to repay a land Bank loan of R32 million which was utilized during the year ending 29 February 1984 for the disposal of surpluses.

(b) It is anticipated that the levy will be discontinued after approximately two years if no further surpluses are produced.

*Handwritten:* Howard Q. 601.701 Apprenticeship contracts 18/3/85

319. Dr A L BORAINÉ asked the Minister of Manpower:

- (a) How many Black apprenticeship contracts were in operation in 1984 and (b) how many were registered in respect of each trade?

The MINISTER OF MANPOWER:

- (a) Statistics concerning the contracts in operation are not kept on a population group basis and those in respect of members of the Black Popu-

30 April	19385
31 May	17409
30 June	17309
31 July	17579
31 August	17122
30 September	17467
31 October	16990
30 November	16406
31 December	17959

## Prisoners: cost

391. Mrs H SUZMAN asked the Minister of Justice:

What was the unit cost per prisoner per day in 1984?

The MINISTER OF JUSTICE:

As the 1984/85 financial year has not been closed, it is not possible to calculate an exact figure at this stage. At present the estimated unit cost per prisoner per day is R8,65.

## Prisoners: deaths

392. Mrs H SUZMAN asked the Minister of Justice:

(1) How many sentenced prisoners died of natural causes during the latest specified period of 12 months for which figures are available?

(2) how many of these deaths were due to pneumonia?

The MINISTER OF JUSTICE:

Figures for the period 1 January 1984 to 31 December 1984 are as follows:

(1) 181.

(2) 14.

## Commissions/departmental committees

397. Mr K M ANDREW asked the Minister of Foreign Affairs:

(1) How many (a) commissions and (b)

departmental committees of inquiry were appointed in respect of his Department in 1984;

(2) whether any of the reports of such commissions and committees have been completed; if so, (a) how many and (b) of which commissions and committees;

(3) whether any of the reports of such commission and committees have been made public; if so, (a) how many and (b) of which commissions and committees;

(4) what is the total estimated cost relating to each of these commissions and committees?

The MINISTER OF FOREIGN AFFAIRS:

(1) (a) A Task group was appointed on 1 December 1984 to investigate the introduction of Subscription television and to submit recommendations to the Government in this regard.

(b) None.

(2) No. (a) and (b) Fall away.

(3) No. (a) and (b) Fall away.

(4) An amount of R5 500 has been budgeted for the present financial year. The Task group is not yet in a position to make a calculation of the estimated costs for the next financial year.

## Commissions/departmental committees

410. Mr K M ANDREW asked the Minister of National Education:

(1) How many (a) commissions and (b) departmental committees of inquiry were appointed in respect of his Department in 1984;

(2) whether any of the reports of such commissions and committees have

been completed; if so, (a) how many and (b) of which commissions and committees;

(3) whether, any of the reports of such commissions and committees have been made public; if so, (a) how many and (b) of which commissions and committees;

(4) what is the total estimated cost relating to each of these commissions and committees?

The MINISTER OF NATIONAL EDUCATION:

(1) (a) None.

(b) None.

(2), (3) and (4) Fall away.

## Sporting facilities

450. Mr M A TARR asked the Minister of National Education:

What was the total amount spent by his Department on the provision of sporting facilities in South Africa in the 1984-85 financial year?

The MINISTER OF NATIONAL EDUCATION:

An amount of R250 000 was allocated for the provision of sports facilities in rural areas. The administration of the project is done by the South African Rugby Board. The needs have been assessed and tenders are awaited before payment can be effected.

(ii) staff nurses, (iii) professional nurses, (iv) senior professional nurses, (v) chief professional nurses and (vi) chief nursing service managers;

(2) (a) what is the estimated annual cost of raising the salary scales applicable to African, Coloured and Asian nurses to those applicable to White nurses and (b) when is it envisaged that parity will be achieved in respect of these salary scales?

The MINISTER OF HOME AFFAIRS:

(1) (a) and (b) The salary scales indicated are public service scales which, as far as is known, are also applied by the provincial administrations. The salary scales of male and female employees in the public service are the same. Salary scales for the different population groups are specified up to the point where posts exist.

(i) White

R2 691-2 886×249-4 878×276-6 258/4 629-4 878×276-6 534×312-7 782 + 12% pensionable allowance.

Coloured and Indian

R2 496×195-2 886×249-4 878×276-5 982/4 131×249-4 878×276-6 534×312-7 158 + 12% pensionable allowance.

Black

R1 674×144-2 106×195-2 886×249-4 629/3 135×249-4 878×276-5 982 + 12% pensionable allowance.

(ii) White, Coloured and Indian

R5 982×276-6 534×312-8 406×414-9 234 + 12% pensionable allowance.

Black

R4 878×276-6 534×312-7 782 + 12% pensionable allowance.

502. Dr M S BARNARD asked the Minister of Home Affairs:

(1) What are the salary scales applicable to (a) male and (b) female persons of each race group employed in provincial hospitals as (i) student nurses,

*97* *Hansen & Q. 601.697*  
Nurses 18/3/85

(iii) White, Coloured and Indian  
R7 470×312-8 406×414-10 890×  
570-12 600 + 12% pensionable  
allowance.

Black  
R6 846×312-8 406×414-10 890-  
11 460 + 12% pensionable al-  
lowance.

(iv) White, Coloured and Indian  
R10 890×570-16 020 + 12%  
pensionable allowance.

Black  
R10 062×414-10 890×570-14 880  
+ 12% pensionable allowance.

(v) White, Coloured, Indian and  
Black  
R16 020-16 590×849-19 137 +  
12% pensionable allowance.

(vi) White  
R24 231-25 080-26 115 + 12%  
pensionable allowance.

(2) (a) R56,7 million.

(b) The implementation of a further  
phase of the programme to elim-  
inate the salary gap will be con-  
sidered in the light of available  
funds when occupational specific  
market related investigations are  
undertaken according to needs  
and/or general salary adjust-  
ments can be effected.

(3) whether any South African individ-  
uals or companies acted as agents in  
any of these transactions; if so, what  
are their names;

(4) whether milk-powder is being export-  
ed at present; if so, at what price;

(5) whether any South African individ-  
uals or companies are acting as  
agents in such transactions at present;  
if so, what are their names;

(6) whether this milk-powder is being ex-  
ported as a loss; if so, (a) what is the  
nature of the loss and (b) how will  
this loss be recouped?

**THE MINISTER OF AGRICULTURAL  
ECONOMICS:**

(1) (a) 34 352 ton.

(b) 28 984 ton.

for the period 1 March 1984 un-  
til 28 February 1985.

(2) No lawful imports occurred.

(3) Fall away.

(4) Yes, at approximately 615 Dollar  
(USA) per ton.

(5) No.

(6) Yes.

(a) Approximately R2,30 per kg.

(b) The loss is recouped from the  
Stabilisation Fund of the Dairy  
Board.

516. Mr D J N MALCOMESS asked the  
Minister of Agricultural Economics:

**Milk-powder**

(1) Whether milk-powder is being ex-  
ported at a profit; if not,

(2) whether a levy is charged on fresh

milk in order to recover the loss; if  
so, (a) what amount (i) had been re-  
covered and (ii) remained to be re-  
covered as at the latest specified date  
for which figures are available and  
(b) when is it anticipated that this  
levy will be discontinued?

**THE MINISTER OF AGRICULTURAL  
ECONOMICS:**

(1) No.

(2) Yes.

(a) 2 cents per litre on fresh milk  
and industrial milk.

(i) R36 million was recovered  
and spent on the disposal of  
surpluses until 28 February  
1985.

(ii) R60 million remains to be  
recovered during the period  
1 March 1985 until approxi-  
mately 28 February 1987 to  
dispose of present surpluses  
and to repay a land Bank  
loan of R32 million which  
was utilized during the year  
ending 29 February 1984 for  
the disposal of surpluses.

(b) It is anticipated that the levy will  
be discontinued after approxi-  
mately two years if no further  
surpluses are produced.

519. Dr A L BORRAINE asked the Minis-  
ter of Manpower:

(a) How many Black apprenticeship  
contracts were in operation in 1984 and  
(b) how many were registered in respect  
of each trade?

**THE MINISTER OF MANPOWER:**

(a) Statistics concerning the contracts in  
operation are not kept on a popu-  
lation group basis and those in re-  
spect of members of the Black Popu-

lation Groups are therefore not kept  
separately.

(b) Falls away.

**Veterinarians**

540. Mr E K MOORCROFT asked the  
Minister of Agricultural Economics:

(a) How many (i) White, (ii) Black, (iii)  
Coloured and (iv) Asian veterinarians are  
registered in the Republic at present and  
(b) in respect of what date is this informa-  
tion furnished?

**THE MINISTER OF AGRICULTURAL  
ECONOMICS:**

(a) There are 1 354 registered veterinar-  
ians in the Republic of South Africa.  
The records of the South African  
Veterinary Council do not distinguish  
between (i) White, (ii) Black, (iii)  
Coloured and (iv) Asian veterinar-  
ians.

(b) The information is furnished as on 1  
February 1985.

554. Dr A L BORRAINE asked the Minis-  
ter of Manpower:

(1) (a) How many facilities for sheltered  
employment are there under the con-  
trol of his Department and (b) where  
are they situated in each case;

(2) how many persons were employed in  
each such facility as at the latest  
specified date for which figures are  
available;

(3) whether persons employed in shel-  
tered employment facilities qualify  
for benefits available to Government  
employees; if so, for which benefits;  
if not, why not;

(4) (a) what is the maximum hourly wage  
paid to such persons and (b) what (i)  
annual and (ii) sick leave are these  
persons allowed;

*Handwritten:* 508. Mr D J N MALCOMESS asked the  
Minister of Agricultural Economics:  
Milk-powder 18/3/85

(1) How many milk-powder was (a) pro-  
duced and (b) sold in the Republic in  
1984;

(1) Whether milk-powder is being ex-  
ported at a profit; if not,

(2) whether a levy is charged on fresh



# Nurses slam cutbacks

RDM

21/3/88

(95)

Mail Reporter

NEARLY 500 nurses from provincial hospitals in the Transvaal packed a hall at the Johannesburg Hospital last night to air their grievances about Government cost-cutting measures.

The Rand Daily Mail learned from reliable sources that among the main grievances to emerge were concern that proposed massive cutbacks in the public sector would render the health service totally inadequate, and that stress factors were unbearably high among nurses in hospital wards because of critical staff shortages and overwork.

Senior executives of the South African Nursing Association are to take up those and other issues at a meeting with management next Tuesday.

# Patients' lives in danger, say overworked nurses

By PAM KRAMER

SENIOR nurses at provincial hospitals have warned that patients are at risk because hospitals are understaffed.

They told the Sunday Express this week that increased working hours and staff and budget cuts had seriously harmed nursing standards and had put patients' lives in danger.

The nurses interviewed did not wish to be named for fear of losing their jobs.

Since last November, provincial hospital nurses in the Transvaal have been working 2½ extra hours a week without more pay. Half the vacant nursing posts in the province have been frozen.

## Severe

A senior sister said understaffing was so severe that many junior nurses were being given responsibilities far beyond their capabilities.

"Junior nurses are running such wards as the surgical and medical wards which accommodate very ill patients. This is a huge responsibility — one which 17-year-olds or 18-year-olds in other professions would never assume."

One student nurse at the Johannesburg hospital said that during the Christmas period last year she and only one senior sister were on night duty in one of the busiest wards.

The nurse, who earns R413 a month, said she was expected to do the same job as many experienced sisters. "We devote our time doing the same things as senior



● Junior nurses in Transvaal hospitals are taking on huge responsibilities due to understaffing Picture: DENIS FARRELL

staff — we are given responsibilities and we kill ourselves to meet them."

A senior sister with six years' experience, who earns R815 a month, said "droves" of nurses were walking out.

"Lots of nurses would rather become medical reps — a job where they can earn far more money — than devote years of service to a profession where they are getting very little pay."

Over 500 nurses from a number of hospitals, includ-

ing Baragwanath and Hillbrow, attended a meeting this week of the South African Nursing Association. They were told by association officers that only Transvaal nurses had been instructed to work extra hours without pay.

"Nurses are up in arms about this," said a senior sister.

The association promised it would speak to the director of hospital services in the Transvaal, Dr Hennie van

Wyk. One nurse said: "We were not asked to work these extra hours but instructed to do so — and then told that if we did not like the situation we could leave."

"They don't want to hear us. They have us under their thumbs."

Many married nurses said their husbands were demanding that they either left the profession or found work in private clinics where the pay was much better.

Scores of nurses are already running the risk of losing their jobs by moonlighting at private clinics.

## Dramatic

A senior sister in charge of several wards at the Johannesburg hospital said moonlighting had had a dramatic effect on the work performance of nurses.

"Nurses are coming to work exhausted and are unable to concentrate properly on their jobs. This can have a detrimental effect on patients."

She said the attitude that nurses were so dedicated that they were prepared to work for a small salary "went out decades ago".

"You can't eat dedication," she said.

Nurses are also furious about an official proposal that R5 be taken off the salaries of all hospital staff to pay for tea and coffee. A petition is going around the Johannesburg hospital to fight this.

Dr van Wyk was not available for comment.

Mr J D Rowles  
Mrs M C Richards  
Dr F R P de Bruyn  
Prof E J Smit  
Mr A A van de Venter  
Mrs H E du Toit  
Mr H P Bütow  
Prof T Botha  
Dr J L Jansen van Vuuren  
Mr D P Oelofse

4. *Regional Council for Cultural Affairs:*  
*Western Cape*

Dr P S Meyer (Chairman)  
Prof K J Pienaar  
Adv L A Pienaar  
Prof J Cawood  
Rev P W Bingle  
Mr E Smit  
Mr A H Gouws  
Dr M du T. Potgieter  
Mr D S van Eeden  
Col H Burnett  
Mr T Barlow  
Bishop S Bradley  
Prof D P Inskip  
Mrs R Salmon  
Mrs E Chait

5. *Regional Council for Cultural Affairs:*  
*Eastern Cape*

Prof J G de Wet (Chairman)  
Dr J F K Marais  
Mrs M Vosloo  
Mr J M Strydom  
Mr G J van der Walt  
Mr J H Hurter  
Mr J P van Zijl  
Mrs S J du Preez  
Rev J R Schmidt  
Mr J J Breitenbach  
Mr J G Loopuyt  
Mr C J Stadler  
Mr D J Rodger  
Mr B D Mann  
Miss M H van Deventer  
Prof J A Gledhill

6. *Regional Council for Cultural Affairs:*  
*Northern Cape*

Rev L Swanepoel (Acting Chairman)  
Mr P J Venter  
Mr H van Tiddens  
Mr K Scholtz

Mr G F Bester  
Mr V W Haddad  
Mr P J Hugo

7. *Regional Council for Cultural Affairs:*  
*Orange Free State*

Prof B de Koker (Chairman)  
Mrs F Zerwick  
Mr G P Visser  
Mrs Z Weich  
Mr A J van Wyk  
Mr A B du Plessis  
Mr J D Bouwer  
Rev J P L van der Walt  
Mr R Rau

8. *Regional Council for Cultural Affairs:*  
*Natal*

Mr H H Hallen (Chairman)  
Dr J J Pauw  
Rev G H J Kruger  
Mr A H Prinsloo  
Mrs K Kriek  
Mr B J Pienaar  
Mrs M J Gildenhuys  
Mr M R A McElligott  
Mr G A Chadwick  
Mr R McDonald  
Dr A R de Villiers  
Mrs L I Dalrymple  
Mrs B C Auret

THURSDAY, 28 MARCH 1985

†Indicates translated version.

For written reply...

General Affairs: *Hem and*  
*95* Nursing profession: agreement  
631. Mr W V RAW asked the Minister of Health and Welfare:

- (1) Whether his Department is concerned with an agreement amongst the four provincial administrations relating to the salaries and conditions of service in the nursing profession; if so, (a) what are the details of this agreement in respect of (i) payment of overtime, (ii) board and lodging charges for accommodation in nurses' homes, (iii) uniform and/or shoe allowances and

- (iv) any other specified allowances and (b) to what extent is his Department concerned with this matter;

- (2) whether he has received any complaints of inter-provincial differentiation; if so, what complaints; if not,

- (3) whether he will conduct an investigation into whether parity is being maintained amongst the four provincial administrations; if not, why not; if so, when?

The MINISTER OF HEALTH AND WELFARE:

(1) No.

- (a)(i), (ii), (iii), (iv) and (b) No written agreement exists between the Department of Health and Welfare and the Provincial Administrations in connection with salaries and conditions of service for nursing personnel.

In terms of the Health Act, 1977 (Act No 63 of 1977) it is a function of each authority which renders a health service in the Republic to co-ordinate these services. Co-ordination in regard to the salaries and conditions of service of Health personnel, is undertaken by the statutory Health Matters Advisory Committee and its sub-committees viz the sub-committee for personnel matters and the sub-committee for nursing, as well as the National Health Policy Council.

- (2) The Department has received no complaints in connection with disparity in the provincial services but is aware of the fact that the abovementioned sub-committees and committees have considered and resolved problems of this nature from time to time.

- (3) In view of the fact that adequate measures exist and are applied for the attainment and maintenance of salary and service parity, it is not considered necessary to institute an investigation into this matter.

*Hem and*  
*634* Infant mortality *61.917*  
634. Dr M S BARNARD asked the Minister of Health and Welfare:

- (a) What are the major causes of infant

mortality for (i) whites, (ii) Coloured, (iii) Indians and (iv) Blacks and (b) what is the percentage of deaths from each of these causes in respect of each race group?

The MINISTER OF HEALTH AND WELFARE:

(a) and (b)

(i) Whites:

- (a) conditions originating in the perinatal period = 47.8%;

- (b) diseases of the respiratory system = 12.3%;

- (c) infectious and parasitic diseases = 10.6%;

- (d) ill-defined conditions = 10.1%;

- (e) congenital anomalies = 8.8%.

(ii) Coloureds:

- (a) infectious and parasitic diseases = 40.7%;

- (b) conditions originating in the perinatal period = 24.8%;

- (c) diseases of the respiratory system = 19.4%;

- (d) ill-defined conditions = 7.4%;

- (e) congenital anomalies = 2.0%.

(iii) Asians:

- (a) conditions originating in the perinatal period = 46.3%;

- (b) infectious and parasitic diseases = 19.2%;

- (c) ill-defined conditions = 12.7%;

- (d) diseases of the respiratory system = 9.8%;

- (e) congenital anomalies = 4.6%.

(iv) Blacks:

- (a) infectious and parasitic diseases = 39.6%;

- (b) conditions originating in the perinatal period = 20.9%;

- (c) diseases of the respiratory system = 15.7%;

three years and negative publicity regarding the alleged presence of salmonella in certain samples of rooibos tea.

- (b) None, except for higher processing costs.

*Leaf tobacco*

- (a) Favourable climatic conditions.  
(b) Exports at reduced prices.

*Beef*

- (a) Forced marketing mainly as a result of the drought.

- (b) Decrease in the auction prices and possible sales at reduced prices.

(3) *Wheat*

- (a) Surplus stocks are exported at competitive prices.  
(b) Incidental surpluses are mainly due to favourable climatic conditions.

*Dairy products*

- (a) Sales at the best prices that can be realized in the market.  
(b) Surpluses are mainly the result of the adverse effects of drought conditions in the northern crop production areas.

*Eggs*

- (a) and (b) Application of an effective marketing strategy to improve the demand for and the sale of eggs and egg products.

*Rooibos tea*

- (a) and (b) Marketing quotas were introduced last year, foreign markets were exploited and steps are being taken to enhance

the market acceptance of stocks and new production.

*Leaf tobacco*

- (a) and (b) Voluntary limitation of production is applied by the producers.

*Beef*

- (a) and (b) Price- and marketing arrangements to effect an equilibrium between demand and supply as far as possible.

**Agricultural products: shortage**

363. Mr E K MOORCROFT asked the Minister of Agricultural Economics:

- (1) Whether any shortages of agricultural products exist or are expected in 1985, if so, of which products;  
(2) what in each case are the (a) reasons for such shortages and (b) price implications;  
(3) what steps have been taken or are contemplated in each case to (a) counter the effect of such shortages and (b) avoid them in future?

**The MINISTER OF AGRICULTURAL ECONOMICS:**

- (1) Yes, sunflower seed (for pressing purposes to provide in the cooking oil requirements) and cotton.

(2) *Sunflower Seed*

- (a) Mainly unfavourable climatic conditions.

- (b) Not quantifiable owing to variable factors such as variation in supply and demand (locally) and price fluctuations on the world market.

*Cotton*

- (a) Mainly unfavourable climatic conditions.

- (b) None.

(3) *Sunflower Seed*

- (a) and (b) It is customary to supplement shortages of cooking oil by means of imports.

*Cotton*

- (a) and (b) It is customary to supplement shortages by means of imports.

*Hens and Alexandria 10/4/85*  
*G. C. 1. 1025*

Mr D J DALLING asked the Minister of Co-operation, Development and Education:

- (1) Whether any civil unrest and/or school boycotts occurred in Alexandra in 1984; if so,

- (2) whether any inquiries have been instituted in this regard; if not, why not; if so, who is or was in charge of these inquiries;

- (3) whether these inquiries have been completed; if so, what were the findings; if not, (a) why not and (b) when is it anticipated that they will be completed;

- (4) whether any action has been or is to be taken as a result of the inquiries; if not, why not; if so, what action?

**The MINISTER OF CO-OPERATION, DEVELOPMENT AND EDUCATION:**

- (1) Yes, only a boycott at a school.

- (2) Yes. The governing body of the school instituted inquiries with the chairman of the governing body in charge.

- (3) Yes. The governing body came to the conclusion that the main reason had been the influence which persons and organizations outside the school exercised on the pupils. A further reason for dissatisfaction with the pupils was their demand that money which they

had paid for wood for the construction of woodwork models, be paid back to them, could not be met as the wood had already been used in models which they had not completed.

- (a) and (b) Fall away.

- (4) Yes. A former Inspector of Schools was appointed as acting principal for the beginning of 1985 to restore order.

*Doctors/paramedical personnel: salary scales*  
*Hansen & Co. 1. 1026 10/4/85*  
454. Dr M S BARNARD asked the Minister of Home Affairs:

What are the present salary scales for (a) doctors and (b) paramedical personnel of each race group employed in provincial hospitals?

**The MINISTER OF HOME AFFAIRS:**

**Explanatory notes:**

1. The salary scales indicated are Public Service scales which, as far as is known, are also applied by the Provincial Administrations  
2. Salary scales for the different population groups are specified up to the point where posts exist.

3. List of abbreviations/symbols used hereafter:

PA Pensionable Allowance  
NPPA: Non-pensionable Professional Allowance  
(W): White  
(C) Coloured  
(I): Indian  
(B): Black

**(A) Salary Scales: Medical Staff**

(All population groups)  
Intern (Medical)  
R12 030 + 12% PA  
Registrar  
R18 288 x 849 - 25 080 + 12% PA  
+ R11 037 NPPA

Medical Officer  
Dentist  
R18 288 x 849 - 25 080/24 231 -  
25 080 x 1 035 - 27 150 + 12% PA  
plus NPPA of R11 037 (first leg of  
scale) and NPPA of R12 420 (second  
leg of scale)  
Deputy Director (Head- and Re-  
gional Office Personnel)  
Medical Superintendent  
Senior Medical Officer  
Senior Dentist  
R31 290 x 1 320 - 33 930 + 12% PA  
+ R7 710 NPPA  
Senior Medical Superintendent  
R33 930 x 1 320 - 35 250 + 12% PA  
+ R7 425 NPPA  
Medical and Dentistry Specialists  
R33 930 x 1 320 - 35 250 + 12% PA  
+ NPPA of R8 745 payable at the  
notch R33 930 and NPPA of R9 495  
payable at the notch R35 250.  
Director (Head- and Regional Office  
Personnel)  
Chief Medical Superintendent  
R39 630 (fixed) + 12% PA + R4 080  
NPPA  
Principal Family Practitioner  
Principal Clinical Pharmacologist  
Principal Stomatologist  
Senior Specialist  
R39 630 (fixed) + 12% PA + R9 255  
NPPA  
Chief Director (Head- and Regional  
Office Personnel)  
R44 850 (fixed) + 12% PA  
Chief Family Practitioner/Professor  
Chief Clinical Pharmacologist/Profes-  
sor  
Chief Stomatologist/Professor  
Chief Specialist/Professor  
R44 850 (fixed) + 12% PA + R8 475  
NPPA

(B) Salary Scales: Paramedical Staff

Occupational Classes Occupational  
Therapist, Physiotherapist, Speech  
Therapist and Audiologist, Radiogra-  
pher:  
Student Occupational Therapist  
Student Physiotherapist  
Student Speech Therapist and Audio-  
logist

Student Radiographer  
PA  
(W): R3 633 x 249 - 4 629 + 12%  
(C)(I): R3 135 x 249 - 4 131 +  
12% PA  
(B) (Male): R2 301 x 195 - 2 886 -  
3 135 + 12% PA  
(B) (Female): R2 106 x 195 -  
2 886 + 12% PA  
Occupational Therapist  
Physiotherapist  
Speech Therapist and Audiologist  
Radiographer  
(W)(C)(I): R7 470 x 312 - 8 406 x  
414 - 10 890 x 570 - 12 600/11 460 x  
570 - 16 020 + 12% PA  
(B): R6 846 x 312 - 8 406 x 414 -  
10 890 - 11 460/10 476 - 10 890 x  
570 - 14 880 + 12% PA  
Chief Occupational Therapist  
Chief Physiotherapist  
Chief Speech Therapist and Audiolo-  
gist  
Chief Radiographer  
(W)(C)(I)(B): R16 020 - 16 590 x  
849 - 19 137 + 12% PA  
Control Occupational Therapist  
Control Speech Therapist and Audio-  
logist  
Control Physiotherapist  
Control Radiographer  
(W)(C)(I)(B): R21 684 x 849 -  
23 382 + 12% PA  
Occupational Class Chiropodist  
Chiropodist  
(W)(C)(I)(B): R16 020 - 16 590 x  
849 - 19 137 + 12% PA  
Occupational Class Medical Orthotist  
and Prosthetist:  
Pupil Medical Orthotist and Prosthet-  
ist  
(W): R4 380 x 249 - 4 878 x 276 -  
6 534 - 6 846 + 12% PA  
(C)(I): R3 882 x 249 - 4 878 x 276  
- 6 258 + 12% PA  
(B): R2 886 x 249 - 4 878 - 5 154  
+ 12% PA  
Medical Orthotist and Prosthetist  
(W)(C)(I): R9 648 x 414 - 10 890  
x 570 - 14 880/16 020 - 16 590 x 849  
- 19 137 + 12% PA  
(B): R8 820 x 414 - 10 890 x 570  
- 13 740/14 880 x 570 - 16 590 x 849  
- 17 439 + 12% PA

Senior Medical Orthotist and  
Prosthetist  
(W)(C)(I): R18 288 x 849 - 21 684  
+ 12% PA  
Chief Medical Orthotist and  
Prosthetist  
(W)(C)(I)(B): R21 684 x 849 -  
25 080 + 12% PA  
Control Medical Orthotist and  
Prosthetist  
(W)(C)(I)(B): R31 290 x 1 320 -  
33 930  
Occupational Class Medical Technol-  
ogist:  
Pupil Medical Technologist  
(W): R4 878 - 5 430 - 5 982 -  
6 258 + 12% PA  
(C)(I): R4 131 - 4 629 - 5 154 -  
5 706 + 12% PA  
(B): R3 135 - 3 633 - 4 131 - 4 629  
+ 12% PA  
Medical Technologist  
(W)(C)(I): R9 648 x 414 - 10 890  
x 570 - 12 600/13 740 x 570 - 16 020  
+ 12% PA  
(B): R8 820 x 414 - 10 890 -  
11 460/12 600 x 570 - 14 880 + 12%  
PA  
Senior Medical Technologist  
(W)(C)(I)(B): R16 020 - 16 590 x  
849 - 19 137 + 12% PA  
Chief Medical Technologist  
(W)(C)(I)(B): R19 137 x 849 -  
25 080 + 12% PA  
Control Medical Technologist  
(W): R24 231 - 25 080 x 1 035 -  
27 150 + 12% PA  
Occupational Class Oral Hygienist:  
Student Oral Hygienist  
(B) (Male): R2 301 x 195 - 2 886 -  
3 135 + 12% PA  
(B) (Female): R2 106 x 195 -  
2 886 + 12% PA  
Oral Hygienist  
(W)(C)(I): R7 470 x 312 - 8 406 x  
414 - 10 890 x 570 - 12 600/11 460 x  
570 - 16 020 + 12% PA  
(B): R6 846 x 312 - 8 406 x 414 -  
10 890 - 11 460/10 476 - 10 890 x  
570 - 14 880 + 12% PA  
Chief Oral Hygienist  
(W)(C)(I): R16 020 - 16 590 x 849  
- 19 137 + 12% PA  
(B): R14 880 x 570 - 16 590 -  
17 439 + 12% PA

Senior Medical Orthotist and  
Prosthetist  
(W)(C)(I)(B): R21 684 x 849 -  
23 382 + 12% PA  
Occupational Class Optometrist:  
Optometrist  
(W)(C)(I)(B): R16 020 - 16 590 x  
849 - 19 137 + 12% PA  
Occupational Class Dental Therapist:  
Student Dental Therapist  
(B) (Male): R2 301 x 195 - 2 886 -  
3 135 + 12% PA  
(B) (Female): R2 106 x 195 -  
2 886 + 12% PA  
Dental Therapist  
(C)(I): R7 470 x 312 - 8 406 x 414  
- 10 890 x 570 - 12 600/11 460 x 570  
- 16 020 + 12% PA  
(B): R6 846 x 312 - 8 406 x 414 -  
10 890 - 11 460/10 476 - 10 890 x  
570 - 14 880 + 12% PA  
Chief Dental Therapist  
(C)(I)(B): R16 020 - 16 590 x 849  
- 19 137 + 12% PA

Teachers: number required

570. Mr R M BURROWS asked the Min-  
ister of National Education:

(1) Whether his Department has under-  
taken a study concerning the num-  
bers of teachers required for White,  
Coloured and Indian schools; if not,  
why not; if so, how many teachers in  
each race group will be required to  
be trained between now and the year  
2000 in order to accommodate the  
natural growth of each community.

(2) whether there is currently a shortage  
of teachers; if so, how many teachers  
in each race group will have to be  
trained during the same period to  
overcome such shortages as might  
persist?

The MINISTER OF NATIONAL EDU-  
CATION:

(1) (a) Yes.  
(b) Falls away.  
(c) The study has not been finalized

Mr J D Rowles  
Mrs M C Richards  
Dr F R P de Bruyn  
Prof E J Smit  
Mr A A van de Venter  
Mrs H E du Toit  
Mr H P Bütow  
Prof T Botha  
Dr J L Jansen van Vuuren  
Mr D P Oelofse

4. *Regional Council for Cultural Affairs:  
Western Cape*

Dr P S Meyer (Chairman)  
Prof K J Pienaar  
Adv L A Pienaar  
Prof J Cawood  
Rev P W Bingle  
Mr E Smit  
Mr A H Gouws  
Dr M du T. Potgieter  
Mr D S van Eeden  
Col. H Burnett  
Mr T Barlow  
Bishop S Bradley  
Prof D P Inskip  
Mrs R Salmon  
Mrs E Chat

5. *Regional Council for Cultural Affairs:  
Eastern Cape*

Prof J G de Wet (Chairman)  
Dr J F K Marais  
Mrs M Vosloo  
Mr J M Strydom  
Mr G J van der Walt  
Mr J H Hurter  
Mr J P van Zijl  
Mrs S J du Preez  
Rev J R Schmidt  
Mr J J Breitenbach  
Mr J G Loopuyt  
Mr C J Stadler  
Mr D J Rodger  
Mr B D Mann  
Miss M H van Deventer  
Prof J A Gledhill

6. *Regional Council for Cultural Affairs:  
Northern Cape*

Rev L Swanepoel (Acting Chairman)  
Mr P J Venter  
Mr H van Tiddens  
Mr K Scholtz

Mr G F Bester  
Mr V W Haddad  
Mr P J Hugo

7. *Regional Council for Cultural Affairs:  
Orange Free State*

Prof B de Koker (Chairman)  
Mrs F Zerwick  
Mr G P Visser  
Mrs Z Weich  
Mr A J van Wyk  
Mr A B du Plessis  
Mr J D Bouwer  
Rev J P L van der Walt  
Mr R Rau

8. *Regional Council for Cultural Affairs:  
Natal*

Mr H H Hallen (Chairman)  
Dr J J Pauw  
Rev G H J Kruger  
Mr A H Prinsloo  
Mrs K Kriek  
Mr B J Pienaar  
Mrs M J Gildenhuys  
Mr M R A McElligott  
Mr G A Chadwick  
Mr R McDonald  
Dr A R de Villiers  
Mrs L I Dalrymple  
Mrs B C Auret

THURSDAY, 28 MARCH 1985

† Indicates translated version.

For written reply:

*General Affairs: Hemand*

**95** Nursing profession: agreement  
631. Mr W V RAW asked the Minister of Health and Welfare:

(1) Whether his Department is concerned with an agreement amongst the four provincial administrations relating to the salaries and conditions of service in the nursing profession; if so, (a) what are the details of this agreement in respect of (i) payment of overtime, (ii) board and lodging charges for accommodation in nurses' homes, (iii) uniform and/or shoe allowances and

(iv) any other specified allowances and (b) to what extent is his Department concerned with this matter;

(2) whether he has received any complaints of inter-provincial differentiation; if so, what complaints; if not,

(3) whether he will conduct an investigation into whether parity is being maintained amongst the four provincial administrations; if not, why not; if so, when?

The MINISTER OF HEALTH AND WELFARE:

(1) No.

(a)(i), (ii), (iii), (iv) and (b) No written agreement exists between the Department of Health and Welfare and the Provincial Administrations in connection with salaries and conditions of service for nursing personnel.

In terms of the Health Act, 1977 (Act No 63 of 1977) it is a function of each authority which renders a health service in the Republic to co-ordinate these services. Co-ordination in regard to the salaries and conditions of service of Health personnel, is undertaken by the statutory Health Matters Advisory Committee and its sub-committees viz the sub-committee for personnel matters and the sub-committee for nursing, as well as the National Health Policy Council.

(2) The Department has received no complaints in connection with disparity in the provincial services but is aware of the fact that the abovementioned sub-committees and committees have considered and resolved problems of this nature from time to time.

(3) In view of the fact that adequate measures exist and are applied for the attainment and maintenance of salary and service parity, it is not considered necessary to institute an investigation into this matter.

*Infant mortality 61.917*  
634. Dr M S BARNARD asked the Minister of Health and Welfare:

(a) What are the major causes of infant

mortality for (i) whites, (ii) Coloured, (iii) Indians and (iv) Blacks and (b) what is the percentage of deaths from each of these causes in respect of each race group?

The MINISTER OF HEALTH AND WELFARE:

(a) and (b)

(i) Whites:

(a) conditions originating in the perinatal period = 47,8%;

(b) diseases of the respiratory system = 12,3%;

(c) infectious and parasitic diseases = 10,6%;

(d) ill-defined conditions = 10,1%;

(e) congenital anomalies = 8,8%.

(ii) Coloureds:

(a) infectious and parasitic diseases = 40,7%;

(b) conditions originating in the perinatal period = 24,8%;

(c) diseases of the respiratory system = 19,4%;

(d) ill-defined conditions = 7,4%;

(e) congenital anomalies = 2,0%.

(iii) Asians:

(a) conditions originating in the perinatal period = 46,3%;

(b) infectious and parasitic diseases = 19,2%;

(c) ill-defined conditions = 12,7%;

(d) diseases of the respiratory system = 9,8%;

(e) congenital anomalies = 4,6%.

(iv) Blacks:

(a) infectious and parasitic diseases = 39,6%;

(b) conditions originating in the perinatal period = 20,9%;

(c) diseases of the respiratory system = 15,7%;

three years and negative publicity regarding the alleged presence of salmonella in certain samples of rooibos tea.

- (b) None, except for higher processing costs.

*Leaf tobacco*

- (a) Favourable climatic conditions.  
(b) Exports at reduced prices.

*Beef*

- (a) Forced marketing mainly as a result of the drought.

- (b) Decrease in the auction prices and possible sales at reduced prices.

(3) *Wheat*

- (a) Surplus stocks are exported at competitive prices.

- (b) Incidental surpluses are mainly due to favourable climatic conditions.

*Dairy products*

- (a) Sales at the best prices that can be realized in the market.

- (b) Surpluses are mainly the result of the adverse effects of drought conditions in the northern crop production areas.

*Eggs*

- (a) and (b) Application of an effective marketing strategy to improve the demand for and the sale of eggs and egg products.

*Rooibos tea*

- (a) and (b) Marketing quotas were introduced last year, foreign markets were exploited and steps are being taken to enhance

the market acceptance of stocks and new production.

*Leaf tobacco*

- (a) and (b) Voluntary limitation of production is applied by the producers.

*Beef*

- (a) and (b) Price- and marketing arrangements to effect an equilibrium between demand and supply as far as possible.

*Agricultural products: shortage*

363. Mr E K MOORCROFT asked the Minister of Agricultural Economics:

- (1) Whether any shortages of agricultural products exist or are expected in 1985; if so, of which products;

- (2) what in each case are the (a) reasons for such shortages and (b) price implications;

- (3) what steps have been taken or are contemplated in each case to (a) counter the effect of such shortages and (b) avoid them in future?

The MINISTER OF AGRICULTURAL ECONOMICS:

- (1) Yes, sunflower seed (for pressing purposes to provide in the cooking oil requirements) and cotton.

(2) *Sunflower Seed*

- (a) Mainly unfavourable climatic conditions.

- (b) Not quantifiable owing to variable factors such as variation in supply and demand (locally) and price fluctuations on the world market.

*Cotton*

- (a) Mainly unfavourable climatic conditions.

- (b) None.

(3) *Sunflower Seed*

- (a) and (b) It is customary to supplement shortages of cooking oil by means of imports.

*Cotton*

- (a) and (b) It is customary to supplement shortages by means of imports.

424. Mr D J DALLING asked the Minister of Co-operation, Development and Education:  
*Howard 10/4/85*

- (1) Whether any civil unrest and/or school boycotts occurred in Alexandra in 1984; if so,

- (2) whether any inquiries have been instituted in this regard; if not, why not; if so, who is or was in charge of these inquiries;

- (3) whether these inquiries have been completed; if so, what were the findings; if not, (a) why not and (b) when is it anticipated that they will be completed;

- (4) whether any action has been or is to be taken as a result of the inquiries; if not, why not; if so, what action?

The MINISTER OF CO-OPERATION, DEVELOPMENT AND EDUCATION:

- (1) Yes, only a boycott at a school.

- (2) Yes. The governing body of the school instituted inquiries with the chairman of the governing body in charge.

- (3) Yes. The governing body came to the conclusion that the main reason had been the influence which persons and organizations outside the school exercised on the pupils. A further reason for dissatisfaction with the pupils was their demand that money which they

had paid for wood for the construction of woodwork models, be paid back to them, could not be met as the wood had already been used in models which they had not completed.

- (a) and (b) Fall away.

- (4) Yes. A former Inspector of Schools was appointed as acting principal for the beginning of 1985 to restore order.

Doctors/paramedical personnel: salary scales  
*Howard 61. 1026 10/4/85*  
454. Dr M S BARNARD asked the Minister of Home Affairs:

- What are the present salary scales for (a) doctors and (b) paramedical personnel of each race group employed in provincial hospitals?

The MINISTER OF HOME AFFAIRS:

Explanatory notes:

1. The salary scales indicated are Public Service scales which, as far as is known, are also applied by the Provincial Administrations.

2. Salary scales for the different population groups are specified up to the point where posts exist.

3. List of abbreviations/symbols used hereafter:

PA: Pensionable Allowance  
NPPA: Non-pensionable Professional Allowance  
(W): White  
(C): Coloured  
(I): Indian  
(B): Black

- (A) Salary Scales: Medical Staff

(All population groups)  
Intern (Medical)  
R12 030 + 12% PA  
Registrar  
R18 288 x 849 - 25 080 + 12% PA  
+ R11 037 NPPA

Medical Officer	Student Radiographer
Dentist	(W): R3 633 × 249 - 4 629 + 12%
R18 288 × 849 - 25 080/24 231 -	PA
25 080 × 1 035 - 27 150 + 12% PA	(C)(I): R3 135 × 249 - 4 131 +
plus NPPA of R11 037 (first leg of	12% PA
scale) and NPPA of R12 420 (second	(B) (Male): R2 301 × 195 - 2 886 -
leg of scale)	3 135 + 12% PA
Deputy Director (Head- and Re-	(B) (Female): R2 106 × 195 -
gional Office Personnel)	2 886 + 12% PA
Medical Superintendent	Occupational Therapist
Senior Medical Officer	Physiotherapist
Senior Dentist	Speech Therapist and Audiologist
R31 290 × 1 320 - 33 930 + 12% PA	Radiographer
+ R7 710 NPPA	(W)(C)(I): R7 470 × 312 - 8 406 ×
Senior Medical Superintendent	414 - 10 890 × 570 - 12 600/11 460 ×
R33 930 × 1 320 - 35 250 + 12% PA	570 - 16 020 + 12% PA
+ R7 425 NPPA	(B): R6 846 × 312 - 8 406 × 414 -
Medical and Dentistry Specialists	10 890 - 11 460/10 476 - 10 890 ×
R33 930 × 1 320 - 35 250 + 12% PA	570 - 14 880 + 12% PA
+ NPPA of R8 745 payable at the	Chief Occupational Therapist
notch R33 930 and NPPA of R9 495	Chief Physiotherapist
payable at the notch R35 250.	Chief Speech Therapist and Audiolo-
Director (Head- and Regional Office	gist
Personnel)	Chief Radiographer
Chief Medical Superintendent	(W)(C)(I)(B): R16 020 - 16 590 ×
R39 630 (fixed) + 12% PA + R4 080	849 - 19 137 + 12% PA
NPPA	Control Occupational Therapist
Principal Family Practitioner	Control Speech Therapist and Audio-
Principal Clinical Pharmacologist	logist
Principal Stomatologist	Control Physiotherapist
Senior Specialist	Control Radiographer
R39 630 (fixed) + 12% PA + R9 255	(W)(C)(I)(B): R21 684 × 849 -
NPPA	23 382 + 12% PA
Chief Director (Head- and Regional	Occupational Class Chiropodist
Office Personnel)	Chiropodist
R44 850 (fixed) + 12% PA	(W)(C)(I)(B): R16 020 - 16 590 ×
Chief Family Practitioner/Professor	840 - 19 137 + 12% PA
Chief Clinical Pharmacologist/Profe-	Occupational Class Medical Ortho-
ssor	and Prosthetist:
Chief Stomatologist/Professor	Pupil Medical Orthoist and Prosthet-
Chief Specialist/Professor	ist
R44 850 (fixed) + 12% PA + R8 475	(W): R4 380 × 249 - 4 878 × 276 -
NPPA	6 534 - 6 846 + 12% PA
	(C)(I): R3 882 × 249 - 4 878 × 276
	- 6 258 + 12% PA
	(B): R2 886 × 249 - 4 878 - 5 154
	+ 12% PA
	Medical Orthoist and Prosthetist:
	(W)(C)(I): R9 648 × 414 - 10 890
	× 570 - 14 880/16 020 - 16 590 × 849
	- 19 137 + 12% PA
	(B): R8 820 × 414 - 10 890 × 570
	- 13 740/14 880 × 570 - 16 590 × 849
	- 17 439 + 12% PA

(B) Salary Scales: Paramedical Staff

Occupational Classes Occupational Therapist, Physiotherapist, Speech Therapist and Audiologist, Radiographer:  
 Student Occupational Therapist  
 Student Physiotherapist  
 Student Speech Therapist and Audiologist

Senior Medical Orthoist and Prosthetist	Control Oral Hygienist
(W)(C)(I): R18 288 × 849 - 21 684 + 12% PA	(W)(C)(I)(B): R21 684 × 849 -
Chief Medical Orthoist and Prosthetist	23 382 + 12% PA
(W)(C)(I)(B): R21 684 × 849 -	Occupational Class Optometrist:
25 080 + 12% PA	Optometrist
Control Medical Orthoist and Prosthetist	(W)(C)(I)(B): R16 020 - 16 590 ×
(W)(C)(I)(B): R31 290 × 1 320 -	840 - 19 137 + 12% PA
33 930	Occupational Class Dental Therapist:
Occupational Class Medical Technol-	Student Dental Therapist
ogist:	(B) (Male): R2 301 × 195 - 2 886 -
Pupil Medical Technologist	3 135 + 12% PA
(W): R4 878 - 5 430 - 5 982 -	(B) (Female): R2 106 × 195 -
6 258 + 12% PA	2 886 + 12% PA
(C)(I) R4 131 - 4 629 - 5 154 -	Dental Therapist
5 706 + 12% PA	(C)(I): R7 470 × 312 - 8 406 × 414
(B): R3 135 - 3 633 - 4 131 - 4 629	- 10 890 × 570 - 12 600/11 460 × 570
+ 12% PA	- 16 020 + 12% PA
Medical Technologist	(B): R6 846 × 312 - 8 406 × 414 -
(W)(C)(I): R9 648 × 414 - 10 890	10 890 - 11 460/10 476 - 10 890 ×
× 570 - 12 600/13 740 × 570 - 16 020	570 - 14 880 + 12% PA
+ 12% PA	Chief Dental Therapist
(B): R8 820 × 414 - 10 890 -	(C)(I)(B): R16 020 - 16 590 × 840
11 460/12 600 × 570 - 14 880 + 12%	
PA	
Senior Medical Technologist	
(W)(C)(I)(B): R16 020 - 16 590 ×	
849 - 19 137 + 12% PA	
Chief Medical Technologist	
(W)(C)(I)(B): R19 137 × 849 -	
25 080 + 12% PA	
Control Medical Technologist	
(W): R24 231 - 25 080 × 1 035 -	
27 150 + 12% PA	
Occupational Class Oral Hygienist:	
Student Oral Hygienist	
(B) (Male): R2 301 × 195 - 2 886 -	
3 135 + 12% PA	
(B) (Female): R2 106 × 195 -	
2 886 + 12% PA	
Oral Hygienist	
(W)(C)(I): R7 470 × 312 - 8 406 ×	
414 - 10 890 × 570 - 12 600/11 460 ×	
570 - 16 020 + 12% PA	
(B): R6 846 × 312 - 8 406 × 414 -	
10 890 - 11 460/10 476 - 10 890 ×	
570 - 14 880 + 12% PA	
Chief oral Hygienist	
(W)(C)(I): R16 020 - 16 590 × 840	
- 19 137 + 12% PA	
(B): R14 880 × 570 - 16 590 -	
17 439 + 12% PA	

Teachers: number required

570. Mr R M BURROWS asked the Minister of National Education:

- (1) Whether his Department has undertaken a study concerning the numbers of teachers required for White, Coloured and Indian schools; if not, why not; if so, how many teachers in each race group will be required to be trained between now and the year 2000 in order to accommodate the natural growth of each community;
- (2) whether there is currently a shortage of teachers; if so, how many teachers in each race group will have to be trained during the same period to overcome such shortages as might persist?

The MINISTER OF NATIONAL EDUCATION:

- (1) (a) Yes.  
 (b) Falls away.  
 (c) The study has not been finalized



# Medicos slam reports that nurses must slim

Sowetan 23/1/85

By SYD KHUMALO

AN ultimatum by hospital authorities, reported in The Sowetan Sunday Mirror that nurses have either to lose weight or their jobs, has been rejected by different sectors of the community.

The president of the Soweto Civic Association, Dr Nthato Motlana, agreed that people should be encouraged to lose weight, "but I completely reject the penalty laid down that the nurses lose their jobs if not their weight. From a medical point of view and from the beauty aspect of it, the nurses must be encouraged to lose weight if they are overweight, but let this be left to them to decide".

The chairman of the Baragwanath Hospital Board, Dr W M Matsie had no knowledge of the matter. He said his board never discussed such a matter. "This matter was not at any stage discussed by my board and it will never be discussed. I think this is a matter amongst

nurses. I have not seen the article and I would not comment until it is officially brought to the board", he said

## Health

95

Well-known boxing medical officer and former chairman of the Hillbrow Hospital Board, Dr Joe Jivhuho said, "I don't think it is fair to ask people to either lose weight or their jobs. Being overweight does not suggest ill-health and being slim does not suggest good-health".

One nursing sister at Baragwanath Hospital was quoted as saying that she was called by the hospital authorities

and told that if she did not lose weight, she was going to have to quit her job as a nurse at the hospital.

Another one from the same hospital was quoted as saying that she was told that she had to leave night-duty because of her weight. She said that preference was given to the slim ones when it came to night-duty, "because it is alleged that we sleep on the job." A sister from Hillbrow Hospital said a number of fat nurses were called in last week and told to slim.

The present chairman of the Hillbrow Hospital Board, Dr Johnny Mosendane, refused to comment.

# What to do if you want to become a nurse

CARE Times  
25/14/85

95



Although demanding, nursing is a satisfying career.

NURSING is a demanding career, but satisfying and offers the young person the opportunity of gaining experience in a rewarding and interesting field where true job satisfaction can still be enjoyed.

Nursing science is a human clinical health science constituting the body of knowledge for the practice of persons registered or enrolled under the Nursing Act as nurses or midwives.

It encompasses the study of preventive, promotive, curative and rehabilitative health care for individuals, families, groups and communities and covers man's life-span from before birth.

The courses available are:

- Four-year diploma course.
  - Four- to five-year degree course, depending on the university.
- Candidates who intend to enrol for a degree course must have a matriculation exemption

certificate and application must be submitted not later than July of the year preceding the commencement of the course in January.

A Std 10 certificate or its equivalent as well as proficiency in both official languages is essential for enrolment in the diploma course.

English and Afrikaans, plus at least two academic subjects of which at least one must be a science subject, for instance mathematics, physics, chemistry or biology. An average D+ symbol is required.

A practical senior certificate will not be acceptable.

To succeed in nursing you need to be responsible, mature, capable, zealous and sympathetic, with integrity above reproach.

Applicants must at least be 16 years old and if possible should arrange for a personal interview with the matron in charge of the hospital concerned.

Accommodation at reasonable cost is offered

by most training hospitals in nurses' residences. It is strongly advised that all first-year students stay in these residences, while older and married students may live out, in which case individual meals are supplied at minimal tariffs.

Uniforms are supplied by the hospital, and an annual shoe allowance is granted.

A monthly salary will be paid to students. Details on degree and diploma courses may be obtained from the hospital. Monthly deductions are made for accommodation, pension fund, medical aid and income tax.

An annual bonus equivalent to one month's salary will be paid at the end of the month of your birthday.

A work week of 40 hours is divided into duty shifts in order to provide a 24-hour service. Night duty is done for one to three months per year. During periods of night duty, the nurse will only be on duty for four nights per week.

Province accused of 'taking all and giving nothing bitter hours

# Cape nurses

W/E Argus 4/5/85 (95)

# over longer hours

NURSES employed by the Cape Department of Hospital Services, already working longer hours than most other Cape Provincial Administration workers, are bitterly angry at orders that they must now work 12½-hour days.

The austerity measures announced by the Administrator, Mr Gene Louw, which affect all Province workers, come in addition to:

- Bonus cutbacks;
- Retraction of a promised half-day off a week;
- Removing lunch-hour time from working hours;
- Refusal of salary increases for the second year running.

And angry nurses accuse the Provincial Administration of "taking everything and giving nothing in return".

However, they say they are powerless to do anything. If they were to take action, they would risk losing their jobs, they say.

### Carry on working

"Only about 1 000 people would be prepared to stand up against this. The other 5 000 will carry on working," said one angry nurse.

"At present employment is frozen in hospital services and we won't easily get jobs somewhere else."

None of the nurses speaking to Weekend Argus was prepared to be named, for fear of retribution.

They feel they should not be included in regulations applying to public servants generally, but that they should be treated separately, as part of the medical profession.

"We are professional people who are highly qualified," said another nurse. "I don't consider myself on the same level as the tax clerk. We are an essential service which applies to all medical people."

Nurses say the extra 2½ hours a week they have been instructed to work would mean they would either have to cut back on their lunch-time or get home later, which would have a detrimental effect on their family lives.

Nursing was one of the essential cornerstones in society and "this move is going to make future nurses reluctant to join the profession," they said.

### Pay cutback

The feeling of many nurses is that they should get their qualifications — and then leave the CPA.

"Why should we stay — they offer us nothing and we can get private employment with normal working hours and better pay," an unhappy nurse said.

At present, nurses work a 48-hour week — compared to the average 40-hour week of many other professions. Shifts for most nurses are either from 7am to 7pm or the night shift from 7pm to 7am. Night shift hours will not be increased but extra pay normally received for night duty will be cut back.

"The nurses are furious about these extended hours and benefit cuts," said a nursing sister.

Many nurses say they cannot understand how this extra half an hour a day will put money in Government coffers.

"What must we do with the extra half an hour a day? We cannot re-wash a patient or re-make a bed and our shifts are so well organised that they overlap anyway."

Some nurses said they felt the Provincial Administration "just takes from us all the time but gives nothing in return".

Mr Robert Engela, Provincial Hospital Services public relations officer, said there is tremendous pressure on health services, as on other services.

"It is just one of those things no one can do anything about."

Province accused of 'taking all and giving nothing'

# Cape nurses bitter over longer hours

W/ ARGUS 4/5/85

95

4/5/85

By LINDA PIETERSEN  
Weekend Argus Reporter

NURSES employed by the Cape Department of Hospital Services, already working longer hours than most other Cape Provincial Administration workers, are bitterly angry at orders that they must now work 12½-hour days.

The austerity measures announced by the Administrator, Mr Gene Louw, which affect all Province workers, come in addition to:

- Bonus cutbacks;
- Retraction of a promised half-day off a week;
- Removing lunch-hour time from working hours;
- Refusal of salary increases for the second year running.

And angry nurses accuse the Provincial Administration of "taking everything and giving nothing in return".

However, they say they are powerless to do anything. If they were to take action, they would risk losing their jobs, they say.

## Carry on working

"Only about 1 000 people would be prepared to stand up against this. The other 5 000 will carry on working," said one angry nurse.

"At present employment is frozen in hospital services and we won't easily get jobs somewhere else."

None of the nurses speaking to Weekend Argus was prepared to be named, for fear of retribution.

They feel they should not be included in regulations applying to public servants generally, but that they should be treated separately, as part of the medical profession.

"We are professional people who are highly qualified," said another nurse. "I don't consider myself on the same level as the tax clerk. We are an essential service which applies to all medical people."

Nurses say the extra 2½ hours a week they have been instructed to work would mean they would either have to cut back on their lunch-time or get home later, which would have a detrimental effect on their family lives.

Nursing was one of the essential cornerstones in society and "this move is going to make future nurses reluctant to join the profession," they said.

## Pay cutback

The feeling of many nurses is that they should get their qualifications — and then leave the CPA.

"Why should we stay — they offer us nothing and we can get private employment with normal working hours and better pay," an unhappy nurse said.

At present, nurses work a 48-hour week — compared to the average 40-hour week of many other professions. Shifts for most nurses are either from 7am to 7pm or the night shift from 7pm to 7am. Night shift hours will not be increased but extra pay normally received for night duty will be cut back.

"The nurses are furious about these extended hours and benefit cuts," said a nursing sister.

Many nurses say they cannot understand how this extra half an hour a day will put money in Government coffers.

"What must we do with the extra half an hour a day? We cannot re-wash a patient or remake a bed and our shifts are so well organised that they overlap anyway."

Some nurses said they felt the Provincial Administration "just takes from us all the time but gives nothing in return".

Mr Robert Engela, Provincial Hospital Services public relations officer, said there is tremendous pressure on health services, as on other services.

"It is just one of those things no one can do anything about."

## Nurses warn cutbacks will affect patients

Argus Correspondent

PRETORIA. — South Africa's nursing associations have warned the Government that a reduction in nursing staff could adversely affect patient care.

And it was recommended that nursing posts be abolished "only with the greatest circumspection", the South African Nursing Association (Sana) publication, Nursing News, reports.

Although nursing posts were being decreased the patient load was increasing with the recession, a delegation from Sana and the SA Nursing Council told the late Minister of Health and Welfare, Dr C V van der Merwe.

Unemployment had led to a greater demand for public health services and health problems were increasing.

The reduction in public health facilities caused further problems with a higher rate of bed occupancy, shorter hospital stays and more seriously ill patients — all of which placed greater demands on nurses.

"A point can be reached when patient care is no longer safe," Nursing News warns.

Another factor lowering the morale of nursing staff was the extra two and a half hours a week they had to work.

# Hospital job freeze to cut costs

<sup>Star 9/5/65</sup>  
~~43~~ (95)  
A total of 95 of the 4 336 posts for medical practitioners at Transvaal provincial hospitals have been frozen and 3 050 out of 25 463 nursing posts put on ice as part of the hospital services' drive to save money.

And according to figures provided by Mr Daan Kirstein, (member of Executive Committee for Hospitals) yesterday, 135 out of 2 427 para-medical positions have been left unfilled as part of the plan.

This action has been slammed by the PFP provincial spokesman on health, Mrs Irene Menell, who said desegregation and rationalisation of the service would make better use of resources.

# Nurses' claims disputed

## But still anger at work hours

1/15/88  
11/5/88  
95

By LINDA PETERSEN  
Weekend Argus Reporter

one shift of 7am to 3:30pm. The matron draws up the roster to meet the demands of the wards, they said.

But, said a spokesman for Grote Schuur Hospital's head matron, it was the nurses' choice to work four days a week and get three full days off.

"It is easier on transport and better for those with families if they have three unbroken days off."

Nurses at one provincial hospital say they have been informed that instead of increasing night duty by half an hour a night, their weekly pay will be reduced.

**Frustration**

"There is a high level of frustration among the nursing sector and whereas we used to work overtime willingly we are now forced into longer hours," the nurses said.

"During the time a nurse is on duty, she is continually at the beck and call of both the patients and doctors," said the Red Cross children's hospital head matron, Miss D McWilliams.

"Nurses do seem concerned about the extra hours," she said.

Nurses who spoke to Weekend Argus said they considered themselves already overtaxed and thought they should be exempt from the 2½ hour weekly increase because they feel it is counter-productive and "shifts are so well organized, they overlap anyway."

Dr Louw stated emphatically that nurses have been told their night duty will not be affected by the working hour increases.

The Administrator said: "Last weekend's report created the impression of a cold and harsh attitude on the part of the administration, but nurses are close to our hearts. We recognize that they have made sacrifices and we have to reward them accordingly."

"Extended working hours are a sacrifice made by all employees as a contribution to the Government's promotion of productivity at a time when we are experiencing harsh economic setbacks and problems."

The Cape Director of Hospital Services and the Administrator have made things even worse.

But angry nurses objected to the official version of the amount of time they work and claim that "unofficially" they often work more than 46 hours a week.

In Weekend Argus last week CPA nurses expressed their anger over having to work an extra 2½ hours a week, like other provincial employees. They said this would mean they would have to work 12½ hours on some shifts.

But the Director of Hospital Services, Dr N S Louw, said this week nurses do not work longer than an eight-hour day. During the 7am-7pm shift, nurses "have four hours off which is determined by a duty roster", he said.

**Time off**

And the Administrator, Mr Gene Louw, said: "Nurses work exactly the same additional time as other provincial employees and they are given time off for working beyond 42½-hours a week."

But nurses who called Weekend Argus this week said although some shifts begin at 7am, nurses have to be on duty at least 15 minutes earlier to take over from the night staff and at the end of the day, handing over duties often takes up to half an hour.

They claimed also that incorporating lunch-times into the nurses' working week has been scrapped, whereas CPA administrative staff work a 42½ hour week, which includes their lunch-break.

Nurses at some hospitals said the four hours off arrangement mentioned by Dr Louw was scrapped for them some time ago and the working week at many hospitals consists of three shifts of 7am to 7pm and

HOUSE OF REPRESENTATIVES. — Freezing of nursing vacancies and creating no new posts while student nurses were being trained at great cost to the State defied logic, Mr Nicholas Isaacs (LP Bishop Lavis) said yesterday.

Speaking in the committee-stage debate on the Own Affairs Budget vote on Health Services and Welfare, he said these restrictive measures, taken because of the poor state of the economy, were exacerbating the "chronic shortage" of nurses in State hospitals and other institutions.

The work-load in these institutions was heavy and increased considerably at weekends, and greater reliance was having to be placed on student nurses.

The present situation was causing nurses who qualified

# Nurse freeze 'illogical'

*Cape Times  
11/5/85*

after their two-year training period to join the ranks of the unemployed, or to work as domestic servants or shop assistants until they were lucky enough to get a nursing post.

The position was not so bad for white

people and when their training was not put to use, it led to frustration.

● Mr Desmond Lockey said health was the cornerstone of the improvement strategy of the Labour Party for coloured people.

## House of Representatives

nurses, who had more chance of employment in private practice, but coloured nurses were becoming very frustrated, Mr Isaacs said.

Their communities were affected because their training elevated their ex-

pectations and when their training was not put to use, it led to frustration. Apartheid was rife in provincial hospitals, where coloured people sat all day waiting to be attended to and white doctors showed no concern for them.

"Let us take the NP policy to its full consequence and allow

people of the same race to look after their own people."

There was a chronic shortage of doctors in the coloured community and no facilities to provide them. The planned medical faculty at the University of the Western Cape should be expedited, he said.

Mr Luwellyn Landers (LP Mitchells Plain) said a general hospital was needed in Mitchells Plain to serve the Cape Flats and to provide a training hospital for the University of the Western Cape.

He welcomed the planned community health centre for Mitchells Plain, but said it was not enough.

The Cape Flats was served by clinics which mainly provided family planning and child-care facilities. There was not even an ambulance service. — Sapa



# KwaZulu nursing colleges plan

African Affairs Correspondent

ULUNDI—A Bill designed to establish nursing colleges in KwaZulu, equal in status to teacher training colleges, was read for the first time in the Legislative Assembly yesterday. NM 15/5/85

At present, the training of nurses in KwaZulu is carried out at hospital level at nursing schools. It was now proposed to establish nursing colleges attached to universities and falling under depart-

ments of nursing.

Nurses would be trained for at least four years and qualify to function as general nurses, community nurses, midwives and psychiatric nurses.

The South African Nursing Council would register successful candidates and maintain professional discipline.

The Department of Health and Welfare of KwaZulu was considering the establishment of at least three nursing colleges.

# Technologists upset over hours

Medical Reporter

MEDICAL technologists have joined nurses in their complaint against longer working hours.

In particular, the technologists are upset about "severe" cuts in compulsory overtime, according to a spokesman for the Society of Medical Laboratory Technologists.

The nursing and medical technologist professions are the only two in provincial hospitals which have to work a 42½-hour week apart from doctors, who work a 56-hour week but receive substantial allowances for this extra time.

According to the SMLT spokesman, medical technologists rendered a compulsory 24-hour service, often operated under extreme stress in emergencies and could not be pushed any harder.

Overtime worked by

technologists had been cut by a tenth but, once the longer working week and other voluntary concessions had been taken into account, they were taking home up to 30 per cent less in overtime pay.

The technologists' objections were based on the lack of consultation with them over the cuts and the failure to impose similar pay reductions or extensions of working hours on doctors.

Morale was low because promotional opportunities had been stifled and because certain doctors received large stand-by allowances without working the long hours of some of their medical colleagues, said the spokesman.

The SA Nursing Association last week said nurses, who already worked long hours, could not be compared to civil servants.

95

# Nurses graduate at Natalspruit

**By NHLANHLA MBATHA**  
FIFTY seven nurses were awarded diplomas and certificates at a graduation ceremony held at the Natalspruit Hospital's main hall on Wednesday afternoon.

The ceremony was attended by about 100 people. The Reverend A B Ntombela opened the ceremony and the superintendent of the hospital Dr A F Chemaly delivered the main speech.

Principal matron Miss S Oosthuisen presented certificates and diplomas while matron, Mrs M D Linda introduced students.

Certificates issued were for the following courses: midwifery, general nursing assistance.

Fifteen students graduated in mid-

wifery, 20 in general nursing and 10 became assistant nurses. Twelve students received certificates of enrolled nursing.

The highlight of the afternoon's event was the awarding of prizes to distinguished students. Student nurse Ms R T Gwakaza received a Hospital Board Award and a floating trophy. The South African Nursing Council (SANC) Award went to Francinah Kandulu. The College Award went to Ms S Matseke and the Matrons prize to Ms L M N Gxasheka.

The only senior male nursing assistant, Mr Shadrack Khumalo, received a standing ovation when called to receive his prize of being a motivation to other males.



Miss ROSEMARY GWABAZA and the trophy she won as best student. Holding the trophy is Sister Dikomelo Langa while other graduands are in the background. Miss Gwabaza is in the centre and also holding the trophy.



Mr SHADRACK KHUMALO is congratulated by Miss Francinah Khambule, Miss Zandile Tshawe, Miss Mildred Bhenau and other graduates in the background.



Miss PATRICIA TSHABALALA and Miss Zanele Matutu pose for our photographer. They were among 50 nurses who passed the nursing examinations.



Miss ZANDILE CHAUKE receives her certificate from Mrs S Oosthuisen during a graduation ceremony at Natalspruit Hospital. Behind is Sister Dikomelo Langa.



You'll always be recognised by your taste in Scotch.

**Johnnie Walker Red Label Scotch Whisky**

Born 1820, still going strong.

# Nurse's role: 'Staggering changes'

CAPE 27/5/85  
Times Staff Reporter 95

NURSES in South Africa are having to become increasingly involved in fields previously regarded as the exclusive domain of the doctor and pharmacist, says the Director of Hospital Services in the Cape, Dr N S Louw.

Speaking at a meeting of the Western Cape Branch of the Nurses' Association on Saturday evening, Dr Louw said the role of the nurse had undergone "staggering changes" over the past 30 years.

Improved training, increasing specialization and technological innovations were all assisting today's nurse to become proficient in a variety of spheres, he said.

Dr Louw appealed to nurses, however, not to underestimate the importance of fulfilling the patient's need for intimate personal communication.

Few doctors had the time nowadays to satisfy the patient's need for personal contact and this task would fall increasingly on the shoulders of the nursing profession.

CAPE TOWN (S) 30/5/85

# Hospital problems blamed on cuts

Medical Reporter

THE problems now being faced by nurses, medical technologists and paramedics at provincial hospitals were almost all related to the cut-back in government spending, the Cape Director of Hospital Services, Dr N S Louw, said this week.

He was reacting to complaints by all three groups relating to cuts in their annual bonuses, cuts in overtime pay and the extension of their working week from 40 to 42½ hours.

## Personnel costs

Dr Louw said: "It must be understood that all these problems relate to the government's decision to cut back on expenditure wherever possible. When the instruction came down to my department to cut back by eight percent on salary and associated personnel costs, we were left with few alternatives.

"We could have cut back on the income of these people, and that would have been an across-the-board reduction. That was done in the form of the one-third reduction in the annual bonuses, which resulted in a R500-million saving to government."

"One way of making these savings was to ask personnel to work an extra half-hour each working day and that was also done," Dr Louw said.

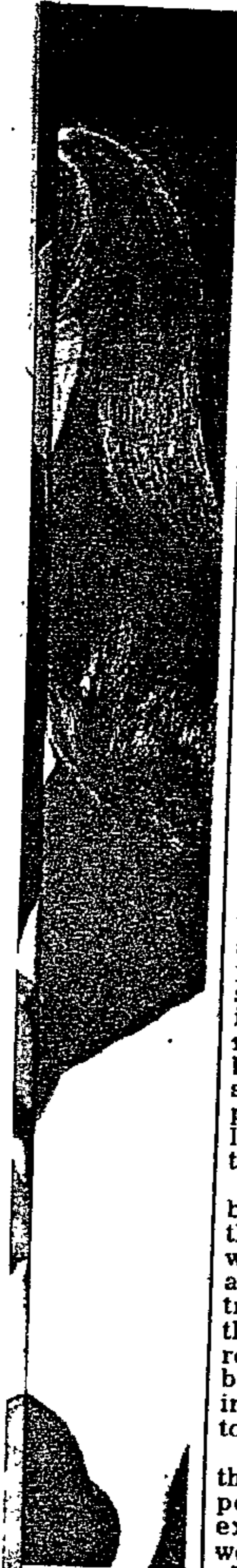
## 'Irritation'

Responding to complaints that an extra half-hour on the hospital staff working day had more "irritation than practical value", Dr Louw said this was "a very dangerous statement" as "I might have to take these people up and force them to work the time efficiently".

Doctors had a much longer working week than nurses or paramedics — a survey had shown they worked an average of 65 hours a week rather than the 56 expected of them.

## Paid overtime

Nurses working 12-hour night shifts



are Shaun van der Design

## Brion and onion

Mr Graham med with de- Tuesday night of his former island col- lided him in th- lifted from and has been r- from them ne- ast year. ste, a medic, le- der of a De-



# 'Patients suffering because of underpaid staff'

Medical Reporter

ARGUS 10/6/85 95

A CAPE Town nurse who feeds, clothes and buses her family on R640 a month, this week made a plea for financial relief on behalf of all South African nurses.

The woman, with 30 years experience in general and psychiatric nursing and midwifery, said patients were suffering because of overworked, underpaid staff.

She did not want to be named for fear of reprisal but came to The Argus to speak up for "all the nurses who are scared to come forward".

"I don't have the energy to take on a second job. Your patients, family, marriage and social life must suffer if you work 18 hours a day but I can understand why some people have to do it."

A single parent with three dependants and a bond on her home, she takes home R640 after deductions, with which she feeds, clothes and educates her children.

The family does not have a television set or car and excludes luxuries from daily life.

Given as a separate amount on her pay slip is "January 1984 allowance" which may be taken away at any time.

A run-down of her expenses are as follows:

Nett salary R643,55. Telephone (average) R27, electricity (average) R52, rates R54.

Groceries for the family of four, including dogfood and cigarettes ("something I will cling to") but excluding meat, cost R250. Meat comes to "between R75 and R100 extra".

"I do my grocery shopping once a month and then tell my children 'this is it, when it's finished, it's finished.'"

One clothing account for all the family's requirements, costs R35 a month.

This, allowing for adjustments and variations, leaves the family less than R100 for miscellaneous expenses.

"My father died overseas in May and I borrowed R2 000 from a friend to go home. Paying that back is R50 a month. I had to do it because I cannot save."

There are always other expenses to be met. "My daughter sometimes needs things for projects at school which I cannot deny her," she said.

"Matriculation examination fees must be paid this month (R35) and if someone goes to the doctor or the dog has to go to the vet, I won't make it."

Nevertheless job satisfaction for this nurse is 100 percent.

"I love my work but when the quality of your life drops so low, something drastic has to be done."

"Not only are the nurses suffering, patients are suffering through lack of equipment and facilities."

MSUS 10/6/85  
95 30/10/85

# 'Moonlighting' nurses warned

Medical Reporter LINDA GALLOWAY investigates the plight of nurses who say the rising cost of living has hit them hard — their last pay increase was in August 1983.

HUNDREDS of nurses in financial difficulties are "moonlighting" to make ends meet — and they are being warned that overworking could mean a risk to patients.

Some who have taken on part-time work after hours are working up to 18 hours a day.

A survey by the South African Nursing Association (Sana) found that about 10 percent of nurses — mainly those in provincial employ — had second jobs to support families where the breadwinner was unemployed.

Some nurses interviewed said they worked part-time in private hospitals — often on night shift after a day at work — and others had started their own private practices at home.

They said the rising cost of living had hit them hard — their last pay increase was in August 1983.

Provincial nurses were granted an "allowance" in January 1984 which was not included in their salaries and could be taken away at any time, said a Cape Town nurse.

Their working week was also extended by two hours for no extra pay and because of economic pressure hospitals had been forced to freeze vacant

posts, increasing their work load.

Sana warned nurses to guard against overworking to the point where they became a risk to their patients.

"By law the nurse is accountable for her actions. Negligence as a result of exhaustion after a long working day is therefore not accepted as an excuse when legal steps are taken against a nurse," Sana reports.

However, it was policy to be sympathetic to nurses who applied to take on second jobs if they could prove to be in genuine financial difficulty.

Chief nursing officer in the Western Cape Miss Martie Hattingh said she was not aware of any nurses in Cape Town who were doing two jobs.

She declined to comment on whether the nurses had been forced to do this through financial difficulties.

"The provincial authorities are very sympathetic to the nurses' plight and Sana is also fighting for them," she said.

"Unfortunately we are not the ones who supply the money so we cannot determine salaries."

Miss Hattingh said her door was always open to any nurse who had problems and each case would be treated on its

50% purchase sp.

∴ purchase to contain  $\geq 70\%$  of purchase

$x = \text{Purchase}$   $z = \text{harmit}$   
 $y = \text{Purchase Milk}$

$x + y \geq 80\%$   
 $x \geq 5\%$   
 $y \geq 0$   
 $x \geq 0$   
 $y \geq 0$

20000 by x  
20000 by z  
20000 by y





**Mrs S. J. van der Merwe, the chairman, at the SANA biennial meeting in East London with the association's executive regional manager, Mr R. Ackermann.**

**EAST LONDON —** Delegates of the various branches of the South African Nursing Association (SANA) yesterday unanimously rejected the establishment of a nursing trade union.

The decision was made at the association's biennial congress, hosted here by the Border branch. It followed an address by Professor R. V. Sutton on Wednesday, in which he advised against trade unionism for nurses.

# Sana rejects nursing trade union plan

The executive regional manager of SANA, Mr R. Ackermann, said after yesterday's meeting that a resolution had been passed that the retirement age of nurses

should be reduced from 65 to 60 years.

"We also resolved to approach employers about the safety of their staff, particularly for those at smaller hospit-

als and casualty departments."

Mr Ackermann said that often there were only one or two people on duty at smaller casualty departments at night.

He said another matter of urgency was the fact that there was no remuneration for nurses on stand-by duty.

He added that the SANA board would approach the authorities on these matters. — DDR.

3  
1  
e

# Nurses vote for black sisters at Jo'burg Hospital

By Joe Openshaw, Medical Reporter

95 Star 29/6/85  
White nurses at the Johannesburg Hospital this week voted in favour of black sisters being used to ease the critical shortage of nursing staff.

The vote was taken at a monthly staff meeting on Tuesday in the auditorium attended by the hospital superintendent, Dr Reginald Broekmann.

Dr Broekmann had told the meeting there were three alternatives to relieve what has become a grave threat to patients' care in the hospital.

## THREE ALTERNATIVES

- Close down more beds in the already more than half-empty hospital. There are 2 000 beds and bed occupancy at the moment is between 800 and 900.

- Use black nurses in the hospital.

- Increase salaries and give nurses overtime pay for the compulsory extra hours they were told to work when budget cuts were announced earlier this year.

He called for a vote on black nurses to gauge the feeling on the staff.

A small number of nurses voted against black nursing staff being used at the hospital and a few abstained.

The situation at the hospital at the moment is:

- Thirty nurses left at the end of last month.

- Ninety-one additional beds will be closed down at the end of the month.

- The Post Operative unit, providing 24-hour care after surgery, has been closed down.

# 'Crisis is shortage of nurses'

Star 3/7/85  
Medical Reporter

A shortage of qualified nursing sisters with cardio-thoracic expertise at the J G Strijdom Hospital is the main reason why the hospital's chief surgeon and head of the cardio-thoracic unit, Dr Rob Kinsley, has resigned.

"If there is a crisis at the J G Strijdom Hospital it is not because Dr Kinsley and his assistant on the cardio-thoracic unit, Dr Peter Coleson, are leaving, but the fact that highly-qualified nursing sisters are leaving for better-paid jobs in the private sector," Dr Anette van der Merwe, superintendent of the hospital, said today.

Dr van der Merwe said patients would not suffer because Dr Kinsley and Dr Coleson were leaving.

"Dr Kinsley has indicated his willingness to continue carrying out operations at this hospital and other leading private heart surgeons have also offered their services.

"There is no suggestion that low-cost by-pass surgery offered by the J G Strijdom Hospital will cease," she said.

Dr van der Merwe said Dr Coleson had not yet resigned but had indicated he would join Dr Kinsley and nursing sisters who have accepted posts at the Morningside Clinic.

# Nurses approach Minister over pay

95

Star 23/7/85

~~23~~

Pretoria Bureau

Nurses have approached the new Minister of National Health and Population Planning, Dr Willie van Niekerk, about their "inferior" salaries, which they say are causing a mass exodus from the profession.

Representatives of the South African Nursing Association (Sana) last week urged Dr van Niekerk to take action.

## ATTENTION

Special attention, they said, must be given to a follow-up investigation of specific nursing needs by the Commission for Administration.

Profession-related increases have been granted throughout the public service over the past couple of years and the commission is now concerned with maintaining salaries at market-related levels.

Sana said, however, that nurses' pay had not kept pace with other professions — a fact which

was causing walkouts and affecting personnel training.

"In certain services students are expected to carry responsibilities for which they have not yet been prepared. This leads to resignations of first year student nurses, shown by research to be as high as 60 percent.

Sana also pointed out that the number of black nurses being trained had remained static over the past decade.

"Projections show that just to maintain the current unsatisfactory ratio between black nurses and the black population, a further 23 000 black nurses must be trained in the next 15 years."

Another issue discussed was the privatisation of health services.

There has been dissatisfaction that private institutions are "poaching" staff from government health care facilities without having to contribute to their training.

## WOMAN



THE matrons who won the first Purity awards display the kettles they were given for their clinics. They are, Matrons Patricia Sepamla Zola; Theodora Mohapi, Tladi; Nomakorinte Pule, Senaoane; Nontombi Moumakwe, Meadowlands; Vuyelwa Mohudi, Chiawelo, and Regina Mathala of Diepkloof.

## Boost for black health

The first Purity awards for nursing staff at maternity clinics were handed out last week at Baragwanath Hospital. (95) Sowetan 30/7/85

The awards will be given to the clinics as a means of augmenting their inadequate facilities. It is hoped that they will encourage nurses to further their education, to improve conditions in the clinics, to help expectant mothers and also reward nurses for their hard work.

The winning nurse will receive R500 to further her education; she can only enter once. The clinic as a whole, will also receive a bonus prize. The prizes will be in the form of crockery, cutlery, pots and

pans and furniture.

The nurses will be judged on their ability to communicate with patients, neatness, academic interest, problem solving, clinical competency, ingenuity, insight, inventiveness and imagination.

A spokesman for the company that is giving out the prizes, said 40 percent of their sales came from the black market and it was an opportunity to give something back to the black community that prompted this award.

The clinics involved in the competition, are Zola, Tladi, Senaoane, Meadowlands, Chiawelo and Diepkloof.

# Hospitals need nurses 9 months after 'bungled'

## staff cuts'

By Joe Openshaw  
Medical Reporter

The Transvaal Department of Hospital Services is advertising for senior and qualified nursing staff because of the critical staff shortage and the alarming rain of experienced nurses from provincial hospitals to private clinics and nursing homes. The advertisements are for senior and qualified sisters at Johannesburg and H. F. Verwoerd hospitals.

The staff situation at these hospitals and the J. G. Strijdom Hospital has been deteriorating since the announcement by the province last November of stringent economy cuts, resulting in appointments and extra over-time. Appointments cannot keep up with the resignation of dismissed nurses.

The shortage of staff has led to the closing of wards at Johannesburg Hospital where fewer than half of the 2 000 beds are open.

"The province has now been forced to advertise for sisters less than nine months after re-trenchments and budget cuts and this is proof of the appalling way they have bungled their economy drive," Mrs Irene Menell, PFP spokesman on hospitals, said.

● Nurses at Johannesburg Hos-

pital work a 42½-hour week while private hospitals advertise a 40, even 30-hour week.

● Overtime and standby allowances have been abolished and this necessitates offering time off to compensate for extra hours worked — something difficult to implement due to lack of staff. These allowances are available in the private sector where attractive conditions are luring nurses away from public

hospitals.

● Delays in processing new appointments through head office and the rigid adherence to staff establishment figures have contributed to the decline in applications.

● Resignations of experienced sisters which threaten units such as intensive care and which caused the resignation of the J G Strijdom's chief surgeon, Dr Rob Kinsley, and the possible

closure of his crack cardio-thoracic unit.

Dr Reg Broekmann, superintendent of Johannesburg Hospital, said that 40 senior and qualified sisters were needed at his hospital.

"There have been virtually no applications to fill these vacant posts and I am not very optimistic that we will get much of a response to the advertisements," said Dr Broekmann.

Professor M C van Huissteen, president of the South African Nursing Association, said she was aware of the tremendous outflow from Transvaal hospitals to the private clinics and nursing homes, especially in Pretoria and Johannesburg.

"We have asked Transvaal Hospital Services for statistics to assess the seriousness of the situation but are told repeatedly that figures are not available."

# Jane first again

# WOMAN

SOWETAN 17/8/85 95

The appointment of Mrs Jane Ramaboa as chief matron of Baragwanath Hospital was another first for her.

She was the first black matron when she was appointed in 1974 and is now the first ever black chief matron at the hospital.

Mrs Ramaboa, principal matron since 1982, joined the nursing profession in 1960. She began her training at a Pretoria Hospital, where she qualified to be a nursing sister.

"I then went to Maritzburg where I did midwifery and came to Baragwanath," she says. A self-confessed workaholic, Mrs Ramaboa, driven by the desire to continue her studies, did a course in 1965 and four years later was promoted to senior sister.

"I felt this was not enough, so I enrolled for a course in Intensive Care Nursing Science, which saw me promoted to matron in 1974, the first black matron at Baragwanath.

"The same year I went to the University of the North (Turfloop)

where I obtained a diploma in nursing. "I came back and worked in the clinical department as matron and was promoted to principal matron in 1982."

The following year she enrolled at Wits University where she did Nursing Administration. She is presently studying through Unisa for a BA Cur degree.

How does she feel about the appointment. "I am delighted, and this is a challenge, and also a challenge for all black people. And I hope to do my best."



CHIEF MATRON: Jane Ramaboa.

# Black nurses start work at white hospital

95  
STAR 14/8/85

By Joe Openshaw, Medical Reporter

Black nurses from Baragwanath Hospital with training in intensive care and theatre are being used at Johannesburg Hospital to relieve the critical staff shortage and keep the high-care sections open.

Sixteen sisters from Baragwanath will start work at Johannesburg Hospital today because there had been no response from whites to advertisements for senior and qualified personnel, superintendent Dr Reg Broekmann has confirmed.

"We have been using black sisters on an ad hoc basis for some time now," he added.

The PFP provincial spokesman on health, Mrs Irene Menell, said the province was "doing the right thing, but in the worst possible way". It was vital that hospitals be desegregated, but not at the expense of black patients.

Baragwanath nurses complain that sisters are being drawn from their hospital (bed occupancy more than 100 percent) to nurse whites at Johannesburg Hospital (bed occupancy below half). They say black nurses are being asked to look after whites to the detriment of black patients.

## 'BLACK PATIENTS NOT ADMITTED'

"We're good enough to nurse white patients, but black patients are not admitted to Johannesburg Hospital," they said.

Johannesburg Hospital needs 40 senior and qualified sisters — but the only applications came from unemployed black sisters, said Mr Daan Kirstein, MEC for Hospital Services.

"They did not have the training for the vacant posts, so we employed them at Baragwanath," he said. "We were then able to release sisters from Baragwanath who had the skills urgently required at Johannesburg Hospital."

He added that no one of colour had been refused treatment in the high-tech departments of Johannesburg or J G Strijdom hospitals.

Black nurses at Baragwanath claim the sisters invited to work at Johannesburg Hospital were afraid they would be fired if they refused.

Mr Kirstein said: "They were free to refuse if they had qualms about the welfare of their black patients. They would not have been fired."



# BLACK SISTERS nurse WHITES

Weekend Argus  
Correspondent

JOHANNESBURG. — Black nurses from Baragwanath Hospital with intensive care and theatre training are being used at the Johannesburg Hospital to relieve the critical staff shortage and keep high-care sections open.

Sixteen black sisters from Baragwanath Hospital started work at the Johannesburg Hospital last week because there was no response from whites to advertisements for senior and qualified nursing sisters, said Dr Reg Broekmann, superintendent of Johannesburg Hospital.

W/E M.W. 17/8/85  
"We have been using black sisters on an ad hoc basis for some time now," he said

The Transvaal Hospital Services advertised the posts because of the critical staff shortage and the alarming drain of experienced nurses from the Johannesburg and J G Strydom hospitals in Johannesburg and the H F Verwoerd Hospital, in Pretoria, to private clinics and nursing homes.

Nurses at Baragwanath complain that skilled and experienced sisters are being drawn from their hospital where bed occupancy is over 100 percent, to nurse white patients in the Johannesburg Hospital were

bed occupancy is below 50 percent.

"We are good enough to nurse white patients but black patients are not admitted to the Johannesburg Hospital," said a deputation of nurses who called on The Star, sister paper of The Argus.

Johannesburg Hospital needs 40 senior and qualified sisters and the only applications came from unemployed black sisters, said Mr Daan Kirstein, the MEC for Hospital Services.

"These black sisters did not have the specialist training for the particular vacant posts at the Johannesburg Hospital so we employed them at Barag-

wanath in jobs for which they were qualified

Mr Kirstein denied there was a shortage of black nurses. He said there were enough black, coloured and Indian nurses in the Transvaal.

He said no one of colour had been refused treatment at the Johannesburg or J G Strijdom hospitals and he referred particularly to kidney transplant and heart by-pass surgery.

"The black sisters who agreed to work at the Johannesburg Hospital chose to do so and were free to refuse if they had qualms about the welfare of their black patients," Mr Kirstein said.

# TRAGEDY

20/8/85 SOWETIAN  
**NURSING** students at Kala-  
 fong Hospital, near Pretoria,  
 yesterday claimed one of their  
 colleagues died at the

## Young nurse's death stirs hospital row

weekend after they had unsuccessfully tried to contact the person in charge of the nurses' home for four hours.

The students, who refused to be identified for fear of victimisation, said the main gate leading to the nurses' home was always locked and the nurses could only contact the person in charge through the intercom.

### Desperate

"The woman either ignored our desperate calls for help or was fast asleep. It was only after we had contacted our colleagues who were working at the theatre that we finally took the sick nurse to the casualty ward, where she died a short while later," one of the students said.

Dr D van Rooyen, superintendent of Kala-fong Hospital, said he could not comment but promised to investigate.

### mands

after the meeting that the NUM made revised demands. He would not give details of these demands.

"We are calling on our members to consider the proposals and another meeting will take place soon," he said. He speculated that the meeting might take place tomorrow.

NUM's spokesman said: "We approached

By **MONK NKOMO**

The dead woman is Miss Pinkie Leshile (20), from Pietersburg. She had heart problems, they said.

The student nurses also claimed that Miss Leshile was discharged from the hospital before she was fully recovered. They blamed a senior official at the hospital and the doctors treating her.

They called on the South African Nursing Council and the South African Medical and Dental Council to take

To Page 3

# SPRIN SPECIAL

### DINING ROOM SUITES:

8-PIECE DRAKENSBERG Was R1599  
 8-PIECE TANYA..... Was R1299

### BEDROOM SUITES:

3-PIECE SANDY..... Was R799 NOW R 599

### Hi-Fis:

SUPERSONIC 242 MG..... Was R999 NOW R 449  
 BLAUPUNKT KC 70  
 Series 30..... Was R1299 NOW R1049

### KITCHEN:

42in. SINK UNIT Yellow ..... Was R349 NOW R 279  
 28in. CORNER UNIT White...Was R399 NOW R 299

### DISPLAY CABINET;

ELDORADO DISPLAY  
 CABINET ..... Was R379 NOW R 249

### TV:

61 cm TELE MONO BATT/MAIN B & W,  
**SPECIAL OFFER!**  
 with FREE battery and aerial  
 51 cm SONY Colour TV..... Was R1599 NOW R1489

### LOUNGE SUITE:

From Page 1  
 20/8/85  
**Treatment**

steps against the official and the doctor. 95

"It is clear that the official was not concerned with Miss Leshile's health, but her training. After all, her period of training could have been extended after her treatment. We also want to know why the doctor, did not take the matter up with the superintendent," one said. SOWETIAN

# New nursing diploma available from 1986

22/8/85 Medical Reporter

A new four-year diploma course for nurses to be included in basic training and offered by eight nursing colleges in the Transvaal, in conjunction with the universities, will be available to matriculants next year.

The new diploma in nursing and midwifery will be available from January to all races and provide more comprehensive training.

The diploma course will replace the three and three-and-a-half year courses previously offered in the Transvaal.

## 95 STAR CLOSER CO-OPERATION

"This is a dream come true. There has always been a need for closer co-operation between nursing and post-secondary education systems," Mrs H F M van Wyk, director of Nursing Services in the Transvaal, said in a statement last night.

The universities will monitor and evaluate academic standards by serving on the committees of nursing colleges and by moderating in examinations.

Each nursing college has developed its own curriculum for the course which will run on a semester basis - one semester being approximately six months and including six weeks at college and the remaining period in wards, clinics or institutions.

# 'Negligence' - Kalafong nurses up in arms

26/8/85

Sowetan

95

ANGRY nurses at the Kalafong Hospital near Atterdidgeville have called for an immediate investigation into the death of their colleague who, they say, died because of "gross negligence" by the hospital authorities.

Miss Pinkie Leshile (21), a student nurse, died last weekend after her colleagues had unsuccessfully tried to contact the person in charge of the nurses' home for four hours, it has been claimed.

She was buried in Pietersburg on Saturday.

Several nurses lashed out at the hospital authorities for trying to "cover up" the case and alleged a white matron ordered a doctor to discharge Miss Leshile before she was fully re-

covered. The SOWETAN was also told that doctors could not diagnose her illness.

Nurses also claim that the authorities had refused to give them a bus to ferry them to the funeral. They later collected and hired two private buses.

The hospital superintendent, Dr D van Rooy, declined to comment.

"I am not prepared to discuss this issue with you because you have already printed false information in your newspaper. I am going to bring this to the atten-

tion of your editor."

Student nurses this weekend said they had been warned by the authorities not to speak to the Press.

"We want an immediate resignation and action to be taken against the culprits," the nurses said.

# 'Co-operate in tuition of nurses'

Mercury Reporter

THE private and public sectors should co-operate to a greater degree in the training of hospital staff, particularly in the basic tuition of nurses and hospital administrators, says Minister of Health Willie van Niekerk.

Speaking at the opening of the new Westville Hospital at the weekend, Dr van Niekerk said pop-

ulation development was one of the most important health priorities in South Africa and warned that the country could not support more than 80 million people.

'We just do not have enough water for more people. Food is not the problem.'

The figure being aimed at is 2,1 children per family, he said, adding that his department was con-

centrating on helping people in the rural areas 'help themselves'.

Natal's MEC in charge of hospitals, Dr Fred Clarke, also speaking at the opening, said the situation in the public sector was 'not as rosy' as in the private sector.

'The economic problems have seriously affected province and the already critical shortage

of beds, posts and equipment has been affected by the escalation of the population in the greater Durban area,' he said.

Although he was delighted at being given the go-ahead for the new hospital in Cato Manor and extensive refurbishment of King Edward, it could take a decade before the bed situation improved, he said, adding that it was a 'serious problem'.

with Department

# The chief aim is progress <sup>STAR</sup> says this dedicated matron <sup>95</sup>

26/8/85

**By Kathy O'Reilly**  
Without knowledge you can't hope to achieve anything, says Jane Ramaboa — who recently became the Transvaal's first black chief matron.

Apart from dedicating a quarter of a century to her career, chief matron Ramaboa has taken every opportunity to further her nursing qualifications.

"When I started out, nursing and teaching were the main professions open to black women; going to university was really a privilege. I chose nursing for the sheer love of it," explains matron Ramaboa.

After completing her basic training in 1960, she studied midwifery in Pietermaritzburg, then moved to Baragwanath hospital where she's been ever since.

Courses, diplomas and promotions followed as matron Ramaboa climbed quickly up the nursing ladder — but she greets her latest success with a mixture of shyness and disbelief.

"To be frank, I didn't expect this appointment, but it will be a great challenge," she says. "The scope of adminis-



**JANE RAMABOA:** "I chose nursing for the sheer love of it."

tration in nursing is now wider than ever before."

As a chief matron — specialising in administration and education — matron Ramaboa's responsibilities are awesome.

She is in charge of about 300 staff members in various sections of Baragwanath hospital, including clinical teach-

ing, St John's eye hospital, the nurses' residence, the intensive-care unit, resuscitation and the operating theatre.

How does she cope? "It's a matter of planning," says the matron calmly. "I meet the people in charge of the different sections every morning to work out our strategies for the day ahead and discuss the

previous day's problems."

Although promotions are made on a neutral, unbiased basis, professional jealousy is encountered. "I just don't let it get to me," says matron Ramaboa. "I try to live up to the expectations of those who have chosen me."

A modern-day trend that bothers her is that "today's children don't take things as seriously as we did". To counteract this among nursing staff, the matron organises regular motivational talks, often inviting outside speakers to share their experiences and points of view.

Chief matron Ramaboa doesn't regret choosing nursing 25 years ago. Currently studying towards her BA Cur (Nursing) through the University of South Africa, she believes it is a career where the sky's the limit.

"To me, nursing has all the opportunities you can imagine," she says enthusiastically. "I recommend it highly — but you've got to take it seriously and make a continued effort to update your existing knowledge."

# 'No intensive care bed' for dying nurse

Pretoria Correspondent

A 20-year-old nurse died of meningitis on Monday after being refused admission to the H.F. Verwoerd Hospital here on the grounds that there were no beds available in its intensive care unit (ICU).

Miss Judy MacNamara, a staff nurse employed at the Arcadia Nursing Home, was diagnosed as having meningococcal meningitis and septicaemia — a very acute and contagious form of the disease — on Friday.

Repeated attempts by doctors to have her transferred from the nursing home to hospital's ICU failed. Hospital officials said they did not have a bed available and not enough nursing staff to accommodate her.

Miss MacNamara died at 2.30 pm on

Monday.

Dr Annette Theron, an assistant superintendent at the hospital, said officials "looked for a bed in the ICU, but there had not been one available at that moment."

"When we phoned back with the news that there was a bed, the patient had already died," she said.

## STAFF "STOLEN"

However, an informed source claimed hospital officials only undertook to accommodate Miss MacNamara after they had been pressured by one of the directors of the Arcadia Nursing Home.

The source alleged an official at the hospital had remarked they could not help with her transfer from the nursing home because "private nursing homes had stolen all their staff".

Dr E van Wyngaard, superintendent of

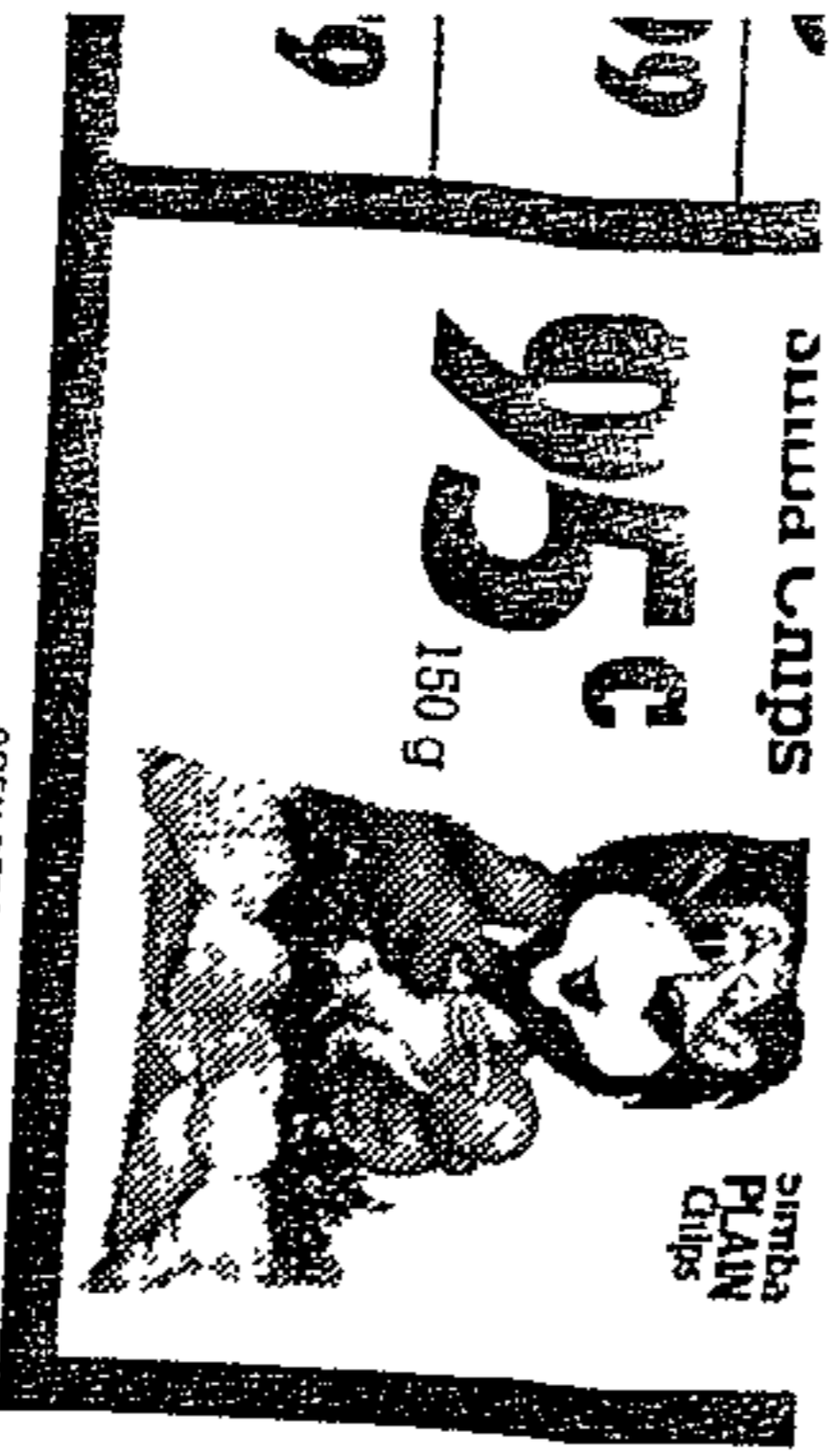
the hospital, confirmed today he had received a telephone call from one of the nursing home's directors.

"I then consulted with my head matron, who organised for some of her matrons to care for the patient in a side room," he said.

According to Dr van Wyngaard, the hospital's ICU was "overflowing" during the weekend and on Monday, and there had been no beds available.

Dr van Wyngaard said though the unit could take seven patients, only four beds were occupied because they had a shortage in intensive care nursing staff.

A doctor involved in the case who asked about a bed was told by a hospital employee only two beds were occupied in the unit.



GREY PERSPECTIVES OK41748/201067

On any of our fresh food, rest assured, it has not been casually given. When it has not been casually given, Not only do we buy from the best suppliers, we hire the strictest quality controllers. When, and only when they're satisfied, do they award the OK Tick of Approval.

AVAILABLE ONLY IN OUR WITWATERSRAND, VAAL & PRETORIA BRANCHES.



THE cheque is presented to the trustees of the fund-raising committee. From left to right: Mrs Hilgarde van Eyssen, Miss Joy Simpson, Mrs Mary Jwaai and Mrs Lali Mabuto (organiser of the fund-raising committee).

Mrs Rose Ngobese ... lost her memory after a stroke.

Mrs Constance Brown ... twice injured on duty.

# The forgotten angels

By SIZAKELE KOOMA

The Florence Nightingales of our society spend their lives on their feet nursing the sick and the dying, but what happens to them when they get old and can no longer continue their work?

The community they were nursing forgets about them — and they retire to a life of struggle and pain — the very things they have been

fighting all their lives.

Mrs Constance Brown is a cripple and a diabetic. She was a midwife at the Jabavu Family Health Clinic in Soweto. She started nursing in 1959 and retired in 1976 when she was injured for the second time on duty, her leg and collar bone were fractured.

Mrs Brown says she tripped on the steps

while trying to disentangle herself from a group of patients who had come for immunisation. She was again injured when she tried to open a high window and slipped on a wet floor.

She is the sole breadwinner — through her pension — in her family. She lives with her two children, Trevor (20) and Faith-Maria (18).

Mrs Brown says she

cannot do anything for herself and when the children are at school she has problems. "I am helpless, I cannot do household chores and cannot afford a helper. I sometimes go without meals for the whole day and skip taking medicines because I cannot move from this bed," she said.

She says that the idea of building an old age home for nurses could be a solution to many of the problems they have.

"When we are together, living in the same building, it could be much easier and convenient to get treat-

ment. "We go for treatment irregularly because sometimes we do not have transport or we do not have the fare.

"At old age homes, people are kept busy by doing handcrafts and get recreational exercises that keep them healthy, rather than staying at home and being a burden to their children. Being at such a place could also keep us updated on the current issues in the nursing field," she said.

Mrs Rose Ngobese has long retired from the nursing profession. She is recovering from a

stroke which affected her memory. She does not remember her age or the number of years she spent in the nursing field.

She worked at the Moroka Clinic as a midwife. Her nephew says it would be better if she went to an old age home as she sometimes becomes ill and cannot get immediate treatment.

Mrs Maggie Nkwe, chairman of a committee trying to raise funds for a home says the idea of building an old age home for nurses was mooted late last year.

She says they realised that it was only through their initiative and active involvement in the scheme that something could be done for their retired colleagues who were neglected.

"The only time we remember them is when we throw a Christmas party for them once a year. These people are the pioneers of our profession. They deserve all the attention and comfort, and if there are people who can provide that for them, let them have it," she said.

A sum of R1 055 has been raised towards the scheme, and the cheque was presented to the trustees on Monday. A site has been provided for the project which will start as soon as enough funds have been raised.

95 Sowetan 6/9/85



# Paramedics and nurses to get R42-m pay boost

By Joe Openshaw, Medical Reporter

Improved service dispensations for nurses and paramedics amounting to R42 million a year will be introduced from the beginning of next month.

About 65 000 staff members — 33 000 auxiliary nurses and paramedics and 32 000 professional nurses and paramedics — will share in the improvements which will take the form of interim non-pensionable allowances to augment the salaries of staff at certain levels.

Except for an adjustment to bring the starting salaries of student therapists on a par with those of student staff, this improvement does not bring about change in the salary scales.

Between October 1 and March 31 next year the cost will be about R21 million. In a full year the cost will be R42 million.

The improvements will be officially announced in Pretoria today by the Minister of Health, Dr Willie van Niekerk, who said in a preliminary statement that the improvements are a "modest attempt at best, with the limited available funds, at bringing partial relief by way of interim measures".

## Benefits differ by race

Black nurses and paramedics will benefit most from the interim non-pensionable allowances to boost salaries announced by the Minister of Health, Dr Willie van Niekerk, in Pretoria today.

The Minister said at a Press conference the salaries of black nurses would improve by 25 percent and those of white nurses by between 9,3 and 11 percent.

Dr van Niekerk said it was to be regretted there was not enough money to have achieved parity in salaries and to have closed the gap between black staff and white, Indian and coloured staff.

He said as soon as additional money was available parity and the increase of black salaries to the level of other groups would receive top priority.

High priority is also being given to a fully fledged structural revision of salaries for all as soon as the economy of the country improves.

"Student nurses and trainees will not get the interim allowances because they receive practical training and do not render a service," he said.

kerk, who said in a preliminary statement that the improvements are a "modest attempt at best, with the limited available funds, at bringing partial relief by way of interim measures".

The improvements are seen only as an interim measure to bring about a degree of relief and will not place staff concerned in a competitive position with the private sector.

The allowance professional nurses and paramedics will receive is higher than for auxiliary nursing staff and paramedics.

When certain salary points in the salary structures are reached, the allowances will begin to reduce until they fall away on reaching specific salary notches.

The improvement consists of the following allowances:

● For nursing assistants, staff nurses, therapy assistants and auxiliary diagnostic radiographers — an allowance of R480 a year. The allowance is reduced to R240 a year at the salary notch of R13 170 and falls away at the notch of R13 740.

For registered nurses, occupational therapists, physiotherapists, radiographers, speech therapists, oral hygienists and dental therapists — an allowance of R840 a year. This is reduced to R555 at the salary notch of R13 740 and to R270 a year at the notch of R14 310 and falls away at the notch of R14 880.

### TRAINEES

Staff in the student and trainee ranks will not receive this allowance but are assured their dispensation still retains high priority for a fully fledged structural revision which will be carried out as soon as funds can be made available.

95  
STAR  
10/9/85

LUXEMBOURG  
al Congress  
European  
yesterday  
persuade

imp  
AN

and  
Government  
faced  
European  
Mr Bot  
country's  
statement  
South Africa  
greatly  
port and  
South Africa  
Without  
fairs had  
mental  
ings with  
Mr Bot  
week's  
council's

lan, un

was  
one the  
our realised  
uth can life  
were a fa  
He said  
he  
st of  
ally  
val. ca for  
r of  
nina-gretted  
rnu-  
such  
about six  
dif-  
Riekerk  
board  
scene by  
e Act  
the apartheid  
attributed  
peaceful  
unsh-

TIME  
on sn

W  
o  
T  
k  
a  
c  
s  
l  
e  
o  
u  
b  
s  
l  
r  
t  
y  
i  
k

CADK Tink 11/9/85

# More money for some <sup>95</sup> nurses, aids

PRETORIA. — The take-home pay of about 65 000 nurses and paramedics in the lower grades will increase by between seven and 25 percent, the Minister of National Health and Population Development, Dr Willie van Niekerk, said in Pretoria yesterday.

Announcing details at a press conference, he said this was not a salary structure adjustment and that the increases were in the form of interim non-pensionable allowances to augment salaries at certain levels.

If the salary structure had been adjusted at this stage, only about 70 percent of the funds voted for the improvement would have been available for an actual increase in the "in-pocket" position of those concerned, Dr Van Niekerk said.

The Minister for Administration and Economic Advisory Services, Mr Eli Louw, announced on Monday that the benefits would come from an amount of R125 million the government had set aside in March this year "for a very modest maintenance of a small group of occupational classes where there is a high need".

Dr Van Niekerk said yesterday about 33 000 auxiliary nursing staff and paramedics and

32 000 professional nurses and paramedics would share in the improvement.

He said the government was aware of the serious deficiencies in the nursing profession's salary structures and that adjustments were regarded as a top priority. They would come into effect "as soon as funds are available and the economic situation improves".

A breakdown of the increases is as follows:

- Newly-qualified black nursing assistants — 25 percent.

- Newly-qualified coloured and Indian nursing assistants — 17 percent.

- Newly-qualified white nursing assistants — 15,9 percent.

- Newly-qualified black enrolled nurses — 8,7 percent.

- Newly-qualified white, coloured and Indian enrolled nurses — 7,1 percent.

- Newly-qualified black registered nurses — 10,9 percent.

- Newly-qualified white coloured and Indian registered nurses — 10 percent.

- Black registered nurses — nine percent.

- White coloured and Indian registered nurses — eight percent.

- Sapa

increases widen gap, says AZAPO

# NURSE PAY SCALERS ATTACKED

16/9/85

Sd W/O A  
195

THE Azanian People's Organisation has called for the total elimination of the differential salary structure for nurses of all racial groups.

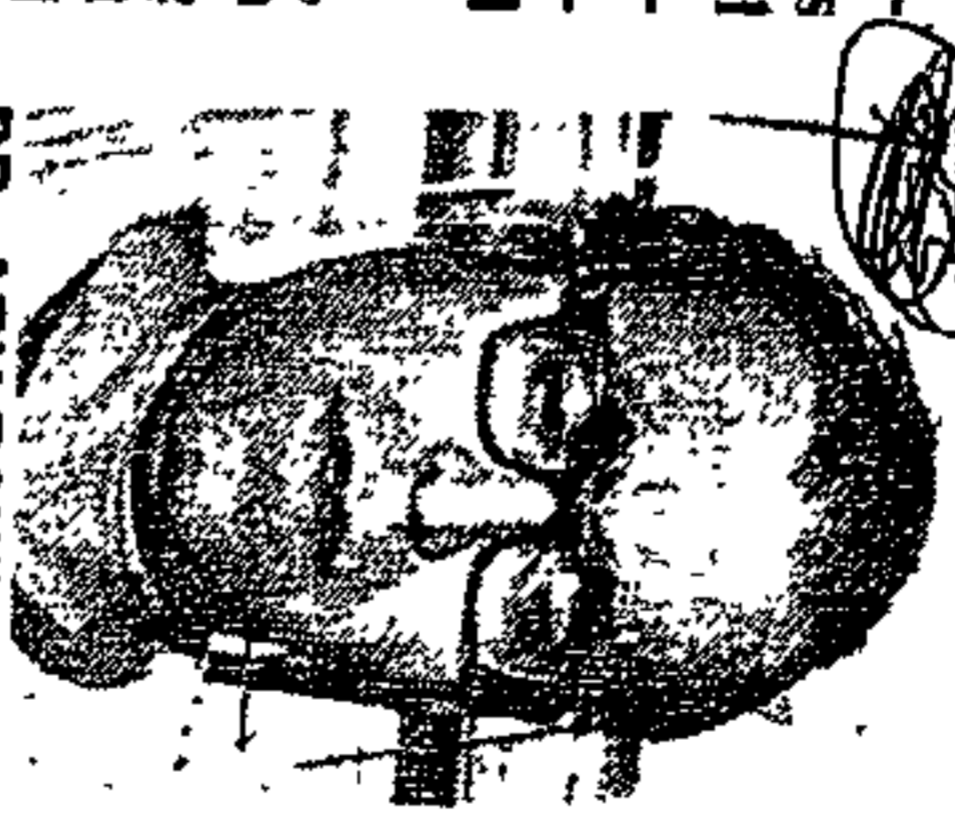
Dr Abu-Baker Asvat, head of Azapo's health secretariat, was reacting to an announcement last week by the Minister of Health, Dr Willie van Niekerk, that black nurses and paramedics would benefit most from interim non-pensionable allowances.

The Minister said black nurses' pay would improve by 25 percent and those of white nurses between 9,3 and 11 percent.

## Money

He said he regretted there was not enough money to close the gap between black staff and white, Indian and coloured workers.

He said as soon as more money was available, increasing black salaries to the level of other groups would receive priority.



DR ABU-BAKER ASVAT, Increase is de-celving

He said student nurses and trainees would not get the interim allowances because they received practical training and did not render a service. Dr Asvat told The SOWETAN the latest increases showed that apartheid is alive and well.

He said although a feeble attempt has been made to narrow the gap, the percentage increase was deceiving because it widened the gap instead of narrowing it.

## Blow

"What we should have is a total elimination of the differential salary structure, and replaced by one that is applicable to all."

"Furthermore, student nurses have been dealt a severe blow. I disagree with the Minister that they do not render a service, because they only receive practical training. "Without them, our hospitals would be incapable of operating," he said.

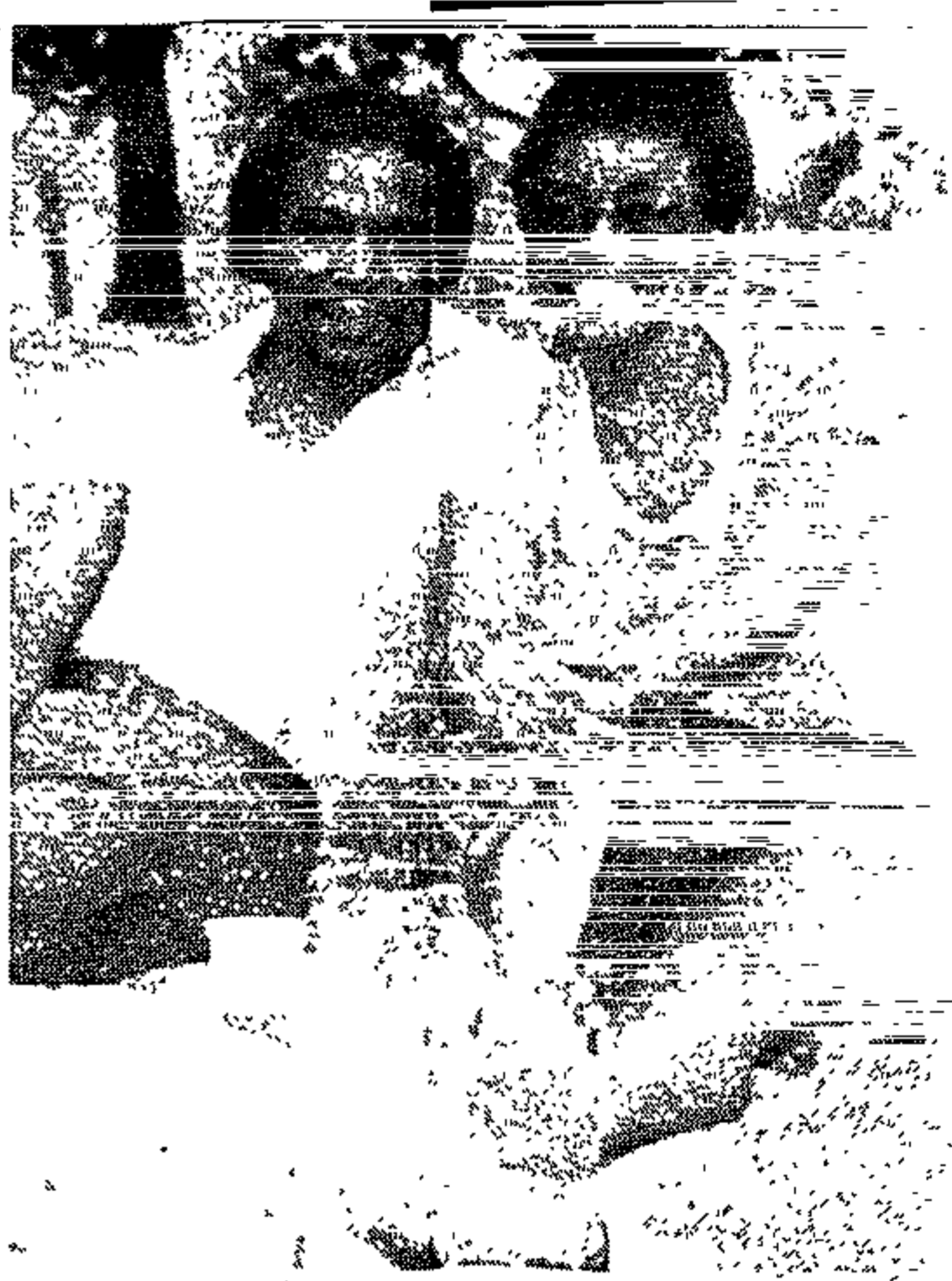
Husband shoots wife, son in suicide bid

# NURSE KILLED

23/9/85

95

Sowetan 23/9/85



VUYISWA with husband, Sam Milligan, America. He killed her and her son, and injured her daughter and himself.

SOWETAN Reporter

**MRS MARGARET Vuyiswa Milligan (38) and her son, Nkosana Ncube (13), were shot dead by her American husband on Saturday — three years after she left South Africa to study in the United States.**

Mrs Milligan's husband, Sam, and daughter, Thandeka (16), are in a critical condition at a hospital in Fort Wayne, Indiana.

Mrs Milligan is the sister of the news editor of The SOWETAN, Mr Thami Mazwai.

Just hours before her death, Mrs Milligan phoned her family in Mofolo North, Soweto, to tell them she had passed her examinations and now had a diploma in psychiatric nursing.

She was excited as she spoke to her young brother, Mr Veli Mazwai.

When Thami heard the news, he phoned to congratulate her, but found Mr Milligan.

"He said she was out, and we spoke for a while," Mr Mazwai said yesterday. "There was absolutely no indication that anything was wrong."

## Burial

Mrs Milligan was nursing at a training hospital while getting tuition from a university. Her husband is a foreman in a motor assembly plant.

By last night the family were still trying to work out burial arrangements.

The story that the family have been able to piece together is that Mr Milligan went to the flat where his wife and her children by a former marriage were living and shot the children and his wife before turning the gun on himself.

The Milligans were separated for a while.

Mrs Milligan left South Africa in 1982 on a scholarship. She was joined by her son in 1983, the same year that she married Mr Sam Milligan. Thandeka followed her mother to the US last year.

# Allowances <sup>STAIR</sup> 'will have little effect'

95  
Medical Reporter

The recent allowances granted to nurses and paramedics will have little effect on the ever-increasing flow of highly trained nurses leaving the public sector, says an editorial in this month's *Nursing*, the official newspaper of the South African Nursing Association.

The allowances announced last month by the Minister of Health, Mr Willie van Niekerk, can only be seen as "emergency measures", says *Nursing*.

The editorial says the allowances have not prevented many nurses from leaving the profession altogether.

## NOTHING

Although people in some categories will now receive about 25 percent more a month it would do nothing to alleviate the burden for many nurses who have had to take on extra jobs.

"For many years now one of SANA's top priorities was to see that parity in salaries (between white and black nurses) be implemented. It was therefore, once again, a disappointment to see this could not be done this year," said the newspaper.

21/10/85

# ZOOBEE DATED

# BARAGWATH

SEVEN hundred workers were arrested yesterday at Baragwanath Hospital as the strike there entered its second day. Medical services were on the verge of collapsing as all the student nurses joined the strike.

The 718 workers, 574 women and 144 men, were arrested for staging a strike demanding a wage increase and improved working conditions.

Sapa reports that they have been charged with holding an illegal gathering, alternatively staging an illegal strike. They will probably appear in court on Monday pending the decision of the senior State prosecutor, according to Brig Jan Coetzee, police divisional commissioner for Soweto.

## Police

When the workers arrived at the hospital yesterday morning they grouped at the Harriet Shezi Hall where they started singing and ululating. Police arrested a group of about 30 but others then offered themselves for arrest. They waited for the police vehicles outside the hall and more than three loads were taken before midday.

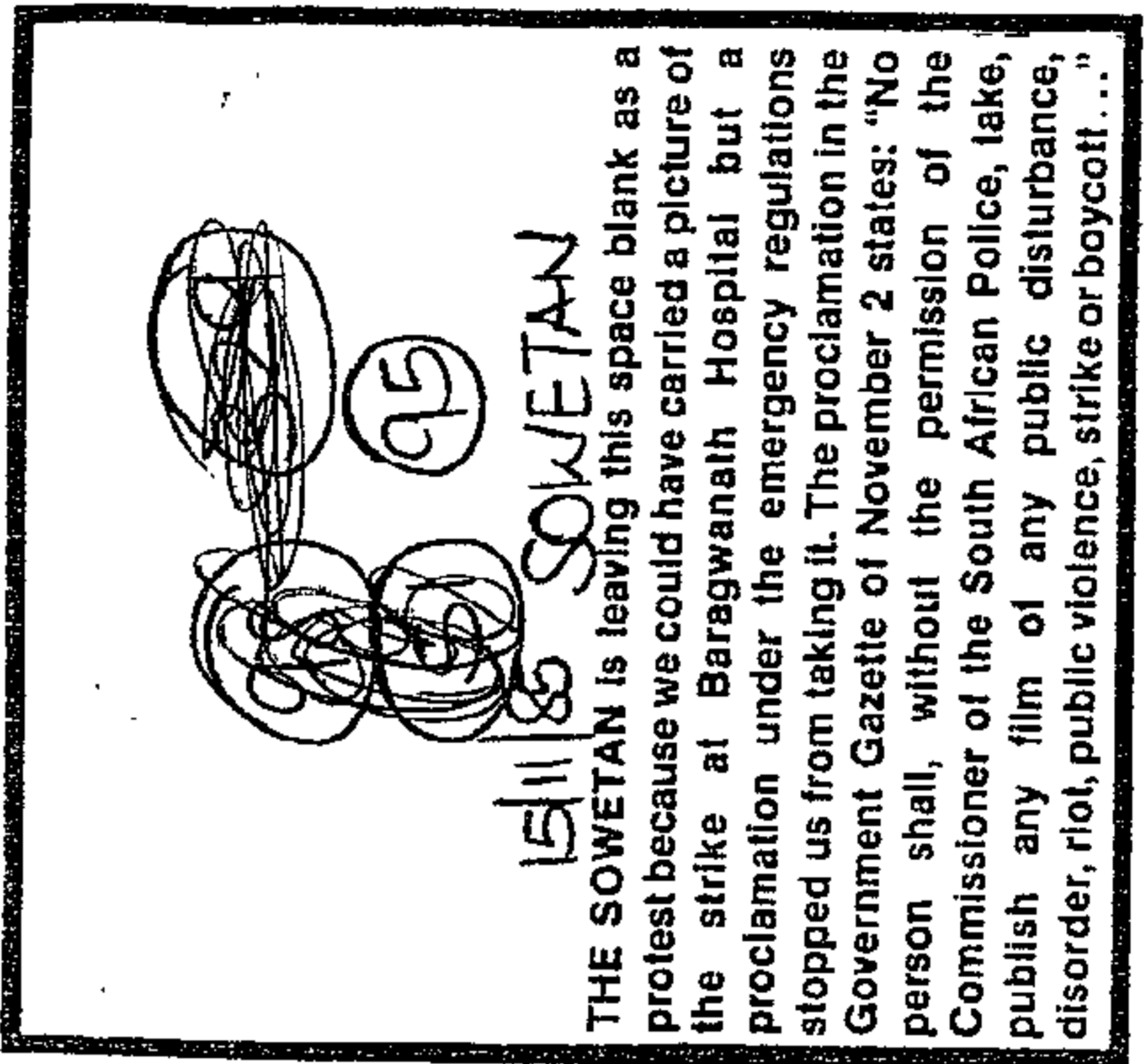
## By MOJALEFA MOSEKI

nurses struggled to offer a smooth service. They were seen pushing trolleys and performing other jobs normally done by the striking workers. White staff at the hospital helped with cooking.

The striking student nurses met at the nurses' home where they resolved to continue with boycott of lectures until their demands were met. A statement by the Health Workers' Association pledged its support for the workers' demands and slammed the "high-handedness and intransigence of the authorities to the workers' demands".

A spokesman declined to comment late yesterday saying that a workers' and nurses' delegation were meeting hospital authorities.

A statement would be released at the end of the meeting, she said.



THE SOWETAN is leaving this space blank as a protest because we could have carried a picture of the strike at Baragwanath Hospital but a proclamation under the emergency regulations stopped us from taking it. The proclamation in the Government Gazette of November 2 states: "No person shall, without the permission of the Commissioner of the South African Police, take, publish any film of any public disturbance, disorder, riot, public violence, strike or boycott..."

Among them were several elderly women. Police wearing khaki overalls and helmets patrolled the hospital for most of the day. Hippos and truckloads of police

armed with rifles stood guard at the bus-taxi rank outside the hospital. Lengthy queues were common as only nursing sisters and assistant

...the wheels, and was not re- what I was doing. I

# 718 arrested in hospital strike

GAFF TINTS 15/11/85

95 (A) (B) (C) Own Correspondent

JOHANNESBURG. — Police arrested more than 700 student nurses and hospital cooks, porters, cleaners and other support workers at Soweto's Baragwanath Hospital yesterday morning and charged them with striking illegally.

A police spokesman in Pretoria said 718 people were arrested on the hospital premises — 574 women and 144 men — after they refused to disperse when ordered to do so by police.

The workers have been released and warned to appear in court on November 29.

Trouble at the hospital started on Wednesday when daily-paid workers went on strike for increased wages and better working conditions.

## Angry workers stormed the kitchen

A mass meeting held by the workers became heated, and angry workers stormed the hospital kitchen and dining-room. They smashed hospital crockery and utensils and scattered food on the floors.

Later in the evening, student nurses met and presented a list of demands — the second drawn up by the nurses within a month — to hospital authorities. This meeting also became heated and angry nurses broke down a gate as they marched to the matron's office.

Hospital security police charged the nurses with batons, injuring several who had to be treated at the hospital casualty department. Yesterday morning hundreds of nurses did not report for work, bringing some sections of the hospital to a complete halt.

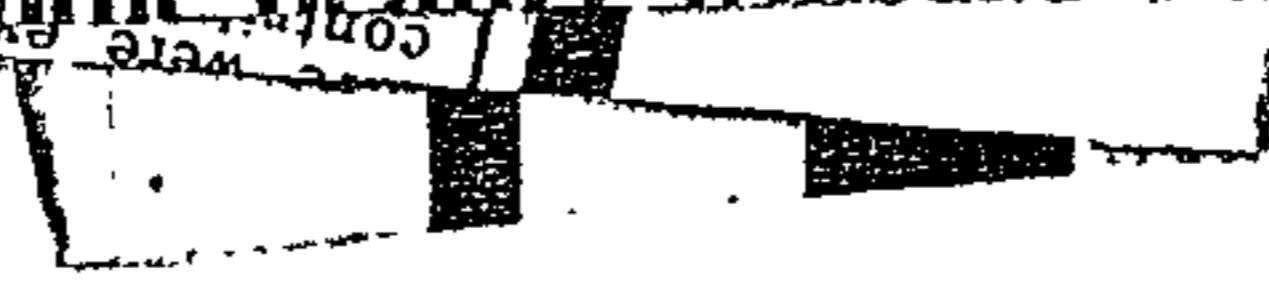
The chief superintendent of the hospital, Dr Chris van den Heever, confirmed the incidents.

Yesterday most of the doctors were doing the work of porters. A hospital spokesman said all available manpower at the hospital was involved in maintaining services.

● The monthly pay of daily-paid workers varies with length of service, with an upper limit of R175, a hospital spokesman said. He said there were some who earned as little as R110 a month.

"There are cases of people with 10 years service earning only R150 a month," he said.

## Icelandic beauty wins crown



CAT FILES 10/10/85

# Hospital strike staff dismissed

JOHANNESBURG. — Domestic staff at Soweto's Baragwanath Hospital are still on strike over pay and those who have not returned to duty have been dismissed, Dr H van Wyk, Director of Transvaal Hospital Services, said yesterday.

All services were being maintained, although student nurses had also refused to go on duty since Thursday.

Dr Van Wyk said "every effort" had been made to deal with legitimate grievances.

"At this stage medical services will continue although surgery will be curtailed and only more urgent operations are being done," he said.

● Sophie Tema reports that tension ran high at the hospital yesterday after more daily-paid workers were arrested.

On Thursday 718 people were arrested and later released after

being charged under the emergency regulations and for attending an illegal gathering.

Police could not confirm yesterday's arrests but a number of doctors and hospital workers alleged that a truck-load of people were arrested.

Nurses have expressed dissatisfaction over an 8pm curfew, poor food, unfair dismissals and victimization, working extra hours without pay, and not being allowed to attend meetings.

The Health Workers' Association yesterday called for an immediate response to worker grievances and a halt to the use of force — such as calling in the army and the Baragwanath security police. They also demanded that legitimate organizations chosen by the workers be allowed to function without harassment.



# SOWETAN

MONDAY, NOVEMBER 18, 1985

27c + 3c GST (PWV) Elsewhere 35c

## 17 000 threaten to join strike

# CRISIS

18/11/85 SOWETAN  
95

# AT BARARA

**MORE** than 300 nursing assistants who have been holding the medical service together at Baragwanath Hospital are set to join the workers and student nurses on strike this week.

**By MOJALEFA MOSEKI**

A spokesman for the South African Black Municipal and Allied Workers' Union yesterday said the union resolved in Johannesburg to join the strike in solidarity if a solution had not been found by the end of this week.

He said the 17 000

members of his union would walk out in solidarity with Baragwanath workers.

The union has informed its mother bodies, the Post Telecommunications and Telegraph International and the Public Service International to take up the matter with Governments at the respective head offices.

It is understood that senior medical officers were to "formally object

to the presence of the army personnel in the wards because their presence psychologically affected the recovery of patients"

This comes after the nursing assistants decided to join the strikers on Friday.

"A group of nurses, who said they had no leadership, but delegates, yesterday said they were "not on strike but were awaiting the results of talks between their delegates and the authorities at Baragwanath Hospital.

Scores of people visiting patients admitted to the Baragwanath Hospital during the week were told they had been transferred to Hillbrow Hospital yesterday.

Uniformed soldiers were present and riot police guarded the entrance.

Some soldiers pushed trolleys and others attended to patients in the surgical wards.

Patients' clothing and sheets had not been changed since Thursday and a team of outsiders cooked in the maternity kitchen only.

The head of the health secretariat of the Azanian People's Organisation, Dr Abu-Baker Asvat, yesterday slammed the authorities for "failing to act in a crisis situation".

He said the blame for the deterioration in medical services at the hospital would be laid on "officials".

See page 3.

## "Dameli"

Mr. J.P. Brumm



The Damelin Study Directorate sees to it that every student receive other members of the Directorate Advisers, and Mr. M.C. Andrew "To get a good job and earn more the past 30 years prove that the My many years in the education the very best in you. You see, D regulations to stand in the way

ARGUS 18/11/85

95

CITY/NA

# Baragwanath nurses' strike 'could spread'

Argus Correspondent

**JOHANNESBURG.** — The Baragwanath Hospital strike may spread to other Transvaal hospitals and 17000 members of the South African Black Municipal and Allied Workers' Union (SABMAWU) have threatened to join the strike in solidarity if the grievances of nurses and daily-paid workers are not resolved soon.

A spokesman for the union said at the weekend that the union would join the strike if a solution had not been found by the end of this week.

## PAY DEMANDS

The union has also told its parent bodies, the Post Telecommunications International, Telegraph International and the Public Service International, to take up the matter with governments at the head offices.

"The Black Health and Allied Workers' Union (BHAWU) — pharmaceutical workers — have also indicated that they will give us support if the situation is not resolved," a spokesman for the Health Workers' Union (HWA) said today.

He said the nurses and theatre sisters would meet their matrons today because they are "uspet" with the having to wash floors and clean wards in the absence of the 800 student nurses and 1 000 auxiliary workers who went on strike late last week over pay demands and better working conditions.

On Friday nurses' aids came out on strike in solidarity with the daily-paid workers and student nurses.

## "NOT LEGAL"

The strikers were told on Saturday they had been dismissed and should collect their salaries and wages today.

The dismissed student nurses were to meet the hospital su-

perintendent, Dr Chris van der Heever, today to discuss their grievances.

"They will refuse to collect their pay because we have been told by our legal advisers that it is illegal to fire workers before they have had an opportunity of putting their case to management," the spokesman for the HWA said.

According to him the crisis still exists at the hospital and "things are very bad".

## SURGERY BACKLOG

"Usually there are 60 operations a day in the hospital's 11 wards. There are only two cases on the list for surgery today and a backlog of "cold surgery" cases is piling up.

"The strike could well spread to other Transvaal hospitals," he warned.

The Director of Hospital Services in the Transvaal, Dr Hennie van Wyk, announced at the weekend that he had asked the Defence Force for help.

Dismissed student nurses' application for a court interdict for the reinstatement of the dismissed Baragwanath Hospital student nurses and auxiliary workers will be submitted to the Rand Supreme Court today.

95

# BARAGWANATH

15/11/88

SOWETAN

# COULDRIT

# MOVIE

AN URGENT application for a court interdict for the reinstatement of the dismissed Baragwanath Hospital student nurses and auxiliary workers will be submitted to the Rand Supreme Court today.

Instead of negotiating with the dismissed workers and nurses' delegates, the hospital authorities yesterday fired the 1 000 student nurses and instructed them to collect their cheques at 2pm today.

They have been given until 11am today to leave the Nurses Home. The nurses rejected the instruction to collect their cheques and resolved to defy the quit order during a meeting yesterday morning.

A spokesman of the Health Workers Association (HWA), which is handling the dismissed workers' demands, said: "We call upon the authorities to withdraw the army from the hospital because its presence prolongs the recovery of patients psychologically and physically as blacks respond negatively to soldiers. The services of the dismissed workers and the nurses can never be replaced".

### SOWETAN Reporters

Meanwhile, a meeting called by non-classified workers who are members of the General and Allied Workers Union (GAWU), was yesterday banned by the Divisional Commissioner of Soweto, Brigadier Jan Coetzee.

The meeting, which was scheduled for the Glynn Thomas Hall, was banned in terms of the Public Safety Act of 1953. The ban was announced 50 minutes before the meeting was to start. Another meeting will be held at Khotso House in Johannesburg at 12 noon.

At another meeting held at Khotso House

terday.

A group of nursing sisters and doctors reportedly sent a letter to the health officials in Pretoria expressing "great concern over the handling of the matter and pledging their support for the workers and student nurses' valid demands".

They have been rendering services to patients since the workers and nurses stayed away on Thursday.

A spokesman for the South African Black Municipal and Allied Workers Union (SABMawu), said he was disappointed with the "arrogant manner of the Baragwanath officials who refused to talk to the union's delegation".

"We will do all in our power, with other concerned unions, to bring the health officials to the negotiating table and will not rest before everyone of the dismissed workers is reinstated," said the spokesman.

### SOWETAN Reporters

yesterday afternoon, about 100 workers at the Hillbrow and General hospitals pledged solidarity with the Baragwanath workers.

Speakers at the meeting included Mr Phillip Dhlamini, general secretary of the South African Black Municipal and Allied Workers Union (SABMawu), and Mr Y Variava of the Health Workers Association

professional groups yesterday. Messages of solidarity from various unions were also read. The meeting also called on the Public Service International to put pressure on the South African Government to resolve the situation.

### SOWETAN Reporters

The dismissed workers and nurses received support from unions and medical associations and professional groups yesterday.

Messages of solidarity from various unions were also read. The meeting also called on the Public Service International to put pressure on the South African Government to resolve the situation.

**GRAVITIN 120**  
**VIRGINIA & MEDICAL**  
**SUPPLEMENT**

**Vaalunrest - 6**  
**more in court - Pages**

# Student nurses told to go

Own Correspondent

JOHANNESBURG. — About 900 striking student nurses at Baragwanath Hospital were yesterday given 24 hours notice to leave the hospital.

The striking nurses said the chief superintendent, Dr Chris van den Heever, announced at a meeting yesterday morning that they should collect their pay cheques and leave the hospital premises by 11am today.

Scores of daily-paid workers were also made to sign receipt of their cheques yesterday and were told their services had been terminated.

Workers who were not made to sign their cheques said they intended going on with the strike in solidarity with those who had been sacked.

The nurses said they had resolved to ignore the decision and expressed their willingness to negotiate.

At the weekend a spokesman for the South African Black Municipal and Allied Workers' Union said its members were set to join the nurses and workers on strike.

● Sapa reports that according to an official of the Hospital Services Directorate in Pretoria yesterday, the sacked student nurses and workers had been told they could reapply for their jobs and each reapplication would be judged on merit.

The workers and student nurses charged with public violence and attending an illegal gathering are due to appear in court on November 27.

# Student nurses told to go

Own Correspondent

JOHANNESBURG. — About 900 striking student nurses at Baragwanath Hospital were yesterday given 24 hours notice to leave the hospital.

The striking nurses said the chief superintendent, Dr Chris van den Heever, announced at a meeting yesterday morning that they should collect their pay cheques and leave the hospital premises by 11am today.

Scores of daily-paid workers were also made to sign receipt of their cheques yesterday and were told their services had been terminated.

Workers who were not made to sign their cheques said they intended going on with the strike in solidarity with those who had been sacked.

The nurses said they had resolved to ignore the decision and expressed their willingness to negotiate.

At the weekend a spokesman for the South African Black Municipal and Allied Workers' Union said its members were set to join the nurses and workers on strike.

● Sapa reports that according to an official of the Hospital Services Directorate in Pretoria yesterday, the sacked student nurses and workers had been told they could reapply for their jobs and each reapplication would be judged on merit.

The workers and student nurses charged with public violence and attending an illegal gathering are due to appear in court on November 27.

Ad 6.0.5 20/11/85 95

# Baragwanath threatened with fresh work stoppage

**JOHANNESBURG.** — Doc-tors, nurses and other health professionals at Baragwanath Hospital have threatened to stop work today if 1 800 student nurses and workers who were dismissed for striking are not immediately reinstated.

The decision was made at a meeting yesterday by 300 health workers in the full knowledge of the consequences they could face by striking — disciplinary action, prosecution with the possibility of a maximum fine of R1 000 or a year in prison and automatic removal from the medical register if convicted.

An ultimatum stating that health workers intended taking an active part in the week-long strike by student nurses and non-classified health workers was given to the superintendent of the hospital, Dr Chris van der Heever, yesterday.

A delegation of doctors, nurses, radiographers, physio-therapists and technical staff were to meet Dr van der Heever today for his reply.

● A telex requesting an urgent meeting with the Minister of Health to resolve the situation at Baragwanath was sent to Pretoria yesterday by the Black Municipal and Allied Workers' Union and the Black Health and Allied Workers' Union. The unions asked for a reply by tonight.

A meeting of the dismissed workers was to be held today at Gawn's Johannesburg offices.

● A meeting of the dismissed workers was to be brought before the Rand Supreme Court today.

An urgent application asking for the reinstatement of the dismissed workers by lawyers representing the General and Allied Workers' Union (Gawu) was to be brought before the Rand Supreme Court today.

Argus Correspondent

**12 000 patients**

A co-ordinating committee of 15 medical workers has been set up to discuss ways of looking after the estimated 12 000 patients still being treated at Baragwanath.

A spokesman for the Health Workers' Association (HWA) said the medical professionals were aware of the serious disciplinary action they could face, but in spite of this had decided to take action in support of the dismissed strikers.

## Intransigence

"These are desperate acts by medical staff brought about by the intransigence of the authorities. The medical staff believe they have no alternative but to take the action planned," the spokesman said.

Yesterday 942 student nurses were ordered to vacate the nurses' home and although they refused, they left the hospital grounds rather than face confrontation with the troops and police sent to evict them.

"Only 40 of the student nurses surrendered the keys to their rooms. The other 900 kept their keys," the HWA spokesman said.

## 'Gunpoint' collection of wages

JOHANNESBURG — A Baragwanath doctor has described what he called an "extremely disturbing scene" at the hospital yesterday when about 300 dismissed workers were rounded up by armed soldiers and some escorted one by one to collect their final pay packets.

Workers have signed affidavits saying they were forced at gunpoint to collect their pay, and have handed their wages back to officials of the General and Allied Workers' Union (Gawu) so that they can be returned to the hospital.

The doctor, who cannot be named, said the workers were surrounded by armed soldiers standing one metre apart. The workers told the doctor they had been forbidden to go to the toilet and had not been allowed water to drink.

The commanding officer told the doctor that the workers would "cause havoc" if they were allowed to move around freely.

The commanding officer denied that the workers were not allowed to have water or go to the toilet. He said he would provide water and that workers were allowed to go to the toilet under escort one at a time. — Sapa

95

# Fired nurses: Lawyers act

Own Correspondent

JOHANNESBURG. — Lawyers acting on behalf of 900 striking Bargwanath Hospital nurses have given notice in the Rand Supreme Court that they will bring an urgent application this morning for the reinstatement of sacked student nurses and auxiliary workers.

Their services have

been terminated and they have been prohibited from remaining on the premises and in the hostels.

It was agreed between all parties that the respondents would not have time to file affidavits before this morning.

The strike started a week ago after a demand by daily-paid or unclassified workers for more pay and the redress of grievances presented to the authorities by live-in student nurses.

## Ban

Meanwhile, a new banning order has been imposed on the Health Workers' Association (HWA), representing all hospital workers and medical staff.

It has been banned from holding meetings from yesterday until 8.30am next Monday.

The banning order was served on the executive on Monday afternoon after 1 500 people at the hospital had been dismissed.

The first ban prohibited the HWA executive from addressing strikers at the hospital from last Friday afternoon until Monday morning.

Of the total dismissed, 900 student nurses were given 24 hours' notice to

collect their pay cheques and be out of the hospital premises by 11am the next day.

The striking nurses defied the order to collect their pay, but all vacated the hospital premises after members of the Defence Force surrounded their hostels.

An official of the Hospital Service Directorate said in Pretoria yesterday that the nurses had been told they could reapply for their jobs. Each application would be judged on merit.

Hundreds of auxiliary workers, porters and cleaners were also fired from their jobs and claimed they were forced to sign receipts for their wages.

## Soldiers

The workers claimed they were taken by armed soldiers and police from the Harriet Shezi Hall to the hospital's personnel office where they were paid off and told their jobs had been terminated.

Yesterday about 650 doctors, including health workers, signed a petition which was to be handed to the hospital's chief superintendent, urging him to meet and address the strikers and get them back at work.



# 'Sackings were unlawful'

AN urgent court application by three dismissed student nurses at Baragwanath Hospital to order the authorities to allow them to remain at the nurses' home and declare their dismissal unlawful was yesterday postponed to today by a Rand Supreme Court judge. **95**

The application is being brought by student nurses Mardulate Tshabalala, Themba Mboho and Macbeth Nxumalo, all former residents at the hospital nurses' home. **95**

The respondents are the Minister of Health and Welfare, the Administrator of the Transvaal, the Director of Hospital Services and Dr C van

der Heever, the chief superintendent of Baragwanath Hospital.

Mr Justice Goldstone adjourned the case to today to allow the respondents' lawyers to file replying affidavits. Proceedings will start at 2pm.

In papers before the court, Ms Tshabalala, a second year nursing student, tells of several unsuccessful meetings between a student delegation and the authorities from November 13.

She then says on November 18, at a meeting attended by the delegation together with Dr van der Heever, two deputy superintendents, three matrons and a student counsellor, they

were informed that the student nurses had been dismissed with effect from November 13.

They were also told that their list of grievances had been found to be vague by the director of hospital services.

In seeking relief, the three applicants say their dismissal was wrongful and unlawful and contrary to the provisions of both the Nursing Act and Ordinance 14 of 1958 of the Transvaal. **SOWETAN**

They further say no disciplinary enquiry into alleged misconduct was held, nor were they given any opportunity whatsoever to make representations regarding their dismissal.

SAA Tark 95  
21/11/85

wanath

# Unions threaten mass strike at Baragwanath

From SOPHIE TEMA

**JOHANNESBURG.** — Labour unions representing hospital medical staff and pharmaceutical company workers have threatened a mass strike if the crisis at Baragwanath Hospital is not resolved immediately.

At a meeting at the hospital on Tuesday, doctors and nursing sisters threatened a mass walk-out or to down tools if the dismissed workers and nurses were not reinstated by yesterday.

A delegation representing doctors, nursing sisters, radio-

graphers and technical and clerical staff gave this ultimatum to the chief superintendent, Dr Chris van den Heever.

But the crisis deepened further when workers and nursing staff of a second hospital threatened to present a list of their grievances to the authorities in solidarity with Baragwanath Hospital's dismissed workers.

A telex requesting an urgent meeting with the Minister of Health to resolve the situation at Baragwanath Hospital was sent to Pretoria on Tuesday by the

South African Black Municipal and Allied Workers' Union and the Black Health and Allied Workers' Union.

The medical staff yesterday said that if the doctors and nursing sisters carried out their threat, hospital services would come to a complete standstill. This could to some extent affect the 12 000 patients at Baragwanath.

Yesterday morning lawyers acting for the 900 dismissed nurses presented papers on an urgent application in the Rand

Supreme Court for the reinstatement of the dismissed workers.

The Supreme Court action is being brought by the General and Allied Workers' Union in a bid to reinstate the nurses who went on strike over poor working conditions and pay.

Legal representatives met Justice G Goldstone in his chambers where he heard the application which was postponed to 11am today. Judgment is expected to be delivered at 2.30 this afternoon.

Meanwhile, Baragwanath is surrounded by military and

police contingents and, it is alleged, patients have to be escorted around the building by armed soldiers.

One senior nurse at the meeting in Johannesburg said it was almost impossible for anyone not working at the hospital to gain entry, even to visit very sick relatives.

Mr Eddie Gobey, who is attempting to negotiate for the Black Health and Allied Workers' Union, said he had been unable to make contact with the hospital authorities. "They are always in meetings it seems."

● In the Cape, the Health Workers' Society yesterday condemned the action of Transvaal hospital authorities in dismissing the 900 nurses and 800 non-classified workers at Baragwanath and called for their unconditional reinstatement.

In a statement, a spokesman for the society said the authorities in the Transvaal had refused to accede to the legitimate demands of the workers, which included decent living wages, better working conditions and the right to democratic worker representation.

CAP6 TIMES  
23/11/85

95

# Nurse alleges attack

JOHANNESBURG. — A student nurse from Baragwanath Hospital described in papers before the Rand Supreme Court yesterday how she was "attacked with batons and stones" after trying to discuss grievances with a matron.

Mrs Mardulate Tshabalala and two others brought an urgent application calling for their reinstatement at the Nurses' Home at the hospital.

In her affidavit, Mrs Tshabalala said nurses were beaten by hospital security guards on November 13 after they were refused permission to discuss grievances at a routine meeting with the chief matron.

### March in hospital grounds

"The students then decided to march from the residence to the pay point, which is within the hospital grounds," she said.

"It was then the hospital security guards attacked the student body with batons and stones, causing bodily injury to certain students and damage to the nurses' hostel."

She said that "at no stage did I or any member of the student body go on strike" and that that their "desire to report back for duty as soon as their grievances were dealt with was at all times made clear to the senior members of staff, including the chief superintendent (Dr Chris van den Heever)".

Finally, a student delegation was told on November 16 by Dr Van den Heever that they were being dismissed as of November 13. On November 18, they were given 24 hours to vacate their hostel rooms.

Mr J Browde, SC, for the nurses, said the court should grant an interim order allowing them to be fully re-instated until the entire matter could be brought to full trial.

### 'Refused to work'

In argument before Mr Justice R Goldstone, Mr J Coetzee, for the respondents, argued that 867 nurses were dismissed because they refused to work while there were 1 112 patients in the hospital.

In his replying affidavit, Dr Van den Heever said he could not approve the reinstatement of the second and third applicants — Mr Themba Mboho, a final year male student nurse, and Mr Macbeth Nxumalo, a male pupil nurse — because they had acted irresponsibly by striking.

Mr Coetzee said Mrs Tshabalala had been unreasonable in "rushing" to court when the authorities did not even consider her dismissed as she was on leave when the alleged strike occurred.

The judge said he could not see how Mrs Tshabalala, who had acted as a representative for the nurses in negotiations, should have considered that she was excluded from the dismissal order.

Over 1 000 patients will be tended by army personnel at least until Monday when the court will pass judgement. — Sapa and Own Correspondent

# Baragwanath: Other workers to take action

Argus Correspondent

JOHANNESBURG — A new development in the Baragwanath hospital strike workers' outside health services have indicated they are prepared to take action on behalf of all the workers.

Workers from several hospitals in the Johannesburg area, including Hillbrow, Coronation and Natalium hospitals, met at Knott's House yesterday to discuss strategies for showing solidarity with dismissed Baragwanath workers.

The meeting was also attended by representatives of trade unions not involved in health services.

## Enthusiasm

A man who identified himself only as a "food worker" said they were prepared to put pressure on their managements so that they in turn could persuade the hospital managements to listen to the grievances of health workers.

His suggestion that the struggle of the health workers should be nationalised met with great enthusiasm. Hospital workers immediately took up his call, saying a general stayaway would be the only way to get their grievances redressed.

A broad co-ordinating committee would however have to be established to organise a stayaway involving the whole community.

## Heavy workload

The meeting decided that representatives should go back to their hospitals, where they would form committees representing the workers. These committees would then form a central committee.

The central committee is to meet on Monday afternoon.

Workers from Hillbrow Hospital were particularly vociferous at yesterday's meeting, calling for immediate action. They said they were directly affected by the situation at Baragwanath Hospital because patients were being transferred from there to Hillbrow, increasing their already heavy workload.

Two women said workers at Hillbrow had been told that they would be made "examples" if they attended meetings such as the one held yesterday.



Defence Force members preparing stretchers outside the casualty department at Baragwanath Hospital.

# BARA HEARING SET FOR TODAY

AN urgent court application by three dismissed student nurses at Baragwanath Hospital to order the authorities to allow them to remain at the nurses' home and declare their dismissal unlawful is to be heard this morning in the Rand Supreme Court.

Mr Justice R Goldstone yesterday postponed the application for the second time this week because the respondents' lawyers had not yet filed replying affidavits. The hearing began at 9.30 am.

The application is being brought by student

## Nurses' plea delayed again

nurses, Mardulata Tshalalam, Themba Mbobo and Macbeth Nxumalo, all former residents at the hospital nurses' home.

The respondents are the Minister of Health and Welfare, the Administrator of the Transvaal, the Director of Hospital Services and Dr C van der Heever, chief superintendent of Baragwanath.

In seeking relief, the applicants say in papers before court that their dismissal was wrongful

and unlawful and contrary to the provision of both the Nursing Act of 1978 and of Ordinance 14 of 1958 of the Transvaal.

They further said no disciplinary inquiry into alleged misconduct was held, nor were they given any opportunity whatsoever to make rep-

resentation regarding their dismissal.

They add that should the relief sought not be granted, not only them but more than 900 other students at the hospital will "suffer irreparable harm".

The applicants are represented by Mr Jules Browde SC, assisted by advocates M Basslian and Christopher Loxton instructed by Ismail Ayob and Associates. Mr J Coetzee SC, assisted by advocate J N S du Plessis, appeared for the respondents.



95

SOWETAN

22/11/8

Cape Times  
day, November 22, 1985

# Hospital a 'shambles' — doctor

JOHANNESBURG. — Baragwanath Hospital was reported yesterday to be "a shambles" as remaining staff considered their next step after threatening a strike in support of the fired student nurses and auxiliary workers.

A doctor at the hospital, who asked not to be named, said: "The place is a shambles. Wards are half-empty because we are discharging patients who are still sick."

## 'Concerned'

"In the children's ward there is a rank smell as the children's nappies are not changed as frequently as they should be. Flies are swarming all over the place.

"We are deeply concerned about our patients and fear that some will get worse as the clinics in Soweto are just not sufficient to cope with the burden."

However, in Pretoria, the Senior Deputy Director of Transvaal Hospital Services, Dr J A Fourie, said yesterday that reports that conditions at Baragwanath Hospital were deplorable were "totally untrue".

In a statement, he

said: "Despite the bad reports in the newspapers by unknown and unidentified Baragwanath Hospital personnel who criticized and slated the presence of the SADF, a lot of positive reaction was received from the staff of most departments in the hospital."

## Terminated

He also said another issue which had repeatedly been misrepresented in the press was that the Chief Superintendent at Baragwanath, Dr Chris van den Heever, had called off negotiations with the now dismissed student workers and that he refused to talk to blacks.

"The true state of affairs is that the student nurses terminated negotiations and not the superintendent," he said.

Conditions in the wards were "highly satisfactory" and all essential services were "functioning well".

Meanwhile, the chairman of the Baragwanath Hospital Board, Dr Woody M Matsie, said the board and the hospital had reached a stalemate.

"We were scheduled to have held our meeting with Dr Chris van den Heever, the superintendent, on Monday. These meetings are held every two months and I had duly called one."

## Postponed

"But the superintendent called it off and said the postponement was indefinite. I cannot say at this stage what our next step will be."

● Meanwhile, the urgent application brought before the Rand Supreme Court by the 940 dismissed student nurses was yesterday postponed until today.

The respondents in the case — the Transvaal Administrator, the Director of Hospital Services and the Chief Superintendent of Baragwanath Hospital — had not filed their affidavits by the time the court sat at 2pm. — Sapa

# Dismissal of nurses invalid — judge

Argus Correspondent

JOHANNESBURG. — The 946 student-nurses dismissed from Earagwanath Hospital were found by the Rand Supreme Court today to have been given an invalid and ineffectual dismissal notice.

Mr Justice R J Goldstone found that the hospital's chief superintendent, Dr C van den Heever, had not properly exercised his discretion in firing all the students in a body.

The action followed the recent strike of an number of student nurses who believed that certain grievances had not been dealt with properly by the authorities.

## URGENT ACTION

Three student nurses Miss Marduiate Tshabalala, Mr Themba Nboobo and Mr Macbeth Nxumalo, brought the urgent action last week in the hope of having their dismissal declared unlawful and of being returned to their jobs and hostels.

Mr Justice Goldstone said that each student had been entitled to a hearing.

His order did not automatically mean, he added, that the three applicants were entitled to reinstatement.

Miss Tshabalala could return to her job and hostel room as she had been on leave at the time of the strike action.

## TEMPORARILY

Mr Mbobo denied having been on strike and this dispute would have to be resolved in the main action. In the meantime, he was temporarily reinstated to his job and hostel.

Mr Nxumalo had not denied striking. The court could not order the reinstatement of someone who took part in an illegal strike the judge said. It would "subvert the principles of the profession."

A spokesman for the Health Workers' Association said today he was "reasonably pleased" with the court ruling.

"We hope the authorities will immediately see their way clear to meeting student nurses to discuss reinstatement to get the hospital back to normal for the benefit of the community and in the interests of patient care," he said.

## LABOUR REVIEW

## Baragwanath: problem of a fight for existence

THREE unions are co-operating to build unity among health workers following what was essentially a wildcat strike at Baragwanath.

The strike, which began more than a week ago has resulted in the sacking of 1 800 student nurses and auxiliary workers.

The difficulties confronting the nurses and auxiliary workers were outlined at several mass meetings.

One problem faced was a moral one: how to use the workers' most effective weapon — strike action — when it jeopardised people's lives.

While the chance of a co-ordinated strike has not been scotched, they decided against a less radical move — a lengthy go-slow — "because people are dying".

Yet, they argued, their fight was also for their own existence (some workers earn as little as R150 a month).

A Black Health and Allied Workers Union of SA (Bhawusa) spokesman stressed that State employers refused to recognise the health unions, although they have been negotiating wages and conditions of employment in most private hospitals for some time.

However, despite this, it has been decided that committees would be formed at a number of Johannesburg and Reef hospitals to improve organisation.

*THE crisis at Baragwanath Hospital triggered by the strike of student nurses and daily-paid auxiliary workers has had more impact on the black community than any other public sector strike over the past five years, writes CLAIRE PICKARD-CAMBRIDGE.*

ANOTHER major event last week was the handing down of the Industrial Court's reasons for its ruling that Gencor's Marievale mine should temporarily re-instate several hundred workers dismissed in a September wage strike.

The ruling is significant because it is likely to encourage workers to use legal dispute procedures and highlights the need for management to base decisions on principles of fairness and not only on common law rights.

But Gencor wants the decision reviewed by the Supreme Court. The outcome will be important because it could cast more clarity on the question of the overlapping jurisdiction of the two courts.

The National Union of Mineworkers (NUM) has, however, pointed out that they are having great problems in getting the Marievale workers re-instated.

They say the majority of the fired workers have not been re-instated and the union has had to send organisers to villages in Lesotho

and the Transkei to find affected workers. The NUM also say there have been difficulties in getting contracts renewed, with The Employment Bureau of Africa (TEBA) reluctant to assist.

A FURTHER development last week was the decision by about 800 workers at three Asea plants in Pretoria to suspend a "go slow" after talks between management and the Metal and Allied Workers Union (Mawu).

The Mawu is still in dispute with more than 40 employers in the metal industry over the issue of plant-level bargaining. But although neither Mawu nor Asea have yet revealed what progress has been made, the union claims there has been a substantial move towards conciliation.

A MILESTONE was the formation of a Southern African Miners Federation in Harare last week, with NUM president James Motlatsi elected as president of the new body.

The federation, which represents workers from SA, Zambia, Botswana, Lesotho and Zimbabwe, resolved that total sanctions be imposed against SA 1: has called on the international Labour Movement to organise the economic boycott and has warned it will take strong action if the SA government repatriates foreign mineworkers.



live caused all this'

# MURSES LAST WORDS

"I am sorry to have caused you all this. I should not have re-applied."

These were the last words of a dying Baragwanath Hospital student nurse, Nomthandazo Sishi, after she was burnt by unknown men who had accused her of "selling out".

Miss Sishi (23) died on Friday night at Baragwanath Hospital while her mother Mrs Gertrude Sishi (53) died after she was trapped by flames in her burning Dube home on Thursday night. The house was attacked and set alight by four unknown men.

Four other people who were in the house at the time, including an organizer in Yvonne Chaka's band, Mr Bongane Mdunge, were also severely burnt and were reported to be critical at Baragwanath Hospital yesterday.

The other three are Mr Anthony Kunupi, Mrs Sishi's son-in-law, his wife Mrs Margaret Kunupi and Miss Lindi Sishi (21), whose condition was said to be deteriorating by late yesterday.

Nomthandazo's father, Mr Aaron Sishi, said his daughter told him that their home was attacked because she had re-applied after she and 939 other student nurses were dismissed.

### By ALI MPHAKI

for going on strike. "I stopped her from continuing as I could see she was in terrible pain and was beyond recognition as a result of the burns. This was on Friday afternoon. On Saturday morning I was told she had died the previous night at 9pm," said Mr Sishi.

Mr Sishi, who is a lecturer on road safety in Pietermaritzburg, said his daughter telephoned him on Tuesday to tell him she had re-applied.

### Miss NOMTHANDAZO SISHI.

He advised her to stay at the nurses home and not go home "because under the circumstances it was not wise to do so."

"My daughter said she would stay at the nurses home but would go home to fetch her clothes.

"She told me that those who intended re-applying were told that they would be dealt with accordingly.

"Why she came home on Thursday night I cannot tell. Now my wife is also dead. She had nothing to do with the Baragwanath strike. My

house is in tatters. All the walls can fall at any time and there is nothing I can do at the moment to have it fixed.

"It appears these people followed her from the hospital because the house was attacked about 20 minutes after she had arrived. When they came in I am told they said "there is a sell-out in this house", and started sprinkling a strange powder before setting it alight. I pray that all those still in hospital survive. This is a terrible thing to happen," said Mr Sishi.

Meanwhile, Baragwanath nurses will have to wait until today to know their fate. On Friday the Rand Supreme Court deferred a ruling on their dismissal.

95

25/11/88 SOWJETAN

## CHRISTMAS SPECIALS

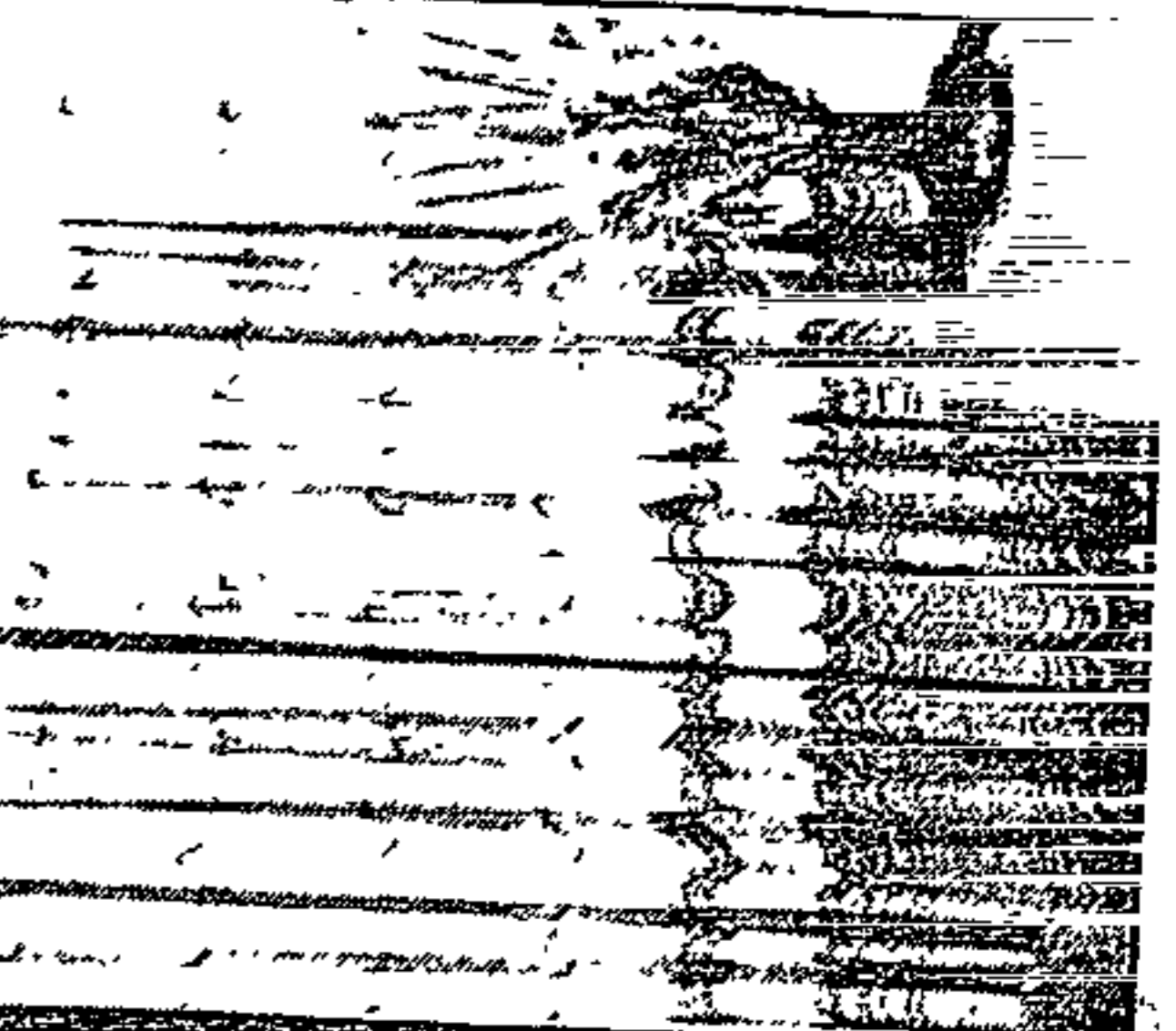
THIS YEAR OUR SPECIALS ARE CHEAPER THAN PREVIOUS YEARS

READY TO HANG  
Lounge/Dining room/  
Bedroom

SUNFILTER  
1,30 WIDTH  
180 cm DROP

14.99

No make-up  
charges



SOWETAN 05/11/88



95



# Bara strike - judge gives ruling today

THE much-awaited judgment in the urgent court application brought by three student nurses at Baragwanath Hospital is to be delivered this morning in the Rand Supreme Court.

Mr Justice R Goldstone on Friday, before a packed courtroom, reserved judgment after hearing argument from counsel for the hospital authorities and the three applicants.

The three applicants, Miss Mardulate Tshabalala, Mr Themba Mbobo and Mr Macbeth Nxumalo, are seeking an order to declare their dismissal unlawful.

They have also asked for a temporary order halting their eviction from the nurses' home or, alternatively, allowing them to return.

Mr J Coetzee, SC, acting for the hospital authorities, argued that the position of student nurses was different from other occupations because work stoppage could endanger life.

The students, he said, had been prepared to hold the hospital over a barrel by striking in their own interests. Striking was an offence for nurses and the summary dismissals of Mr Mbobo and Mr Nxumalo was therefore justified.

As for Miss Tshaba-

lala, she was not dismissed as she had been on leave at the time of the strike. He said she should have ascertained her status and her coming to court was not justified.

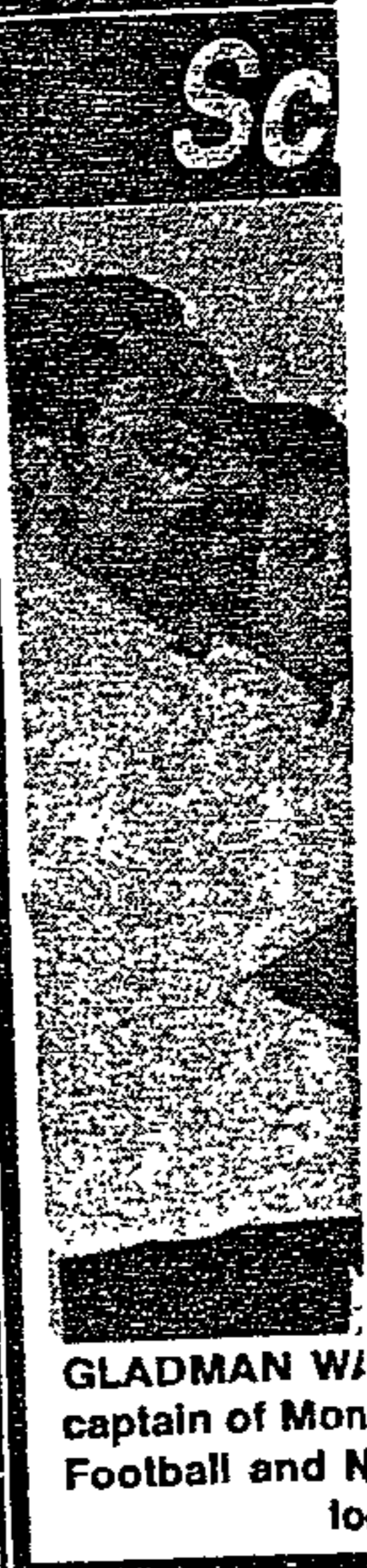
Mr Jules Browde, SC, counsel for the applicants, said although the application had been brought by the three, it was nevertheless a test case affecting the fates of more than 900 others, also dismissed.

He submitted the students were wrongfully sacked for "strike action" as the dismissal, on November 18 was given retrospectively from November 13 "when there was no threat of a strike".

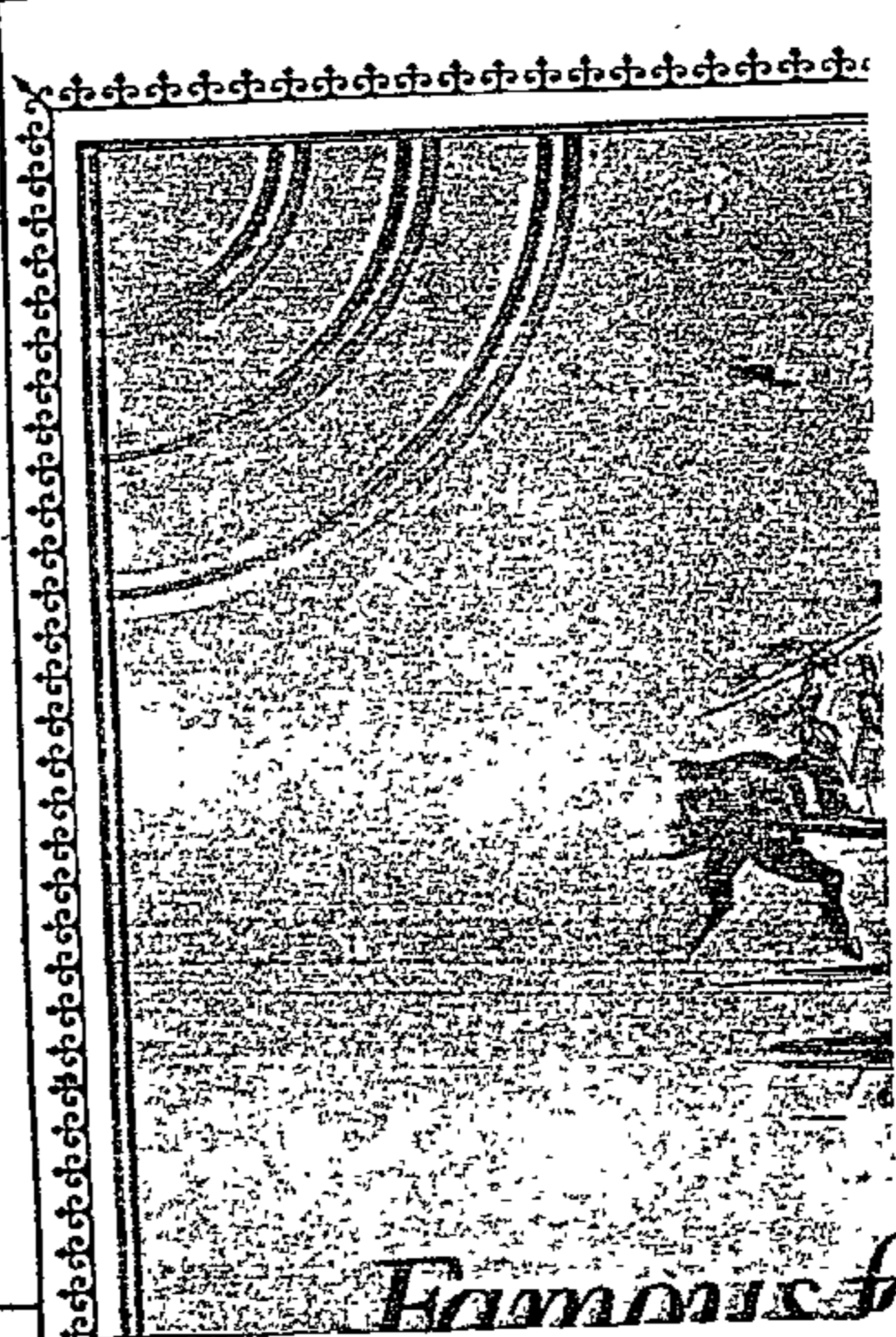
He said the students would suffer irreparable harm if they were not granted interim relief.

**SOWETAN  
Reporter**

## Student nurses challenge hospital over dismissals



GLADMAN WA  
captain of Mon  
Football and N  
10



OK for 58 percent  
hike in doctors' fees

Medical Reporter

THE Medical Association of SA (Masa) has backed a move by a group of doctors in the Hottentots Holland district to increase their consultation fees from R9,50 to R15 a visit — an increase of almost 58 percent.

A spokesman for the group, the Hottentots Holland Clinical Society, an informal body which represents almost all the private practitioners in Strand, Grabouw, Gordon's Bay and Somerset West, said the increase would bring members' consultation fees into line with those of practitioners elsewhere in the country.

The new tariff is to become effective on January 1 next year, when the medical aid tariff for

consultations will also go up from its present level of R9,50 to R13,40.

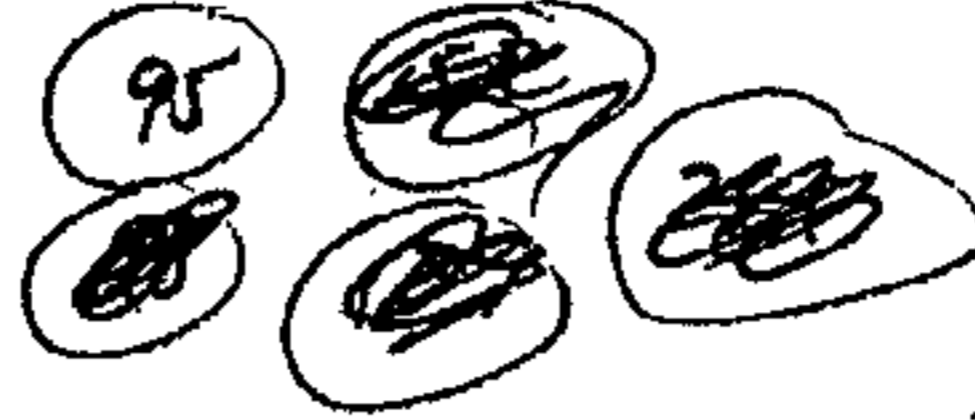
"Colleagues in other areas of the Western Cape are charging about R15 for consultations and those up-country about R18, so we calculated R15 was a reasonable level at which to set consultation fees," said the HHCS spokesman.

He said the group would maintain its policy of offering cut-rates, or even making no charge at all, to people who simply cannot afford the laid-down rate.

Dr Norman Levy, vice chairman of the Federal Council of Masa, said the move by the HHCS — most of whose 30-odd members are also Masa members — fell within the range of fees suggested by Masa to its members.

Time 26/11/85  
95  
B/A

CAPE TIMES  
26/11/85



# Hospital staff get jobs back

Own Correspondent

JOHANNESBURG. — All the student nurses and non-classified workers dismissed from their jobs at Baragwanath Hospital have been reinstated.

Their legal representatives were told yesterday afternoon that the hospital authorities had resolved to reinstate all the workers — approximately 900 student nurses and 800 non-classified workers — with immediate effect, under the same conditions as before they were dismissed and with their full benefits.

The 800 non-classified workers were dismissed on November 18 following a wage increase strike and the student nurses on November 19 after complaining about the hospital's curfew regulations.

Three nurses who said that they had not gone on strike brought an action in the Rand Supreme Court against the Minister of Health and Wel-

fare, Dr C V van der Merwe, the Director of Hospital Services, Dr Hennie van Wyk, and Dr C van der Heever, Chief Superintendent of Baragwanath Hospital, claiming the right to remain in the hospital's nurse's home and to continue working.

Mr Justice R Goldstone ordered that Miss Mardurata Tshabalala, one of the three nurses demanding to be reinstated, should be fully reinstated and allowed to live in her room in the nurses' home.

He ordered that the case of the second applicant, Mr Themba Mbobe, should go to full trial to decide whether he was employed on a permanent or temporary basis, and if he had been on strike between November 14 and November 18.

He found that the third applicant, Mr MacBeth Nxumalo, did not deny taking part in the strike action and therefore could not be granted any relief.

CAPE TIMES 26/11/85

# Baragwanath nurse, mother burnt to death

S  
U  
T  
W  
N

From SOPHIE TEMA JOHANNESBURG. — A student nurse at Baragwanath Hospital and her mother were burnt to death when their house was attacked and set alight by unknown men last week.

The home of Miss Nomthandazo Sishi, 23, who had re-applied to the Baragwanath Hospital after about 950 nurses went on strike, was attacked and burnt by four men who accused her of "selling-out".

Her mother Mrs Gertrude Sishi, died after she was trapped in the flames while four other people were seriously burnt and were admitted to the Baragwanath Hospital's intensive care unit.

One of the four people who sustained severe burns and who is reported to be in a critical con-

dition is well-known organist Mr Bongane Mdunge, who backs the famous vocal singer Yvonne Chaka Chaka.

The three other people who also suffered serious burns are Miss Lindi Sishi, Mrs Margaret Kunupi, and her husband Mr Anthony Kunupi.

According to the Sishi family four men came to their Dube house about 20 minutes after Nomthandazo had arrived at home.

They entered the house and said there is a "sell-out in here". As they spoke they sprinkled a powder-like substance on the floor before setting it alight.

The whole house was soon engulfed in flames and Mrs Sishi, 53, burnt to death.

Nomthandazo and the other burn victims were taken to hospital. She

died on Friday night. Relatives of the Sishi family said the last words the dying student nurse spoke were: "I am sorry to have caused you all this. I should not have re-applied."

Miss Sishi's father, Mr Aaron Sishi, a road safety lecturer in Maritzburg, said his daughter had spoken to him at the hospital and told him that their home was attacked because she had re-applied to the hospital after she and 949 other student nurses had gone on strike.

Mr Sishi, said he stopped her from saying anything further because he realized that she was in pain.

"She was burned beyond recognition and I could not bear to see her in that state."

● Hospital staff get jobs back, page 2

B  
Go  
Ra  
FT  
BD  
Do

INT  
D  
NT

# SOWETAN

TUESDAY, NOVEMBER 26, 1985

27c + 3c GST (PWV) Elsewhere 35c

## Judge gives different ruling on other applicants

# BARAGWANATH <sup>nurse</sup> WINS CASES

26/11/85 SOWETAN

*(scribble)*

95

*(scribble)*

Case

A RAND Supreme Court judge yesterday found that a Baragwanath Hospital student nurse, who brought an urgent application against the Transvaal Provincial Administration, was unlawfully dismissed and will therefore be reinstated at the hospital and is entitled to her accommodation.

Mr Justice R Goldstone, in giving judgment yesterday, said Miss Mardulata Tshabalala, the first applicant, was on leave at the time of the strike and was led to believe that she was dismissed.

He added that the chief superintendent of Baragwanath Hospital, Dr Chris van der Heever, did not apply his mind to each individual circumstance and

**SAPA**

that the notice of termination issued by him on November 18 was invalid in the case of all students, therefore giving each student the right to be heard.

Miss Tshabalala was awarded costs.

In the case of the second applicant, Mr Themba Mbohe, Mr Justice Goldstone said it was to be decided whether he was employed on a permanent

of temporary basis and that oral evidence must be heard to prove whether he was on strike between November 14 and November 18.

He added that Mr Mbohe was entitled to remain in the employ of the hospital and could occupy his room while the court decision was still pending.

### Meeting

He found that the third applicant, Mr Macbeth Nxumalo, "did not come to court with clean hands" as he did not deny taking part in the strike action and therefore could not be granted any relief. Therefore no order was made on his application and on costs.

Defence counsel for

the 940 student nurses who were dismissed following a strike action at the Baragwanath Hospital earlier this month, yesterday said they intended suggesting negotiations with the hospital authorities.

Advocate Chris Loxton said they were presently preparing a settling telegram which they intend sending to the hospital authorities telling them about yesterday morning's Rand Supreme Court judgment.

Dr van der Heever and other hospital authorities were not available for comment as they were in a meeting, apparently discussing the matter.

To Page 3 →

**CHRIS Loxton**  
**SP**

THIS YEAR OUR SPECIALS



# Bara nurses want to go in muffi

95

**JOHANNESBURG.** — Nurses at Baragwanath Hospital fear they may be assaulted if they leave or arrive at the premises in uniform, the press was told this week.

Nurses interviewed during a tour of the hospital told reporters that they wanted to be allowed to change out of their uniforms before leaving the hospital. They said they were frightened of being attacked.

A student nurse, Miss Nontandazo Sishi, 23, died along with her mother when her Dube home was attacked and set alight this week.

Miss Sishi had been accused of being a "sell-out" because she re-appeared for her job after she had been dismissed following a wildcat strike at

the hospital last week.

On Monday members of staff estimated that about a two-thirds of the sacked staff had not returned.

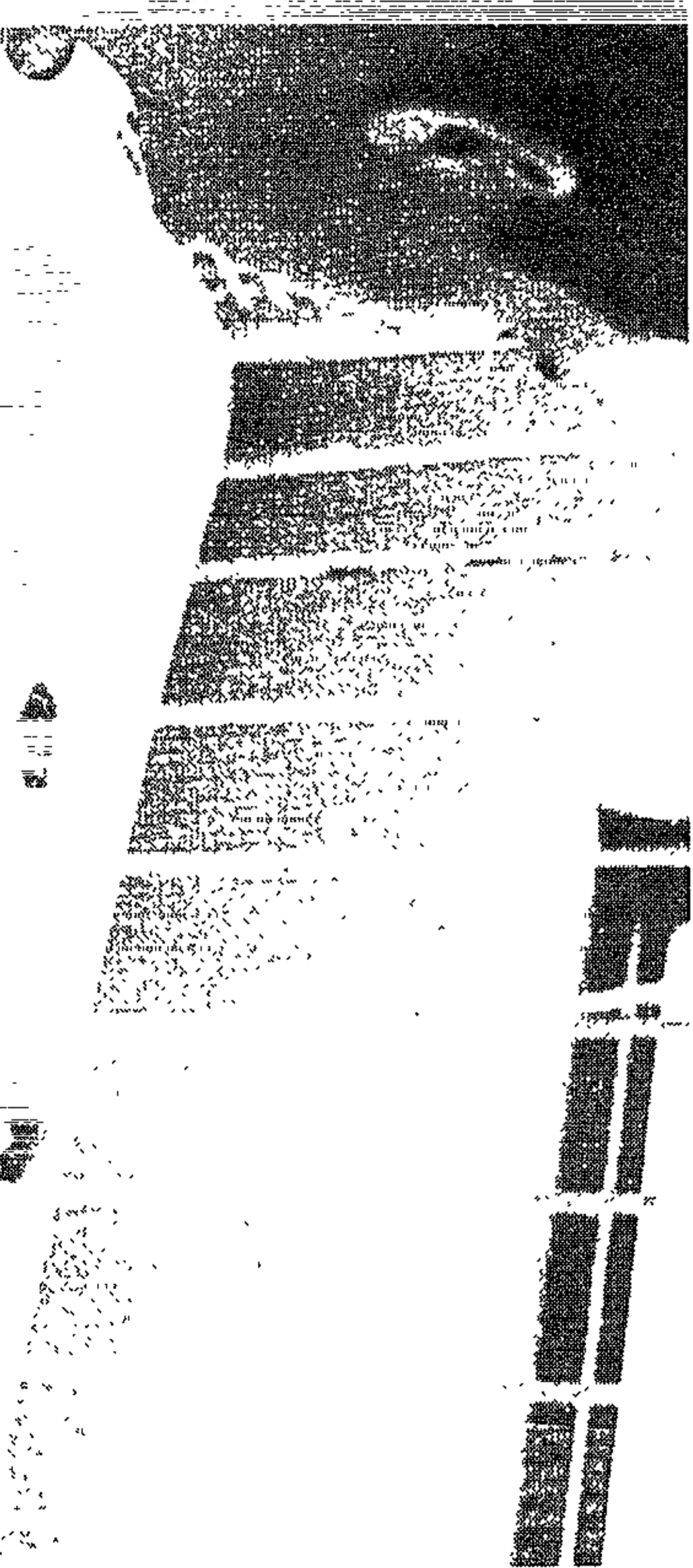
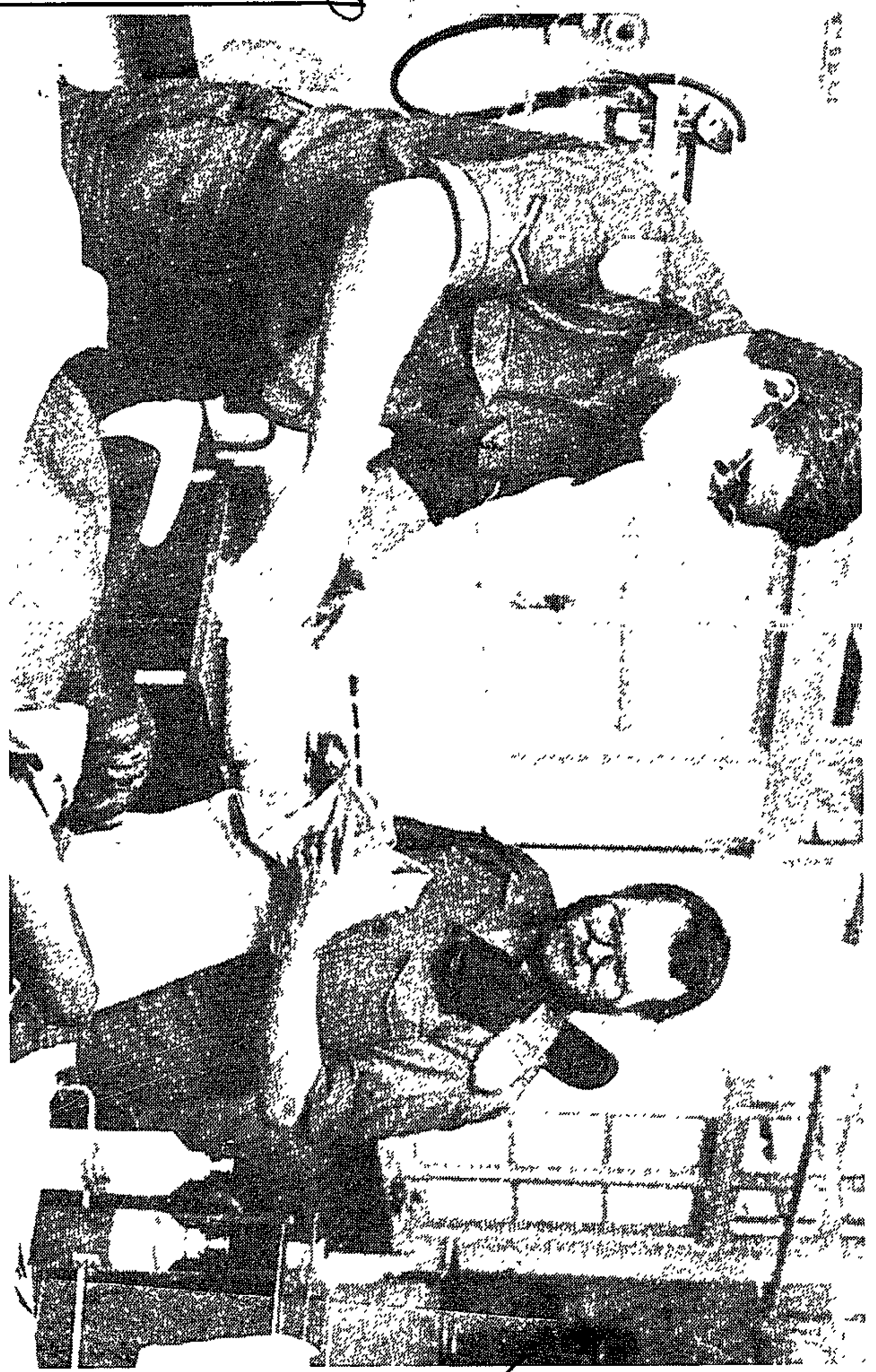
The director of hospital services, Dr Henrie van Wyk, said that 600 of the 800 student nurses had been re-employed and about 800 of the 960 daily paid workers had been re-employed.

"We still have to consider new applicants and are in the process of approaching people that are re-applying," he said.

After reports that the hospital was in a shambles, reporters were allowed to visit the hospital. They visited casualty, childrens' and intensive care wards, theatre block, canteen and medical wards. Conditions appeared normal.

**LEFT TOP:** Members of SA Defence Force give first aid to an injured patient at Baragwanath Hospital this week. Most of the nurses did not turn up for their duties at the hospital after last week's wildcat strike.

**LEFT BELOW:** A member of SADF feeds a baby at Baragwanath Hospital where a shortage of staff after last week's wildcat strike at the hospital forced authorities to call on the army for help.



CAPE TIMES 27/11/85

# Hospital 'tense' as nurses return

JOHANNESBURG. — Baragwanath Hospital authorities yesterday said that although many daily-paid workers and student nurses were back at work, soldiers would remain until the hospital could function fully on its own.

Baragwanath was reported tense as student nurses, reinstated after Monday's court ruling in their favour, resumed their duties and mingled with members of the army's South African Medical Services and civil defence volunteers.

Auxiliary workers who were the first to be fired had still not returned to work and nurses interviewed said their absence caused the tension.

About 900 student nurses and 800 daily-paid workers, who were dismissed earlier this month after a strike, were reinstated by the hospital authorities after a ruling in the Rand Supreme Court on an urgent application brought by the General and Allied Workers' Union.

A hospital spokesman said about 90 percent of the reinstated daily-paid workers and about 60 to 70 percent of the student nurses were back at work.

He said the remaining workers had not reported for duty and the hospital authorities were allowing them time to return because many had already left for rural districts at the time of their reinstatement.

The South African Nursing Council has condemned student nurses at Baragwanath Hospital for unlawful conduct and said it may take disciplinary action against nurses who deliberately neglected their duties.

"It is gratifying that registered and enrolled nurses at the hospital considered the interests of their patients as of paramount importance and were not involved in the alleged strike," said the president of the council, Miss C I Roscher. — Sapa



# NURSING COUNCIL CONDEMNS STRIKE

THE SOUTH African Nursing Council has condemned student nurses at Baragwanath Hospital for unlawful conduct and said it may take disciplinary action against nurses who deliberately neglected their duties.

<sup>SOUDEIAN</sup>  
"It is gratifying that registered and enrolled nurses at the hospital considered the interests of their patients as of paramount importance and were not involved in the alleged strike," said the president of the council, Miss C. I. Roscher. 95

"Strikes or go-slow strikes are explicitly forbidden in the Nursing Act of 1978 — which applies to all nursing personnel, including students," she said.

Meanwhile, Mr Philip Dlamini, secretary of the South African Black Municipal and Allied Workers' Union, said the South African Nursing Council was taking the issue on racial basis, not on the problems affecting the workers.

"They have been quiet all along and never cared for those student nurses. We say that the council's condemnation is premature because nobody has said it was a strike," Mr Dlamini said. 27/11/8

He said this week's Rand Supreme Court judgment was a victory for all workers in the public service which, he said, will bring senses to the authorities.

# 25 Bara nurses absent

95  
SOWETAN  
28/11/85

ONLY 25 of the 1 106 student nurses at Baragwanath Hospital failed to report for work yesterday, Dr Daan Kirstein, MEC in charge of the Transvaal Hospital Services, said.

He said three of the 25 absent student nurses had notified the hospital authorities they were on their way back to the hospital from home. The 22 others will be taken back when they arrived, Dr Kirstein assured.

The 1 687 auxiliary workers had also been reinstated but only 961 had returned to work. About 740 of the workers face charges of attending an "illegal gathering or alternatively staging an illegal strike". The General and Allied Workers' Union (Gaawu) has arranged legal representation for the workers.

Dr Kirstein expressed the hope that members of the Defence Force serving at the hospital since the strike began could be withdrawn by the weekend.

Meanwhile Miss C F Roscher, president of the South African Nursing Council, yesterday said her council was not going to press for disciplinary measures under the Nursing Act of 1978. She said: "We cannot take disciplinary action before the legal aspect of the strike is over. And we will not press for action this time but we will be obliged to do so in the future if such a case recurs."

# After the strike nothing's changed

CLAIRE PICKARD-CAMBRIDGE

HE decision to summon the SA De-  
ces Force to provide back-up ser-  
e during the Baragwanath crisis  
drawn sharp criticism from  
gns and a health association.  
The MSE for Hospital Services,  
an Kirstein argues that the pres-  
e of the SADF was essential for  
nursing of patients, cooking of  
als and washing of laundry.  
The patients would have suffered  
he SADF had not been called and I  
ve letters from black nursing sis-  
s at Baragwanath who thanked us  
calling in the SADF to assist  
im," he says.  
However, the Health Workers Asso-  
tion (HWA), the General and Allied

Workers Union (Gawu), the Black  
Health and Allied Workers Union of  
SA (Bhawusa) and the SA Black Muni-  
cipal and Allied Workers Union  
(Sabmawu) argue that the SADF's  
presence generated great tension  
among remaining health workers.  
Chairman of Bhawusa's advisory  
board Benny Alexander said had feel-  
ings between employees and the  
SADF had been reinforced by exist-  
tensions with the SADF in the town-  
ships. Others say black patients found

the presence of the SADF upsetting.  
An HWA spokesman supports this,  
claiming five senior doctors had gone  
to the student nurses' quarters early  
last week to try and facilitate the  
reopening of negotiations between  
nurses and authorities.  
He said an armoured vehicle had  
drawn up and members of the SADF's  
red beret units had ordered the doc-  
tors at gunpoint to lie on the floor.  
They had been searched and ques-  
tioned for 20 minutes before being  
released.

when the new budget is announced.  
However, health authorities have put  
the question of increases for auxil-  
iary workers to the Treasury and the  
commissioner of administration.

The unions in turn are dismissive of  
the employee associations, which they  
say have no negotiating power and  
only act in a consultative capacity.  
They claim the bodies are headed by  
senior personnel against whom work-  
er grievances are sometimes direct-  
ed.

Tensions have also arisen with the  
SA Nursing Council condemning stu-  
dent nurses for contravening the  
Nursing Act — which prohibits strikes  
— and warning that they may take  
action against the student nurses.

The unions have responded sharply,  
saying it is not certain that the nurses  
were on a proper strike and claim  
their sit-in was an indictment of the  
council's inability to effectively ad-  
dress problems.

Gawu president Samson Ndou has  
warned that they have instructed  
their lawyers to step in if student  
nurses are victimised by Nursing  
Council members.

Bhawusa's Alexander argues that  
the World Health Organisation, Pub-  
lic Services International and the In-  
ternational Labour Organisation ac-  
knowledge the right of nursing staff to  
strike.

Asked what had been achieved by  
the strike, the unions said it had cre-  
ated more unity among the workers  
as well as highlighting both their  
plight and the state's attitude towards  
workers' rights. However, their major  
demands for a collective bargaining  
arrangement and improved wages  
and working conditions have clearly  
not yet been met.

Kirstein said he had not heard of  
the incident and an SADF spokesman  
has dismissed the account as untrue.

The HWA argues that the SADF's  
presence cannot be justified because  
the authorities should have dealt with  
grievances beforehand. And at a mass  
meeting last week, nurses claimed  
the presence of the SADF allowed the  
authorities to continue running the  
hospital without addressing employee  
grievances.

Asked if the authorities would meet  
with any of the unions, Kirstein said  
the hospital was not prepared to nego-  
tiate with "outside bodies".

"We are only prepared to negotiate  
with people in our employ and believe  
existing professional bodies such as  
the Hospital Employees Association  
and the SA Nursing Association pro-  
vide adequate channels for this pur-  
pose. I believe they act in the interests  
of members because they were elect-  
ed."

Kirstein says there cannot be any  
increases for nurses before March,

- November 4: Auxilliary workers at Baragwanath Hospital meet to demand higher wages.
- November 13: Workers meet to hear management's response and are told their demand will be considered in March with the start of the new financial year. A fracas breaks out in the evening with workers and some student nurses allegedly rampaging through the kitchens and dining rooms.
- November 14: Workers reassemble and some want to travel to Pretoria to make representations to the health authorities. Police arrive and several hundred are arrested and charged with attending an illegal gathering. This erupts in a wildcat strike among auxilliary workers.
- November 15: Student nurses approach the authorities with their

- grievances. Agreement cannot be reached and they stage a sit-in at their quarters.
- March 17 and 18: About 800 student nurses and 700 auxilliary workers are fired. The SADF is summoned to provide backup at the hospital and observers describe the area as akin to a "militarised zone".
- Monday 25: Authorities begin to reinstate employees without loss of benefits. This coincides with a succesful supreme court application for the reinstatement of student nurse Mardulate Tshabalala.
- Wednesday 27: Most employees are back at work.
- Thursday 28: Most SADF members have left Baragwanath. Charges against workers who attended an "illegal gathering" are dropped.

# AS Baragwanath crisis deepens



Dr. MATSEKE officials slammed.

# OUTSTANDING

THE crisis at Baragwanath Hospital deepened yesterday when doctors and nursing sisters announced they would down tools this morning if dismissed workers were not reinstated.



95 SOWETAN

# OUT

20/11/85

This means that the giant hospital will be brought to a virtual standstill with its patients left stranded. There are around 12 000 patients at the hospital.

This ultimatum was given to the hospital superintendent, Dr Chris van der Heever, yesterday by a delegation representing doctors, nursing sisters, radiographers, technical and clerical staff.

## Strike

According to our information all staff at Baragwanath not affected by the strike last week have now thrown in their lot with the dismissed workers.

# THREAT

BY MOJALEFA MOSEKI

He did, however, concede that the army could give such service if asked to do so.

A spokesman for the Health Workers' Association (HWA) said when the doctors and nursing sisters were told that Dr Chris van der Heever was "unavailable to respond to their petition submitted after the 10am meeting they resolved to down tools today at 11am if he has not responded".

Late yesterday it was reported that Dr van der Heever had agreed to meet a delegation of the medical personnel comprising of nursing sisters

and doctors.

And yesterday morning all student nurses were evicted from the hospital by 11am nurses were ordered to collect their belongings from their rooms and leave.

The army and police were present. There were no incidents.

Meanwhile the court action to be brought against the hospital by dismissed workers will be heard today. Lawyers acting for the dismissed workers were yesterday busy with preparation of the papers and said they would only bring the matter before the court today.

As reported in The SOWETAN yesterday an urgent application is to be brought in the Supreme Court for the reinstatement of all dismissed workers.

The Institute of Public Servants yesterday condemned the action of the Baragwanath Hospital authorities in dismissing striking staff and the eviction of student nurses from their hostel. Its chairman, Dr S K Maseke, said yesterday that his organisation condemned the action of the authorities at Baragwanath "in the strongest terms".

"The authorities have responded to the situation in a most high-handed way. They did not even bother to consult with community or national leaders to help solve the crisis," Dr Maseke said.

STAR 4/12/85  
95

# Checks on nurses' overtime attacked

Pretoria Bureau  
The South African Nursing Association (Sana) has objected to the fact that some nurses have been asked to provide written proof that they are working the extra hours required by the Government every week.

The extra hours are part of a Government savings drive.

However, Sana told the Minister of National Health and Population Development, Dr Willie van Niekerk, that it objected to having its members "policed" in this manner.

Sana's president, Pro-

essor Margaret van Huyssteen, said this approach by certain authorities had been counter-productive.

"The nursing profession supports the principle of increased productivity and measures to contain costs in health care," said Professor van Huyssteen.

The association also petitioned the Minister for a review of nursing salaries and conditions of service and reports of hardship among nurses were brought to his attention.

Dr van Niekerk said he would give the matter his personal attention.

CAPE TIMES 4/12/85

# SADF medics quit Baragwanath

Owens Correspondent

JOHANNESBURG. — A Defence Force headquarters spokesman in Pretoria last night confirmed that elements of the SADF medical corps had been withdrawn from Baragwanath Hospital in Soweto.

He said the withdrawal had followed the return to work by daily-paid workers and student nurses who had been dismissed by hospital authorities after a walk-out.

The nurses' union went to the Rand Supreme Court to request an order reinstating them. The court ordered that they should be reinstated pending a full trial.

Subsequently hospital authorities announced that all of the 1 800 dismissed staff should be reinstated until the outcome of the trial which could involve hundreds of witnesses.

In the urgent application brought by the nurses' union, the judge ruled that it was arguable whether all of the dismissed people had been on strike or whether hospital authorities had acted arbitrarily against the majority of its staff without regard to whether they were in fact on strike or not.

Since November 17, SADF and police units have guarded and run the hospital except for intensive care units.

# Buthelezi praise for defence force hospital help

ARGUS  
5/12/85  
[Handwritten initials and scribbles]

Argus Correspondent

DURBAN. — Kwazulu Chief Minister Chief Mangosuthu Buthelezi praised the South African Defence Force for sending conscripted doctors to Kwazulu hospitals.

He was speaking at the opening ceremony for a R100 000 outpatients clinic at Nkonjeni Hospital, in the Mahlabathini district of Kwazulu near Ulundi.

### SITE OFFICE

The clinic has been donated by Murray and Roberts Construction Ltd. It was formerly used as the site office during the construction of the Kwazulu Legislative Assembly.

Chief Buthelezi congratulated the contractors for building the hospital.

He also thanked the young doctors who were prepared to move away from the glitter of city lights to serve their people in rural areas such as Mahlabathini.

"We are also grateful to the SADF for allowing some of the doctors to come to serve here in



Chief Buthelezi

our hospitals instead of going to the borders."

However, while Kwazulu had a single doctor for every 90 000 people, there was still a long way to go, Chief Buthelezi said.

### Free flights for servicemen

Staff Reporter



# Conditions worse, but nurses are content

11/12/85  
Pretoria Bureau

*STAR*  
In spite of their slashed bonuses and longer working hours, most nurses still profess to be happy in their jobs

According to a recent survey of 670 nurses conducted by the HSRC in conjunction with the South African Nursing Association (Sana), just over 63 percent of nurses said they were very satisfied with their posts and another 33 percent said they were reasonably happy.

A total of 90 percent said they were in no hurry to change jobs.

Like other public servants, nurses took a one-third cut in their bonuses this year and most of them are now working up to two hours extra every week as part of a Government savings drive.

Their salaries have also remained static for some time.

But of all the respondents, only 3,72 percent said they were reasonably dissatisfied with their lot.

More than 65 percent said morale within the profession was high, while only 3,5 percent said they believed morale was poor.

Sana executive director Mrs Susan du Preez said her association could be proud of its members, who, in spite of problems, exhibited high morale and great job satisfaction.



2171 measuring 827 sq m, corner Gokonda & Canalia Streets, Cansaan Heights  
 Ref No 2201 measuring 727 sq m, Canalia Street, Cansaan Heights  
 Enquiries phone Real Estate 7 — 88-1036/63  
 or Page 46-8024 Ext 3388

**JUNIS BUCHINSKY**  
 The "BIG" name in the Auctioneering game  
 PHONE 21 7520

*"Why are Buchinsky advertisers everywhere?"*  
 Lm272939

**WOMEN**

**EVERY TUESDAY**  
 TEL: 23-1163 EXT 280  
 THE ANSWERS IN THE ARGUS



Miss J M Strydom with a group of children of various ages in the small classroom.

**Teaching**

ANNE TAYLOR

THIS school has three teachers, teaching in English, Afrikaans and Xhosa in 17 different places. The number of pupils varies from day to day, and it's a happy day when a child leaves.

This is the Groote Schuur Hospital School which teaches patients from Sub-A to Standard 7. Some come to the classroom on E floor, others have to be taught in their wards, in traction or in the low light of the eye-surgery department. One kidney transplant pupil has to be taught in mask and gown because he is so vulnerable to infection.

"One day we will have 20 pupils, the next 30," says Norman Wolf, the principal. "The children appreciate school here and it's a pleasure to teach them."

**Audio-visual aids**

The school was started 36 years ago and when Mr Wolf took over this year he set out to improve the facilities, and started looking for teaching aids. There is now a small classroom for up to eight pupils. He garnered donations of curtains and paint which make the room look homely and provide a change of scene for the children. The activities also provide variety and stimulation.

"We have to devise both equipment and teaching methods for children whose movement is restricted," says Mr Wolf. He is proud of computer on a trolley designed by UCT bio-engineering department for the use by immobilised children.

Audio-visual aids help to extend the teaching time, he explained, by keeping the children happily occupied for longer periods of the day. Learning distracts them from their surroundings and pain and discomfort.

"We have to slot in with a child's treatment, X-rays, physiotherapy, etc. and co-operate with the occupational and speech therapists to make sure that activities used in the classroom are appropriate for the child's condition."

There is not enough time for the teachers to give the children all the attention they need and



Seven-year-old Melanie Snell with Nurse T P J Bird and teacher Mrs E J Nell. Melanie suffers from brittle bones and the hospital school ensures that she doesn't fall behind her classmates.

**children in hospital**

he is establishing a media centre from which they and teachers at other hospitals can draw items like audio visual programmes and tapes.

He already has a donated micro-computer and received two tape recorders from the Department of Education Funds raised at a pottery exhibition and auction held at the hospital helped to buy a television set and video recorder, half the cost of which was donated by the supplier.

He has also been able to acquire some software, video programmes and games, story and music tapes and discs.

"Tape Aids For The Blind have given a library of tapes from which blind children and those with visual difficulties can borrow. We are looking forward to getting tape aids in Xhosa for children."

"Art, too, is therapeutic. It acts as a catalyst and helps the children give non-verbal expression to their feelings. This is very important in a hospital. The volunteer Sunshine Ladies do some art and craft work with the children."

"We need special equipment for long term patients. I hope that funds will become available to make art trolleys which can be taken to beds as well as to have an art room. In about three years time we hope to have more space in the new and old hospital buildings."

**Specialised teachers**

"Children come here from all over, from Mauritius, the Transkei, the Boland. Hospital is a great change for them. Their eating habits, for instance, may be different."

"The Transkei is much more oriented towards assisting hospitals. They have specialised teachers who come in for individual patients. We don't even have teachers for our high school pupils."

A high school and a pre-school teacher are both needed to cover the patients' needs and children often need remedial teaching. High school students can often cope on their own to some extent but they do need specialist teachers for maths and language. These teachers could rotate through the several hospitals as they are needed. Mr Wolf hopes that improved economic situation extra teachers will be provided.

11/12/85  
 95

One standard 7 pupil needs all subjects because he is in for three months. It is important that a child keeps up his school work.

Student pre-school teachers from Barkly House and students from Mowbray Teachers Training College will be coming to the hospital for teaching experience.

"The teachers are often also friends and counsellors when children are away from their families. They provides a form of continuity, seeing children every day. They are a stable factor in their lives and are trusted. They can contribute to treatment picking up things that the medical staff miss and being aware of the child's improving or worsening condition."

"We can do a lot to relieve tension by keeping children stimulated. Their mental and physical improvement is more rapid."

"I am very impressed by the children's ward young nurses. They treat the patients marvelously, responding to their needs, often buying sweets or gifts for their patients. One teacher made a dress for a little girl to wear on her return home to the Transkei."

**Needs vary**

The needs of the children vary from week to week and from patient to patient. One girl of 14 from the Transkei learned to read and do arithmetic while she was at Groote Schuur. When she returned to hospital the following year the book she had been given was still her most prized possession.

An orientation classroom is being organised and another pet project is making an orientation video with the help of Professor Eric Meyer at UCT. It will make admission to hospital less of a shock for children. Copies would be sent to schools. But for this a sponsor is needed.

"I also want to set up visits to the hospital for school children, give them miniature uniforms and instruments and let them play out the hospital roles, to take away their fear of hospitals."

Mr Wolf has recently been involved in forming a hospital schools association to give the administrators more muscle and he plans a seminar in April for hospital school teachers throughout the country. He corresponds with hospital schools overseas and hopes for a national conference in about two years.

# Nurses: We're happy

Argus Correspondent

PRETORIA.— In spite of their slashed bonuses and longer working hours, most nurses still profess to be happy in their jobs.

According to a recent survey of 670 nurses conducted by the HSRC in conjunction with the South African Nursing Association (Sana), just over 63 percent of nurses said they were very satisfied with their posts and another 33 percent said they were reasonably happy.

A total of 90 percent said they were in no hurry to change jobs.

Like other public servants, nurses took a one third cut in their bonuses this year and most of them are now working up to two hours extra every week as part of a government savings drive.

Their salaries have also remained static for some time.

But of all the respondents, only 3,72 percent said they were reasonably dissatisfied with their lot.

More than 65 percent said morale within the profession was high, while only 3,5 percent said they believed morale was poor.

Of the latter group, most said they felt that a poor relationship between employer and employee had a negative effect on morale.

On the profession's public image, 80 percent stated unequivocally that it was vital that this be improved.

Sana executive director Mrs Susan du Preez said her association could be proud of its members, who, in spite of problems exhibited a high morale and great job satisfaction.

OFS is to train  
17/12/85 STAR  
more local nurses

Own Correspondent

BLOEMFONTEIN — The Free State Provincial Administration is to stop recruiting overseas nurses for provincial hospitals, according to the MEC for hospital services, Mr Humphrey Simes.

More attention will now be given to the training of white, coloured and black nurses and a training college for coloured nurses is to be set up at Pelonomi Hospital.

Of the 31 people recruited overseas in 1983, only five are still in the service of the provincial administration.

Mr Simes said it cost R92 000 to bring the 31 people from Britain, the Netherlands and Belgium in 1983. They were recruited because of a serious shortage of trained personnel.

He said the foreign personnel gave good service but experienced language problems.

# Probe on 'satisfied' nurses sparks anger

STAR  
20/2/85  
95

Nurses have reacted angrily to the publication of research results which suggest most nurses are satisfied with their jobs.

According to a survey carried out by the Human Sciences Research Council in conjunction with the South African Nursing Association (Sana), 63 percent of nurses said they were extremely satisfied with their posts, while 33 percent said they were reasonably satisfied.

However, a large group of nurses, who cannot be named because they are officially restricted from talking to the Press, say they regard these results as totally invalid and misleading.

A spokesman for the group of nurses questioned whether the sample of 670 nurses who answered questionnaires was representative of the total 65 000 registered nurses in South Africa.

"Results from a sample of just over 1 percent of nurses should not be used to create the impression that nurses are satisfied."

"Furthermore, an 80 percent response rate is needed in a survey like this. But in fact replies were received from only 670 of the 2 000 nurses who were sent questionnaires," said the spokesman.

She said results could easily be swayed, depending on what language or racial group were questioned, and whether they worked in cities or towns.

Every urban nurse she had spoken to was

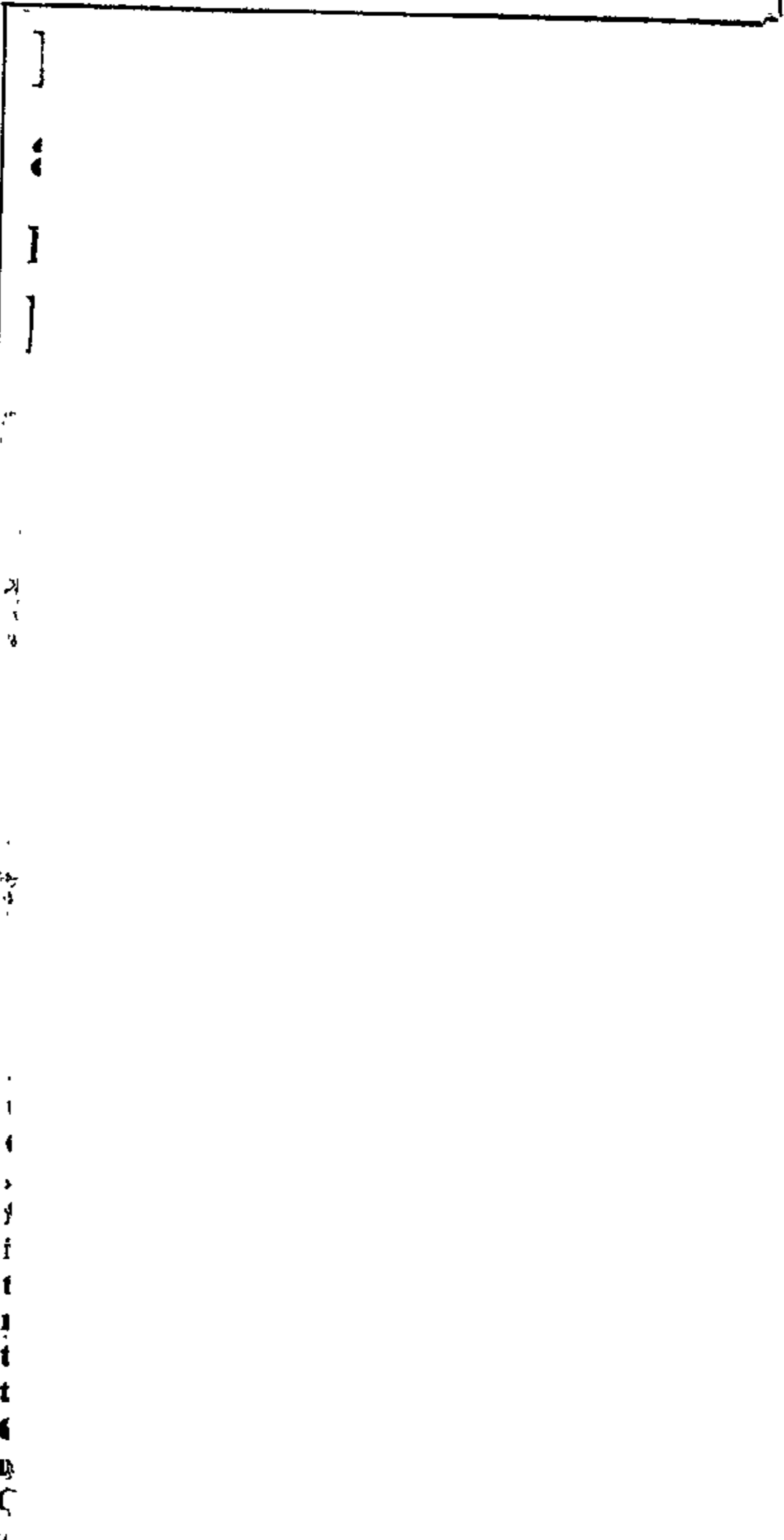
dissatisfied with working conditions, she said.

Nurses, always a poorly paid group, had taken a one-third cut in bonuses this year, and most were working up to two hours extra every day in a Government savings drive.

The spokesman said the report could reveal Sana's inability to represent nurses in South Africa.

Mrs Susan du Preez, executive director of Sana, said the HSRC survey was scientifically conducted and results were drawn from a random sample.

She said the results of the survey had come as a surprise to Sana, as the association was well aware of the individual problems and hardships nurses suffered.



HEALTH & DISEASE — NURSES

1986

JAN. — DEC.

72  
55  
/

# Readers give black nurses their vote of confidence

People who live on the Reef are overwhelmingly in favour of black nurses at white hospitals.

Invited to air their views, 50 readers called *The Star* last night to say how pleased they were hospitals were finally to make more use of trained black nursing staff. Only two callers objected to black nurses while a third caller described the nurses as "tools of the white regime". Many wanted to know if the nurses were being paid the same as their white counterparts.

Here is some of the reaction:  
Mr Hassim Varachia, of Krugersdorp, said: "It is disgusting black nurses are allowed to nurse white patients while white hospitals are reserved to black patients. Open all hospitals to all patients."  
Miss Kathleen Florence, of El

## SPEAK OUT!

dorado Park, said: "When you are really ill who cares about the colour of the nurse? I am happy black nurses are being used to help nurse white patients but I hope they are receiving equal pay."

Mrs Margaret Courtnage, of Blairgowrie: "Who cares if nurses are black or white as long as they are competent?"

Mr Aaron Makhatha, of Soweto: "I hope black nurses are receiving equal pay and not being discriminated against."

A Johannesburg medical student, Mr. Ivor Katz, said: "Three or four nurses are employed for every 30

95

beds at Baragwanath, yet each bed has an average of 100 patients per year. Instead of using Black nurses at white hospitals, more posts should be created at Bara. Better still, disband apartheid in the health services now. The Johannesburg Hospital is half empty anyway."

Mr Paddy Banks, a railways pensioner from Florida, said: "I pay top rates for medical attention and I expect the best. I don't want black nurses if I go to hospital."

He was supported by Mrs June Stewart-Wilson, of Berea, who said: "I don't want black nurses in my hospitals. Look at what's happening

on our beaches.

Mrs Beryl Clark, of Benoni, who was nursed by black sisters when her daughter, Stella, was born 29 years ago today, said black nurses were fantastic.

Mrs Denise Anderson, of Vereeniging, said black nurses were far more caring.

Mr Abbey Lamakoe, of Soweto, said: "The whites know where to come when they need help. This is another type of exploitation. Our black nurses have no option but to work but they are being used as tools of the white government."

Mrs Vanessa MacBain, of Kemp-ton Park, said: "I don't care about the colour of nurses but I have found white nurses often have a chip on their shoulder. Black sisters are more compassionate."

Mrs Marlene Paatz, of Mayfair, said she was an Afrikaner and a staunch Nationalist but could see no difference in the colour of nurses. "Black nurses will give us a better service."

A coloured woman from Brakpan said: "I'm glad white hospitals are taking black nurses. Perhaps they will teach them some manners. They are so rude to their own patients."

An unidentified caller had a simple story to tell. "My father was a racist when he was admitted to the Johannesburg Hospital and quite shocked when a black nurse wanted to wash him. However, she was so professional in her manner, she won him over in no time. We now have a black nurse to care for him at home."

**As** CITY P.  
**good**  
**as** 9/3/86  
**gold** 95

**By HERMAN LETSIE**  
GOLDFIELDS Training School for male nurses has produced some of the best results in the country.

The school - at West Driefontein Gold Mine's Leslie Williams Memorial Hospital near Carletonville - obtained a 100% pass in the last exams.

A massive 80% passed with distinctions.

Proud principal tutor JM Nojaja said 10 of the school's male students had entered for the SA Nursing Council's examination.

"All the students passed, and eight obtained distinctions," he told *City Press*.

The eight were: J Gaya, N Silongo, P Phetde, E Khoza, L Rubela, Colin Mgoduka, J Hoshe and B Dabula.

Mgoduka obtained 87% - making him the fifth best South African student to write the exam last year.

11/03/86  
11/03/86  
11/03/86

CAPE PROVINCE

WHITE	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
COLOURED	0	0	0	0	0	3	0	2	0	1	1	1	0	0	0	0	0	0	0
ASIAN	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
BLACKS	0	0	0	1	2	4	0	3	0	1	1	1	0	0	0	0	0	0	0

(1) (b) DEATHS FROM POLIOMYELITIS

1984 1985  
Dec Jan Feb Mar Apr May Jun Jul Aug Sep Oct Nov Dec

TRANSVAAL

WHITE	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
COLOURED	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
ASIAN	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
BLACK	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0

O.F.S.

WHITE	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
COLOURED	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
ASIAN	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
BLACK	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

NATAL

WHITE	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
COLOURED	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
ASIAN	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
BLACK	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

CAPE PROVINCE

WHITE	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
COLOURED	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
ASIAN	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
BLACK	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

(2) POLIOMYELITIS IMMUNISATIONS

Figures for 1985 are not yet available. Figures for 1984 are given below.

TRANSVAAL	Number given their third vaccination	Number given additional fourth vaccination	O.F.S. WHITE	4971	4272	COLOURED	1219	879	ASIAN	3	3	BLACK	24299	19962
CAPE	WHITE	6212	4872	COLOURED	2646	2506	ASIAN	16278	14898	BLACK	40405	21559		
TRANSVAAL	WHITE	40411	34797	COLOURED	7130	6525	ASIAN	3461	3090	BLACK	106043	77155		

*95*  
241. Dr M S BARNARD asked the Minister of National Health and Population Development:

(1) How many (a) applications to train as nurses were (i) received and (ii) accepted from, and (b) vacancies existed at institutions for the training of nurses for, Whites, Coloureds, In-

The MINISTER OF NATIONAL HEALTH AND POPULATION DEVELOPMENT:

Position as at 31 December 1984.

(1) (a) (i) Whites	5558	(ii) 4292
Coloured	3541	1051
Indians	924	298
Blacks	40615	4791

(b) Whites 2415  
Coloureds 1416  
Indians \*  
Blacks \*

\*Information can unfortunately not be supplied in respect of each respective racial group.

(2) Whites 1898 #  
Coloureds 588 #  
Indians 219 #  
Blacks 3161 #

Information obtained from the South African Nursing Council.

*95*  
242. Dr M S BARNARD asked the Minister of National Health and Population Development:

How many hospital beds were (a) available and (b) needed for (i) White and (ii) non-White patients in hospitals falling under the control of his Department as at the latest specified date for which figures are available?

The above figure does not include Private Hospitals subsidised by the Department of National Health and Population Development.

The MINISTER OF NATIONAL HEALTH AND POPULATION DEVELOPMENT:

(a) Beds available: 6469  
(i) Whites..... 6469  
How many cases of acquired immune

AIDS

243. Dr M S BARNARD asked the Minister of National Health and Population Development:





# Nurse held after escape of ANC cadre

CP Correspondent

A MALE nurse from Edendale Hospital in Pietermaritzburg - the scene of the daring rescue operation of an ANC cadre two weeks ago - has been detained under Section 29 of the Internal Security Act.

This was confirmed by Durban police, who are keeping quiet about the major breakthrough in their search.

They would not confirm reports that two student nurses at Edendale had also been detained.

The detentions are apparently linked to the police follow-up operation following the rescue of Gordon Webster, alias Stever Mkhize, who was kidnapped from the hospital.

Mkhize - seriously injured during a shootout on April 27 when cops allegedly found him and a fellow guerilla loading mines, detonators and AK47 ammunition into a car - was being treated in the ICU for severe abdominal wounds.

He was rescued by "comrades" - armed with automatic weapons under their white coats - who wheeled him out on a trolley to a waiting minibus.

Two cops were shot in the raid - believed by observers to show the Mkhize may have been part of a highly sensitive operation and that he may have had information which could be vital in cops' attempts to smash ANC operations in Natal.

He was rescued by "comrades" - armed with automatic weapons under their white coats - who wheeled him out on a trolley to a waiting minibus.

Two cops were shot in the raid - believed by observers to show that Mkhize may have been part of a highly sensitive operation and that he may have had information which could be vital in cops' attempts to smash ANC operations in Natal.

The son of an Edendale nurse, Mlungisi Buthelezi, 20, was killed in the cross-fire and two visitors - S Shange, 17, and N Nkabinde, 18 - were injured.

Doctors were this week divided on whether Mkhize could have withstood the rough treatment of the "movie-style" raid.

Earlier, Edendale Hospital superintendent Dr Peter Evans said Mkhize's urinary system was "working" and that he could pull through if he did not bleed internally.

Cops have offered a R2 000 reward for information leading to his capture.

When police shot at... and a youth died of bullet wounds... victim was found dead in a street... edly shot in the mouth, another... A 35-year-old man was reported... are scant.  
Details of the five casualties... at... and were teargassed and shot... clashed with police at the funeral... Opponents of the vigilantes... group for his death... blamed the Umbokotho vigilante... found last week, and residents... Skosana's mutilated body was... victim Jacob Skosana.  
day at the funeral of vigilantes... their protests in earnest on Tues-... to disperse the youths, who began... ber bullets, birdshots and teargas... The security forces fired rub-... Ndzundza Royal Kraal.  
independence meeting near... protest at the ban on an anti-... took to the dusty rural roads in... dreds of marching youths, who... sive confrontations with hun-... and troops were involved in mas-... According to residents, cops... "sustained fighting" in the area... ple have been shot and there is... All they'll say is that five peo-... news blackout.  
cops in the area have enforced a... details are unavailable because... injured in the battles, but official... Hundreds of people have been... police.  
involved in running battles with... and anti-independence groups in-... - with at least five people dead... dependence" raged on yesterday... KWANDEBELES' "war of in-... CP Correspondents  
By SINNAH KUNENE and

## FIVE dead of independence



# Impromptu strike <sup>STAT</sup> <sup>852</sup> <sup>95</sup> — 9 nurses <sup>28/5/86</sup> cautioned

By Joe Openshaw  
Medical Reporter

The strike by 800 Baragwanath nurses last year was caused by desperation — it was the “only way” they knew to express their anger with the “least harm to people and property”.

The principal matron of Baragwanath Hospital, Matron Mildred Makhaya, said this in mitigation at a disciplinary committee hearing of the South African Nursing Council in Pretoria yesterday.

The committee found nine nurses guilty of improper and disgraceful conduct for failing to report for duty on November 14 and 15 last year without having proper authority to be absent.

The nine were cautioned by Mrs Iris Roscher, president of the disciplinary committee, who said: “Proper machinery to deal with grievances was not available to student nurses.”

The hearing follows the hospital crisis in which 800 nurses were dismissed by the superintendent, Dr Chris van der Heever, after an impromptu strike.

## FAILING TO REPORT FOR DUTY

The nine admitted failing to report for duty in breach of regulations. They were: Jeanette Mpshe (28), Mary Theresa Papo (26), Tembo Mboho (28), Marjorie Morodi (21), Alice Shilote (25), Frances Morafo (23), Hazel Mophosho (29), Mary Maglou (24) and Nobantsi Shibambo (23).

Matron Mildred Makhaya, who holds an honours degree in nursing and is also the nurses' guidance officer, said in mitigation: “They had no platform to air their views except at student nurse meetings. They were single voices crying in the wilderness.”

They had felt increasingly inadequate in trying to express their grievances. Some had also been “severely assaulted” by other hospital employees.

After desperate attempts to be heard by the authorities, they had tried to approach Dr van der Heever. But they waited three hours for a meeting, after he had twice previously refused to see them.

“The strike was not planned — it was a spur of the moment situation,” said Matron Makhaya.

## SPECIAL POSITION

Mr C D A Loxton, appearing for the nurses, argued that nurses owed a duty to their patients because of their special position in the community. And the Labour Relations Act did not allow them to strike.

This meant authorities had an added responsibility to provide at all times the mechanism for the fair and proper airing of their grievances.

“Their conduct cannot be condoned, but it can be understood,” he said.

Mrs Roscher said: “A stressful situation prevailed. Student nurses had tried unsuccessfully to air their grievances and no proper machinery to deal with them was available.

“The strike had been unpremeditated and this has been taken into account.”

Mrs Roscher pointed out before the hearing that the outcome would decide how the council would proceed against the other nurses involved.

Clauses that the nurses had wilfully neglected their duties were deleted from the original charge sheet by Mr Johan Smit, appearing *pro forma* for the Transvaal Hospital Services.



Nurses waited outside the packed SA Nursing Council building to hear the outcome of a disciplinary hearing of nine student nurses from Baragwanath Hospital who had failed to report for duty on November 14 and 15 last year.



SENIOR Nursing Sister, Busisiwe Makhaya is surrounded by a number of nurses after the disciplinary committee hearing in Pretoria yesterday

# PARDON FOR BARA 9

Sowetan 22/5/86 95

THE nine Baragwanath Hospital nurses who appeared before the South African Nursing Council's disciplinary committee on charges of improper or disgraceful conduct were cautioned and discharged in Pretoria yesterday.

The nine are Miss N Matlou, Miss K Mophosho, Miss F Morafe, Miss M T Papo, Miss M Mpshe, Mr J Nboho, Miss P M Morodi, Miss W H Shibambo and Miss A Shilote. The six-member committee led by the council's president Ms C I Röscher, handed down a verdict after defence advocate Mr Chris Loxton and *pro forma* com-

## Hundreds of nurses at hearing

By MONK NKOMO

plainant's advocate Mr J Smut, SC, agreed that the nurses be cautioned.

Both lawyers also agreed to withdraw two further charges in which the nurses were alleged to have wilfully and negligently failed to treat or care for patients and render the correct administration of treatment, medication and care to patients.

The hearing took a dramatic turn when Mr Loxton pleaded

guilty on behalf of the nurses to a charge of improper and disgraceful conduct. The Nursing Council alleged in the charge sheet that the accused failed to report for duty on or about November 14 last year between 7am and 4pm in ward 31 without the employer's authority.

Mrs Mildred Adelaide Makhaya, a sister tutor at the Baragwanath Hospital, pleading in mitigation for the nurses said their actions were "unanticipated" and "unplanned" and that they had no platform to air their frustrations and grievances.

"They had no platform to air their views except at large student nurse meetings where they were single voices crying in the wilderness," Mrs Makhaya said.

Hundreds of nurses from throughout the country were locked out of the hall which was packed almost three hours before the proceedings began.

## Police

The police were condemned for their actions when they arrived outside the council's offices at about 10am and ordered nurses to leave the building corridors within five minutes.

Officials of the Health Workers' Association averted confrontation after discussions with senior officers.

Although the nurses left soon afterwards, there were still about four police vehicles near the premises. Policemen kept watch even after the hearing.

## Mthembu is killed

THE former president of the Azanian People's Organisation, Mr Khehla Mthembu, was killed yesterday by youths in Soweto, Sapa's correspondent reports.

Mr Mthembu was bludgeoned to death with stones, pangas and bricks at Emdeni High School where he was to address students and call for a truce between Azapo and the Soweto Youth Congress, which is opposed to Azapo, the correspondent reported.

The two organisa-

## SAPA

tions were involved in a fierce battle at the weekend in which five people died and several houses were burnt.

Mr Mthembu was confronted by a group of armed students when he went to see the school principal.

Before he could address the students, he was chased and forced to barricade himself in the principal's office. He was then dragged out of the office and hacked to death in view of teachers and

residents.

Members of the SADF arrived a few minutes later and saved Mr Mthembu's body from being burnt.

He was an executive member of Azapo.

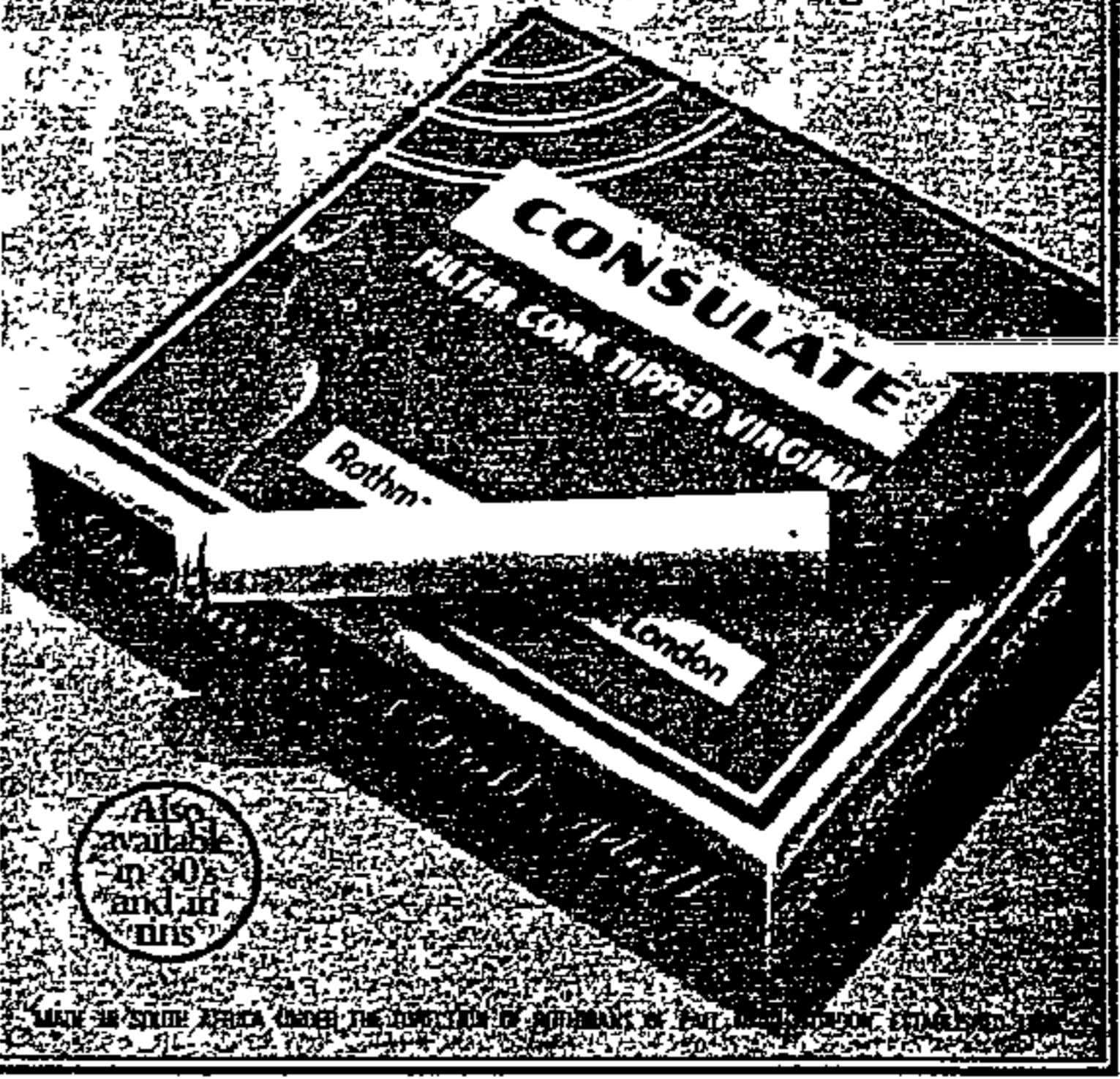
Last night's unrest report made no mention of the incident reported by Sapa's correspondent but said a man had been burnt to death in Soweto yesterday when a private vehicle was set alight.

In another incident in Soweto yesterday, a beerhall was extensively damaged.



Famous for their unwavering quality

Smoking fashions may come and go but Consulate will always give you three things: The finest tobacco, Superb skill in blending, The pleasure of smoking a really fine cigarette.



Also available in 30's and 10's tins

Sowetan 28/5/86

95 3

# Nursing training in Natal enters new era

## Pietermaritzburg Bureau

AN AGREEMENT signed here yesterday at Natalia, headquarters of the Natal Provincial Administration, heralds a new era in nursing education and training in Natal.

Colleges of nursing throughout South Africa are now fully recognised as tertiary education institutions with university associations.

All training courses in

Natal will be linked by the Natal College of Nursing with Natal University, which will approve the courses and moderate the college examinations.

The agreement establishes a council to guide and direct college affairs, and a campus board for each campus of the college. The five Natal campuses are the Colleges of Nursing and Midwifery of Addington, King Edward VIII, R K Khan, Grey's and Northdale.

This year 174 students started training under the new system, which included students from Entabeni and St Augustine's hospitals.

The agreement, which has the approval of the Minister of National Education, now confers full college status on both the Natal College of Nursing and the course being conducted, according to a spokesman for the Provincial Administration.

CITIZEN 11/6/86

## Shocked nurse saw cop shoot Mashigo 95

A NURSING assistant this week told a Rand Supreme Court judge she was so frightened when she saw police shoot her friend that she forgot to tell the man's wife.

Francina Monane was giving evidence before Judge R. Golstone in a case involving Law and Order Minister Louis le Grange and Defence Minister Magnus Malan, brought by the Krugersdorp Residents' Organisation.

KRO has accused both police and soldiers of harassment, rape, assault and murder.

Monane said Roy Mashigo - co-worker at the Sterkfontein Mental Hospital near Krugersdorp - had been grabbed by police while they were talking.

"Police dragged him away from my car," she said, "and they struggled for some time."

She said the cop was trying to drag Mashigo to the police vehicle, but he was not prepared to go along and seemed to have the upper hand as he was strongest.

Another policeman handed a rifle to his colleague, she said, who then shot Mashigo.

# City hospital to try private nurse system for a year

By Joe Openshaw, Medical Reporter

Johannesburg Hospital where there is a critical nursing shortage — will experiment with private nurses running wards for a year, Dr Reg Broekmann, the superintendent of the hospital, said yesterday.

The hospital was last month forced to ask a private agency to supply 60 nurses for a surgery and a paediatric casualty ward and they are expected to begin duties in August.

"One consideration is whether the Province's new deal for nurses — improved salary scales and conditions of service at present being investigated by a commission — will solve the nursing shortage and stop the flow of nurses to the private sector.

## BLACK NURSES

"The new deal could become effective on October 1 this year or April 1, 1987," said Dr Broekmann.

Nurses have been leaving public hospitals in the Transvaal for private ones because of the lure of better pay and working conditions.

In April, Dr Broekmann announced the number of beds in the hospital were to be reduced because of the nursing shortage and 25 percent fewer private patients admitted by stricter adherence to the means test.

At the moment 90 black nurses are employed at the hospital and Dr Broekmann says more might be employed, depending on who applied for vacant posts at the hospital.

D.A. 19/6/86

# Komani man awarded first nursing degree

Dispatch Reporter

EAST LONDON — The chief professional officer in the psychiatry division of the Komani Hospital in Queenstown, Mr Sisa Tyalimpi, 52, has become the first person to graduate with a BA Curationis degree from the University of Fort Hare.

The degree was first introduced in 1984.

The degree will be conferred on Saturday during the graduation ceremony.

Mr Tyalimpi said yesterday he would share the celebrations with his daughter, Cozoma, 24, who has passed an H Ed postgraduate diploma from the University of Transkei.

Mr Tyalimpi holds a number of diplomas from other institutions.

He passed his diploma in Nursing Administration and Community Science at the University of Port Elizabeth.

He completed a diploma in Public Administration in Pretoria and an instructors course at Tower Mental Hospital in Fort Beaufort.

He is also a qualified primary school teacher.

Mr Tyalimpi is currently registered for a masters degree in psychiatry at Fort Hare.

*Sowetan*  
**Appeal to nurses** (95)

AN APPEAL is being made for non-practising nurses to join an emergency list which would come into action on days when black nursing staff in clinics, nursing homes and hospitals are involved in stay-aways.

The South African Nursing Association has made this appeal in the light of the May 1 and June 16 stay aways when nursing homes in particular were crippled by the shortage of staff.

14/7/86



By Claire Robertson

Student nurses at the Johannesburg Hospital are "disheartened and angered" by an increase in their residence fees which they say wiped out an April pay increase.

Hospital authorities backdated the fees increase — which amounts to 31 percent — to April and deducted the entire sum from the July pay packet.

There were angry scenes when nurses received their pay yesterday. They told *The Star* they had not been warned the increases would be backdated. Last night nurses' residences in Parktown were abuzz with talk of resignations.

Dr Reg Broekmann, superintendent of the Johannesburg Hospital, said today that in June circulars had been placed in all residents' letter boxes inform-

# Increase in residence fees has student nurses up in arms

ing them the increase was to take effect from April 1.

"The nurses should not have been surprised by the lump sum deduction and were advised in the circular that if there were any queries they should contact the senior matron.

"If there are any nurses who are experiencing difficulties they should contact the authorities. The names of four matrons and an administrator to whom they could go were listed," said Dr Broekmann.

Nurses maintain the first they knew of the lump sum deduction was when they opened their pay packets yesterday.

Dr Broekmann said the lump sum deduction was due to an administrative delay because salaries and wages were handled by a computer. If there were a salary increase, this would also have to be backdated.

A student nurse, who asked not to be named, said: "Nurses here who rely entirely on their monthly salaries and have to

pay off debts can't even afford to buy shampoo and toothpaste."

A second-year nurse who received a R20 raise in April found her residence fees had increased by R27 to R77 this month — a more than 50 percent increase. With the backdated deductions, she received R81 less than last month. She earns R420 a month.

"The consensus is that we work such shocking hours, have to assume a tremendous amount of responsibility in the wards, get very little thanks — and now this comes down on us," said one nurse.

"People are totally disheartened and hurt."

The same thing happened last year — at least one nurse received a R10 raise and a R10 fees increase — and fees will rise again next April.

STAR  
1/8/86  
95

# Nurses' hearing today

SOWETAN REPORTER

HUNDREDS of Baragwanath Hospital nurses travel to Pretoria today to appear before the South African Nursing Council on charges that they "failed to report for duty" during a strike at the hospital last year.

The nurses have been summoned to appear before the disciplinary body of the council.

A spokesman for the nurses' union, the Health Workers' Association, said nurses expressed strong and angry feelings against the council "which seems to pursue this case instead of letting sleeping dogs lie".



JUBILANT . . . Baragwanath nurses after their case yesterday

## Bara nurses warned

From Page 1  
 wrongfully and without permission failed to report for duty between 7 am and 4 pm on November 14 and 15 last year.

They appeared before Ms Iris Röscher (president), Professor Wilma Kotze (vice-president), Ms Antjie Kruger, Mr Willem Malherbe and Mrs Teresa Bandile.

Mrs Mildred Adelaide Sibusisiwe Makhaya, student guidance officer at Baragwanath

Hospital, pleaded in mitigation that the student nurses did not wilfully neglect their duties and the incident was "unanticipated, unplanned and non-wilful".

She added that the events of those days were regrettable but she had observed "stressful behaviour on the part of student nurses".

Mrs Makhaya said the usual grievances of student nurses had been mentioned to her and that the nurses had no platform to air their views except at large student nurse meetings "where they were single voices crying in the wil-

derness".

Ms Röscher said the committee had considered the distressing situation that prevailed at the hospital and the fact that the accused had unsuccessfully failed to air their grievances because there was no proper machinery for communication with the authorities.

The nurses' action was not premeditated and they were therefore cautioned and discharged, she said.

Ms Röscher warned, however, that this sentence should not be taken lightly as it was considered as a record.

## 500 Bara nurses warned

MORE than 500 Baragwanath Hospital nurses who were charged with improper or disgraceful conduct, were cautioned and discharged by the disciplinary committee of the South African Nursing Council in Pretoria yesterday.

But another 120 of their co-accused who did not acknowledge receipt of the summonses will still have to appear before the committee on the same charges, the council registrar, Mr Frank Germishuizen, told the *Sowetan* yesterday.

Of the total 640 nurses summoned, only 540 had acknowledged receipt of the summonses, the registrar added.

The 450 nurses who appeared yesterday pleaded guilty to a charge of improper and disgraceful conduct. The registrar alleged they

To Page 2 →



CAPE TOWN 4/10/80

# Nurses forced to give money

Own Correspondent

93

PORT ELIZABETH. — African nurses throughout the country are being intimidated and are forced to give R50 of their monthly income to the United Democratic Front, it is alleged.

According to sources within the South African Nurses' Association, in the Eastern Cape alone, 5 410 nurses are affected by "necklace" threats. Their combined "contribution" to the UDF could be as high as R270 500 monthly.

No comment could be obtained from the UDF on the allegations last night.

According to the sources such intimidation is countrywide.

Numerous complaints of intimidation, necklace threats and harassment were made by the nurses to the association, said the sources.

The sources said threats began soon after an announcement ear-

lier this year that parity in salaries was to be introduced.

According to some black nurses, "comrades" in the townships have decided that health services are not essential in South Africa and that nurses must contribute towards their (the comrades') cause.

The association now fears that fewer blacks will register for training as nurses which, it says, will eventually lead to the suffering of innocent blacks in need of medical care.

"The recent outbreak of measles in the townships had led to the deaths of many black children. Similar outbreaks of diseases in future will be disastrous if these people continue to intimidate and threaten our nurses and keep prospective nurses away," said the sources.

They said nurses were often seen as police and government

informers, and had been forbidden to speak to anyone about "comrades" being treated in hospitals and clinics — particularly about those treated for burns or gunshot wounds.

Nurses said a whole bus load of "comrades" recently confronted nurses at the Livingstone Hospital in Port Elizabeth and informed them of the "donation" they would be expected to make.

"Comrades" have also gone to the homes of nurses. The money is collected by the street committees in the townships, the sources said.

Major Eddie Everson, SA Police liaison officer for the Eastern Cape, said the police were aware of the situation, and numerous anonymous telephone calls have been received by the police in connection with the intimidation of nurses by "comrades".

Cape Times 6/10/86 (1986) 27B

# Threats to nurses denied

Own Correspondent

PORT ELIZABETH. — The PE branch of the United Democratic Front has denied allegations that it is demanding protection money from members of the South African Nurses' Association.

And the UDF has described so-called comrades harassing nurses at the Livingstone Hospital as "thugs out on their own mission".

The denial follows claims by association sources that African nurses throughout the country were being intimidated to pay the UDF R50 a month.

The sources said that in the Eastern Cape alone, 5 410 nurses were affected by threats of "necklaces".

Their combined "contribution" to the UDF could be as high as R270 500

monthly, they claimed.

But the UDF denied that any office members or affiliated organizations had been instructed to demand R50 a month from individual members of SANA, or threatened them with death.

A spokesman for the UDF, Mr Siphosile Mnyimba, who is also a member of the Consumer Boycott Committee, told correspondents here that the front wished to distance itself from these "scandalous, groundless and intimidatory reports".

According to the sources within SANA, the intimidation and threats were made against black nurses throughout the country.

Major Eddie Everson, SA Police liaison officer for the Eastern Cape, said the police were "aware of the situation".

# UDF denies threats to nurses

**THE Port Elizabeth branch of the United Democratic Front yesterday denied allegations by the South African Nurses Association that about 5 400 black nurses in the Eastern Cape had been threatened with death unless they paid R50 a month to the UDF.**

A UDF spokesman, Mr Siphosile Mayimba, said his organisation wished to "distance itself from these scandalous, groundless and intimidatory reports."

Major Eddie Everison, SAP liaison officer for the Eastern Cape, said police were aware

of the allegations and had received numerous anonymous telephone calls.

The nurses association claim the threats were being made to nurses throughout the country and said some of them had been threatened with "necklaces".

*Smelcer*  
2/10/8  
95

October 7 1986

# UDF denies nurses told to pay R50 or die

7/10/86 SNAK

95

PORT ELIZABETH — The United Democratic Front (UDF) yesterday denied allegations by the South African Nurses' Association that about 5 400 black nurses in the Eastern Cape had been threatened with death unless they paid R50 a month to the UDF.

A UDF spokesman, Mr Siphosile Mayimba, who is also a member of the Consumer Boycott Committee, said his organisation wished to "distance itself from these groundless reports".

Major Eddie Everson, SAP liaison officer for the Eastern Cape, said police were aware of the allegations and had received numerous anonymous telephone calls.

## Necklace threats

The Nurses' Association said some nurses had been threatened with "necklaces".

It said a busload of "comrades" had confronted nurses at Livingstone Hospital and made their demands. The youths had also visited nurses at their homes.

In another development, SABC radio news has reported that nurses in the Western Cape were threatened with death and "necklaces" unless they paid the UDF R50 a month.

SABC reported the nurses were told they had to pay the money to street committees in the townships, and had been threatened with death if they did not pay.

Spokesmen for the UDF in the Western Cape were unavailable for comment.

Captain Jan Calitz, police liaison officer for the Western Cape, said they had not yet received any reports of the allegations. — Sapa.

# Shots fired at Bara tutors' homes

9/10/86

June 1986

THE Soweto homes of two top tutors at the nursing college of Baragwanath Hospital were shot at recently in what is believed to be in-fighting among staffers over senior positions.

Some staffers said ill-feeling among tutors has been aroused by the takeover of the nursing teaching function at Baragwanath by the Medical School of the University of the Witwatersrand, necessitating the creation of new senior positions for tutors as heads of department.

The victims of the shooting are Mrs Nada Mayekiso, vice principal of the Bara Nursing College, and Mrs Doreen Embell, acting head of the department of general nursing.

A gunman shot at their homes on Saturday night, firing one shot through a lounge window of each house.

## Gunman

Nobody was injured, but furniture in both homes was slightly damaged.

Mrs Embell's home in Diepkloof Extension was shot at 9 pm, and Mrs Mayekiso's, in Orlando West, about 25 minutes later.

Five tutors are to be appointed as heads of departments and the two victims of the shooting are seen as people who could influence appointments, sources at the college said.

The shootings have been reported to the Soweto Murder and Robbery Squad.

Miss Margaret McCarty, principal of the Nursing College, declined to comment on the incident yesterday.

Sapa.



# Bara tutors' homes shot at in job row

95

12/10/86 CIT (P) 25

THE SOWETO homes of two top tutors at Bara Hospital's nursing college were shot at recently in what is believed to be in-fighting among staffers over senior positions.

Some staffers said ill-feeling among tutors has been aroused by the takeover of the nurse teaching function at Baragwanath by Wits University medical school, necessitating the creation of new senior positions for tutors as heads of department.

The victims of the shooting are Bara Nursing College vice-principal Nada Mayekiso and General Nursing Department acting head Doreen Embell.

A gunman shot at their homes on Saturday night, firing one shot through a lounge window of each house.

Nobody was injured, but furniture in both homes was slightly damaged.

Embell's home in Djepk-loof Extention was shot at at 9pm, and Mayekiso's home in Orlando West about 25 minutes later.

Five tutors are to be appointed heads of department and the two victims of the shooting are seen as people who could influence appointments, sources at the college said.

The shootings have been reported to the Soweto Murder and Robbery squad.

Nursing college principal Margaret McClarty declined to comment. - Sapa.

12/10/88 SUN 0167 95

# 'Comrades' threaten nurses: Pay up or else

NURSES in the Eastern Cape are being systematically terrorised by money-grabbing "comrades".

The feared "comrades" — described by local police as members of township street committees — have apparently taken advantage of recent pay rises for black nurses by demanding R50 a month from each of them.

The terrified nurses have complained to police that they have been threatened with an immediate kangaroo court and execution by neck-lace if they failed to pay.

The mass intimidation has been highlighted in complaints to the police by the South African Nurses' Association (Sana) and individual nurses.

## Denied

Major Eddie Everson, liaison officer for the police in the Eastern Cape, said this week that complaints from nurses reached him almost daily.

It has been estimated that about R270 500 has been raised in this manner from Eastern Cape nurses alone.

But the United Democratic Front, to which street committees are invariably

By JEREMY McCABE

linked, has denied the nurses' claims.

Spokesmen for the UDF affiliated Port Elizabeth Youth Congress (Peyco) and the National and Transvaal offices of the UDF have all denied any knowledge of involuntary donations.

Mr Mandla Dhlamini, the UDF's Transvaal organiser, said this week: "We do not need their money. In fact, we are totally opposed to anyone demanding protection money."

Mr Mpumelelo Odolo, Peyco's vice-president, said it was "significant" that Sana should come out with this al-

legation soon after the Government had decided on equal pay for nurses.

There were probably some Sana members who were unhappy with the move, he said.

"We shall act against anyone we find discrediting our organisations by making such demands," he said.

28/10/86  
PE health  
services  
reduced (95)

Municipal Reporter

CHILD health services and family planning clinics which were not being fully used have been stopped or reduced because of a shortage of nurses, Port Elizabeth's Medical Officer of Health, Dr J N Sher, reports to a City Council committee meeting this afternoon.

He says there is a decrease in the number of registered nurses qualifying in the Eastern Cape and an increase in jobs.

It was not possible within the council's salary structure to offer a salary that was competitive with other employers of registered nurses in the public and private sector, Dr Sher said.

In the city area service, seven of the 26 nursing posts were vacant.

# 40 new nursing posts created

9/12/86 N/M  
95

Mercury Reporter

**FORTY** new nursing posts at Umlazi's Prince Mshiyeni Hospital are among the benefits resulting from this week's announcement that the hospital is to be upgraded at a cost of more than R4 000 000.

Reacting to the announcement by Health Minister Dr Willie van Niekerk that the hospital will be upgraded, the Kwazulu Secretary for Health and Welfare, Dr Daryl Hackland, said yesterday that much of the money will be spent on equipment and services in the hospital's department of paediatrics, the department of obstetrics and gynaecology and on the purchase of orthopaedic beds.

He said 40 nursing posts would be created immediately in the department of obstetrics and gynaecology.

As the hospital had anticipated addition-

al funding, tender documents had already been prepared for the larger items of equipment, and the documents would be going out soon.

Speaking at King Edward VIII Hospital on Wednesday, Dr van Niekerk also announced that a new outpatients facility would be built at the hospital.

But a King Edward VIII spokesman said yesterday it was not yet known how much money had been allocated towards the project and when building might start.

● See Editorial Opinion

# 'NO' TO FIRED NURSE

9/11/86  
SOWETAN  
95  
[scribble]

**BARAGWANATH HOSPITAL** has rejected fired student nurse, Mr Macbeth Nxumalo's application for re-employment.

As reported in yesterday's **The SOWETAN**, the hospital's board asked Mr Nxumalo to re-apply after he had made representations on his dismissal.

He was fired last month at the end of a Supreme Court case which he and two colleagues brought on behalf of 940 student nurses who were dismissed when they went on strike. All were reinstated except him.

A spokesman for the Health Workers' Association (HWA) yesterday said Mr Nxumalo's application had been rejected.

The spokesman said

**By MOJALEFA MOSEKI**

hospital officials were taking statements from senior nursing sisters on the events of November 14 and 15 when the student nurses stayed away from work. The sisters were "under pressure" to make the statements.

"We feel the step is not conducive to good labour relations," said the spokesman.

The Director of Hospital Services in the Transvaal, Dr Hennie van Wyk, confirmed that statements were being taken from nursing sisters. These were "for staff record purposes", he said.

# Sacked nurse can re-apply

95 SOWETAN 8/12/6

A BARAGWANATH Hospital student nurse who was sacked during a strike has been asked to re-apply for his job.

The chairman of the hospital's board, Dr Woodie Matsie, said this week that a letter was sent to Mr Macbeth Nxumalo requesting him to re-apply for his former position.

Mr Nxumalo was fired

by the hospital following a strike by student nurses and labourers in November last year.

Dr Matsie said he took the case up after being approached by Mr Nxumalo. He then made representations to Dr Hennie van Wyk, the Director of Hospital Services in the Transvaal.

"Mr van Wyk said Mr

Nxumalo could re-apply for his post. He did not indicate if the application will be considered favourably," Dr Matsie said.

## Bara

Mr Nxumalo was advised to send the application to Baragwanath and a copy to the director in Pretoria.

A spokesman for the

Health Workers' Association (HWA) said they had decided to wait and see how the authorities handled the application. He said representations had been made by four organisations at Baragwanath Hospital to the hospital board on behalf of Mr Nxumalo.

The association is to meet this week to review the situation.

**Nurse move  
could lead  
to staff  
shortages**

Pretoria Correspondent

The appointment of black registered nurses in white provincial hospital wards would in the long run lead to a shortage of personnel in black hospitals, spokesmen for both the Conservative Party and the Progressive Federal Party warned yesterday.

Mrs Irene Menell, the RFP spokesman on hospitals, said she was delighted about the latest development.

The Department of Hospital Services could solve its problems only by desegregating the whole hospital system, including the training of nurses, she said.

Mr Servaas Latsky, spokesman for the CP, found the idea of black nurses attending to white patients totally unacceptable.

Black hospitals would be drained of experienced staff, because black registered nurses would compete for posts at white hospitals, he said.

STAFF Shortage forces H.F. Verwoerd Hosp. to still (95) STAR 19/11/86

# Nursing race bars break down

Pretoria Correspondent

The H F Verwoerd Hospital is soon to make use of nurses of all races to fill vacant posts in white intensive care units, casualty wards and theatres.

This was revealed by the manager of the socio-economic affairs division of the South African Nursing Association (SANA), Miss Eileen Brannigan.

She said the H F Verwoerd Hospital had advised SANA late in December 1985 that the hospital was ready to start advertising posts for registered nurses of all race groups.

Miss Brannigan pointed out that the Johannesburg General Hospital had also recently removed race specifications from similar advertisements for 40 registered nurses.

## Shortages

Due to severe staff shortages, this hospital had previously started using nurses from the Baragwanath Hospital.

"Non-white" hospitals would not, however, be drained of experienced staff by this move, she said. It might help decrease the high number of unemployed non-white registered nurses.

Miss Brannigan said no problems were expected in regard to the quality of service rendered by black nurses, but the new move would put pressure on the hospital authorities to eliminate the wage gap between white and black nursing staff.

A nurse's pledge of service includes the undertaking that her duty to her patients will not be affected by considerations of religion, nationality, race or social standing, she said.

What might lead to trouble was racial prejudice from patients. People still

black nurses' training was inferior to that of whites.

The fact was that black nurses had to meet the same requirements for registration as white nurses, she said.

The issue of wage parity would also have to be addressed urgently should the appointment of black nurses in white wards become a reality, she said. SANA was very much in favour of such a move.

Miss Brannigan said there was no justification for having black and white nurses working shoulder-to-shoulder in white wards for unequal wages.

"We cannot ask for general wage increases before this gap is closed," she said.

The private hospitals' higher end-of-month-pay was drawing more and more highly qualified, experienced nurses, even if the government hospitals' wage packet was more beneficial in the long term.

This exodus left provincial and State hospitals unable to fill the ideal patient-nurse ratio recommended in the Commission for Administration's recent report on the matter.



## P O Friends aid Seaside Fund

Mr Trevor Olmesdahl (left), regional director of the Post Office for Central Transvaal, hands a R2 300 cheque to Mr Noel Stoffberg, The Star Seaside Fund manager. Every year since 1954 the Post Office Friends Committee has helped the fund give deserving children seaside holidays. It costs R122 to send a child on a two-week holiday.

## Students for Cuba

The Star's Africa News Service HARARE — More than 1 000 Zimbabweans are to go to Cuba for teacher training and the first batch of 400 will leave in September.

The student teachers will spend five years studying for their Bachelor of Education degrees, with emphasis on scientific subjects and mathematics.

But first they have to learn Spanish and an advance party of Cuban lecturers is due in Zimbabwe soon to conduct language courses.

The teacher training scheme follows a visit to Cuba in October by Zimbabwean Prime Minister Mr Robert Mugabe.

This year, Cuba is expected to send a contingent of doctors, dentists and pharmacists

# The new Th



# NURSE LAYS CHARGES

By MANDLA NDLAZI

Police Station. 95

POLICE yesterday confirmed that a nursing sister has laid charges of malicious damage to property against five white policemen and a relative.

Major Tienie Halgryn, public relations officer for the West Rand Police, confirmed that Mrs Lydia Tinise (48), a nursing sister at the Durban Deep Mine Hospital, laid the charges at the Kagiso

He said no arrests have been made yet and police were investigating.

Mrs Tinise said a relative was with five white policemen armed with rifles who burst into her house, insulted her and damaged some of the furniture. This was

about a week ago.

She said she was in her nightdress when they dragged her and locked her out of the house. She later followed them to Kagiso Police Station where she reported the matter.

She said she was alone in her bedroom when the six entered through the kitchen door and into her bedroom.

"Now I've been

locked out of my house and the council will not help me," she said.

Mrs Tinise said the mayor, Mr Z Moeketsi, referred her to Anthony Zulu, who is councillor for the block where her house is.

She claimed Mr. Zulu could not help her get back into her house. "I am stranded now and can somebody help me get back into my house," pleaded Mrs Tinise.

# Union for private nurses

THE Light is shining once more for retired and working private nurses after the successful formation of a union, the Private Homes and Hospital Nurses Union, to represent their interests.

The organisation was started as a burial society to help private nurses, the union's president, Mrs Virginia Mazwi, said.

It worked at uniting nurses.

Private nurses have always been made to feel like outcasts in the profession. The reason for our organisation was to build a spirit of belonging," Mrs Mazwi said.

The organisation has more than 50 nurses on the Reef.

They meet every month at members' homes, where they hold cookery demonstrations, and give knitting

and sewing lessons to each other. They also lecture to retired nurses on new developments in nursing.

Mrs Mazwi says that her organisation also participates in community projects and offer help to the needy.

They give out food parcels to their aged members every month.

Last year, during the

festive season they donated R150 and clothing to the Othandweni Place of Safety.

Government nurses are not included in the organisation because it would be difficult to organise meetings with

them, because they do not work in the same places and their working hours are irregular.

"Besides, ours is a domestic organisation which concerns private nurses only," Mrs Mazwi said.

26/3/78  
SOLJAN

dren to take their pets for inoculations as a part of a national pet care week from June 1 to 7. Here, Miss Tessa Riemix is introduced to the two pet care campaigners. ● Picture by John Hogg.

# Tutu and Nel in TV clash on reform

The Star Bureau

WASHINGTON — The Deputy Minister of Foreign Affairs, Mr Louis Nel, and Bishop Desmond Tutu clashed over reform today on a widely-watched United States television current affairs programme.

Commenting on the lifting of the pass law, Bishop Tutu said apartheid could not be reformed: it was a Frankenstein which had to be destroyed.

Mr Nel said, however, that in

the new dispensation no legal control would apply only to black people.

"There is no sting to the tail, as the Bishop said."

The two were speaking on ABC television's "Nightline" programme hosted by Ted Koppel.

Bishop Tutu said he would like to commend the Government for lifting the pass law.

But the new freedom of movement applied only to those in

South Africa, not the homelands.

Mr Nel said the Government was negotiating with the four independent states to reconfer SA citizenship on homeland citizens.

Bishop Tutu described this as "one of those ad hoc adjustments that the Government is making to the apartheid system. That is why people say 'too little too late'."

Ad hoc adjustments would not end the unrest.

On the far right wing, Mr Nel said, there were whites who said it was too much too soon.

Mr Nel said the lack of or pace of reform had nothing to do with the unrest. It would continue because there were organisations committed violence to and revolution.

Bishop Tutu said it was "utter baloney" that blacks were inspired by communists.

"Why should the South African black need an educator to know he is being oppressed?"

# Dismissed hospital workers refuse to leave

By Sheryl Raine

About 100 black cleaners fired for staging a work stoppage at the Welkom Provincial Hospital yesterday refused to leave the premises or accept their termination papers.

Black workers have reported to the hospital again today despite their dismissal.

White volunteers have come forward to do the work of black cleaners at the hospital.

The Orange Vaal General Workers' Union said the workers had agreed in principle to return to work yesterday morning after a two-day work stoppage over union recognition, wages and poor communication.

When they arrived for work the cleaners were told to wait for the arrival of a representative of the Free State Hospital Services.

Union spokesman Mr Stanley Tyelentombi said: "Four of our shop stewards were taken away by hospital personnel. The rest of about 200 workers were issued with termination forms which they refused to accept". He said the workers refused to leave the premises.

The hospital superintendent said after careful consideration between 150 and 160 workers had been "selectively discharged". As a State department, the hospital could not recognise the union. The hospital would start recruiting new employees tomorrow.

95 STAR 24/4/86

*the times 10/5/86*

# SANA seeks new nurses' dispensation

Medical Reporter

THE South African Nursing Association (SANA) has submitted proposals via the Department of National Health and Population Development to the Commission for Administration on the revision of the nurses' dispensation.

Detailed in the latest issue of Nursing News, Sana's official news organ, the proposals deal with several "problem areas".

Apart from issues from "the past few years" which have yet to receive attention, the problem areas identified by nurses include the financing of nurse training, the status and utilization of registered nurses and midwives, housing subsidies, leave,

maternity benefits and recognition of qualifications.

The "who, where and how" of nurse financing was addressed to the commission "in the light of the new SA constitutional changes".

The association also pointed out to the commission that registered nurses and senior enrolled nurses were on the same salary scale and that the same was true for registered midwives and enrolled nurses.

The entry notch for registered nurses was also addressed as was the position of the nurse tutor.

No details were available about when the Commission's findings were likely to be made public.

# Bará strike: nurses slam SA <sup>STAR</sup> nursing <sup>16/5/76</sup> association

95 By Joe Openshaw  
Medical Reporter

A meeting of 500 Baragwanath nurses last night unanimously expressed no confidence in the South African Nursing Association (SANA) for evading the issues involved in the hospital strike crisis last November.

Disciplinary action is being taken by the South African Nursing Council against nine alleged strikers.

The nurses resolved not to ask or accept any assistance from SANA at the disciplinary hearing which will be held between May 27 and 29.

The nine are charged with patient neglect by going on strike on November 14, during the course of which 800 nurses were dismissed from service.

The charges were brought against the nurses because of a complaint by the Transvaal Hospital Services Department.

The dismissed nurses were reinstated on November 26 as a result of a successful application to the Rand Supreme Court.

## PROSECUTION WITNESS

Last night's meeting also supported the reluctance of Sister Tladi of Ward 31, selected as a prosecution witness, to give evidence at the hearing against her colleagues.

An emergency meeting of Sister Tladi's fellow sisters has been called for Monday to discuss her plight. Most sisters have already donated R10 each towards any legal representation Sister Tladi may need.

At the meeting it was also agreed that all nurses would attend the hearing. Those on duty would ask for time off to attend.

The Health Workers' Association yesterday distributed a pamphlet in which the superintendent of Baragwanath Hospital is requested to intervene in the matter and prevent the problem from developing.

The nine nurses will be represented by counsel at the hearing.

SANA has indicated that it cannot take action on behalf of the nurses and will act in an advisory capacity only.

# Death threats to nurses denied

21/5/86 BUW DAY  
DIANNA GAMES

THE Health Workers' Association (HWA) has rejected allegations by the SA Nursing Association (Sana) that it has threatened witnesses due to appear at disciplinary hearings against nurses who went on strike at Baragwanath Hospital last year.

HWA secretary Dr Resik Bismilla yesterday said the association fully supported the right of witnesses to testify.

The Nursing Council, which is conducting the hearings, and Sana had said its members were threatened almost daily with the "necklace" and the "people's court" if they appeared as witnesses.

Nine nurses, who have employed legal counsel, have been summonsed to appear before the council charged with neglecting their patients during the strike last November.

The exact number of people to be charged has not been released but it is believed the nine are the first of many. About 800 nurses were fired from the hospital during the strike but were reinstated after a Rand Supreme Court application.

Sana president Professor M C van Huyssteen has attributed the threats to the HWA and said they were clearly aimed at preventing nurses from stating their case.

# HEALTH WORKERS 'WILL ACT'

THE Health Workers Association intends taking action against two nursing bodies over Press statements published recently concerning last year's strike at Baragwanath Hospital.

The bodies are the South African Nursing Association (Sana), which represents the interests of nurses and the South African Nursing Council (Sanca), which determines the code of ethics for nurses and takes disciplinary action where necessary.

A spokesman for the HWA yesterday said they had taken legal advice over the "unfounded claims and accusations" by both bodies made in the Press

Soweto Jan 23/5/86

By MOJALEFA  
MOSEKI  
(Health Reporter)

recently.

The HWA's response is a sequel to a statement by both bodies claiming that the HWA was "intimidating" nurses not to give evidence during a disciplinary hearing by Sanca in Pretoria starting on Tuesday.

The statement, by the nursing bodies, also said threats of "death through necklance treatment, the burning of houses and the use of

the people's court" were made against those who were to give evidence.

The HWA spokesman said Sana and Sanca were "embarrassed by the refusal of black nursing staff at Baragwanath Hospital to give evidence against their student nurses. The sisters also support the nursing students' demands and they identify with the collective action taken by the nursing students."

The HWA spokesman said his association was against intimidation of anyone in the profession and none of its members had threatened those nursing sisters selected to give evidence. He said the HWA's objectives were to:

- Support student nurses in their legitimate demands;
- Prevent and expose further victimisation of student nurses and was sympathetic to sisters/nurses refusing to testify against their colleagues.

# NURSES' STRIKE: 9 TO FACE ACTION

A MAJOR disciplinary hearing involving nine of the Baragwanath nurses who went on strike last year starts in Pretoria tomorrow.

The action has been brought by the South African Nursing Association and South African Nursing Council.

The hearing—set for Tuesday, Wednesday and Thursday—is a sequel to a strike on November 14 and 15 last

year by nurses at the hospital.

Baragwanath nurses said they would attend the hearing in force.

"We are going to give moral support to those appearing. We are also aware that we are all on trial as the outcome of the case may be used to charge us," said a

speaker during a meeting at the hospital on Friday.

The meeting was called by the Health Workers' Association (HWA).

The HWA successfully represented the nurses during the "November Crisis" at Africa's biggest hospital. The mood was one of

anger as speaker after another slammed the hospital authorities for "harassing" the nurses.

They felt SANC aimed to charge all nurses for the events leading to the strike last year.

Among the nine nurses summoned to appear before the SANC disciplinary committee is one of the three

nurses who brought an urgent court interdict against the authorities, Mr Themba Mboobo.

The second applicant, Mr Mabeth Nxumalo, was fired last year while the third, Miss Mordunlate Tshabalala, is still at the hospital. The feeling of nurses at the meeting was that

the authorities were gunning to fire Mr Mboobo. Nurses vowed to use all the power at their disposal to resist the "unfair" dismissals.

The hearing was dealt a heavy blow when the key witness for SANC refused to testify against the nurses as that "created a conflict of interests".

The witness is a nursing sister at Baragwanath Hospital who was in charge of ward 31 where Mr Mboobo was supposed to work.



# BIG SUPPORT FOR BARAGWANATH NURSES

915  
Sowetan  
27/5/86

THE National Medical and Dental Association and nurses from five major hospitals yesterday pledged support for the nine Baragwanath Hospital nurses summoned to appear at a South African Nursing Council disciplinary hearing in Pretoria today.

The five hospitals employing thousands of nurses and Namda have sent messages of support to the Health Workers' Association (EWA).

The hospitals are Hillbrow, Coronation, Leratong (Kagiso), Klerksdorp and Welkom Hospital in the Free State.

The Namda message of support read at the Friday meeting at Baragwanath said: "We note with great concern the disciplinary action instigated by the Transvaal Provincial Administration against the nine Baragwanath Hospital nurses. We support the nurses in their present struggle."

A spokesman for the HWA yesterday said

By SOWETAN Reporter

more than 1 000 signatures had been collected in a petition to be presented to the SANC disciplinary committee before the hearing today.

The petition "appeals to the SANC to consider the case of the nine nurses favourably in the interest of nursing care".

A solidarity meeting by the Hillbrow Hospital nurses will be held at the offices of the General and Allied Workers' Union at 78 Troye Street on Wednesday at 4.30 pm.

Meanwhile, the council hearing could be dealt a blow by the sudden withdrawal of Sister Anastina Tladi from testifying against the nurses at today's hearing.

Sister Tladi's husband, Mr William Tladi, yesterday told the *Sowetan* that he had decided that his wife should have nothing to do with the hearing "because of the threats that his family was facing" as a result of reports that she was going to testify.

Although he would not give details of the threats and who made them, he emphasised that the threats were not from his wife's colleagues.

"Everybody should know what we are going through in this country at the moment. My wife's testimony in this hearing could endanger her life, my life and that of every member of my family and with due respect to the nursing council, we do not believe this is the price we would like to pay," said Mr Tladi.

# Not involved

Sowetan 28/9/86

95

THE South African Nursing Association has pointed out that it was not involved in the action brought against nine Baragwanath Hospital student nurses who yesterday appeared before the South African Nursing Council.

A spokesman for the association was reacting to a story that appeared in the *Sowetan* on Monday which said the action against the nurses was brought by the association and the nursing

council.

"The action was brought by the Transvaal Provincial Administration, which employed the nurses. The council is the presiding body," the spokesman said. It was incorrect, the spokesman pointed out, to say the action was brought by the council and association.

The spokesman said the association had tried everything to resolve the situation and gave help during the crisis period.

CAN Times (95)  
28/5/86  
Strike

## Nine nurses guilty

PRETORIA. — All nine Baragwanath Hospital nurses charged with disgraceful conduct at a South African Nursing Council (SANC) disciplinary hearing yesterday admitted guilt, were found guilty and given warnings.

Scenes of jubilation erupted in the packed hall where the hearing took place. People sang, danced and hugged each other. The nurses faced suspension and de-registration as nurses.

The council will still decide whether more nurses who allegedly participated in a strike last November should be charged, a SANC disciplinary board spokeswoman said.

The admissions of guilt came as a surprise to the council, which had set aside three days for the hearing.

### Threatened

The council and the SA Nursing Association were compelled to release press statements recently after its witnesses were threatened with violence.

At least one had reportedly declined to testify, but no testimony was required after the admissions were made.

The nurses charged yesterday were: Theresa Papo, Hazel Mophosho, Jeanette Mpshe, Angelina Mahlangu, Mary Matlou, Nobuntu Shibambo, Themba Mboho, Alice Shilote and Marjory Morodi. They were represented by Mr C D A Loxton.

Five police cars were parked in the vicinity of the council's offices during the hearing. — Sapa

# The fight goes on, say Bara workers

By SINNAH KUNENE

HEALTH workers' organisations this week welcomed the decision by the SA Nursing Council to caution and discharge the nine student nurses charged with "patient neglect" during last year's Bara strike.

But the workers are still pressing for the reinstatement of Macbeth Nxumalo, who admitted in the Supreme Court earlier this year that he took part in the strike.

They warned that "the entire unhappy episode will come to an end only when all grievances have been met and Nxumalo reinstated. Until then, the fight goes on."

Dr Abu-Baker Asvat of the Azapo Health Secretariat said this week's SANC decision was "the only one they could have made".

He warned that any other decision would have "precipitated another crisis in the black hospitals."

A Health Workers' Association spokesman said while they welcomed SANC's verdict, they challenged the "authorities' concern to address grievances that contributed to unrest in the hospital."

He criticised SANC and the SA Nursing Association - the two bodies which monitor the ethical conduct in the profession.

"They talk about ethics instead of addressing themselves to the question of apartheid nursing," he said.

39

Superblue

# SUN



Puts BRIGHTNESS

# 529

# OKO

PURE GERRY KETTEL



JOKO  
TAGLESS  
TEA BAGS  
100's

# KiKat

QUALITY WITH A WHOLE LOT OF FLAVOUR

# TEA

# OKO

# OKO

# 600 NURSES

Sampan 15/8/86  
95  
[Signature]

**Sequel to  
strike at  
Baragwanath  
Hospital**

# FACTS FACE ACTION

A TOTAL of 600 Baragwanath Hospital nurses are to face charges of "failing to report for duty without permission" at a hearing before the South African Nursing Council in Pretoria next Wednesday.

On May 27 nine nurses from the hospital were charged with "improper or disgraceful conduct". The Council cautioned and discharged them.

**By MOJALEFA MOSEKI**

quently dismissed, and later reinstated after the court ruling. The Health Workers Association, which represented the nurses during the crisis, said it had briefed its legal team to represent the nurses.



THIS was the scene last year outside the Rand Supreme Court. Baragwanath Hospital nurses made an urgent application for their reinstatement.

The new action comes after the nurses won a case for their reinstatement against the Transvaal Provincial Administration in the Rand Supreme Court on December 24.

## Suspended

A spokesman for the SA Nursing Council yesterday said the nurses could be suspended for a period, cautioned or removed from the register, after which they are not able to continue with their careers.

He said these measures fell under the Nursing Act.

The Nursing Council move is a sequel to an incident at the hospital in November last year when about 942 nurses refused to work for two days. They demanded that hospital authorities address them on a list of grievances they submitted.

They were subse-

11/19/85  
95

## Nurses are concerned

BARAGWANATH Hospital nurses, who are scheduled to appear before the South African Nursing Council (SANC) tomorrow for failing to report for duty, last night expressed "extreme concern" at the situation.

The Health Workers Association, representing the workers, said that they wanted to emphasise that their members were not responsible for the crisis at the hospital during November 1985.

Hundreds of nurses downed tools during November last year.

The HWA said the workers could not be held responsible for the "intransigent attitude of the authorities".

AP-TM: 21/8/66

# Striking nurses guilty, cautioned

PRETORIA. — All 660 nurses charged with disgraceful and improper conduct following a mass strike at the Baragwanath Hospital last year were found guilty, cautioned and discharged by a disciplinary committee of the SA Nursing Council yesterday.

Relieved nurses burst into song and hugged each other, but the committee warned that the caution should not be taken lightly as it would be entered into their professional records.

The committee, chaired by Mrs Iris Roscher, said it had taken into consideration the "stressful" situation at the hospital at the time. Nurses were unhappy about working conditions.

Yet no matter how great the stress, the nurses should at all times conduct themselves in a professional manner, it added.

All the nurses pleaded guilty. — Sapa

# Affidavit helps Bara nurses get off lightly

By SOL MORATHI

THE AFFIDAVIT submitted in mitigation on behalf of the 660 Baragwanath nurses who appeared before the SA Nursing Council in Pretoria on Wednesday, saved 539 them from severe punishment after they were found guilty of disgraceful conduct.

The affidavit, drafted by Baragwanath student nurses guidance officer Mildred Makhaya, "humbly requested the SANC disciplinary committee to be lenient in sentencing of students and to take into account the circumstances and stressful conditions which existed at the time of the crises".

The nurses had been found guilty following their "failure to report for duty on November 14 and 15, 1985 without their employer's authorisation".

Of the 600 nurses, 539 were cautioned and discharged. The remainder are awaiting judgment.

In the affidavit, Makhaya

said she had observed "stressful behaviour on the part of the student nurses".

"During the times of high stress and anxiety, unfortunately some of them were, in some cases, severely assaulted by other employees of the hospital. I therefore feel a combination of the feelings of inadequacy and desperation led them to express their anger in the only way they knew."



## Back to normal hours

HUNDREDS of South African nurses are no longer expected to work a compulsory extra-two-and-a-half hours per week with effect as from September 1.

This was announced yesterday by an executive member of the South African Nursing Association, Mrs J du Preez, who said nurses will now be expected to work normal hours.

She said the practice was introduced in provincial and State hospitals last year. Nurses were not paid for working extra hours and "we hope they will be happy and welcome the giant step," she said.



Odella Muller

## 35 000 more nurses needed

Mercury Reporter

SOUTH Africa needs 35 000 more trained nurses by the year 2000 otherwise the country is heading for disaster.

This is according to Odella Muller, the new president of the South African Nursing Association, who has been elected for a four-year term of office.

Miss Muller is also the deputy director of nursing services for the Department of National Health and Population Development.

'We have to convince both the Government and the private sector that we need to train more nurses, otherwise there is going to be a serious shortage,' she said.

'We believe the private sector has to take more responsibility — we support the privatisation of health although we still feel the Government is responsible for certain groups such as the indigent and the aged.'

### Backlog

Miss Muller said that a backlog of efforts by the Government to improve the socio-economic position of the nursing profession has improved greatly.

'Most nurses work 38 hour week now and they got a pay increase in September.'

'We think we got a pretty good salary deal but we have to prevent it from slipping back again. While the Government reviews salaries of other public servants, it often results in a backlog. This we aim to prevent.'

Miss Muller said she also hoped to unite nurses.

'Membership to the association is mandatory and we have about 160 000 members. Unfortunately, only a very small percentage of those are active.'

'Communication is a problem but it has improved since the regionalisation of the association in 1982.'

'In the next few years we mean to tackle the position of women as breadwinners, which has still not been recognised by the authorities, but to do this we need the support of all women in public service.'

# We learnt from strike says Bara chief

By Sara Martin

A year after the strike at Baragwanath Hospital by 1 800 student nurses and daily paid workers, hospital authorities report all is back to normal.

Chief Superintendent Dr Chris van den Heever said: "We hope to take the most positive features of the 1985 labour unrest and to use these as building bricks for a brighter future for the hospital."

When the workers went on strike, their most serious complaint was that they had last received an wage increase in 1983. They also cited bad working conditions, bad food, a curfew for student nurses and unfair dismissals.

The authorities dismissed the workers and patients were left without adequate care until the army was called in to provide a skeleton service.

The police arrested about 740 auxiliary workers. The workers applied to the Supreme Court for reinstatement. The court found two student nurses had been unlawfully dismissed and suggested a mechanism should exist for the student nurses to air their grievances.

The hospital then reinstated all 940 dismissed nurses and about 800 daily paid workers.

19/1/86.  
STATK.

## Few community nurses trained 95

Prétoira Bureau

Only 4 790 of the country's 63 772 registered nurses are qualified in community medicine, according to Minister of National Health and Population Development Dr. Willie van Niekerk.

However, he told a public meeting in Kroonstad on Monday that if all categories of nursing staff were taken into account, there was a large potential workforce to tackle the problems of community health.

Aside from registered nurses, there were also 22 437 enrolled nurses and 40 584 nursing assistants.

# Nurses stop work in pay protest

95  
3/12/86

### Mercury Reporter

SENIOR spokesmen for the privately-run Shifa Hospital in Durban yesterday declined to comment on allegations by the hospital's nursing and domestic staff about low wages and poor working conditions.

Dr Farouk Motala, a director of the hospital, which is owned by a group of Indian doctors, told the Mercury it was 'hospital policy not to discuss anything with the Press over the telephone'.

The superintendent, Dr Solly Motala, could not be reached for comment yesterday.

The nursing and domestic staff at the hospital in Sydenham stopped work for two hours on Friday in protest against what they claim to be low wages and poor working conditions.

They submitted a petition to the superintendent on Monday requesting urgent consideration of their grievances.

### Lost linen

The nurses claimed they did not receive their annual increment in July this year although, when 15 of their colleagues were retrenched earlier this year, it was said that the staff cut was made so that enough money would be saved for the pay rise.

The nurses also claimed that they had missed out on the September/October pay rise which all nurses in State hospitals received.

They alleged they were forced to pay R5 every month for lost linen, regardless of whether they were responsible for the loss or not.

'If we don't pay we are confronted by the matron,' said one member of the nursing staff

'We are expected to pay for any treatment we receive at the hospital, although one of the conditions of employment is that we receive free hospitalisation,' they said.

in

mourn  
e the hot

te Lebano  
ings on th  
are blamed  
black vio  
le people  
l its the un  
don't know  
n the town-  
added.

r Informa-  
spate of  
of bomb at-  
wnships.

200 black  
a private  
abducted  
ned him

dy of an-  
as found  
nd petrol  
buses and  
ious dam-  
wnships.  
beth, bus  
ack town-  
er crowds  
ree buses.  
s resume,  
ve to indi-  
pared to  
e without  
said Carl  
Elizabeth  
a-Reuter)

B.  
m  
ra  
an  
all  
Bo  
T  
the  
Mi  
ha  
an  
thi  
aft  
Na  
boa  
mal  
S  
ove  
said  
con  
bac  
he  
gov  
me  
for



Pretoria Bureau

Some black nurses are still earning almost 30 percent less than their white counterparts, the Transvaal Provincial Council heard last night.

The MEC for hospitals, Mr Daan Kirstein, said it would cost the province R14 million to remove the gap which still exists between black, coloured and Indian nurses' salaries and those of their white colleagues.

He said that though nurses above the rank of senior matron now enjoyed salary parity, there was no timetable for removing the remaining salary differentials.

## Nursing pay parity would cost R14-m

He quoted figures which showed that salaries for black nurses between the ranks of student nurse and senior sister still lag behind those of whites. Coloured and Indian students nurses and nursing assistants also earn less than whites.

According to his figures, the pay packets of black nursing assistants and student nurses contain 30 percent less than those of

their white colleagues.

The salary of a black senior sister is still 7,28 percent lower than that of her white counterpart, while the differential between the salaries of white and black sisters is 16,6 percent.

Coloured and Indian senior nursing assistants earn 9 percent less than whites, while nursing assistants and students earn almost 6 percent less.

Low salaries prompted nurses at Baragwanath Hospital in Soweto to strike last year, and the army had to be brought in to keep the hospital running.

A number of nurses were summarily dismissed, but won reinstatement after they appealed to the Rand Supreme Court.

Mr Kirstein said 1 004 of the 1 005 student nurses who had been dismissed had been reinstated in compliance with the court order.

All 732 of the other staff members who had been sacked had been reappointed, though 19 had not returned to their posts.

in  
nurses  
salaries  
welcomed

Post Reporter

DOCTORS and nurses in Port Elizabeth have welcomed the Government's announcement of parity in nurses' salaries.

The Minister of National Health and Population Development, Dr Willie van Niekerk, told a meeting of the SA Nursing Council in Pretoria that pay parity would be introduced in nursing and allied professions.

"Implementation will begin immediately," he said.

Negotiations would be held with all professional associations.

Ways of improving fields of specialisation for nursing and auxiliary services would also receive attention, Dr Van Niekerk said.

The chairman of the Eastern Cape branch of the South African Nursing Association, Mrs Sheila van der Merwe, said pay parity "had been on the cards for years".

"It has always been an item on every agenda of every SA Nursing Association for years, but nothing has ever come of it.

"However, a few weeks ago it was hinted at that the Minister had a 'nice' announcement to make. This must be it!"

She said salary differences had resulted in much ill-feeling among nurses, but she was confident the announcement would vastly improve "race relations".

Dr Frederick Rank, a superintendent of Livingstone Hospital, said the announcement would give the nurses at his hospital a "great boost".

"It's the best news I've heard for ages," he said.

Dr Wikus Malherbe, superintendent at Dora Ngiza, said he had long been aware of dissatisfaction about the disparity in nurses' pay.

# Delight over pay parity for nurses

CAPE TOWN 19/3/86  
Staff Reporter

THE GOVERNMENT had decided to introduce pay parity for nurses of all races, the Minister of National Health and Population Development, Dr Willie van Niekerk, said yesterday.

Speaking at a meeting of a sub-council of the SA Nursing Council, he said parity would be introduced in the nursing and allied professions immediately. Negotiations would be held with all professional associations.

Ways of improving fields of specialization for nursing and auxiliary services would also receive attention, Dr Van Niekerk said.

Dr Hannah Reeve-Sanders, the superintendent of Groote Schuur Hospital, said last night that she was "absolutely delighted" by the pay parity decision.

"The parity of salaries has occupied me for years. I am very pleased that the same salary will now be paid for the same services provided by people with equal qualifications," said Dr Sanders.

The president of the Nurses Association, Professor M C van Huyssteen, said in Johannesburg last night that it had been a very long battle.

"The situation was an embarrassment to everyone — nurses get the same training and work under the same conditions and therefore the salary situation was just one of the things we could not tolerate."



Pay hikes welcomed, but better conditions urged

# Black nurses want 'absolute parity'

SYN  
25/3/86  
35  
95

By Joe Openshaw,  
Medical Reporter

Parity in nurses' pay is the first step towards equal working conditions for all nurses, says the Health Workers' Association (HWA).

Although welcoming the announcement last week by Dr Willie van Niekerk, Minister of Health, that pay parity for nurses would be introduced immediately, a spokesman for the HWA said today black nurses would be satisfied only if there was absolute parity in conditions of service.

"We are eagerly awaiting details of the pay increase for black, coloured and Indian nurses and any particulars of upgraded conditions for them,"

the spokesman said.

He added that the HWA feared blacks would still be short-changed in regard to peripheral benefits, such as housing subsidies, transport allowances, life insurance and medical benefits.

"At the moment, white nurses enjoy better conditions of service than do blacks, whose food and accommodation leave a lot to be desired," the spokesman said.

## 'Open hospitals'

"Nurses at Baragwanath, Coronation and Hillbrow hospitals have to care for twice and, on occasions, three times, as many patients as do white nurses because of gross overcrowding.

"We would also like to see

white hospitals being open to all nurses, regardless of population groups," the spokesman said.

Mrs Susan du Preez, director of the South African Nursing Association, told *The Star* the association was delighted by Dr van Niekerk's announcement.

She believed parity would come into effect from April 1.

"The Public Service Commission will now undertake an investigation into working conditions," she said.

"If there is not parity in conditions of service, my association will look into it."

Mrs du Preez quoted some of the discrepancies in existing white, coloured, Indian and black pay scales:

● Nursing assistants — R2 691 for whites and R1 674 for blacks (62,21 percent of white pay).

● Professional nurses — R7 470 for whites and R6 846 for blacks (91,65 percent).

● Senior professional nurses — R10 890 for whites and R10 062 for blacks (92,40 percent).

There are two categories in which coloured and Indians nurses earn less than whites — nursing assistants and senior nursing assistants.

The scale for senior nursing assistants is: R4 692 for whites, R4 131 for coloureds and Indians, and R3 135 for blacks. Coloureds and Indians earn 89,24 percent of white pay and blacks, 67,73 percent.

## Third party must be shown

Political Staff

Motorists will still have to display third party tokens although they will no longer be directly paying for them.

Tokens will be issued free of charge to motorists next month and it will be an offence not to display them when the new system comes into operation on May 1. The new Motor Vehicles Accident Bill provides a maximum fine of R100 for failure to display a third party token on the windscreen.

Motorists have been paying a two-cents-a-litre levy on petrol towards the new fund to provide third party cover.

In terms of legislation third party tokens will be issued free of charge to motorists by insurance companies in the Motor Vehicle Accident Consortium.

# Equal pay for nurses before end of year

W/E ARGUS 12/7/86

95  
~~95~~

Weekend Argus Correspondent

PRETORIA. — There will be parity in salaries for South African nurses of all races soon — probably before the end of the year.

This reassurance was given by Miss Odelia Muller, vice-president of the South African Nursing Association.

Miss Muller was reacting to enquiries by some senior nurses about the announcement in March by the Minister of Health and Population Development that "parity would be valid immediately".

### "An enormous task"

Miss Muller said the principle of parity had been accepted, and appealed to nurses to be patient "a little longer".

"The Commission for Administration is busy with a second investigation and once their proposals are accepted, parity will be implemented," she said.

"You must understand that it is an enormous administrative task to adjust the salaries of about 100 000 nurses in South Africa."

She said there had been a "very positive response from the nursing profession" to the announcement of parity by the Minister, Dr Willie van Niekerk.

# Parity in nursing salaries 'probably before year's end'

Pretoria Correspondent

There is no doubt that parity in salaries for South African nurses of all races will be implemented, probably before the end of the year, says Miss Odelia Muller, vice-president of the South African Nursing Association.

Miss Muller was reacting to recent inquiries made by some senior nurses who were confused by the announcement by Dr Willie van Niekerk, Minister of Health and Population Development, in March this year that "parity would be valid immediately."

## NEED FOR PATIENCE

Miss Muller, who appealed to the nursing profession to be patient a little longer, said the principle of parity had been accepted.

"The Commission for Administration is still busy with a second investigation into a career-specific dispensation for nurses and once the commission's proposals are accepted parity will be implemented," she said.

"You must understand that it is an enormous administrative task to adjust the salaries of about 100 000 nurses in South Africa," she added.

The Minister's announcement of parity in salaries for nurses of all races evoked a very positive response from the nursing profession.

Nurses and teachers of all races 'to get equal salaries this year'

# Govt promise on pay parity

Action is to be taken "as swiftly as possible" towards the achievement of pay parity between the different races in all occupational classes, Mr E van der Merwe Louw, the Minister for Administration and Economic Advisory, said yesterday.

"To demonstrate its concern, Government has provided appropriate funding so as to allow for the complete elimination during the current year of salary disparities, based on racial classification, in nursing, paramedical staff and in education," he said.

Investigations into the improvement of salary dispensation and the elimination of salary disparities among nurses and paramedical staff had reached an advanced stage.

The Minister of National Health and Population Development would soon announce

further particulars.

The elimination of educationists' salary disparities was still receiving attention and the relevant Minister would issue a statement in due course, the statement added.

## MARKET-RELATED

"During the debate on the commission for administration's budget in the House of Assembly on May 30, I announced that during this year, in accordance with Government policy, an amount had been set aside for the further achievement of selective market-related salary dispensations for those occupational classes where the greatest need existed," Mr van der Merwe Louw said.

"In line with this, during 1985, the position of director-generals was investigated by two independent and highly regarded personnel consultancies, with a view to

bringing about a market-related salary adjustments.

"Their proposals have also been submitted to a panel of business leaders for comments and recommendations. On this basis, Government has concentrated on an improved salary dispensation adjustment for director-generals, with effect from July 1," he said.

Besides the position of director-generals, various other occupational groups had also been identified by the Cabinet as groups that were to receive priority salary improvements during this financial year.

"It is common practice not to divulge detailed information about salary improvements. Such information will be passed on to the heads of the relevant departments and institutions," the statement said. — Sapa.

information saturation. A similar  
Natal Agricultural Union  
te members and it was

CAPE TOWN 4/8/86

# Pay parity between races to cost R94m

**Own Correspondent**  
**JOHANNESBURG.** — The scrapping of wage apartheid among teachers, paramedics and nurses is to cost the state R94-million in fiscal 1986, according to Treasury figures.

said R45-million would be injected into the salaries of 81 000 black teachers employed by the Department of Education and Training and its counterpart in national states.

The amount will be drawn from the Commission for Administration's R1-billion budget for improving conditions of service for State employees.

The government has said the "disparity in the salaries of teachers of different population groups" will be eliminated from December 1.

Adjusting salaries and allowances of government departments increases by R63,5-million to R505-million in the current term.

Meanwhile, a further R49-million will be used to achieve racial pay parity for nurses and paramedics.

It is understood that the lion's share of the increase comes from the 10 percent civil service salary rise in April and funds earmarked for closing racial and occupational wage gaps in the public sector.

The Minister of Administration and Economic Advisory Services, Mr Eli Louw, said public sector pay discrimination would be eliminated "as swiftly as possible", but that the government still had to announce a timetable for nurses and paramedics.

A Treasury spokesman



**clicks**  
ariety, Service & Style

T  
i  
S  
w  
C

# sunrise

## Nurses' <sup>SPK</sup> pay to be <sup>95</sup> adjusted <sup>6/9/86</sup>

CAPE TOWN — About 90 000 nurses and paramedical staff are to benefit from "salary structure adjustments" backdated to September 1.

This was announced yesterday by the Minister of National Health and Population Development, Dr Willie van Niekerk.

He also announced that much of the increase would be used to establish parity in pay for various population groups.

Special allowances for staff employed at psychiatric hospitals and in intensive care units, as well as additional payment for night duty, would be effective from the same date.

Dr van Niekerk said the Commission for Administration had completed its investigation into the service dispensations of nursing and paramedical staff.

The improvements resulting from the investigation were effective from September 1.

As had already been made known, the improvements comprised the establishment of parity in the salary structures and related measures for the various population groups.

"In the second instance, it comprises further essential salary structure adjustments to place the relevant personnel classes in a moderately competitive position in the open labour market," he said. — Sapa.

# Pay hike for 90 000 nurses on the cards

CAPE TOWN — About 90 000 nurses and paramedical staff are to benefit from "salary structure adjustments" backdated to September 1, the Minister of National Health and Population Development, Dr Willie van Niekerk, said yesterday.

Much of the increase would be used to establish parity in pay for various population groups, he said.

Special allowances for staff employed at psychiatric hospitals and in intensive care units, as well as additional payments for night duty, would be effective from the same date.

Replying to questions at a press conference here, Dr Van Niekerk said it was impossible to give actual figures or percentages of the increases as these were still being calculated.

However, details of the improvements had been conveyed to the "institutions concerned", which were implementing them as quickly as possible.

● Dr Van Niekerk also told representatives of medical aid societies that the government was prepared to look at changes to the legislation affecting medical aid schemes, if these were required.

He said his discussions with the representatives had aimed at establishing the facts about recent subscription increases.

"The main fact being that increases have not been 20 per cent across the board," Dr Van Niekerk said.

Another fact was that when viewed as a percentage of salary, the public's contributions had hardly risen over the period 1971 to 1986. However, a major increase had occurred in black medical aid subscriptions.

The minister had told the medical aid representatives the government viewed the issue as a private sector matter, but naturally had an interest in it. — Sapa.

# Nurses await ruling

ENG. POST  
6/9/80 (95)

Weekend Post Reporter

NURSES at the Provincial Hospital in Port Elizabeth are eagerly awaiting official news that they will no longer have to work an extra 2½ hours a week, without overtime pay.

All public service employees — including nurses — have had to work the 42½-hour week since the beginning of last year.

"Nurses are on their feet most of the day or night, and it has really been tough on them," said Matron A. J. Botha, nursing services manager, Provincial Hospital.

She said the Transvaal Provincial Administration had already advised hospitals of the return to the 40-hour week for nurses.

The Transvaal Department of Hospital Services confirmed this week that it had scrapped the additional work time from September 1, but that it had appealed to staff to continue voluntarily overtime work.

● Pay rises for nurses and paramedic staff, retrospective to September 1, were announced yesterday by the Minister of National Health and Population Development, Dr Willie van Niekerk. The Minister said the "salary structure adjustment" (not yet detailed) would also be used to establish parity in pay for the different race groups.



# Nurses 'restive over pay parity'

By Michael Tissong

There was to have been parity in nurses' salaries by September 1. Because this had not happened the nursing profession was becoming restive, said Dr Abu-baker Asvat, head of the health secretariat of the Azanian People's Organisation (Azapo).

Hospital Services spokesman Dr P C Hauptfleisch said yesterday that the decision on nurses' salaries was taken by the Cabinet.

In February, the Transvaal MEC for hospitals, Mr Daan Kirstein, said parity would cost the province R14 million.

Minister of National Health and Population Development Dr Willie van Niekerk said earlier this month that when parity was introduced, it would be backdated to September 1.

Another Government spokesman said parity would be introduced "before the end of the year."

Dr Asvat said: "It is imperative that the authorities unequivocally state when and how equalisation is going to be implemented".

16/11/86  
STAR  
**Black nurses  
move 'a start'**

95 Pretoria Bureau

The Progressive Federal Party's provincial spokesman on health, Mrs Irene Menell, has applauded the province's decision to use black nurses in the white H F Verwoerd Hospital, but says she believes this does not do away with the urgent need for total rationalisation of the provincial hospital service.

Mrs Menell said yesterday the latest move was "the beginning of a saner approach", but warned that it was dangerous to integrate the hospital service "piecemeal".

She said it was vital that the remaining salary differences between black and white nurses be scrapped, noting that in the entry grades, blacks were still paid between 10 and 15 percent less than whites.

Mrs Menell said nursing training facilities must also be opened to all races, particularly now that nursing colleges were attached to universities.

HEALTH & DISEASE - NURSES  
1987

JANUARY      —————      SEPT. —————>      DEC.

# Number problems for nurses

THE removal of house numbers in Soweto has created problems for district nurses on call, Dr Chris van den Heever, chief superintendent at Baragwanath Hospital has said.

Dr van den Heever said nurses had difficulty finding the homes of mothers who were discharged from the maternity section of the hospital.

He said the nurses' visit to such patients was of great importance

because they had to check on the health of mothers and babies on a daily basis after discharge.

Dr van den Heever said patients should report to their nearest clinic if in 24 hours after discharge, they have had no visit by a district nurse.

Soweto's Town Clerk, Mr Nico Malan, said the council was not "really" affected by the removal of the house numbers. He said

the council's survey plans had site numbers which were similar to house numbers.

Mr J A Laubscher, the Post Office public relations officer said the Post Office had not experienced any problem with the delivery of letters because the postmen knew the areas.

In some areas the youths erased the numbers and in others, the heads of families were told to erase the numbers themselves.

Sowetan  
18/1/87

bid to avert collapse of operations at hospital

# DOCTORS, NURSES THREAT TO QUIT

95  
Sowetan  
23/2/87

**Demand for  
better pay**

## Hospital crisis

**960 patients may be at risk**

THE crisis at the Sebokeng Hospital worsened this week when a number of the remaining doctors threatened to resign unless their demands for better pay and working conditions received immediate attention.

By **JOSHUA RABOROKO**

This comes after the nursing staff resolved at a meeting on Wednesday that they will be forced to leave the hospital if they were not paid for working long hours and if working conditions are not improved.

In an attempt to save the collapse of operations at the hospital, the superintendent, Dr Juric van der Vyver, yesterday held a meeting with several private doctors to persuade them to do casual work at the hospital.

### Unhappy

By late yesterday the doctors were still locked in the meeting.

Doctors told the *Sowetan* yesterday that they were unhappy with the low salaries they received as compared with

doctors in private practice

"We are made to work long hours without pay and have to attend to hundreds of patients from townships in the Vaal and surrounding farms," they said.

They have approached officials of the hospital on other complaints which include working under trying conditions.

"Under the circumstances we feel that we must follow our colleagues who resigned after voicing similar grievances," they said.

Nursing sisters also complained about the conditions they were forced to work under, especially at night. The shortage of doctors has

To Page 8

From Page 1  
aggravated the situation, they said.  
"We are not paid any money for working overtime. Instead we are

being given time-off which we do not need," the nurses said.  
Both doctors and nurses at the hospital agreed that the hospital

was on the verge of a crisis and blamed the authorities for allowing the situation to prevail for a long time without attending to problems.

They said that the authorities seemed to be relaxing and making vague promises.

"We are worried about the most of the 960 patients currently admitted to the hospital," they said.

Dr van der Vyver admitted yesterday that the doctors' demands included pay rises. The matter had been referred to the Department of Hospital Services which will make a decision soon, he said.

There was a shortage of doctors mainly because many doctors had left "for greener pastures" and other were going to the army.

"We are still talking to private doctors to see if they can help in the situation. We are hoping that they will agree and things will be sorted out," he said.

95  
B/Deey  
1/13/87

## NURSE RECRUITMENT WORRIES HEAD

DURBAN — A US health company is planning to recruit SA nurses while the SA Nursing Association (Sana) is expressing fears of a possible future shortage of registered nurses.

Sana president Odelia Muller says a decreased intake of student nurses is a danger signal.

She said yesterday: "The association has never been in favour of active

Own Correspondent

recruitment drives. Of course, we can't tell our members not to work in other countries — on the contrary, we often assist them.

"We have found that some of the promises made by recruiting companies don't materialise and we warn our members to be on their guard."

# Nurses' neglect blamed for girl's death

By EUGENE ABRAHAMS

A MOTHER of six has accused hospital staff of "gross negligence", which she believes caused the death of her 14-year-old daughter.

Mrs Phillipina Petersen, of Ravensmead, Cape Town, claimed at the Bellville inquest that the nurses at Tygerberg Hospital did not change her seriously ill daughter's colon drainage bag often enough.

The inquest is being held at the request of Mrs Petersen to determine if negligence was responsible for her daughter's death.

Her daughter, Karin — a Standard 5 pupil — died in the hospital's intensive care unit of multiple organ failure and a septic colon on August 10 1985.

She had been admitted to the hospital on June 17 1985 after a car accident outside Laingsburg, in which her colon was torn and she broke an arm and leg and suffered head wounds.

After emergency surgery, during which the broken bones were placed in casts



MRS PETERSEN  
Complained

and the torn colon repaired, she was admitted to Tygerberg Hospital for daily care.

At the inquest, Mrs Petersen said she had often found her daughter's bed and bandages soiled from the intestinal drainage bag.

Her daughter had told her the bag was not being replaced often enough, and when she (the mother) had approached the nursing staff, they said it was the responsibility of the night staff.

When Mrs Petersen complained to the senior matron on duty she "was bluntly told that she (the matron) was not interested in hearing complaints about nurses not doing their jobs properly".

Mrs Petersen then complained to the senior medical superintendent, Dr R T



KARIN  
Scared

Truter, who investigated and "promised that Karin would be treated properly".

Said Mrs Petersen: "I often cleaned my soiled daughter when I visited her and even found waste from the overflowing drain beneath her fingernails.

Karin was scared of the night duty personnel and asked me to spend the night with her.

"When she was in pain and rang the bell, the night personnel did not respond," she claimed.

Testifying for the hospital, Dr F J Rademan said that Karin was "not acutely ill" when admitted to hospital.

She developed fever about three days later and had a painful stomach.

He said Karin died of infection of the colon.

"I never got the impression that the drainage bag was overflowing," he said.

The case was postponed to April 27.

Groups would be allowed  
Square during working

Call for 13/3/87

# SA nurses spell out duties in unrest

Staff Reporter

THE South African Nursing Association has spelt out the responsibility of nurses in times of unrest in the March edition of "Nursing News", its official publication.

SANA reaffirmed that a nurse's first responsibility was towards her patients. It said the association believed the responsibility of the professional nurse was to "prevent illness, restore health and alleviate suffering".

Furthermore SANA:

- Condemns any act of torture or mutilation, and any humiliating treatment which affronts personal dignity.
- Upholds the principles that during unrest all persons, whether involved in the hostilities or not, shall receive protection and care if wounded or ill.
- Resolves that the right of a patient's access to any facility be upheld, meaning "that access by police can only be allowed when in possession of appropriate documentation" and that anyone deemed to be a threat to the patient's safety can be refused admission.

GOUGH

## Fine and v

CAPE PENINSULA and vicinity and Western Cape Coastal Belt: Fine and warm with fog patches becoming partly cloudy and cool. Wind moderate south-westerly. The minimum and maximum temperature will be between 14 and 22 deg C.

### YESTERDAY'S READINGS

Barometer	noon 1010,3	8pm 1008,3
Humidity	67,0	90,0
Temperature	22,7	18,7

max 24,6 min 16,5

(At D F Malan 24 hours to 8pm)  
Hours of sunshine: 11,5  
Wind (D F Malan) 8 pm: S 7 knots

### TIDES (TABLE BAY) TODAY

High:	0228	1440
Low:	0835	2042
Sun sets	1908	rises 0643
Moon rises	1819	sets 0425

### TIDES (TABLE BAY) TOMORROW

High:	0225	1509
Low:	0903	2108
Sun sets	1906	rises 0644
Moon rises	1846	sets 0525

### PHASES OF THE MOON

Full Moon, Mar 15.  
Last Quarter, Mar 22.  
New Moon, March 29.  
First Quarter, April 6.

### POOL, SEA TEMPERATURES

Mulzenberg: Pool 20,5, Sea 18,5  
Sea Point: Pool 21, Sea 11

Newland  
Long Str  
Coastal b  
berg B  
Coastal b  
Alfred:  
cloudy:  
the we  
Namaqu  
Highveid  
over  
area.  
Transva  
Free Sta  
Natal: F  
Namibia  
Botswan

Athens  
Brussels  
Buenos  
Geneva  
Hong K  
Jerusale  
Lisbon  
London  
Los Ang  
Madrid  
Miami  
New Yo  
Paris  
Perth  
Rio  
Rome  
Taipei  
Tel Avi  
Tokyo  
Toronto

# televis

TV schedules, supplied by the SABC, may

TV1

- 6.00: Good Morning South Africa
- 2.00: Currie Cup cricket final
- 4.15: The Bubbliies. Echoes. A str disturbs the Bubbliies, until that it is only an echo.
- 4.20 Tom and Jerry. The Atom-inabl Jerry all over a mountain an Dog has repeatedly to com rescue.
- 4.30: Hand in Hand
- 4.35: Orpen House



# Professor urges nurses to strive for change

By Inga Molzen

Almost 270 graduate and staff nurses were presented with certificates or special prizes at the Johannesburg Hospital graduation ceremony last night.

During the ceremony, held in the University of the Witwatersrand's

Medical School auditorium, Professor B Robertson, head of the university's department of nursing, encouraged the nurses to face the challenge of staff shortages and decreased budgets and to strive for change.

Two general medical and surgical nurses received the Johannesburg Hospital's gold badge for outstanding academic ability.

Miss Cheryl Willoughby, who passed her final year general nursing examination with a distinction in social sciences, was presented with the Leanne Wing Memorial Trophy for her exceptional qualities of concern and compassion.

Miss Laure Lagarrigue (22) of the adult trauma unit was awarded the Moira Connelly Memorial Prize for excellence in practical performance in all departments.

Sister Deborah Lancaster (25) received the department of anaesthetics' prize for obtaining the highest marks in the Nursing Council's diploma in operating theatre nursing science.



Not only patients need loving care . . . 25-year-old Sister Deborah Lancaster (left) broke her ankle in January while on holiday. Sister Henny de Beer (27) was among 270 others to receive certificates. ● Picture by John Hogg.

# PRP calls for education investigation

## Mercury Reporter

THE Progressive Reform Party in the House of Delegates decided at its meeting in Durban yesterday to make urgent representations to President Botha for a full and thorough investigation into Indian education.

Mr Mamoo Rajab, the party's spokesman on home affairs, said Indian education seemed to be 'living from crisis to crisis'.

'The question of the evaluation system is another one of the many problems that has arisen in that department.

'We are of the opinion that this is not the only problem that will be arising in the near future.

'There will always be crises precisely because those in authority are either incompetent or not concerned about the standard of education that should be imparted to the Indian child, but are concentrating more on stupid and petty issues to maintain the bureaucracy.'

Mr Rajab said the PRP would draw up a fully motivated dossier on Indian education highlighting the

tremendous sacrifices that were made by the Indian people themselves initially in providing for the education of their children.

'We will also refer to the massive strides in education after the Government assumed control over it in 1961.

'We will then be highlighting what happened after control was passed to the Indian Council and now to the House of Delegates under the direct control of the Ministers' Council of Mr Amichand Rajbansi.

'Our fear is that in the next couple of years the community will see the adverse effects of all that has been happening in the general standard of education in the Indian community.

'Instead of making improvements on the structures that have been created we fear there will be a dramatic and adverse fall in standards.'

## Beirut blast

BEIRUT—Three people were killed when a bomb blast destroyed a car in east Beirut yesterday. — (Sapa-AP)

# Nurses in KwaZulu win right to join

## African Affairs Correspondent

ULUNDI—Nurses in KwaZulu have won a six-year battle to retain their membership of the South African Nursing Association.

A statement from the KwaZulu Minister of Health, Dr Frank Mdlalose, yesterday said the KwaZulu Department of Health and Welfare had been advised in July, 1980, that membership by KwaZulu nurses of the SA Nursing Association had been illegal since 1977 since KwaZulu was a region in its own right.

The statement said talks on this issue with senior Government representatives had taken place from 1980.

Dr Mdlalose said the view of his department was that it had never wanted KwaZulu nurses to be excluded from membership of the association since the region was a part of South Africa.

He said a letter had now been received from the Director-General of the Department of National Health and

Population Development, stating that the South African Government intended to amend legislation to make it possible to incorporate nurses in self-governing territories into mandatory membership of the association.

Dr Mdlalose said that, after the nurses of self-governing territories had been excluded from membership of the national association, the KwaZulu Nurses' Organisation had taken over the functions of the association in the region as an interim body.

## Buffalo bought

THE Karkloof Falls Nature Reserve near Pietermaritzburg has imported 30 disease-free buffalos from the Regent's Park Zoo in London. — (Sapa)

## P O plan

PRETORIA—The Post Office plans to instal another ten public electronic franking machines country-wide. — (Sapa)

ete-  
ingly  
zim-  
ex-  
n of  
otal  
  
t to  
cton  
any  
re-  
ose  
ven  
re-  
for  
res  
ps-  
  
ill  
oti.  
his  
da-  
oti  
ny  
ur  
in-  
ay

20/13/87  
N/M

20/13/87  
N/M

## Report cases of ill-treatment, SA nurses told

Medical Reporter 95

PROFESSIONAL nurses aware of physical or mental ill-treatment of detainees should take action, including reporting the matter "through appropriate channels", says the South African Nursing Association.

Stating its policy on the responsibilities of nurses during "civil unrest", the association says in Nursing News that it upholds the principle that all persons, whether involved in hostilities or not and regardless of all considerations, should receive protection and care if wounded or ill.

Nurses were "bound to hold in confidence" any information given by a patient "except, for example, in acts of terrorism" or when instructed by a court of law.

### REFUSAL OF ENTRY

Police "without appropriate documentation" could be prevented from entering any health facility unless authorised by law and any other person "deemed to be a threat to the patient's safety" could be refused entry.

The association condemns "torture, mutilation, cruel treatment or murder" and any other humiliating or degrading treatment.

## Bank closed Mr Z's account

The Argus Correspondent

JOHANNESBURG. — Volkskas Bank closed the account of Mr Yusuf Surtee, the "Mr Z" who paid for the "Unban the ANC" advertisements, because he was consistently overdrawn and refused to grant him an overdraft without security.

Mr Johannes Greyvenstein, manager of the bank's Sauer Street branch here, told the Munnik commission of inquiry into the financing of the advertisements that, in hindsight, Mr Surtee's account had not been operated "normally".

The commission heard earlier that Barclays Bank granted Mr Surtee an overdraft of R100 000, used to pay for the advertisements, without security. He had an overdraft facility of R30 000 on another account, which was later reduced to R20 000.

### Asked to be told

Mr Greyvenstein said Mr Surtee asked him to contact him whenever there was not enough in the account to meet withdrawals.

"I couldn't see my way clear to phone him every time he was overdrawn and, in October 1986, I told him I could no longer do it and closed the account."

The bank manager said Mr Surtee had had two accounts at Volkskas, one of which was opened in August 1980 and lapsed in 1985 and another opened in June 1985 and closed by the bank in October 1986.

Mr Surtee was granted an overdraft facility on the first account after putting up investments, two insurance policies and shares as security. The facility rose from R2 500 in 1980 to R16 000 in August 1983, and was brought down the next month to R10 000.

The commission heard that Mr Surtee's account was originally well controlled but last year he issued cheques and debit orders without having money to cover them.

Mr Greyvenstein agreed with Mr Justice Munnik that this was not normal procedure. "Normal procedure is that there are always funds in the account, but that is how the account was run."

(Proceeding)

# Agreement reached on Zambian nurses' strike

LUSAKA — Trade union leaders agreed at the weekend to end strikes which paralysed hospitals and schools in many parts of Zambia, the government-owned *Zambia Daily Mail* reported.

The chairman of the Zambia Congress of Trade Unions, Mr Frederick Chiluba, reached the agreement at an emergency meeting with Prime Minister Mr Kebby Musokotwane, *The Mail* said.

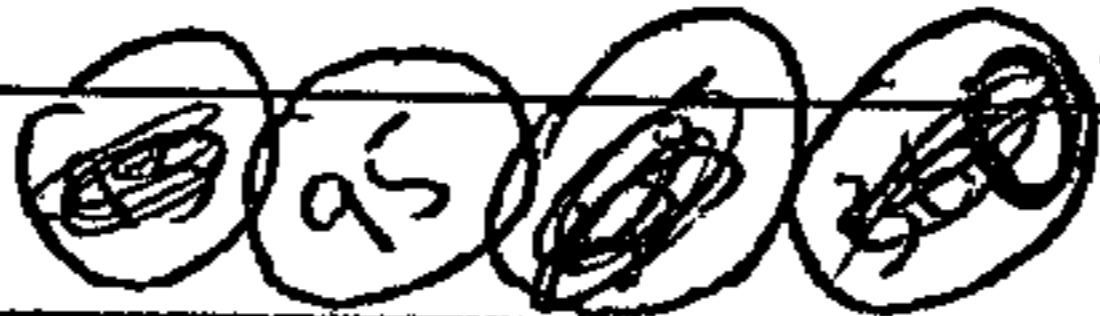
It quoted Mr Musokotwane as saying the unions agreed to end the

strike while the government sorted out pay discrepancies which had caused the dissatisfaction.

*The Mail* reported that the strike of nurses at Kitwe, in the Copperbelt, had spread to Livingstone, Ndola, Kabwe and Luanshya.

The nurses were demanding a 50 percent salary increase and danger money for caring for patients who had AIDS. Teachers also demanded pay increases. — Sapa-  
Reuter.

SMK  
25/3/87



## Doctors join striking nurses and teachers

LUSAKA — Some doctors in Lusaka stayed away from work a second day yesterday as part of a nationwide Zambian strike by nurses and teachers over poor wages.

Government officials described the 40 new strikers as “junior doctors”.

An undetermined number of nurses and 8 000 members of the 35 000-strong Zambian teachers’ union are on strike.

At least 40 patients were said to have died as a result of the strike. — Sapa-AP.

# Nurses strike led to death of 40 <sup>SMR 25/3/87</sup> report

LUSAKA — At least 40 children have died through lack of medical care in State hospitals as a result of a strike by government-employed nurses and assistants, the *Zambia Daily Mail* newspaper reported on Saturday.

The government-owned newspaper, in a page one editorial on the fourth day of the strike, urged the nurses to "examine their consciences."

"How do they feel seeing people dying as a direct result of their failure to attend to them?" the newspaper asked.

The paper gave no attribution for its report. Meanwhile, Roman Catholic missionary nuns, student nurses and other volunteers staffed Zambia's main hospitals and clinics to replace the strikers. — Sapa-Associated Press.

# Security forces shot me — nurse

By Montshiwa Moroke

A Soweto mother of three has laid a complaint with the police after she was allegedly shot and wounded by members of the security forces while travelling home from work.

The attack on Miss Aurelia Qina (32), a nurse, took place at night on March 23 while she and three colleagues were travelling in a minibus along the Old Potchefstroom Road to Protea North.

She was taken to Baragwanath Hospital where she was treated for a leg wound and discharged.

In a telex reply to The Star, however, the SAP public relations directorate said:

"We have no record that Miss Aurelia Qina has laid any charges with the SA Police at Kliptown. She is advised to do so as soon as possible as this is a serious allegation.

"Copies of your telex have been sent to the Divisional Criminal Investigation Officer, Soweto, and the Public Relations Division of the SADF."

Miss Qina said that about 7.20 pm as they were passing Zones One and Two, Pimville, they heard a noise in the car.

"Suddenly a military vehicle cut in front of us. Men in brown army uniform got out and approached us.

"This was the same army truck we saw when we stopped earlier at a robot opposite the Doornkop Military Base.

"One of them went to the driver's side and accused the driver of being drunk. He then hit the driver with a gun.

## BLOOD

"I did not know what had happened until I felt heat in my leg. When I touched it my hand was stained with blood."

She said she heard one of the members of the security forces asking the others "Wie het geskiet, wie het geskiet?" (who shot, who shot?) No one replied.

The passengers asked what was wrong and one of the soldiers looked at the bleeding wound and remarked "Dit is net 'n krap (it is just a scratch)."

Miss Qina said another soldier told the driver of the minibus to take her to hospital. They tried to follow the army vehicle but lost track of it.

"We went to the Kliptown police station where we reported the matter after I had been treated for a bullet wound at Baragwanath Hospital.

... ..

# PE hospital patient stabs nursing sister

EP. 24/4/87 (95)

Crime Reporter (32)

A NURSING sister at the Livingstone Hospital is fighting for her life in the hospital after she was stabbed 11 times with a pocket knife by a patient last night.

At 11pm sister Grace Lipiwana, 53, was helping an asthma sufferer aged 61.

He suddenly had an asthma attack, grabbed her and stabbed her 11 times.

Sister Lipiwana's al-

leged assailant is being treated in the hospital under police guard. An attempted murder docket has been opened.

● In another incident at the hospital, a 49-year-old patient fell to his death through a fourth-floor window early today.

He was Mr Charles Lekata, of Kareedouw, who was admitted yesterday with a chest complaint.

His body was found outside the hospital shortly after 2 am.



~~CAT TIMES 28/4/87 (298) 95~~  
**'Please don't stop the nurses'**

PRETORIA. — The South African Nursing Association yesterday expressed its concern about nurses having been stopped from going to work in Soweto.

SANA executive director Mrs Susan du Préez said in an interview here that individuals at public transport boarding points had stopped nurses not wearing uniforms from going to work during last week's rent-protest stayaway.

She said she was grateful that nurses in uniform were let through. Nurses were professionally bound to remain neutral in any civil unrest, she said.

SANA's president, Ms Odelia Muller, appealed to communities to support nurses in performing their duties. — Sapa

---

and irreplaceable union records. he  
added. Legal...  
...in interim

to is d is e k  
d e t e r m i n e

# Don't stop nurses plea

95  
Sowetan  
28/4/87

**THE South African Nursing Council yesterday appealed to communities throughout the country not to stop nurses from going to work during periods of unrest.**

In a statement released in Pretoria, the SANC said they were concerned "about the fresh attempts of the Soweto community to interrupt nursing services and to prevent nurses from going about their business as citizens and caring professionals."

**By MONK NKOMO**

The council's appeal was made following the recent spate of unrest in Soweto where at one stage thousands of people were left stranded because of the shortage of transport after some trains were set alight.

Large numbers of commuters were forced to jump from burning trains.

The SANC said yesterday that the nurse was "professionally

bound to remain neutral in any civil unrest or conditions of unrest and conflict."

"She cares about and, in illness, for all persons in need of nursing, regardless of their political alliance or other affiliations. Those of the community who are obstructive will also be cared for by nurses when they themselves have health needs. We appeal to communities all over South Africa to help nurses to help and care for all of us," the SANC said.

than Std 10; if so, how many in each case?

**The MINISTER OF CONSTITUTIONAL DEVELOPMENT AND PLANNING:**

(1) Yes: Std 10, but a lower qualification in deserving cases is also acceptable.

(2) (a) (i) (aa) 20

(bb) 10

(cc) 80

(dd) 148

(ii) 0

(b) (i) (aa) 0

(bb) 63

(cc) 152

(dd) 33

(ii) 0

**Detainees**

80. Mr S VAN DER MERWE asked the Minister of Water Affairs:

- (1) Whether any persons employed by his Department have been detained; if so, how many since 1 September 1984 as at the latest specified date for which information is available;
- (2) whether the posts of such detained

**Whites**

(b) (i) 26 839 355 454

(ii) +4.8%

Notes: (1) These statistics excludes taxpayers paying tax under the Final Deduction System, in respect of whom accurate statistics are not available.

(2) These statistics are incomplete because approximately 20 per

employees are filled by temporary employees; if not, what arrangements are made regarding these posts; if so, (a) how many temporary employees had been engaged to fill such posts as at the above date and (b) what steps are taken in respect of such temporary employees when the detained employees are released by the Police?

**The MINISTER OF WATER AFFAIRS:**

(1) No.

(2) Falls away.

**Taxable earnings**

93. Mr J J WALSH asked the Minister of Finance:

- (a) What were the total taxable earnings for Whites, Coloureds and Indians, respectively, in 1986 and (b) what was the (i) total taxable income earned in this year by each of these race groups and (ii) percentage increase or decrease for each such group over the previous year?

**The MINISTER OF FINANCE:**

- (a) No statistics are available in respect of total taxable earnings.

**Coloureds**

1 965 070 957

+4.4%

**Indians**

1 296 794 320

+8.6%

cent of individual taxpayers have not yet been assessed for the 1986 year of assessment. The percentage growth has therefore been calculated on the average income per taxpayer.

**State housing sale**

111. Mr P C CRONJÉ asked the Minister of Constitutional Development and Planning:

How many houses had been sold to Blacks by his Department under the State housing sale announced by the then Minister of Community Development on 3 March 1983, as at the latest specified date for which figures are available?

**The MINISTER OF CONSTITUTIONAL DEVELOPMENT AND PLANNING:**

As at 30 April 1987:

Transvaal	41 036
Cape Province	6 352
Natal	562

Orange Free State

3 837

**TOTAL**

51 787

**Mining sector: tax revenue**

116. Mr C J DERBY-LEWIS asked the Minister of Finance:

- (a) What amounts were budgeted in respect of tax revenue from the mining sector for the 1980-81, 1985-86 and 1986-87 tax years, respectively, and (b) what were the actual amounts collected from this source in each of these tax years?

**The MINISTER OF FINANCE:**

(a) and (b)

Financial Year	Estimate		Collections	
	Mining Leases	Income Tax	Mining Leases	Income Tax
1980-81	R695 m	R2 090 m	R880.2 m	R3 006.4 m
Diamond Export Duty	R 31 m		R 24.8 m	
1985-86	R468 m	R2 275 m	R633.2 m	R2 938.1 m
Diamond Export Duty	R 37 m		R 56.7 m	
1986-87	R680 m	R2 730 m	R845.3 m	R3 450.2 m
Diamond Export Duty	R 35 m		R 48.4 m	

**Nurses: salary scales**

126. Dr M S BARNARD asked the Minister in the State President's office entrusted with Administration and Broadcasting Services:

- (1) What are the salary scales payable to (a) male and (b) female persons of each race group employed in institutions falling under the control of Government Departments as (i) student nurses, (ii) staff nurses, (iii) professional nurses, (iv) chief profession-

al nurses and (v) chief nursing service managers;

- (2) whether salary parity has been achieved in respect of all nurses falling under the control of such Departments; if not, (a) why not, (b) when is it anticipated that salary parity will be achieved and (c) what is the estimated annual cost of bringing about parity by increasing the salaries of Black, Coloured and Asian nurses?

The MINISTER IN THE STATE PRESIDENT'S OFFICE ENTRUSTED WITH ADMINISTRATION AND BROADCASTING SERVICES:

- (1) (a) and (b)—all population groups
- (i) R5 412 x 309-6 030 x 339-7 725/5 721-6 030 x 339-8 064 x 384-9 600
- (ii) R8 448 x 384-10 368 x 510-12 918
- (iii) R11 898 x 510-13 428 x 702-18 342
- (iv) R22 542 x 1 047-26 730
- (v) R33 468 x 1 275-38 568

(2) Yes. (a), (b) and (c) Fall away.

(Note: Full parity i.r.o. salaries and measures for all nursing personnel were implemented with effect from 1 September 1986, as a result of the announcement by the Minister of National Health and Population Development during the opening of the 5th Meeting of the 9th Council of the S.A. Nursing Council, on 18 March 1986.)

THURSDAY, 11 JUNE 1987

†Indicates translated version.

For written reply:

Own Affairs:

Children attending schools

17. Dr F HARTZENBERG asked the Minister of Education and Culture:†

- (1) (a) How many (i) Black, (ii) Coloured and (iii) Indian children were attending schools for Whites in the Republic as at the latest specified date for which figures are available and (b) how many of these schools are (i) State-controlled, (ii) State subsidized, (iii) private and (iv) other specified kinds of schools;
- (2) with what total amount did his Department subsidize schools attended by White children as well as children from other population groups, in the latest specified 12-month period for which figures are available?

The MINISTER OF EDUCATION AND CULTURE:

	(i)	(ii)	(iii)	(b)	(i)	(ii)	(iii)	(iv)
Cape	509	1 917	391	6	9	44	0	0
Natal	575	464	585	2	1	50	0	0
OFS	38	25	6	0	0	4	0	0
Transvaal	1 848	602	648	5	0	132	0	0

National Liquor Board

44. Mr D J N MALCOMESS asked the Minister of Economic Affairs and Technology:

What was the cost of operating the National Liquor Board in the latest specified year of which figures are available?

The MINISTER OF ECONOMIC AFFAIRS AND TECHNOLOGY:

R847 480 during the 1986/87 financial year. This amount includes the expenditure in respect of the Directorate: Liquor Affairs in the Department of Trade and Industry.

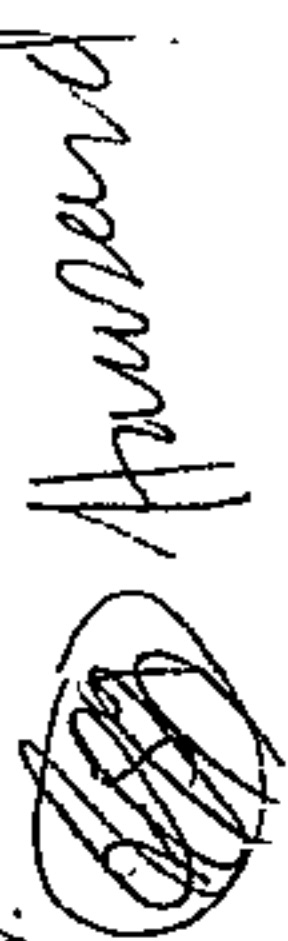
†Indicates translated version.

For written reply:

General Affairs:

HoA

12/6/87



QUESTIONS UNDER NAME OF MEMBER

- Andrew, Mr K M—  
General Affairs: Home Affairs, 94, 95
- Gastrow, Mr P H P—  
General Affairs: Constitutional Development and Planning, 49, 50  
Manpower, 49
- Hartzenberg, Dr F—  
General Affairs: Constitutional Development and Planning, 57  
Education and Development Aid, 96, 97, 99
- Own Affairs: Education and Culture, 144  
Justice, 63
- Hulley, Mr R R—  
General Affairs: Economic Affairs and Technology, 57, 107  
Environment Affairs, 55, 121
- Own Affairs: Education and Culture, 63
- Langley, Mr T—  
General Affairs: Foreign Affairs, 58  
Justice, 51  
Law and Order, 59, 98  
Transport Affairs, 97
- Lorimer, Mr R J—  
General Affairs: Agriculture, 109  
Environment Affairs, 111  
Finance, 75  
Own Affairs: Education and Culture, 125
- Malcomess, Mr D J N—  
Constitutional Development and Planning, 43, 50, 135  
Defence, 114
- Andrew, Mr K M—  
General Affairs: Constitutional Development and Planning, 105, 106  
Education and Development Aid, 52, 55  
Home Affairs, 128  
Law and Order, 54  
National Health and Population Development, 102
- Own Affairs: Education and Culture, 118, 119
- Barnard, Dr M S—  
General Affairs: Administration and Broadcasting Services, 141  
Justice, 61  
Law and Order, 85
- Burrows, Mr R M—  
General Affairs: Constitutional Development and Planning, 11  
Economic Affairs and Technology, 12  
Justice, 10  
National Education, 67, 84, 116  
State President, 124
- Own Affairs: Education and Culture, 15, 16, 64, 65, 66
- Cronjé, Mr P C—  
General Affairs: Constitutional Development and Planning, 99, 141
- Dalling, Mr D J—  
Justice, 1  
Transport Affairs, 1
- De Jager, Mr C D—  
General Affairs: Transport Affairs, 96
- Derby-Lewis, Mr C J—  
General Affairs: Finance, 142

HoA

Population Group	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec
OFS	0	0	0	0	0	0	0	0	0	1	1	1
Whites	1	1	6	2	3	1	0	5	2	0	0	1
Coloureds	0	1	0	0	5	0	0	3	1	2	1	0
Asians	0	1	0	0	2	0	0	0	0	0	0	0
Blacks	137	155	137	167	158	153	166	156	150	142	129	160

(b) Deaths from typhoid per month per population group in each province in 1986.

Population Group	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec
Cape Province	0	0	0	0	0	0	0	0	0	0	0	0
Whites	0	0	0	0	0	0	0	0	0	0	0	0
Coloureds	0	1	0	0	1	0	0	0	0	0	0	0
Asians	0	0	0	0	0	0	0	0	0	0	0	0
Blacks	0	0	0	2	0	0	0	0	0	1	0	0
Natal	0	0	0	0	0	0	0	0	0	0	0	0
Whites	0	0	0	0	0	0	0	0	0	0	0	0
Coloureds	0	0	0	0	0	0	0	0	0	0	0	0
Asians	0	0	0	0	0	0	0	0	0	0	0	0
Blacks	2	1	1	0	0	1	0	0	0	0	0	0
OFS	0	0	0	0	0	0	0	0	0	0	0	0
Whites	0	0	0	0	0	0	0	0	0	0	0	0
Coloureds	0	0	0	0	0	0	0	0	0	0	0	0
Asians	0	0	0	0	0	0	0	0	0	0	0	0
Blacks	0	0	0	0	0	0	0	0	0	0	0	0
Transvaal	1	0	0	0	0	0	0	0	0	0	0	0
Whites	0	0	0	0	0	0	0	0	0	0	0	0
Coloureds	0	0	0	0	0	0	0	0	0	0	0	0
Asians	0	0	0	0	0	0	0	0	0	0	0	0
Blacks	3	5	0	0	0	0	1	1	2	4	0	2

(2) how many cases of tuberculosis were hospitalised in each (a) province and (b) such national state in 1986;

(3) how many tuberculosis patients died in each (a) province and (b) such national state in 1986?

The MINISTER OF NATIONAL HEALTH AND POPULATION DEVELOPMENT:

(1) How many cases of tuberculosis were reported in 1986 in each (a) province and (b) national state whose government had not taken over health services;

Cape Province ..... 22 348 cases  
Natal ..... 4 455 cases

*Handwritten signature: M S Barnard*

OFS ..... 3 717 cases  
Transvaal ..... 16 270 cases

(b) The governments of all national states have taken over health services

(2) (a) Cape Province ..... 8 942 cases  
Natal ..... 5 316 cases  
OFS ..... 2 680 cases  
Transvaal ..... 18 115 cases

(b) The governments of all national states have taken over health services.

(3) (a) Cape Province ..... 1 288 deaths  
Natal ..... 83 deaths  
OFS ..... 96 deaths  
Transvaal ..... 477 deaths

(b) The governments of all national states have taken over health services.

The MINISTER OF NATIONAL HEALTH AND POPULATION DEVELOPMENT:

Position as on 31 December 1985.

*Handwritten: 23/6/87 (95) Howard*

	(i) Received	(ii) Accepted
(1) (a) (aa) Whites	4 141	3 461
(bb) Coloureds	2 024*	856
(cc) Indians	32 450	217
(dd) Blacks	4 174	4 284
(b) (aa) Whites	—	—
(bb) Coloureds	3 352*	—
(cc) Indians	—	—
(dd) Blacks	—	—
(2) (aa) Whites	1 768	—
(bb) Coloureds	648	—
(cc) Indians	199	—
(dd) Blacks	3 049	—

\*Information cannot be supplied separately for each population group.

Polio myelitis

24. Dr M S BARNARD asked the Minister of National Health and Population Development:

(1) How many (a) cases of and (b) deaths from poliomyelitis were reported in respect of each race group in each province for each month from Decem-

ber 1985 to the latest specified month for which figures are available;

(2) how many persons of each race group were immunised against poliomyelitis in each province in 1985?

The MINISTER OF NATIONAL HEALTH AND POPULATION DEVELOPMENT:

(1) (a) Cases of Poliomyelitis 1985/86

*Handwritten signature: Howard*

# 'Desperate' need in SA for nurses

Post Correspondent

PRETORIA — The need for nurses in some big, understaffed provincial hospitals has become desperate, according to authorities.

They were reacting to a Medical Association of SA statement earlier in the week that State health services were deteriorating because of a shortage of doctors — as much as 40% in some parts.

Superintendent of the Johannesburg Hospital, Dr R J Broekmann, said the areas of crisis were the academic hospitals where hospital administrations had to compete for trained staff with private practitioners, private hospitals and in certain other areas of the private sector.

Another problem was that white nurses left the service at an average age

of 30, after giving an average of eight years' service.

Dr Broekmann said that even if all vacant authorised posts were filled there would still be a shortage in Johannesburg hospitals.

Currently the shortage amounted to 70 nurses, or about 10% of the establishment. "In a general ward of 30 patients we need nine sisters. In most of our wards at present we have two or three."

Student nurses and nursing aids had to fill the gaps, he said. This placed a tremendous load on trained staff. Currently more than 300 beds were closed. The shortage of doctors, nurses and administrative staff was critical, he said.

The PFP health spokesman, Dr Marius Barnard, said there was an urgent need for a total re-evaluation of training and conditions of service in the nursing profession.

One part of the solution to the shortage, particularly of white nurses, would be a complete integration of medical and nursing services. Another was the fact that private hospitals were luring nurses away from State and provincial service with attractive pay and service packages.

Dr Barnard stressed, too, that the State was carrying too heavy a training burden — about 95%. The burden, he said, should be shared by the growing number of private hospitals. Dr Barnard agreed with the Medical Association of SA that state health services were threatened by a shortage of doctors. Here, too, conditions of employment were the root cause.

95

20/8/87

20/8/87

(95) DO 70/8/57

# Officials: desperate need for nurses

Dispatch Correspondent

PRETORIA — The need for nurses in some big understaffed provincial hospitals has become desperate, according to authorities.

They were reacting to a Medical Association of South Africa (Masa) statement earlier in the week, that state health services were deteriorating because of a shortage of doctors — which was as great as 40 per cent in some parts.

The superintendent of the Johannesburg Hospital, Mr R. J. Broekmann, said the areas of crisis were the academic hospitals, where hospital administrations had to compete with private practitioners, private hospitals and certain other areas of the private sector, for trained staff.

Another problem was that white nurses left the service at an average age of 30, after giving an average of eight years service. Mr Broekmann said even if all vacant authorised posts were filled, there would still be a shortage in the Johannesburg hospitals.

Currently, the shortage amounted to 70 nurses, or about ten per cent of establishment, he said. "In a general ward of 30 patients, we need nine sisters. In most of our wards, at present, we have two or three."

Student nurses and nursing aids had to fill the gaps, he said, and this placed a tremendous load on trained staff.

He added that currently more than 300 beds were closed and the shortage of doctors, nurses and administrative staff was critical.

The Progressive Federal Party health spokesman, Mr Marius Barnard, said there was an urgent need for a total re-evaluation of training and conditions of service in the nursing profession.

One part of the solution to the shortage of, particularly white nurses, would be a complete integration of medical and nursing services, Mr Barnard said.

He also mentioned the fact that private hospitals were luring nurses away from state and provincial service with attractive pay and service packages.

Mr Barnard stressed, too, that the state was carrying too heavy a training burden — about 95 per cent. The burden should be shared by the growing number of private hospitals, he said. It should not all be left to the state.

Mr Barnard agreed with Masa that state health services were threatened by a shortage of doctors. Here too, conditions of employment were the root cause, he said.

# Serious lack of nurses

GERALD REILLY

PRETORIA — The need for more nurses in some large provincial hospitals has become desperate, say authorities.

Johannesburg Hospital superintendent R J Broekmann said the areas of crisis were the academic hospitals, where hospital administrations had to compete for trained staff with private practitioners, private hospitals and other areas of the private sector.

Another problem was that, on average, white nurses left the service at the age of 30, after giving only eight years of service.

Broekman said student nurses

and nursing aides had to fill the gaps. This placed a tremendous load on trained staff. More than 300 beds at Johannesburg Hospital were closed at present. The shortage of doctors, nurses and administrative staff was critical.

PFP health spokesman Marius Barnard said there was an urgent need for a total re-evaluation of training and conditions of service in the nursing profession.

One solution to the shortage of white nurses would be the complete integration of medical and nursing services, said Barnard.



## The POST says:

THE Government should take note of the call by Dr Marius Barnard for a total re-evaluation of the training and conditions of service in the nursing profession.

It follows disclosures that the need for nurses in some big, understaffed provincial hospitals has become desperate.

The Johannesburg Hospital, for example, is short of 70 nurses — about 10% of the estab-

lishment — but even if all vacant authorised posts were filled, there would still be a shortage, the superintendent says.

"In a general ward of 30 patients we need nine sisters. In most of our wards at present we have two or three."

Student nurses and nursing aids have to fill the gaps and this places a

tremendous load on trained staff, he says. More than 300 beds have been closed.

One of the causes of the nursing shortage is the fact that white nurses leave the service at an average age of 30, after giving an average of eight years' service.

Another is the fact that private hospitals are lur-

ing nurses away from State and provincial service with attractive pay and service packages.

Dr Barnard recommends, as one part of the solution to the shortage, particularly of white nurses, the complete integration of medical and nursing services.

He stresses, too, that the State is carrying too

heavy a training burden — about 95%. It should be shared by the growing number of private hospitals, he says.

Clearly, action is needed — and quickly. Are nurses getting a fair deal? That must be the starting point of what appears to be a much-needed investigation.

Nursing is a vital service and it must not be allowed to fall into disrepute through a lack of understanding of its needs.

# Give nurses square deal

95

AS WOST 19/9/87

# More hospital beds — but fewer nurses

Weekend Post Reporter  
THE dwindling pool of nursing staff in South Africa is a significant threat to health care, the manager of a private hospital in Cape Town said in Port Elizabeth this week.

Mr A R Matthews was addressing a symposium on private hospital development organised by the Eastern Cape branch of the SA Federation of Hospital Engineering.

He said new hospitals were being built and extensions made, but the bottom line was that there were not enough nurses to staff them.

"I do not believe that salaries are the basic issue. One just does not get applications," he said.

"We are reaping the seeds sown five to 10 years ago when conditions of service and salaries were so poor that very limited numbers of trainees were attracted into the profession.

"Since then salaries have improved and there are attractive benefits, such as housing subsidies, but this still does not attract sufficient numbers."

He said Cape Town's Carinus Nursing College had a biannual intake of 50 to 60 pupil nurses, a 50% reduction compared with 10 years ago.

The dropout rate for the new four-year course was between 40% and 50%. After qualifying, girls left to get married, had children or could not or would not work the onerous hours, nights and weekends.

"A newly qualified nurse after four years training earns about the same as a secretary," he said.

By February, 1988, beds in private hospital would

theatre sisters, needed for high technology hospitals, intensive care and high care staff, were also scarce. Sister tutors and general ward staff were hard to find.

Private hospitals drew nursing staff from provincial hospitals which was a contentious issue.

"Is it a provincial or government responsibility to train nursing staff? Should private hospitals train their own staff?" asked Mr Matthews.

There were costs in

training which could not be recovered by the private hospital sector, and there were very few private hospitals which had the full spectrum of practical work to give pupil nurses adequate experience.

His own hospital had gaps in areas such as casualty, psychiatry, geriatrics and paediatrics.

Mr Matthews said he would like to see the national bodies concerned tackle the attracting and training of adequate nursing staff.

Election Ball: King's Armour, Topiatus  
Red Flag  
Winner trained by R P Lerena  
Betting: 5-2 Election Ball; 7-2 Blue  
Saloon: 8-1 Lord Of Jazz; 7-1 Everton,  
Moombe's Joy, Caerula, Everton; 16-1  
1 King's Armour; 20-1 Film Fan; 33-1

# HEALTH & DISEASE - NURSES

1987

OCT.

—

NOV

47.

1.5.

8.

15.75

1.1.

1.

21.2

2.2

18.4

10

17.25

released

Argus 17/10/87  
**Nursing crisis talks**

The Argus Correspondent

JOHANNESBURG. — The critical shortage of nurses at the Johannesburg Hospital will be discussed in Pretoria today at a meeting between Miss Odelia Muller, president of the South African Nursing Association, and Dr Hennie van Wyk, director of medical services in Transvaal.

# Top meeting on nursing crisis

The grave shortage of nurses at the Johannesburg Hospital will be discussed in Pretoria today at a meeting between Miss Odelia Muller, president of the South African Nursing Association, and Dr Hennie van Wyk, director of Medical Services in the Transvaal.

The meeting was called after a discussion between the association and nurses at the Johannesburg Hospital last week at which it was pointed out they were working

under stressful conditions because of the shortage of staff. Miss Muller told The Star one of the main problems was money — the low salaries nurses earned made it difficult for them to make ends meet.

A reliable source said many nurses had resigned. The hospital has had to close all but one third of available beds because of the shortage of nurses and because of financial constraints.



attacks that they were not

# Pressure on nurses to ease

JOHANNESBURG — An order had been issued to fill all porters' posts in Transvaal hospitals in order to free nurses from porter duties, the president of the South African Nursing Association, Miss Odelia Muller, said today.

Miss Muller said the order had been issued after a meeting yesterday with the Director of Hospital Services for the Transvaal, Dr Hennie van Wyk, about nurses' complaints over the deterioration of patient care at the Johannesburg Hospital.

Miss Muller said: "In the past two weeks 217 beds have been closed and this should ease the pressure in the wards."

The nursing course now involves a great deal more theoretical work and junior student nurses have complained they have to do night duty and accept responsibility for very sick patients with only one trained sister in charge for two wards.

The Johannesburg Hospital is better off than other academic hospitals where sometimes one trained sister is in charge of four wards." — Sapa

# Nursing crisis

20/10/87  
95  
C. M. M. M.

THE closing of beds at the Johannesburg Hospital will alleviate the burden for nursing staff, the president of the South African Nursing Association, Miss Odelia Muller, said last night.

Miss Muller said this after talks she had in Pretoria with the director of Hospital Services in the Transvaal, Dr Jennie van Wyk, to discuss understaffing at the hospital.

# Porters to help

65  
23/10/83

# ease nurse shortage

THE Johannesburg Hospital will employ more porters to alleviate pressure on the nursing staff, according to Mr D P Kirsten, executive member for Medical Services for the Transvaal.

He said the decision to increase the number of porters was taken at Monday's meeting to discuss "the great shortage of nurses at the Johannesburg Hospital." The meeting was between Henrie van Wyk, director for the medical services and Miss Odella Muller, the South African Nursing Association's president.

Nurses had also complained of being overworked. This was attributed to shortage of staff.

Mr Kirsten said the situation at the hospital was not as "bad as it was made to sound." He admitted however, that certain nursing sisters had to take

charge of two wards each and said they operated at a nurse/patient ratio of 1:98.

"Allegations that junior staff members had to make decisions in wards have also been found to be untrue. Junior nurses are supposed to inform their seniors in cases where decisions have to be made," he said.

He also pointed out that the number of people being admitted has been limited to enable nurses to cope. He said some of the patients brought in for admission were referred to other hospitals.

Miss Muller said in a statement: "We have intensive talks and he (Dr van Wyk) is aware of the situation, and attention will be given to complaints. In the past two weeks 217 beds have been closed and this should ease the pressure in the wards."



**OVERWORKED** nurses have demanded an immediate end to segregation in health services to help counter crippling staff shortages at South Africa's biggest white hospital.

The Government's refusal to employ more black nursing staff at the Johannesburg Hospital has led to a deterioration in the care of patients, putting their health and even their lives at risk, they claim.

This week, Dr Marius Barnard, PFP spokesman on health, called for the resignation of Dr Willie van Niekerk, Minister of National Health, and the Director of Hospital Services for the Transvaal, Dr Hennie van Wyk.

"These two men are either unaware or uncaring about the serious position and should make way for people better able to manage the problem," he said.

Nurses who told the Sunday Times of their grievances said they did not want to be identified for fear of "victimisation" at work.

"Our complaints stirred up a hornets nest and the situation has improved slightly," said one.

While discontent simmered among nursing staff at the hospital late this week, concerned health authorities in Pretoria attempted to rectify

# Nurses demand more black staff

By IVOR CREWS

the crisis situation.

Miss Odella Muller, president of the South African Nursing Association, has called for an investigation into the acute staff shortages.

Miss Muller said the association was particularly concerned about the amount of responsibility being placed on junior personnel.

In the latest move to ease this pressure on junior staff, health authorities had requested trained sisters to be on duty in all wards at night, sources said.

Previously there had been only one ward sister for every two wards and junior nurses on night duty

had to attend to as many as 25 patients, some critically ill.

However, this move has led to further discontent — among the sisters.

"Previously we only had to work one week of night shift every four or five months. Now we will be called on to work about one week of night shift a month," said one distressed sister.

"We are badly paid, the working conditions are awful and staff with many years experience and specialist training are resigning," she complained.

Hospital sources allege that:

- The Government has its priorities wrong — new hospitals are being built while problems at grass-roots level remain unresolved.

- Grievances addressed to the authorities through the correct channels are ignored.

- Ethics are being compromised because of a lack of funds.

- Nurses wanting better salaries and working conditions are leaving for the private sector.

Mrs Irene Mehell, former PFP spokesman on Hospital Services in the Transvaal Provincial Council, said: "Trained black nurses are only called in emergency situations because of Government restrictions."

## Fall-off in black nurses now crucial

# Nursing council has ambitious plans to turn about shortage

By Chris van Gass,  
Pretoria Bureau

The South African Nursing Council has announced a far-reaching plan to alleviate the crucial shortage of nurses — especially blacks — by implementing a 10-year “bridging programme” to upgrade the qualifications of nurses.

The council discussed details of the programme with Minister of National

Health and Population Control Dr Willie van Niekerk on Wednesday.

The council said it had drawn Dr van Niekerk's attention to the urgent need for expansion in the training of nurses to meet the needs of blacks.

Two main problems which the council and Dr van Niekerk discussed were the “alarming” decline in the intake of student nurses, and an “unsatisfactory” ratio of registered (professional) nurses to enrolled nurses (staff nurses) and enrolled nursing assistants.

The council highlighted the “inappropriate utilisation” through staff shortages of the enrolled nurse and nursing assistant, who performed tasks outside their scope of their training.

This, it said, had exposed the public to the possibility of unsafe nursing practices.

“These observations are reflected by the nature of disciplinary cases investigated in the past 15 years,” says the council.

After the meeting, the council released to The Star details of its plan to bolster the profession.

The plan makes provision for the phasing out of the sub-category of enrolled nurse. Only one sub-category, the nursing assistant, is to be trained.

The council recommended a bridging course “of at least two years” to give staff nurses with a Std 10 or equivalent certificate an opportunity to be upgraded to registered general or psychiatric nurses.

The council gave an assurance that an enrolled nurse who was not admitted to the bridging programme “will be legally entitled to continue practising within her scope of practice and retain her right to enrolment as long as she wishes”.

Conflict between State and private institutions



# Trained nursing staff shortage hits hospitals

**HOSPITAL** services in the Cape and elsewhere are approaching a crisis which few in official circles will openly acknowledge.

Privately, however, there is a willing expression of concern that serious problems are on the horizon which need to be tackled as a matter of urgency.

The most immediate of these — which is of national proportions — is the shortage of nursing staff and the schism this is creating between provincial/State-funded hospitals and those established for gain by the private sector.

The most critical is the fact that no new qualified nursing sisters can be expected to enter the market next year, exacerbating an already serious shortage of nursing staff around the country.

The plight of the massive Johannesburg Hospital, which has many of its wards closed because of the lack of staff, fully highlights the problem. But it is by no means limited to this one institution.

Similar is the dilemma facing Groote Schuur Hospital in Cape Town. In the last stages of a major

**CHRIS CAIRNCROSS**

expansion and refurbishment programme costing more than R270m and due for completion in a year's time, the hospital has to recruit a minimum of 1 000 extra nursing staff to fully satisfy its commitments by 1989.

This represents a target staff increase of almost 30% on a complement which is already seriously stretched. Medical Superintendent J D L Kane-Berman says he is seriously concerned over how these needs will be met.

In contrast to Johannesburg Hospital, where total projected bed occupancy is extremely low — mainly as a result of the staff situation — Groote Schuur in its current format remains fully occupied, but at great strain to its already limited nursing fraternity.

It seems unlikely this problem will be resolved; rather, it can be expected to worsen once the new extensions to the hospital are commissioned. Like Johannesburg, Groote Schuur may also have to face up to closing immediately — if only temporarily — some new wards and ancillary

facilities as a result of the lack of sufficient staff.

It is a problem which Kane-Berman, and others concerned, with the administration of provincial hospital care, are patently loath to openly discuss.

What is beginning to boil, however, is the growing confrontational relationship emerging between the needs of the provincial hospitals and those new private institutions that are blossoming in the Western Cape. Private institutions do not have to look towards the provision of training facilities that will also serve their needs.

Attracted by higher pay offers and better conditions, training medical staff are being honeyed away from State-funded hospitals to those emerging privately-run institutions, providing a national health care dilemma which the long-standing Browne Commission failed to properly address.

A crisis exists already, so all involved with the provision of hospital services privately admit: but they are reticent about discussing it in public.

# 'Second-hand tackies' allowance for nurses

By JOHN YELD  
Municipal Reporter

NURSES working for the city council earned less than their colleagues elsewhere and there was a "grave shortage" in the city health department, city councillor Dr John Sonnenberg said.

Nurses had received a R36 a year shoe allowance since October 1979 — "you can buy a pair of second-hand tackies for that" — and the uniform allowance had been fixed for the past 12 years, Dr Sonnenberg said.

AR645 30/10/87 95

About 30 percent of the department's professional nurses had left because of pay dissatisfaction and there were 27 vacant posts for public health nurses and clinic sisters.

Dr Sonnenberg was speaking at yesterday's council meeting on staff proposals which included the redesignation of nursing posts and an increase in shoe and uniform allowances.

Although parity with the State and provincial services had been reached in September last year, regrading had been only on a notch-for-notch basis, Dr Sonnenberg said.

There had to be "accelerated notching" or "double notching" as had been done in the traffic department, he argued.

This would cost the city R183 000 a year, while parity would cost R1.4-million.

## "Got to do it"

"We've got to do it — we have to pay our staff the same as they get anywhere else."

"We've got too few (nurses) and those who are there are unhappy. We need people and we need them quickly.

"The very important functions of the health department

are being vitally affected. Doctors and nurses in clinics in the townships are being driven to distraction because of the shortages."

Executive committee chairman Mr Dick Friedlander asked for approval for the redesignation of nursing posts and increases in shoe and uniform allowances.

He assured Dr Sonnenberg that the committee would ask for a further report next month on what additional benefits could be found for nurses.

● More council reports, page 4.

# Upgrading of nursing

AS B/acy DIANNA GAMES 3/11/87

MORE than 12 000 staff nurses are in line to become registered nurses in terms of the "bridging programme" devised by the SA Nursing Council to upgrade nursing qualifications.

Council president Iris Roscher said yesterday more than half present staff nurses, whose minimum qualification was a Std 8 certificate and two years' training, had Std 10.

These nurses would be eligible for the two-year programme, after which they would become registered nurses.

Roscher said this was a positive step towards correcting the utilisation of manpower.

The SA Nurses Association has welcomed the move and its president, Odelia Muller, said it was hoped areas like job creation would be looked at.

E

(95) STAN 3/11/87

## New training suggested for nurses

The South African Nursing Council has recommended changes in the training and categories of nurses which are expected to have far-reaching implications.

In a statement released yesterday, the council said it had decided that the sub-category of nursing — the enrolled nurse — should fall away and that the training for enrolled nursing assistants be lengthened from a minimum of 100 days to one year.

At present the Nursing Act of 1978 provides for three categories of nurses — the registered professional nurses and two sub-categories, namely enrolled nurses and enrolled nursing assistants.

The decision was taken by the council recently because of concern over the growing imbalance in different nursing categories with the disproportionate number of enrolled nurses and assistants and the decrease in the number of registered

nurses.

"The inappropriate utilisation of the enrolled nurse and nursing assistant in the performance of tasks falling outside their scope of practice exposes the public throughout the country to the possibility of unsafe nursing practice," a council spokesman said.

The council has already discussed the matter with the Minister of National Health, Dr Willie van Niekerk.

# Nurses 'barred from crash victim

Step 19/11/87

By Anna Louw,  
East Rand Bureau

A Germiston traffic officer barred three black nursing sisters from treating a seriously injured Johannesburg car crash victim who died on the pavement minutes later — an action the victim's son later called "terrible".

"It was very frustrating to stand and watch a man dying, and be barred from giving him emergency treatment," one of three sisters told The Star yesterday.

She said they were prevented from attending to the crash victim, Mr Stoffel van Niekerk (53),

of Bezuidehouth Valley, on Tuesday.

Mr van Niekerk died at the scene of the accident in Black Reef Road at 9 am after his car was in collision with a truck.

The nursing sister, who requested that her name and that of her two colleagues not be published, said they were in an ambulance en route from Natalspruit Hospital.

They stopped at the scene of the accident and saw a seriously injured man in the wreckage

he was badly injured," she said, adding that she and her colleagues as well as the ambulance driver were prepared to postpone their mission until later to attend to the dying man.

"Why should colour mean the difference between life and death?"

The sister said they had reported the matter to their superiors at Natalspruit Hospital who would take up the issue with the local authority in Germiston.

he was badly injured," she said, adding that she and her colleagues as well as the ambulance driver were prepared to postpone their mission until later to attend to the dying man.

"Why should colour mean the difference between life and death?"

The sister said they had reported the matter to their superiors at Natalspruit Hospital who would take up the issue with the local authority in Germiston.

Germiston's Town Clerk, Mr Jan du Plessis, told The Star he had received a report from the city's traffic chief, Mr Tookie Steyn, that Mr van Niekerk was already dead by the time the sisters arrived at the scene.

Mr Steyn told Mr du Plessis he had received a report from the traffic officer on duty at the accident. He apparently told Mr Steyn that he had to remove the man's dentures as he was already dead and there was nothing anyone could do for him.

Mr du Plessis said the matter would be investigated, and there were a discrepancy in necessary steps would be taken.

He extended his gratitude, on behalf of the Germiston Council, to the nursing sisters. Mr John van Niekerk last night said the reports that traffic officer barred nurses from treating his father were "terrible".

He asked how a traffic policeman would know better than a nurse when a person was dead.

Mr Stoffel van Niekerk, typewriter mechanic, leaves wife, Connie, three sons and daughter.

# Thousands apply, few get nurse jobs

CAPE TIMES  
4/12/87  
95

By ANTHONY JOHNSON  
Political Correspondent

THOUSANDS of blacks — who constitute more than a third of the population in the Western Cape — apply each year to train as nurses but fewer than 1% of general posts at hospitals in the area are authorized for black nurses.

The Minister of Health and Population Development, Dr Willie van Niekerk, disclosed yesterday that only 114 of the 13 147 general posts at Western Cape hospitals could be filled by black nurses. A further 26 psychiatric nurses were employed at Valkenberg hospital.

The minister further disclosed that:

- Only two of a total of 1 506 black nurses who had applied for admission to Nico Malan Training College so far this year were enrolled for the four-year diploma, and 12 for the two-year course.

- Only 13 of the 5 000 applicants (including coloureds and Indians) for admission to the Sarleh Dollie Nursing

College so far this year, were admitted for the four-year diploma.

Dr Van Niekerk said it was "policy" to appoint 10 black nurses at this college a year at present, adding that the language medium of Afrikaans "presents a great problem to prospective applicants".

- At Valkenberg Hospital only five of the 31 black applicants were admitted for the one-year training course.

Replying to a written question in Parliament from Mr Ken Andrew (PFP Gardens), Dr Van Niekerk said plans to provide additional training facilities for black nurses was being investigated and that recommendations of the nursing division of the Cape provincial administration were still to be presented to the executive director.

Mr Andrew said the hospital authorities in the Peninsula had been requested for "many years" to provide more posts and training facilities for black nurses but progress had been "abysmal".



HEALTH & DISEASE  
NURSES  
1988.

## **Student nurses (95) guilty of cheating**

SEVEN student nurses from the St Mary's Hospital in Melmoth were this week found guilty of cheating during exams by a disciplinary committee of the South African Nursing Council at Addington hospital in Durban.

The students, who were found with unauthorised notes while writing an examination for enrolled nurses in September last year, received six months suspended sentences suspended for a year.

The names of the students were ZM Mathe, NB Bhengu, PT Ngcobo, CT Mpungose, NC Buthelezi, MP Mtshali and O Mncube.

At another hearing of the SANC, a trainee nursing assistant, CR Swarts, 21, of Maritzburg, was found guilty of disgraceful misconduct for being absent for long periods without leave during his military service.

Swarts was warned and reprimanded.

He said what he had done was wrong and would not do it again. — Sapa

## Nurses found guilty of disgraceful conduct

3/2/58 Pretoria Correspondent

The negligence of two nurses in failing to check that the correct fluid was administered in the intravenous drip of a seriously ill baby who later died, resulted in them yesterday being found guilty of disgraceful conduct.

During a disciplinary hearing of the South African Nursing Council in Pretoria, Mrs Francina Lorna Moeng and Mrs Gaylene Felicity Walstroom were both suspended from nursing for one year.

Their sentences were conditionally suspended for three years and two years respectively.

In another case, a 45-year-old nurse, Miss Annie Emerentia Dempers of Primrose, was found guilty of disgraceful conduct on several charges of falsifying prescriptions for Stopayne, a pain-killer.

Mrs June Richter, senior pharmacist at the Rietfontein Hospital, Edenvale, where Miss Dempers is employed, testified that one of the ingredients in Stopayne, Meproamate, had a high potential for dependency.

Miss Dempers was suspended from nursing for one year, the sentence conditionally suspended for three years.

(98)

Cape Times, Monday, February 15, 1988 9

## Doctors given further week to decide on jobs

Own Correspondent

JOHANNESBURG. — Up to 30 Baragwanath doctors face the sack unless they retract statements about the hospital before next weekend.

Mr Daan Kirstein, MEC in charge of Transvaal hospitals, said yesterday that the doctors, who are all on permanent staff, had asked for a week-long extension. They had earlier been given till February 12 to retract a letter published in the SA Medical Journal criticizing "deplorable" conditions at the hospital.

Five temporary Baragwanath medics who have refused to withdraw a statement criticizing conditions at the hospital are no longer in its employ, he said.

He denied reports that the five faced dismissal saying they had not been reappointed this year.

"It is not a matter of firing, they are not in our employ until they withdraw what they said about the hospital authorities."

With regard to permanent staff, Mr Kirstein said a letter had been addressed to them which said they "should withdraw" their statements.

# Nurse - struck off <sup>18/2/88</sup>

DURBAN — A Newcastle nurse has been struck off the South African Nursing Council roll for failing to continue the oxygen supply to a critically ill patient in August 1985.

Mrs. D. N. Kubeka, who has been practising as a general and psychiatric nurse and midwife for 18 years, was found guilty by a disciplinary committee of the SANC

at Addington Hospital here yesterday. (95)

The committee found she did not ensure she was fully aware of the condition of a patient, suffering from multiple stab wounds, when she took over from another nurse at the Madadeni Hospital.

It found that as a result she did not continue the oxygen supply and the patient died later.

# Post shortage for nurses

There was not so much a shortage of registered nurses (SRNs) as a shortage of posts countrywide, the head of the Frere Hospital nursing college, Miss Penelope Bellad-Elis, said.

Of the country's nursing complement of 135,000, only about half of these were registered nurses.

Miss Bellad-Elis said student nurses here dropped out of their training for a variety of reasons.

They either had difficulty adjusting or they found the course too demanding. Some students found they had chosen the wrong career.

There was roughly a 20 per cent drop out rate particularly amongst first years and the adjustment problems arose among those students who come from other centres, she said.

There are currently 144 student nurses at the hospital studying for the four-year diploma in nursing science and midwifery. There are two black students on the course for the first time in about 10 years. The hospital continued to train black midwives during the interim, however.

Miss Bellad-Elis said after Cecilia Makiwane was built in Mdantsane black students were trained.

Debbie Swart, 20, is in her second year of training to become a state registered nurse (SRN).

She is doing her four year's training — which will qualify her as a sister — at Frere Hospital. Roughly half of her time is spent in the classroom and half on the wards. Exams are written every year in October.

The criterion now for black students to train at Frere is that they must be South African.

There are usually two or three male nurses in each year of training and they usually adjusted well, she said.

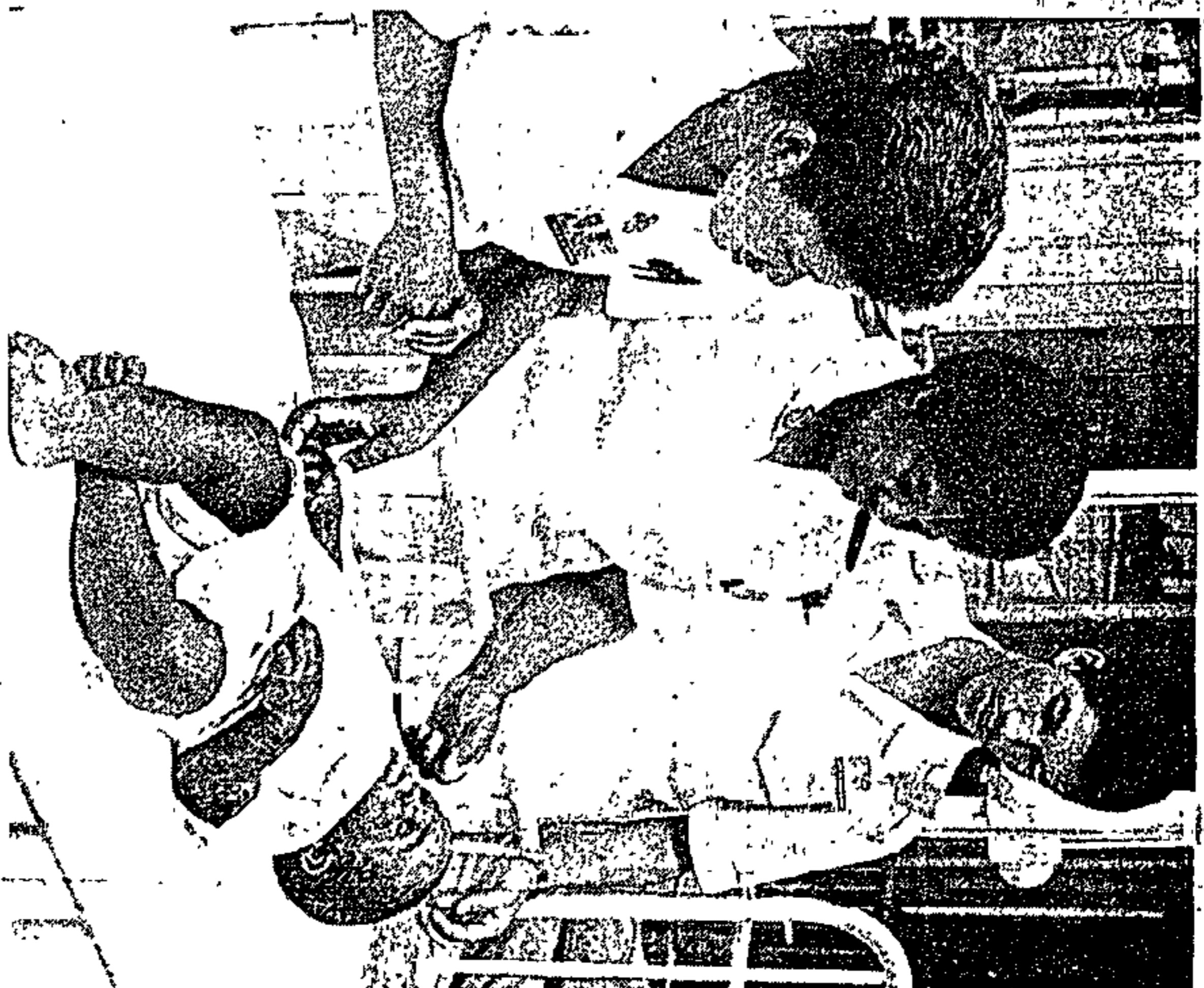
Miss Bellad-Elis described the course introduced in 1984 as "revolutionary" as it trained the students in four disciplines namely general nursing, psychology/psychiatry, community nursing and midwifery.

*She*

The course is similar to that offered by universities but it is a diploma as opposed to a degree course. The practical requirements are identical and the content is similar.

The selection criteria is strict and this year the committee had hoped for an intake of 60 first years but only 44 were accepted, Miss Bellad-Elis said.

The training for state enrolled nurses (SEN) is two years. There are currently 86 pupil nurses at the hospital. Pupil nurses fall under the control of the matron of the hospital as opposed to the students who are under Miss Bellad-Elis' control.



Sister Felicia Mazwi (centre) gives instruction to two pupil nurses, Gloria Peters and Henry Steenkamp, in a children's ward in Frere Hospital.

Enrolled nursing assistants train for six months and the course is a practical in-service one.

There are 347 registered nurses at Frere.

## Nurse: I'm disciplined and confident

95 23/2/88

When she qualifies her training will enable her to go anywhere. She would like to do intensive care or community nursing. She says in the first year of training stu-

There seems to be a shortage of nurses and a shortage of nursing posts country-

contact if the student is in doubt. Debbie is paid a basic R540 a month but after deductions, including nurses home costs of R106 a month she gets R340.

## Great need for geriatric nurses

95 23/2/88

Gai Clarke, 39, is sister-in-charge of a 75-bed government sponsored home for geriatrics in the Guigney.

She loves the job she's had since August and feels there is a great need for nurses in her field.

"The elderly need so much love and attention, sometimes they are almost like children."

The patients are not a problem — as long as they aren't antagonised — but relatives sometimes are, she says. They complain that the patient's hair is uncombed or that they're wearing the same dress.

"You need patience, understanding and a lot of sympathy to work with old people and you need a sense of humour to see the funny side of things."

"You have to be a happy person too," she adds. "You can't be miserable because many of them are."

Some patients can look after themselves but others need constant care. She has two sisters and two staff nurses under her.

The home, which is a converted hotel, currently has 63 sub-economic patients and the rest are economic.

The salary she earns is less than the current going rate at hospitals and holidays are definitely out but, she says, the conditions suit her better. There's no night duty and less red tape.

"The disadvantages of nursing are the hours and the salaries, sure. Girls out of matric today are earning fantastic salaries," she says.

But she wanted to nurse "right from a child".



Sister Gai Clarke.

She did her training at Windhoek State Hospital starting in 1966 and once qualified was put in charge of a daunting 96-bed ward.

"It was horrifying. There were so many languages but I did have five sisters who could interpret."

She later moved to East London and did her midwifery at Mater Dei where she stayed for nine years first on the maternity side and then with the chronically ill when the maternity ward

Debbie Swart, 20, is in her second year of training to become a state registered nurse (SRN).

She is doing her four year's training — which will qualify her as a sister — at Frere Hospital. Roughly half of her time is spent in the classroom and half in the wards. Exams are written every year in October.

This course, which was introduced a few years ago, is broken down into modules very similar to the British system, where the four years of training are mapped out in advance and a student knows where she will be at any given time during her training.

The course now includes psychiatry, psychology, midwifery and community nursing in the general training.

Debbie says she has always wanted to work with people so after matriculating at Greens Hoerskool in 1985 she enrolled at Frere.

# Nurse: I'm disciplined and confident

95 24/9/88

When she qualifies her training will enable her to go anywhere. She would like to do intensive care or community nursing.

She says in the first year of training students have no responsibility while on the wards. They do "everything" except administer medicine including giving bed baths, making beds, serving food, taking temperatures, and blood pressure, and bedpans. They also give injections but are supervised by a qualified person.

"We get more responsibility as we become more qualified and by third or fourth year when we work night shift we can be put in charge of a ward."

A sister always administers medication, however, and there is always someone to

contact if the student is in doubt.

Debbie is paid a basic R540 a month but after deductions, including nurses' home costs of R106 a month, she gets R340.

She gets an annual 10 per cent increment but this is absorbed in a corresponding annual increase in accommodation fees at the nurses' home so she doesn't really benefit.

But, she says, she is getting a lot of training at a little cost.

When she qualifies her salary will go up to a basic R1 150.

She says if she manages but books for her studies are very expensive and she certainly could not afford to marry or buy a car.

She is in college at



Debbie Swart.

the moment so her hours are quite regular — from 7.15 am to 4 pm and 1 pm on Fridays.

She has 30 days leave a year and if she saves, she can go on holiday but she hasn't been able to yet.

She says she has found that she has changed a lot since she started. A nurse learns self-discipline, self confidence and how to handle responsibility.

A nurse must be able to communicate and have a good sense of humour. "You can't walk around with a sour face" — she must be able to take criticism and she must be able to work very hard.

She says she is "not very keen" on doctors. "Some people think it gives them status to go out with a doctor."

Debbie says, "But I don't see why they make heroes out of them, they're normal people and did their training like anyone else."

hospitals and holidays are definitely out but, she says, the conditions suit her better. There's no night duty and less red tape.

"The disadvantages of nursing are the hours and the salaries, sure. Gents out of matrix today are earning fantastic salaries," she says.

But she wanted to nurse "right from a child".

She finds it rewarding and "wouldn't change it for anything".

A divorced mother of two, this serenely pretty woman starts her day at 5 am in order to organise her home before leaving for work at 6.10 am.

Her daughter Nicola, 16, catches the bus to and from Stirling High School and her 12-year-old son, Joe, is a boarder at Dale College.

Nicola is usually home when she gets back but it is a problem when she is on the late shift. She does, however, have a full-time live-in maid

et was put in charge of a daunting 96-bed ward.

"It was horrifying. There were so many languages but I did have five sisters who could interpret."

She later moved to East London and did her midwifery at Mater Dei where she stayed for nine years first on the maternity side and then with the chronically ill when the maternity wing closed down.

It was there that she was introduced to caring for the elderly and she moved onto Fairlands where she stayed for eight years before moving to her current position.

In her 20 odd years of nursing she has only had eight months off to have her children.

She says she has seen quite a few changes over the years with nurses gaining more responsibility. When she started out nurses were not allowed to take blood but now can do that and put up drips.

Uniforms she has to buy herself.

She says it is very difficult to manage on her salary and she cannot afford a holiday.

It's also difficult to get time off for a holiday because private nurses do not get paid leave.

If she requires time off, the agency will find a replacement nurse.

When and if this should occur, Marias should be felt.

"She's like a daughter to me," Mrs Lloyd says.

There are both pros and cons to private nursing, but the important part of her work, Maria says with a quiet sincerity, is that she enjoys doing things for people.

## Private nursing: entire patient care

She enjoys her work because, she says, in private nursing "you take care of the whole patient".

"You make friends with the person you're nursing and you have a goal that you work towards. I'd like to see Mrs Lloyd up on her feet again."

"Often you find patients tend to lose interest when they can't help themselves but in private care you can encourage them to improve."

"You do things to rekindle their interest in life, for example, if I cook, I like to make the food look as attractive as possible."

Marias says she has changed her patients' diet to a more suitable

one and they enjoy recreational activities together, often going for drives, and when Maria stays over, they play cards and scrabble or watch television.

Her duties involve entire patient care.

She is helped by Mrs Lloyd's maid, Mrs Vicky Jonas, when it comes to assisting her charge into the bath and she also gives her patient a daily foot massage.

Maria completed her Std 8 at J.C. Mering School in Cape Town in 1973.

"I never really wanted to nurse. I did office work for a couple of months after school, and then my sister suggested it."



Maria Tito.

"She said I'd make a good nurse but I'd heard all the negative things about nursing and I wasn't interested."

But she took the advice, and she's never

looked back.

"I enjoy caring for people. It makes me feel good knowing that I can do things for my patients."

She trained at Tygerburg in Cape Town before moving to Goodwood. Later she moved to a home for senior citizens for three-and-a-half years.

Originally from the mother city, she moved to King with her family four years ago.

She ran a video shop there initially but she wanted to return to nursing and heard of the agency through her sister-in-law.

brothers and a sister all live in King. Nursing is a popular family career and both her mother, sister and sister-in-law are nurses. Her sister nurses at Grey Hospital and her sister-in-law is at Kingsholme in King.

Maria says it takes patience, understanding, and the ability to give and take to be a good nurse.

"Often more give than take," she adds.

She earns R600 a month but her take home pay is R535.

The agency takes 12.5 per cent. The hourly rate is R4.78 for an assistant nurse which is what Maria is. R5.25 for a staff nurse, and R8.50 for a sister.

Maria Tito, 32, is an enrolled nurse who works through a local nursing agency for private patients.

For the past three months she has been working for an arthritis sufferer, Mrs Lynne Lloyd of Nahoon, who is wheelchair bound. The booking is an indefinite one.

She works a six-day week from Monday to Saturday and commutes from King William's Town every alternate day having arranged to stay over at Mrs Lloyd's to cut down on petrol expenses which amount to about R250 a month.

Her hours are roughly 8 am to 5 pm on a Saturday but because she stays over her hours are more flexible.

**SLEEPING on duty cost three nursing sisters their jobs at the Rand Mutual Hospital in Johannesburg, writes LEN MASEKO.**

But one of the nurses, Ms Ethel Tshikosi, recently had her dismissal reversed by an arbitrator after she challenged the hospital's authorities' decision.

Ms Tshikosi and two other nurses were found sleeping on duty on September 16, 1987, by a white colleague. The three, all employed in the hospital's intensive care unit, were dismissed.

The two other nurses admitted sleeping on duty but Ms Tshikosi denied the allegation.

The National Union of Mineworkers, which represented Ms Tshikosi in the arbitration proceedings, contested her

## Sleeping at work costly

dismissal on the grounds that her disciplinary hearing had not been fair.

The arbitrator, Mr N P Willis, said the Chamber of Mines' disciplinary procedure provided for a written warning for "sleeping on duty" for a

first offender — not a dismissal.

Mr Willis said: "It would seem to me that the disciplinary procedure in existence at the Rand Mutual Hospital was taken from elsewhere where sleeping on duty is obviously not as serious an offence as it is

for a sister at a hospital.

"Be that as it may, both the union and the Chamber were *ad idem* that this was the disciplinary procedure and code which they expected to be applied," he said.

The arbitrator ruled that the nursing sister should be reinstated from the date of her dismissal by the Chamber of Mines.

The Rand Mutual Hospital is a specialist referral hospital in the mining industry.



# Nurses who say 'no' to Aids must not be fired

By Toni Younghusband,  
Medical Reporter

StV  
1/3/88

Nursing staff who refuse to treat Aids patients should not be fired unless they do so after being provided with the correct protective measures, said Dr Ralph Yodaiken, a director of Occupational Medicine for the Federal Government in the United States.

Dr Yodaiken, who is holidaying in South Africa,

said the Transvaal Provincial Administration's recent announcement that it would fire nurses who refused to treat Aids patients was inadmissible.

"Unless those nurses are provided with protective measures — such as gloves, gowns, perhaps even liniment and whatever else is available — you cannot dismiss them," said Dr Yodaiken.

The MINISTER OF LAW AND ORDER:

- (a) 73 policemen.
- (b) 636 policemen.

\*6. Mr P G SOAL—Public Works and Land Affairs. [Withdrawn.]

Notices to evict non-White occupants

\*7. Mr S S VAN DER MERWE asked the Minister of Constitutional Development and Planning:

Whether any owners of properties in White group areas who leased such properties to non-White occupants, have had notices issued in 1987 to evict the occupants concerned; if so, (a) (i) how many, (ii) why, (iii) when and (iv) on whose instructions and (b) in which towns or cities were these notices issued?

The DEPUTY MINISTER OF DEVELOPMENT PLANNING: No.

South African Certification Council

\*8. Mr A GERBER asked the Minister of National Education:†

Whether the South African Certification Council proposes to introduce equal educational standards; if not, why not; if so, when?

†The MINISTER OF NATIONAL EDUCATION:

Section 3 of the South African Certification Council Act, No 85 of 1986, stipulates that it is the object of the Council to ensure that the certificates issued by the Council at a point of withdrawal represent the same standard of education and examination. Because the Council does not control education departments, it cannot introduce equal standards of education but it can however ensure that the certificates issued by it will represent the same standard. The quality of education that is provided in each education department and the standards which pupils achieve in each department, depend upon that department and the community it serves.

The members of the Council have already been appointed and the Council will in due course be able to determine its working programme.

sections of the H F Verwoerd and Westkopjes hospitals and at clinics in Eersterust.

(ii) In the Dennekruin residence for Coloured nurses at the H F Verwoerd Hospital.

(iii) At the Lebone Nurses Training College, where training was done in English.

Clifton Beach: arrests for topless bathing/sunbathing

\*11. Mr C W EGLIN asked the Minister of Law and Order:

- (1) Whether any persons were arrested on Clifton Beach on or about 10 February 1988 for alleged topless bathing or sunbathing; if so, (a) how many, (b) with what offences were they charged in each case and (c) what were the (i) ranks and (ii) positions held in the Police Force of the policemen who made the arrests.
- (2) whether the arresting officer was acting in response to a complaint from a member of the public in each case; if so, (a) when and (b) where were these complaints lodged; if not, on whose instructions did he take this action;
- (3) whether these policemen were in police uniform at the time of the arrests; if not, why not;
- (4) whether, prior to being arrested, the persons concerned were warned that they were committing an offence; if not, why not; if so, (a) when and (b) by whom;
- (5) whether these persons were fingerprinted following their arrest; if so, why?

The MINISTER OF LAW AND ORDER:

- (1) Yes.
- (a) 2 persons on 10 February 1988 and 2 persons on 11 February 1988. They were, however, released shortly after their arrest after they had been summonsed.
- (b) Contravening section 19(b) of the Immorality Act, 1957 (Act 23 of 1957), public indecency
- (c) (i) and (ii)

NOTE: I wish to point out to the hon member that according to representations received from the residents of the area, since the beginning of the summer and since the press started giving publicity to topless bathing, men of dubious character have flocked to this beach. Police observation has confirmed this fact.

Corridor between Brits/Thabazimbi: transfer

\*9. Mr A GERBER asked the Minister of Constitutional Development and Planning:†

- (1) Whether his Department is at present considering the possible transfer of the corridor, or a portion thereof, situated between Brits and Thabazimbi and bordered by Bophuthatswana; if so,
- (2) whether any negotiations have taken or are taking place with White landowners of the area concerned; if not, why not; if so, (a) when and (b) with what result;
- (3) whether any negotiations on the matter have taken or are taking place with the Government of Bophuthatswana; if so, (a) when and (b) with what result;
- (4) whether he will make a statement on the matter.†

†The MINISTER OF CONSTITUTIONAL DEVELOPMENT AND PLANNING:

- (1) No
- (2) Falls away.
- (a) and (b) Fall away.
- (3) No.
- (a) and (b) Fall away.
- (4) No.

SG Lourens Nursing College: student nurses

\*10. Mr A GERBER asked the Minister of Constitutional Development and Planning:†

Whether any Coloured student nurses are currently receiving their theoretical training at the S G Lourens Nursing College; if so, (a) how many, (b) why and (c) where (i) are they completing the practical part of the course, (ii) are they accommodated and (iii) did they previously receive their training?

†The MINISTER OF CONSTITUTIONAL DEVELOPMENT AND PLANNING:

- Yes.
- (a) Eight
- (b) The Coloured community of Pretoria requested that Coloured student nurses from their community be trained through the medium of Afrikaans.
- (c) (i) At the Coloured, Indian and Black

Chen 6/2/88  
93

# Nurses celebrate 10th anniversary

By SIMPIWE NGWANA

THE Transvaal Professional Society for Black Occupational Health Nurses, held a meeting to celebrate its 10th anniversary at a special occasion in Johannesburg this week.

The meeting was well attended by health workers and different groups from other regional branches.

When the black health nurses broke away from the South African Occupational Health Nurses, they decided to form their own society, the Transvaal Professional Society of Black Occupational Health Nurses, in 1977.

Felicia Pholoho, an executive member of the society, said it was "high time" the health workers in the industry took a stand, because they were involved in a

socio-political situation.

One of the founder members of the society, Gopolang Sekobe, said: "The nurses in factories should be aware of the delicate situation they are involved in."

"Since they are involved in the capitalist world, they could get trapped in that situation, not knowing exactly who needs their service."

"There is no way that people can be neutral, occupational nurses should distinguish between those who need their services and those who could exploit it."

The main aim of the society was to keep its members abreast of current trends in the profession and in the nursing profession, in general and to pool ideas and experiences in the work place with each other.



The committee, from left, Rachel Sibya, Stella Mohlameane, Thako Mahlangu, Yvonne Campbell and Felicia Pholoho.

10/13/88

# Nursing congress starts 95 in EL

**Daily Dispatch Reporter**  
EAST LONDON — The first day of the national congress for occupational health nurses held here yesterday was unanimously voted a "stimulating" day.

The national president of the executive committee of occupational health nurses, Sister Yvonne Campbell, was pleased with the turnout of about 160 delegates from all over the country, who included management representatives in the medical profession.

The national secretary, Sister Brenda Webster, described the day as "fantastic, wonderful, stimulating" and the national treasurer, Sister Pam Harvey, said the atmosphere was "very receptive".

Sister Ann Aukett, who made the opening address, said one of the highlights was a new development announced by Professor J. Kotze of the South African Nursing Council. Prof Kotze said the council had recognised the educational needs of occupational health nurses and presented a proposed curriculum for a diploma course in occupational health nursing.

The next series of lectures on practical challenges in occupational health nursing continue today.



Jenny Gower, Marge Miles and Annalie Pizzey who were among the delegates at the occupational health nurses' congress in East London yesterday.

D/D 11/3/88

# Health congress ends on high note

Daily Dispatch Reporter  
EAST LONDON — The first national congress for occupational health nurses ended yesterday on a note of enthusiasm.

Speakers and listeners alike agreed that the two-day congress was a "great success" and Mrs Meg Hillyer, said: "The meeting gave me more encouragement to carry on".

Sister Ann Aukett pointed out that occupational health nursing was "work in isolation" as "there is normally only one nurse per factory, so it is important to learn from each other and exchange knowledge on different hazards in different industries".

A group session leader, Sister Jenny Acutt, said there was "terrific interaction", which was essential to widen channels of thought.

A speaker on visual display units, Sister Theo Le Roux, said the "participation was fantastic" and the problems unique to each occupational health nurse had been shared.

In his lecture, Doctor Errol Peterson, said: "Occupational health nursing is not a Girl Friday, but a professional" which is often not realised.

The annual meeting of the South African Society of Occupational Health Nurses takes place in Bisho today.

0/10/1988

## SA nurses receive psychiatric training

Daily Dispatch Reporter

95

GRAHAMSTOWN — South African nurses are adding an extra facet to their skills — training as psychiatric as well as general nurses.

To achieve their BA (Nursing Science) they must spend periods of two months to a year in psychiatric training, and Fort England Hospital here has become an important training ground.

Fort England opened its doors a year ago and since then nearly 90 trainee nurses have trained there. A further intake of 21 is expected next month, the hospital's medical superintendent, Dr H. C. Slabbert, said.

The nurses, of all races, and some males, are accommodated at the nurses' home.

There were fewer men training to become nurses — probably as few as one per cent.

A directive from the Minister of Health, Dr Willie van Niekerk, that health services be taken into the community was proving successful.

"Since the start of the community psychiatric services, the admission rate at Fort England, and more important the re-admission rate, has plummeted," Dr Slabbert said.

Fort England had white and coloured patients from East London, King William's Town, Adelaide, Bedford, Cookhouse, Somerset East, Alicedale, Paterson, Alexandria and Port Alfred.

The new approach is to keep patients out of the hospital. Another aspect was the team approach.

"We work together — psychiatrist, medical officer, nursing sector, occupational therapist, social worker and clinical psychologist.

"These constitute the therapeutic team and each has a valuable part to play."

Fort England had now included in the treatment music and movement therapy.

"The results have been astonishing," Dr Slabbert said.

*Cape Times 15/3/88 (95)*  
**997 black student nurses**

**ONLY 997 of the 23 060 black people who applied to train as nurses in 1986 were accepted at training institutions in 1986, the Minister of National Health and Population Development, Dr Willie van Niekerk, said yesterday.**

**He also said 102 of the 1 680 coloured people and 101 of 1 544 Indian people who applied for training as nurses were accepted.**

**However, 2 091 of the 4 971 white people who applied were accepted for training.**

**During 1986, 1 808 white, 635 coloured, 189 Indian and 2 842 black nurses completed their training, Dr Van Niekerk said.**

# Few applicants trained

Political Staff

CAPE TOWN — Only 997 of the 23 060 black people who applied to train as nurses in 1986 were accepted at training institutions in the same year, National Health Minister Willie van Niekerk revealed yesterday.

He said also 102 of the 1 680 coloured people and 101 of 1 544 Indian people who applied for training as nurses were accepted.

However, 2 091 of the 4 971 white people who applied were accepted for training.

Van Niekerk said there were 1 435 vacancies for whites at institutions for training of nurses, 244 vacancies for coloureds, 32 vacancies for Indians and 752 vacancies for blacks.

95 B/day 15/3/88



# Lucrative US jobs offered to SA nurses

By Toni Younghusband  
Medical Reporter

United States hospitals were offering South African nurses lucrative jobs with starting salaries of more than R47,000, a Johannesburg personnel recruitment officer said yesterday.

Mrs Myra Landau told The Star that an acute shortage of qualified nurses in the US had forced hospitals to set up a recruitment programme in South Africa, offering nurses here an 18-month contract.

Figures released in October last year showed that the net salary for student nurses here was about R250.

## THOUSANDS OF JOBS

A junior sister earned about R770 after deductions and a senior ward sister with five years' experience between R1 200 and R1 500.

Mrs Landau said there were thousands of positions open for qualified nurses — under the age of 35 — in the US.

"There is a tremendous shortage of nurses. They say there is a shortage here but that's not true, it is only that they pay so badly."

Each potential South African recruit would have to pass the Commission for Foreign Nurses examination in October to obtain a US visa, she added.

# US in high-wage bid to poach SA nurses

The Argus Correspondent

JOHANNESBURG. — American hospitals are offering South African nurses jobs with starting salaries of more than R47 000, a Johannesburg recruitment officer has confirmed.

According to Mrs Myra Landau, an acute shortage of qualified nurses in the US has forced hospitals to set up a recruitment programme in South Africa offering 18-month contracts.

In South Africa, figures released in October last year showed that the net salary for student nurses was about R250 a month, a junior sister earned about R770 after deductions and a senior ward sister with five

years' experience between R1 200 and R1 500.

Mrs Landau said there were thousands of positions open for qualified nurses in America. "There is a tremendous shortage of nurses. They say there is a shortage here but that's not true, it is only that they pay so badly."

## Paid flight

She said starting salaries for nurses recruited to the US would be about R47 500 a year but this would go up once they had passed their state board examinations which are written in February or July. Until then, nurses worked as staff nurses.

"Before they leave South Africa, each nurse will have to write the Commission for Foreign Nurses examination in October to

obtain her visa. Her flight to the US will be paid for by the hospital at which she is to work.

"Accommodation is available at reasonable rents.

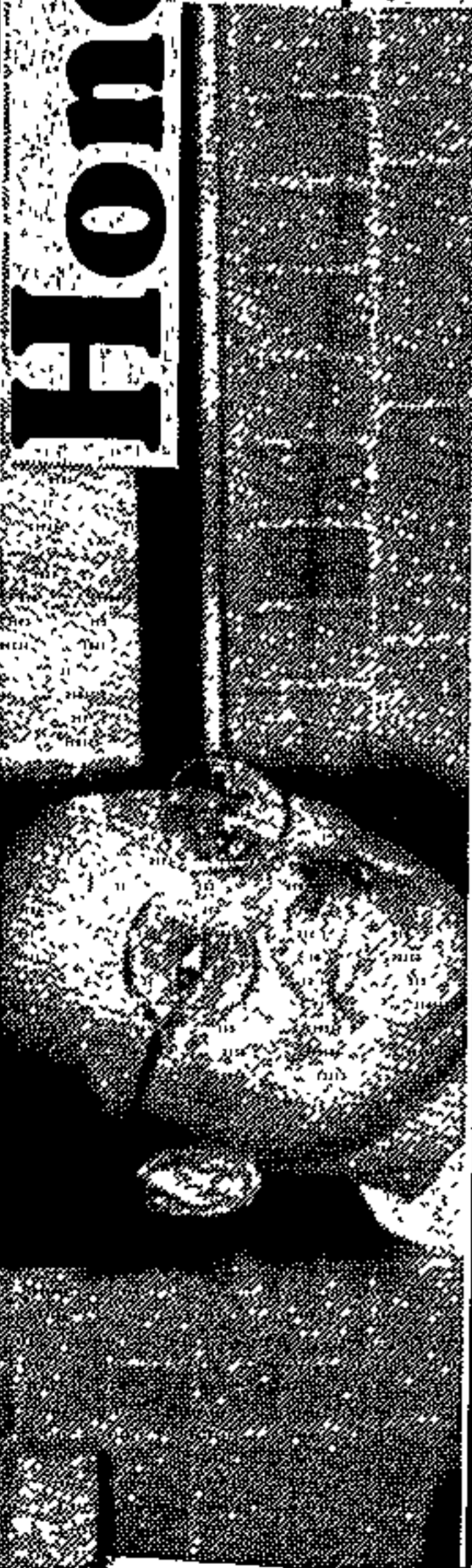
"We are looking for as many nurses as possible but they must be under 35 as we find this age group more flexible. They need not be single although they must realise that if married the husband must find his own way over and his own job."

The only costs the nurses will have to meet is the examination cost of about R204 and the passport and visa fees.

And the nurses will have a contact base in America should they need help with accommodation or a friend to talk to.

Anyone interested can contact Mrs Landau at 011 8845350.

WOMAN



*Sowetan 25-1368 95*  
**Honour for Bara woman**

**T**HE staff and patients at the Hospital's Cancer Unit recently honoured Mrs Regina Shibambo, the unit's after-care nurse.

**MRS Regina Shibambo.**

She has worked for four years as family counsellor and is also responsible for house visits.

Her commitment to the cancer-ridden children at the hospital is a fulfilment of a vow she took to devote her life to cancer victims after she watched her child waste away for three years and die of cancer. Professor Lorna MacDougall, who is in charge of the Unit, thanked Mrs Shibambo on behalf of the staff, patients and their families.

a finalist in the Sowetan Woman of the Year awards last year, was honoured for her dedicated work with cancer patients and their

overseas visits in 1987; if so, (a) which countries were visited and (b) what was the purpose of each visit;

- (2) whether he or these Deputy Ministers were accompanied by any representatives of the media on these visits; if so, (a) what were the names of the journalists involved, (b) which newspapers or radio or television networks did they represent, (c) to which countries did each of these persons accompany him or these Deputy Ministers and (d) why;
- (3) whether any costs were incurred by his Department as a result; if so, what total amount in that year?

**THE MINISTER OF CONSTITUTIONAL DEVELOPMENT AND PLANNING:**

- (1) No.
- (2) and (3) Fall away.

Mixed couples: applications for permits  
585. Mr R M BURROWS asked the Minister of Constitutional Development and Planning:

- (1) Whether his Department has received any applications from couples who entered into mixed marriages for the issue of permits in terms of section 26(3) of the Group Areas Act, No 36 of 1966, to reside permanently in White areas and to be exempt from the provisions of the said Act; if so, how many (a) in 1987 and/or (b) as at the latest specified date for which figures are available;
- (2) whether any of these applications have been granted; if not, why not; if so, how many (a) in 1987 and/or (b) at the above-mentioned date;
- (3) whether any of these applications have been refused; if so, why in each case?

**THE MINISTER OF CONSTITUTIONAL DEVELOPMENT AND PLANNING:**

No.

Soweto proper/Dobsonville/Diepmeadow: applications for 99-year leases/freehold title

588. Mrs H SUZMAN asked the Minister of Constitutional Development and Planning:

- (a) How many persons in Soweto proper, Dobsonville and Diepmeadow, respectively,

**HOUSE OF ASSEMBLY**

applied in 1987 for (i) 99-year leases and (ii) leave to purchase property under freehold title and (b) how many such applications had been granted in each case as at the latest specified date for which figures are available?

**THE MINISTER OF CONSTITUTIONAL DEVELOPMENT AND PLANNING:**

As at 31 December 1987.

(a)	(i) Soweto	(ii) Soweto
Diepmeadow	3 949	1
Dobsonville	604	1
	310	
	4 863	
		1
		3 949
		291
		310
		4 550
		1
		1

99-year leasehold scheme: plots surveyed  
590. Mrs H SUZMAN asked the Minister of Constitutional Development and Planning:  
How many plots were surveyed in each province of the Republic in 1987 with a view to the 99-year leasehold scheme?

**THE MINISTER OF CONSTITUTIONAL DEVELOPMENT AND PLANNING:**

**TRANSVAAL**  
381 678 plots were registered with the Deeds Office.

**ORANGE FREE STATE**  
1 569 plots.

**CAPE PROVINCE**  
59 739 plots.

**NATAL**  
5 690 plots.

Greater Soweto: population

591. Mrs H SUZMAN asked the Minister of Constitutional Development and Planning:  
What was the population of Greater Soweto as at 31 December 1987?

**THE MINISTER OF CONSTITUTIONAL DEVELOPMENT AND PLANNING:**

1 542 100 estimated.

Christmas cards sent out

606. Mr P G SOAL asked the Minister of Justice:

- (1) Whether (a) he, (b) the Department of Justice and/or (c) the Prisons Service sent out Christmas cards in 1987; if so, (i) what total number of cards was printed, (ii) to whom were they sent, (iii) what was the total cost of producing and distributing these cards, and (iv) who was responsible for printing them, in each case;
- (2) whether postage stamps were used to send out these Christmas cards; if not, how were they distributed?

**THE MINISTER OF JUSTICE:**

- (1) (a) Yes.
  - (i) No cards were printed in 1987.
  - (ii) Approximately ten cards were sent to colleagues and friends.
  - (iii) None. Existing stocks were used.
  - (iv) The Government Printer.
- (b) Yes.
  - (i) 1 000.
  - (ii) The Director-General in his official capacity sent out cards to approximately 800 people comprising public office-bearers, heads of state departments, retired heads of the Department, heads of sub-offices in the Directorate: Justice, heads of prison commands and prisons and retired officials in the Directorate: Justice.

**THE MINISTER OF CONSTITUTIONAL DEVELOPMENT AND PLANNING:**

(1) (a)	(i) 1985 — 340	(ii) 1985 — 205
	1986 — 634	1986 — 232
	1987 — 668	1987 — 210
		1985 — 152
		1986 — 147
		1987 — 181

- (c) Yes.
- (iv) The Government Printer.

**HOUSE OF ASSEMBLY**

(i) 3 000.

(ii) 575 were sent out to instances and persons with whom the SA Prisons Service has official connections and also in return of season greetings to the Commissioner of Prisons and the personnel corps of the SA Prisons Service received from individuals, instances and Members of Parliament.

(iii) R684,32 for the supply of 3 000.

(iv) The Government Printer.

(2) Yes. However, the cards mailed by the Director-General and the Commissioner of Prisons in their official capacities were dispatched as official mail.

**Nursing diploma course at H F Verwoerd hospital in Pretoria**

613. Mr A GERBER asked the Minister of Constitutional Development and Planning:

- (1) (a) How many (i) enquiries about, and (ii) applications for admission to, the nursing diploma course at the H F Verwoerd Hospital in Pretoria were received in 1985, 1986 and 1987, respectively, and (b) how many persons were admitted to the course in each of these years;
- (2) whether there is a shortage of nursing staff at present at (a) Transvaal provincial hospitals in general and (b) the H F Verwoerd Hospital in particular; if so, what (i) is the extent of and (ii) are the reasons for this shortage, in each case?

**THE MINISTER OF CONSTITUTIONAL DEVELOPMENT AND PLANNING:**

(1) (a)	(i) 1985 — 340	(ii) 1985 — 205
	1986 — 634	1986 — 232
	1987 — 668	1987 — 210
		1985 — 152
		1986 — 147
		1987 — 181

- (2) (a) Yes.
- (b) Yes.

**HOUSE OF ASSEMBLY**

*Answered*

*Answered*

- (i) The extent of shortage with regard to (a) and (b) is 15%.
- (ii) The reasons for shortage with regard to (a) and (b) are the lack of funds and unavailability of manpower.

**Soweto: family housing units built by State/private owners**

615. Mrs H SUZMAN asked the Minister of Constitutional Development and Planning:

- (1) How many family housing units were built in Soweto by (a) the State and (b) private owners in 1987;
- (2) (a) how many such units were being built at present by (i) the State and (ii) private owners and (b) in respect of what date is this information furnished?

**The MINISTER OF CONSTITUTIONAL DEVELOPMENT AND PLANNING:**

- (1) (a) None.  
(b) 1 775.
- (2) (a) (i) None.  
(ii) 3 759.  
(b) 29 February 1988.

**Soweto: housing schemes developed at present by State/private sector**

616. Mrs H SUZMAN asked the Minister of Constitutional Development and Planning:

- (1) How many housing schemes are at present being developed in Soweto by the (a) State and (b) private sector;
- (2) (a) when (i) were such schemes initiated and (ii) is it envisaged that they will be completed and (b) how many housing units are involved in each case;
- (3) whether any housing schemes for lower-income groups are under construction in Soweto; if so, (a) (i) how many and (ii) how many units are involved in each case and (b) in respect of what date is this information furnished?

**The MINISTER OF CONSTITUTIONAL DEVELOPMENT AND PLANNING:**

- (1) (a) 0  
(b) 6

- (2) (a) (i) 1987  
(ii) 1988  
(b) State  
0

**Black townships in RSA: 99-year leasehold scheme/freehold title**

617. Mrs H SUZMAN asked the Minister of Constitutional Development and Planning:

- (1) Whether the (a) 99-year leasehold scheme is in operation, and (b) right to hold freehold title to land applies, in every Black township in the Republic; if not, (i) why not and (ii) in respect of which townships is this (aa) scheme and (bb) right not applicable;
- (2) in respect of what date is this information furnished?

**The MINISTER OF CONSTITUTIONAL DEVELOPMENT AND PLANNING:**

- (1) (a) Yes.  
(b) Yes. No right to hold freehold is as yet registered due to the fact that town registers does not exist. The land owner is entitled to apply for the opening of a town register. The Local Authorities are the legal land owners and it is their duty to apply.

**ORANGE FREE STATE**

- (1) (a) No.  
(b) No.
- (2) 8 March 1988.

**NATAL**

- (1) (a) No.  
(b) No.
- (i) and (ii) (aa) The 99-year leasehold scheme is applicable in all black urban townships in Natal, except Shyamoya (Umzinto) where a decision as to its future is still awaited.

- (i) and (ii) (bb) The right to hold freehold title to land has not yet been approved for urban townships in Natal, and legislative amendments are awaited.

**TRANSVAAL**

- (1) (a) No. As certain policies and procedures are still being implemented and the scheme is apparently not well received by inhabitants of certain towns.  
(b) Yes.
- (i) and (ii) (aa) Applies to all black towns.  
(i) and (ii) (bb) Fall away.

**CAPE PROVINCE**

- (1) (a) Yes.  
(b) Freehold is applicable to townships that have been declared approved townships in respect of the township establishment regulations No 1897 of 12 September 1986. Certain towns have already been declared while majority are still in the process to be declared.

- (i) and (ii) (aa) and (bb) Fall away.
- (2) 29 February 1988.

Hospitals: posts established

633. Dr M S BARNARD asked the Minister of Constitutional Development and Planning:

- (1) How many posts had been established as at 31 December 1987 for (a) nurses, (b) paramedics, (c) medical staff, (d) administrative staff and (e) other staff at the (i) Baragwanath Hospital, (ii) Coronation Hospital, (iii) H F Verwoerd Hospital, (iv) Johannesburg Hospital, (v) Kalafong Hospital and (vi) Paul Kruger Memorial Hospital in Rustenburg;
- (2) whether any posts at these hospitals were frozen as at 31 January 1988; if so, how many in each category in respect of each hospital;
- (3) (a) how many applications were made from each of these hospitals in each category for

the unfreezing and filling of posts during the period 1 January to 31 December 1987 and (b) how many applications were (i) granted and (ii) refused in each case?

**The MINISTER OF CONSTITUTIONAL DEVELOPMENT AND PLANNING:**

(1) (i)	Baragwanath Hospital	(a) nurses	4 105
	(b) paramedics	424	
	(c) medical staff	591	
	(d) administrative staff	515	
	(e) other staff	1 989	
(ii)	Coronation Hospital		
	(a) nurses	763	
	(b) paramedics	88	
	(c) medical staff	166	
	(d) administrative staff	108	
	(e) other staff	405	
(iii)	H F Verwoerd Hospital		
	(a) nurses	2 124	
	(b) paramedics	572	
	(c) medical staff	589	
	(d) administrative staff	550	
	(e) other staff	1 345	
(iv)	Johannesburg Hospital		
	(a) nurses	1 932	
	(b) paramedics	539	
	(c) medical staff	681	
	(d) administrative staff	684	
	(e) other staff	2 011	
(v)	Kalafong Hospital		
	(a) nurses	1 578	
	(b) paramedics	157	
	(c) medical staff	308	
	(d) administrative staff	273	
	(e) other staff	742	
(vi)	Paul Kruger Memorial Hospital		
	(a) nurses	399	
	(b) paramedics	17	
	(c) medical staff	64	
	(d) administrative staff	36	
	(e) other staff	235	

# Danger of exploitation faces SA nurses in US

From: CHEETAH HAYSOM

The Argus Foreign Service

NEW YORK. — South African nurses who come to the United States to work without following official procedures are open to exploitation, according to the American Nursing Association.

And, warns ANA spokeswoman Cynthia Cizmek, if they don't know what to expect they can be in for bitter disappointment.

"American salaries may look very big to foreign nurses, who don't know what the living costs are. They may not know about the high costs of housing, or expensive medical insurance."

There was such a shortage of nurses at all levels that some hospitals had applied to the ANA to recruit overseas without going through the proper procedure. They had been refused, she said.

The procedure is:

- A foreign nurse must pass an exam set up by the ANA's Commission on Graduates of Foreign Nursing Schools (CGFNS). It is a screening test, set up to establish that the foreign applicant is sufficiently familiar with English and with American nursing practice so that she is likely to pass the state licensing exam. It does not guarantee a job.

- Once she has the CGFNS she is allowed by the immigration authorities to apply to enter the United States on an Occupational Preference Visa. Then she has to pass the state licensing exams.

"We cannot protect people who do not go through the right channels. Their chances of being exploited are greatly increased," said Miss Cizmek.

There have been reports of widespread dissatisfaction among American nurses. One reason is the work load, the shortage of nurses places on those in the profession.

The other is the salary. There is "compression" at the top of the field. After four years nurses' salaries do not increase, no matter how much experience they have.

The average starting salary for a nurse is R40 000. The average salary for a staff nurse is R49 000. After about five years the average salary is R57 000.

(95) SAM 7/4/88  
MP to press for new probe

# Black nurses 'held back' as white man died

By Martin Challenor

Germiston City Council is taking no action against a white traffic policeman who allegedly barred three black nurses from helping a white accident victim as he lay dying in his smashed car.

But National Party MP Mr Sam Bloomberg will ask the council to re-investigate the accident.

Mr Stoffel van Niekerk (53) of 6th Avenue, Bezuidenhout Valley, was killed when his car and a truck collided in Black Reef Road, Germiston, on November 17.

The nurses, who were on their way to Boksburg-Benoni Hospital, stopped to help him.

## Barred from touching

But, said one of the nurses in a signed statement, a Germiston traffic policeman stood in front of the driver's door barring them from touching the injured man, saying that they must not touch him because they were not doctors and that he was waiting for an ambulance for whites.

Mr van Niekerk died on the scene within about 15 minutes.

Mr Bloomberg became involved as Mr van Niekerk lived in his Bezuidenhout constituency.

The MP asked for the three nurses to submit statements to him and asked Germiston City Council to investigate the officer's behaviour.

But a letter from the Germiston town clerk's office to the MP said: "The incident was properly investigated and we are quite satisfied that no disciplinary measures should be taken against any employee of the council in terms of the agreement for the Industrial Council for the Local Government Undertaking."

Mr Bloomberg said yesterday he was deeply unhappy with the outcome of the investigation. Now he wants the Germiston City Council to probe the accident again.

Mr Bloomberg said: "The nurses acted in a manner which does credit to them and which is in accordance with the highest traditions of their calling."

This is an extract from one of the

nurse's statements made to Mr Bloomberg (the nurses' names have been withheld at Mr Bloomberg's request):

"The occupant of the car was trapped and had a bleeding wound on his forehead, and was also bleeding from his mouth.

"There were two black ambulance men who brought a fracture board/stretchers.

"We three black tutors and two ambulance men tried to lift the injured man on to the fracture board but the white traffic officer barred us from doing so. He obstructed the car door so that we should not touch the injured man.

"He told us that he was waiting for an ambulance for whites and the fire department men would be coming. He also told us that we are not doctors.

"I (and) my colleagues insisted that it was urgent we give emergency treatment but he adamantly refused.

"There were intravenous infusion sets and intravenous solutions, bandages, as well as oxygen in the ambulance.

"As a highly qualified professional with long-standing experience I am proficient in emergency treatment.

"I could have put up an intravenous infusion, cleared the airway and administered oxygen, stopped the visible bleeding and positioned the patient in a manner that would have encouraged circulation to the vital organs.

## Watched helplessly

"I could have carried out relevant observations and prevented the injured man from (going into) shock.

"As a result of the actions of the traffic officer we watched helplessly for about 15 minutes as the patient's condition deteriorated rapidly.

"He progressively became paler and paler. He experienced respiratory distress, gasped for air and ultimately gave the last breath.

"We reported the matter to a short white man from the fire brigade and also to the two traffic officers who arrived later at the scene of the accident, but they all seemed not perturbed. They just looked at us and never uttered a word," the statement said.

(95) 7/4/88  
MP to press for new probe

# Black nurses 'held back' as white man died

By Martin Challenor

Germiston City Council is taking no action against a white traffic policeman who allegedly barred three black nurses from helping a white accident victim as he lay dying in his smashed car.

But National Party MP Mr Sam Bloomberg will ask the council to re-investigate the accident.

Mr Stoffel van Niekerk (53) of 6th Avenue, Bezuidenhout Valley, was killed when his car and a truck collided in Black Reef Road, Germiston, on November 17.

The nurses, who were on their way to Boksburg-Benoni Hospital, stopped to help him.

## Barred from touching

But, said one of the nurses in a signed statement, a Germiston traffic policeman stood in front of the driver's door barring them from touching the injured man, saying that they must not touch him because they were not doctors and that he was waiting for an ambulance for whites.

Mr van Niekerk died on the scene within about 15 minutes.

Mr Bloomberg became involved as Mr van Niekerk lived in his Bezuidenhout constituency.

The MP asked for the three nurses to submit statements to him and asked Germiston City Council to investigate the officer's behaviour.

But a letter from the Germiston town clerk's office to the MP said: "The incident was properly investigated and we are quite satisfied that no disciplinary measures should be taken against any employee of the council in terms of the agreement for the Industrial Council for the Local Government Undertaking."

Mr Bloomberg said yesterday he was deeply unhappy with the outcome of the investigation. Now he wants the Germiston City Council to probe the accident again.

Mr Bloomberg said: "The nurses acted in a manner which does credit to them and which is in accordance with the highest traditions of their calling."

This is an extract from one of the

nurse's statements made to Mr Bloomberg (the nurses' names have been withheld at Mr Bloomberg's request):

"The occupant of the car was trapped and had a bleeding wound on his forehead, and was also bleeding from his mouth.

"There were two black ambulance men who brought a fracture board/stretcher.

"We three black tutors and two ambulancemen tried to lift the injured man on to the fracture board but the white traffic officer barred us from doing so. He obstructed the car door so that we should not touch the injured man.

"He told us that he was waiting for an ambulance for whites and the fire department men would be coming. He also told us that we are not doctors.

"I (and) my colleagues insisted that it was urgent we give emergency treatment but he adamantly refused.

"There were intravenous infusion sets and intravenous solutions, bandages, as well as oxygen in the ambulance.

"As a highly qualified professional with long-standing experience I am proficient in emergency treatment.

"I could have put up an intravenous infusion, cleared the airway and administered oxygen, stopped the visible bleeding and positioned the patient in a manner that would have encouraged circulation to the vital organs.

## Watched helplessly

"I could have carried out relevant observations and prevented the injured man from (going into) shock.

"As a result of the actions of the traffic officer we watched helplessly for about 15 minutes as the patient's condition deteriorated rapidly.

"He progressively became paler and paler. He experienced respiratory distress, gasped for air and ultimately gave the last breath.

"We reported the matter to a short white man from the fire brigade and also to the two traffic officers who arrived later at the scene of the accident, but they all seemed not perturbed. They just looked at us and never uttered a word," the statement said.



## HOUSE OF DELEGATES

†Indicates translated version.

For written reply:

Own Affairs:

Plots/building contracts awarded to Clarion Homes (Pty) Ltd

30. Mr Y MOOLLA asked the Minister of Housing:

(1) Whether his Department or any statutory body falling under his Department allocated any plots and/or awarded any building contracts in Mountain Rise and/or the Pietermaritzburg area to a certain firm, the name of which has been furnished to the Minister's Department for the purpose of his reply; if so, (a) (i) by whom or what statutory body were these plots allocated and/or building contracts awarded and (ii) when in each case, (b) what is the name of the firm in question, (c) what was the tender price in respect of each such plot and/or building contract, (d) how many (i) plots and (ii) building contracts were involved and (e) what was the (i) area of each such plot and (ii) floor area of each such building;

(2) whether any other firms tendered for these plots and building contracts; if so, (a) what were the prices tendered in respect of each of these (i) plots and (ii) contracts and (b) who submitted each of these tenders;

(3) whether the firm referred to in paragraph (1) of this question has been allocated any other plots and/or awarded any other

building contracts since 1 January 1986 (a) by his Department, (b) by any statutory body falling under his Department and/or (c) on his recommendation or that of his Department by (i) any other agency falling under his Department and (ii) any local authority; if so, what are the relevant particulars?

The MINISTER OF HOUSING:

(1) Yes

(a) (i) Housing Development Board.  
(ii) 19 February 1988.

(b) Clarion Homes (Pty) Ltd.

(c) R450 000,00.

(d) (i) One.

(ii) None.

(e) (i) ± 8,3243 ha

(ii) Falls away.

(2) Yes. Tenders were called for proposals and not for price of stand. The best proposals were submitted by Clarion Homes (Pty) Ltd and Sunshine Housing. Clarion Homes (Pty) Ltd offered R200 000,00 more than Sunshine Housing.

(a) (i) Falls away.

(ii) Falls away.

(b) Sunshine Housing.

Comhousing.

(3) (a) No.

(b) No.

(c) (i) No.

(ii) No.

*Hansard*

## HOUSE OF ASSEMBLY

†The MINISTER OF LAW AND ORDER:

No.

†Indicates translated version.

For oral reply:

General Affairs:

State President:

SWA: status in relation to RSA  
\*1. Mr C J DERBY-LEWIS asked the State President:

Whether South West Africa falls under his direct jurisdiction; if not, what is the status of this territory in relation to the Republic of South Africa; if so, (a) in what manner and (b) in collaboration with whom is the amount of financial aid provided by the Republic to this territory determined?

†The STATE PRESIDENT:

I refer the hon member specifically to section 38 of the South West Africa Constitution Act, 1968 (Act No 39 of 1968) as well as Proclamation No R101 of 1985. Financial assistance is determined by the Department of Finance, after consultation with the South West African government.

\*2. Mrs H SUZMAN — State President. [Withdrawn.]

Ministers:

Questions standing over from Tuesday, 29 March 1988:

Trojan Horse incident: SAP members suspended

\*8. Mrs H SUZMAN asked the Minister of Law and Order:

Whether the members of the South African Police who were involved in the so-called "Trojan Horse" incident approximately three years ago, have been suspended from the Police Force pending the decision of the Attorney-General regarding prosecution; if not, (a) why not, (b) what duties are they performing at present, (c) where are they stationed and (d) what were the circumstances surrounding this incident?

(a) As soon as the decision of the Attorney-General is known, steps against these members will be considered.

(b) Normal police duties.

(c) At various police stations.

(d) The circumstances were already the subject of an inquest which was held in an open court and which received wide publicity in the media. The court record is a public document which is at the disposal of the hon member.

New Questions:

J G Strijdom Hospital: Black nurse attending to Whites

\*1. Mr A GERBER asked the Minister of Constitutional Development and Planning:†

(1) Whether a Black male nurse attended to White female patients in the J G Strijdom Hospital in Johannesburg on or about 29 February 1988; if so, what were the circumstances surrounding this incident;

(2) whether it is the policy of his Department that non-White male nurses attend to White female patients;

(3) whether he will make a statement on the matter?

The DEPUTY MINISTER OF CONSTITUTIONAL DEVELOPMENT AND PLANNING:

(1) No.

(2) No.

(3) Falls away.

Provincial hospitals: motor-car travel allowances to doctors

\*2. Dr M S BARNARD asked the Minister of Constitutional Development and Planning:

(1) Whether his Department pays motor-car travel allowances to all doctors working at provincial hospitals in (a) the Transvaal, (b) the Cape Province, (c) Natal and (d) the Orange Free State; if not, why not;

JOHANNESBURG  
The Germiston City Council is taking no action against a white traffic policeman who allegedly barred three black nurses from helping a white accident victim as he lay dying in his smashed car.

But a National Party MP, Mr Sam Bloomberg, will ask the council to re-investigate the accident.

Mr Stoffel van Niekerk, 53, of 6th Avenue, Bezuidenhout Valley, was killed when his car and a truck collided in Black Reef Road, Germiston, on November 17.

The nurses, who were on their way to Boksburg-Benoni Hospital, stopped to help him.

One of the nurses said, in a signed statement, that a Germiston traffic policeman stood in front of the driver's door barring them from touching the injured man. The officer told them they must not touch him because they were not doctors and that he was waiting for an ambulance for whites, she

# Black nurses prevented

## from treating dying man

Did 8/14/88

Mr Van Niekerk died on the scene within 15 minutes.

Mr Bloomberg became involved as Mr Van Niekerk lived in his Bezuidenhout constituency.

The MP asked the three nurses to submit statements to him and asked the Germiston City Council to investigate the officer's behaviour.

But a letter from the Germiston town clerk's office to the MP said the incident was properly investigated and the council was quite satisfied that no disciplinary measures should be taken.

Mr Bloomberg said yesterday he was deeply unhappy with the outcome of the investigation. Now he wants the

Germiston City Council to probe the accident again.

"The nurses acted in a manner which does credit to them and which is in accordance with the highest tradition of their calling," he said.

An extract from one of the nurse's statements to Mr Bloomberg (with the nurses' names withheld at Mr Bloomberg's request) reads:

"The occupant of the car was trapped and had a bleeding wound on his forehead, and was also bleeding from his mouth.

"There were two black ambulance men who brought a fracture board/stretcher.

"We three black tutors and two ambulancemen tried to lift the injured

man on to the fracture board but the white traffic officer barred us from doing so. He obstructed the car door so that we should not touch the injured man.

"He told us that he was waiting for an ambulance for whites and that the fire department men would be coming. He also told us that we are not doctors.

"I and my colleagues insisted it was urgent that we give emergency treatment but he adamantly refused.

"There were intravenous infusion sets and intravenous solutions, bandages, as well as oxygen in the ambulance.

"As a highly-qualified professional with long-standing experience I

am proficient in emergency treatment.

"I could have put up an intravenous infusion, cleared the airway and administered oxygen, stopped the visible bleeding and positioned the patient in a manner that would have encouraged circulation to the vital organs.

"I could have carried out relevant observations and prevented the injured man from (going into) shock.

"As a result of the actions of the traffic officer we watched helplessly for about 15 minutes as the patient's condition deteriorated rapidly.

"He progressively became paler and paler. He experienced respiratory distress, gasped for air and ultimately gave the last breath.

"We reported the matter to a short white man from the fire brigade and also to the two traffic officers who arrived later at the scene of the accident, but they all seemed unperturbed."

—Sapa

*Attwood*

*Attwood*

trial property in the Orange Free State in terms of the provisions of the said Act during the above-mentioned period; if so, (i) in respect of the owners or occupants of which properties, (ii) what action was taken, (iii) who initiated the action, (iv) who decided that action should be taken, (v) why was action taken and (vi) what was the outcome of this action in each case?

**THE MINISTER OF CONSTITUTIONAL DEVELOPMENT AND PLANNING:**

(1) No. The rest of the question falls away.

Natal: applications for permits granting exemption from Group Areas Act

584. Mr R M BURROWS to ask the Minister of Constitutional Development and Planning:

- (1) Whether representatives of his Department in Natal have considered any applications for permits granting exemption from the application of the Group Areas Act, No 36 of 1966, in respect of persons wishing to reside in group areas proclaimed for another race group; if so, how many such applications were received during the latest specified period of 12 months for which information is available;
- (2) whether any of these applications were refused; if so, (a) how many and (b) for what reason in each case;
- (3) whether, amongst the applications that were refused, there were applications which had received the support of the local authority and the local member of Parliament; if so, (a) in respect of which group areas were these applications submitted and (b) for what reasons were they refused in each case?

**THE MINISTER OF CONSTITUTIONAL DEVELOPMENT AND PLANNING:**

- (1) No.
- (2) Falls away.
- (3) Falls away.

99-year leasehold scheme/freehold title: applications

589. Mrs H SUZMAN asked the Minister of Constitutional Development and Planning:

- (1) (a) How many persons in each specified

HOUSE OF ASSEMBLY

office for community services area applied in 1987 for (i) leases in terms of the 99-year leasehold scheme and (ii) leave to purchase property under freehold title and (b) how many such applications had been granted as at the latest specified date for which figures are available;

(2) whether the figures in respect of each such area represent an increase or decrease in comparison with the relevant figures for 1986?

**THE MINISTER OF CONSTITUTIONAL DEVELOPMENT AND PLANNING:**

**NATAL**

- (1) (a) (i) 979 — with the option to convert to freehold title.
- (ii) Nonc.
- (b) (i) 416.

(2) Increase.

**ORANGE FREE STATE**

- (1) (a) (i) 1 156.
- (ii) None.
- (b) 1 156 applications have been granted in terms of the 99-years leasehold scheme up to 31 January 1988.

(2) Increase.

**CAPE PROVINCE**

- (1) (a) (i) 5 312.
- (ii) None.
- (b) 5 169.

- (2) Northern Cape — decrease
- Western Cape — increase
- Eastern Cape — increase

**TRANSVAAL**

- (1) (a) (i) 24 763.
- (ii) 3.
- (b) 21 463 (99-year leasehold).

(2) Increase.

Christmas cards sent out

610. Mr P G SOAL asked the Minister of Constitutional Development and Planning:

- (1) Whether (a) he and/or (b) his Department

sent out Christmas cards in 1987; if so, (i) what total number of cards was printed, (ii) to whom were they sent, (iii) what was the total cost of producing and distributing these cards, and (iv) who was responsible for printing them, in each case;

(2) whether postage stamps were used to send out these Christmas cards; if not, how were they distributed?

**THE MINISTER OF CONSTITUTIONAL DEVELOPMENT AND PLANNING:**

- (1) (a) and (b) Yes.
- (i) 6 500.

(ii) To various persons, Members of Parliament, members of legislative assemblies, diplomats, provincial and local authorities of all population groups, public bodies, semi-government and private organisations and bodies.

(iii) R10 208

(iv) The Government Printer.

- (2) No, it was distributed as official mail according to standard practice and directives.

95  
Diplomas in Clinical Nursing Care/Health Diagnosis/Treatment and Care awarded

639. Dr M S BARNARD asked the Minister of Constitutional Development and Planning:

- (1) (a) How many Diplomas in Clinical Nursing Care, Health Diagnosis, Treatment and Care were awarded in each province in each of the latest specified four years for which information is available and (b) by which training institutions for nurses were they awarded;
- (2) (a) what additional salary scale is paid to holders of such qualifications in the employ of each provincial hospital services department and (b) (i) how many registered nurses with the above qualifications were employed by each provincial department as at 31 December 1987 and (ii) at which institutions were they so employed?

Western Cape Region Training Centre, Bellville	
Beaufort West Hospital, Beaufort West	
East Cape Region Training Centre, Port Elizabeth	
Livingstone Hospital, Port Elizabeth	
Dora Nginza Hospital, Port Elizabeth	
Frere Hospital, East London	
Galeshewe Day Hospital, Kimberley.	
Hospital and Health Services Branch Cape Town.	

**TRANSVAAL**

- (1) (a) 1983 — 23
- 1984 — 39
- 1985 — 28
- 1986 — 27

(b) Baragwanath — Soweto Community Health Centre

Leratonk — Paardekraal Hospital

Kalafong Hospital

HOUSE OF ASSEMBLY

*Handwritten signature*

*Handwritten signature*

**Tembisa Hospital**  
 Tshepong — Klerksdorp Hospital

(2) (a) Recognition is granted for the additional qualification by means of a cash bonus equivalent to two salary notches.

(b) (i) 218

(ii) Boksburg-Benoni  
 Sebokeng  
 Pietersburg  
 Bethal  
 Coronation  
 Witbank  
 Paul Kruger Memorial  
 Rustenburg  
 F H Odendaal — Nykström  
 A G Visser — Heidelberg  
 Far East Rand — Springs  
 Tembisa — Oifantsfontein  
 Natalspruit — Alrode  
 Kalafong — Pretoria  
 Leratong — Krugersdorp  
 Amajuba Memorial — Volksrust  
 Hillbrow  
 Tshepong — Klerksdorp  
 Soweto Community Health Centre

residents of the Black township of Munsieville, Krugersdorp, were relocated prior to 1 January 1975; if so, (a) how many and (b) when;

(2) whether these residents were relocated on a voluntary basis; if not, on what basis were they relocated?

**THE MINISTER OF CONSTITUTIONAL DEVELOPMENT AND PLANNING:**

(1) No.  
 (a) and (b) Fall away.

(2) Falls away.

Rent boycotts: loss suffered

750. Mr C J DERBY-LEWIS asked the Minister of Constitutional Development and Planning:

(a) What is the amount of the loss suffered by the State during the latest specified 12-month period for which information is available, as a result of rent boycotts in Black residential areas throughout the Republic and (b) how was this loss financed on a day-to-day basis?

**THE MINISTER OF CONSTITUTIONAL DEVELOPMENT AND PLANNING:**

None.

Rest of question falls away.

Unpaid water/electricity accounts: amounts written off

786. Mr C J DERBY-LEWIS asked the Minister of Constitutional Development and Planning:

Whether any amounts were written off by the four provincial councils in respect of unpaid (a) water and (b) electricity accounts in each of the latest specified six years for which information is available; if so, what amounts were so written off in each case in respect of Whites, Coloureds, Indians and Blacks, respectively?

**THE MINISTER OF CONSTITUTIONAL DEVELOPMENT AND PLANNING:**

No.

Rest of question falls away.

Sedgefield: opening of residential areas to non-Whites

803. Mr C J DERBY-LEWIS asked the Minister of Constitutional Development and Planning:

HOUSE OF ASSEMBLY

(1) Whether, with reference to his reply to Question No 35 on 11 February 1986, it is still the policy not to open any White residential areas of Sedgefield for occupation by non-Whites; if so,

(2) whether any exceptions to this policy have been or will be allowed; if so, whose authorization is required for such exceptions?

**THE MINISTER OF CONSTITUTIONAL DEVELOPMENT AND PLANNING:**

(1) Yes.

(2) Yes. Exceptions can be made by way of permits issued by the relevant Provincial Administration in terms of the provisions of the Group Areas Act, 1965.

Listed/unlisted companies: publication of year-end financial results

806. Mr C J DERBY-LEWIS asked the Minister of Economic Affairs and Technology:

Whether any statutory requirements are to be met in connection with the publication of the year-end financial results of (a) listed and (b) unlisted companies; if so, what statutory requirements in each case?

**THE MINISTER OF ECONOMIC AFFAIRS AND TECHNOLOGY:**

(a) and (b) Yes, in respect of public companies, whether listed or unlisted, and private companies, in terms of the Companies Act, 1973 (Act 61 of 1973) which distinguishes between public and private companies only and not between listed and unlisted companies.

Section 302 of the Companies Act provides that a copy of the annual financial statements of a company and the group annual financial statements, if any, shall not less than twenty-one days before the date of the annual general meeting of the company be sent to every member and every holder of debentures of the company. A public company shall on the day on which it sends such copies to its members send to the Registrar of Companies a true copy certified by a director and the secretary of the company of the annual financial statements and group annual financial statements, if any, and of the annual financial statements of every private company which is a subsidiary of that public company.

Other authorities such as, for example, the Johannesburg Stock Exchange, may possibly lay down additional requirements regarding the publication of annual financial statements of listed companies.

**Gampo Township: relocation of residents**

811. Mr H SUZMAN asked the Minister of Constitutional Development and Planning:

(1) Whether any residents of Gampo Township, previously known as Duncan Village, are to be relocated; if so, (a) how many residents are to be relocated, (b) (i) when, (ii) where and (iii) why are they to be relocated and (c) who took the decision in this regard;

(2) whether the site to which these residents are to be moved is situated in the Republic; if not, what effect will this move have on the South African citizenship status of these persons; if so, what action will be taken in respect of persons already resident in this area;

(3) whether any consideration is being given to incorporating this relocation area into Ciskei; if so, (a) when and (b) why;

(4) whether any guarantee will be given to these persons that they will be able to retain their South African citizenship and all rights corresponding thereto; if not, why not; if so, by whom;

(5) whether he will make a statement on the matter?

**THE MINISTER OF CONSTITUTIONAL DEVELOPMENT AND PLANNING:**

(1) No. The rest of the question falls away.

**Hospitals: beds/staff establishment/vacant positions**

819. Dr M S BARNARD asked the Minister of Constitutional Development and Planning:

(1) What was the (a) number of commissioned beds as at 31 December 1987 at the (i) Bethlehem, (ii) Bontumelo, (iii) Oden-dalsrus, (iv) Parys, (v) Pelonomi, (vi) Phekolong, (vii) Sasolburg, (viii) Universitas, (ix) Virginia, (x) Voortrekker, (xi) Welkom and (xii) Harrismith Hospital, (b) average bed occupancy rate, expressed in percentage, in respect of each of the above hospitals for the (i) 1984/85

HOUSE OF ASSEMBLY

*Stewart*

**Institutions for training of nurses: applications received/accepted**

412. Dr M S BARNARD asked the Minister of National Health and Population Development:

- (1) How many (a) applications to train as nurses were (i) received and (ii) accepted from, and (b) vacancies existed at institutions for the training of nurses for, (aa) Whites, (bb) Coloureds, (cc) Indians and (dd) Blacks in 1986;
- (2) how many nurses of each of these race groups completed their training in that year?

**The MINISTER OF NATIONAL HEALTH AND POPULATION DEVELOPMENT:**

Position as at 31 December 1986:

(1) (a)	Applications to train as nurses:	(i) Received	(ii) Accepted
(aa)	Whites	4 971	2 091
(bb)	Coloureds	1 680	102
(cc)	Indians	1 544	101
(dd)	Blacks	23 060	997

(b) Vacancies at institutions for the training of nurses:

(aa)	Whites	1 435
(bb)	Coloureds	244
(cc)	Indians	32
(dd)	Blacks	752

(2) Number of nurses who completed their training during 1986:

(aa)	Whites	1 808
(bb)	Coloureds	635
(cc)	Indians	189
(dd)	Blacks	2 842

**Aids: cases diagnosed/carriers identified**

413. Dr M S BARNARD asked the Minister of National Health and Population Development:

- (a) How many cases of acquired immune deficiency syndrome (Aids) were diagnosed in 1987 and (b) how many carriers of the Aids virus had been identified in respect of each race group in South Africa as at the latest specified date for which information is available?

**The MINISTER OF NATIONAL HEALTH AND POPULATION DEVELOPMENT:**

- (a) 37 South African cases  
(b) Not available

HOUSE OF ASSEMBLY

**Cholera: cases/deaths**

416. Dr M S BARNARD asked the Minister of National Health and Population Development:

- How many (a) cases of and (b) deaths from cholera were reported in respect of each race group in each province for each month from January 1987 to the latest specified month for which figures are available?

**The MINISTER OF NATIONAL HEALTH AND POPULATION DEVELOPMENT:**

Notified cases of cholera per month in the RSA, 1987 (as on 23 February 1988)

(a) MONTH	NUMBER OF CASES
January	5
February	4
March	11
April	5
May	1
June	3
July	3
August	3
September	0
October	1
November	1
December	0

(b) All cases were Blacks in Natal (including KwaZulu). No deaths were notified.

**Malaria/typhoid/cholera: increase in incidence**

417. Dr M S BARNARD asked the Minister of National Health and Population Development:

- (1) Whether there was any increase in the incidence of (a) malaria, (b) typhoid and (c) cholera in the Republic during the latest specified period for which figures are available; if so, (i) to what extent, (ii) in which areas and (iii) how many cases of each disease were diagnosed in each area;
- (2) whether any persons died of these diseases during this period; if so, how many in each area in respect of each disease;
- (3) whether any steps are being taken to combat the spread of these diseases; if so, what steps in each specified area?

**The MINISTER OF NATIONAL HEALTH AND POPULATION DEVELOPMENT:**

- (1) (a) Yes  
(b) No

*Stewart*

**(c) No**

- (a) (i) Number of malaria cases notified in the RSA (as at 23 February 1988)
- |      |       |
|------|-------|
| 1986 | 6 842 |
| 1987 | 8 012 |
- (ii) Natal and KwaZulu (mainly Umbombo and Ingwavuma)
- (iii) As at 23 February 1988:
- |         |       |
|---------|-------|
| Natal   | 1 990 |
| KwaZulu | 3 126 |

(2) Yes  
Notified deaths from malaria and typhoid in each region in the RSA 1987 (as at 23 February 1988)

Region	Number of deaths	Malaria	Typhoid
Eastern Cape	0	3	3
Western Cape	0	2	2
Northern Cape	0	0	0
Natal	2	0	0
OFS	0	1	1
S Transvaal	1	2	2
N Transvaal	1	2	2
Gazankulu	1	2	2
KanNgwane	0	4	4
KwaNdebele	0	0	0
KwaZulu	1	4	4
Lebowa	1	1	1
OwaQwa	0	0	0

No deaths from cholera were notified in 1987.

(3) Yes

- (a) Malaria  
(i) Surveillance

- (ii) Active and passive case-finding  
(iii) Health education  
(iv) Encouragement of prophylactic treatment  
(v) Vector control

Campaign mainly concentrated on Northern and Eastern Transvaal and North-Eastern Natal-KwaZulu.

In Natal-KwaZulu the malarial teams have been strengthened, active case-finding intensified, screening of illegal immigrants is done and treatment regimens

of proven cases have been changed from the traditional Darachlor to Fansidar treatment.

- (b) Typhoid  
(i) Surveillance  
(ii) Case-finding  
(iii) Health education  
(iv) Treatment and surveillance of contacts  
(v) Advice with regard to environmental factors

- (c) Cholera  
(i) Surveillance  
(ii) Case-finding  
(iii) Health education  
(iv) Treatment and surveillance of contacts  
(v) Advice with regard to environmental factors

**Council for Social and Associated Workers: social workers registered**

459. Mr P G SOAL asked the Minister of National Health and Population Development:

- (1) What total number of (a) White, (b) Black, (c) Coloured and (d) Indian social workers is registered with the Council for Social and Associated Workers;
- (2) how many social workers does his Department employ;
- (3) in respect of what date is this information furnished?

**The MINISTER OF NATIONAL HEALTH AND POPULATION DEVELOPMENT:**

(1) (a)	4 395 White
(b)	1 022 Black
(c)	729 Coloured
(d)	331 Indian
(2)	51
(3)	As at 22.02.1988

**Internal Security Act: detainees**

471. Mrs H SUZMAN asked the Minister of Justice:

HOUSE OF ASSEMBLY



**Daily Dispatch Reporter**  
GRAHAMSTOWN — A young woman here, Miss Pamela Mngcongco, has been trying for several months to enrol as a trainee nurse.

There was an eight per cent drop in students enrolling for nursing last year according to the president of the South African Nursing Council and the director of nurses for the Department of National Health and Population Development, Miss Iris Roscher.

Yet Miss Mngcongco has been thwarted in her efforts to achieve a post in a training hospital.

To nurse has been her lifelong ambition. Before she matriculated

# Woman <sup>21/4 88</sup> unable to enrol as nurse despite shortage <sup>95</sup>

last year she wrote to three training hospitals and was told she would have to submit her matriculation certificate.

She did this but they responded by saying there were no vacancies.

Livingstone Hospital in Port Elizabeth required a birth certificate and identity document.

In January, Miss Mngcongco applied to the Department of Home Affairs in Grahamstown. By mid-April the docu-

ments were not forthcoming.

There are more than 110 nurses' training hospitals in southern Africa according to the Hospital and Nursing Yearbook.

There is, however, no central clearing house for these establishments, the senior matron at Settlers' Hospital, in Grahamstown, Miss Jill Ueckemann, said.

"Trainee nurses must apply to every one of

them to find if there is a vacancy," she said.

● This year the Frere Hospital Nursing College has admitted two black student nurses after a 10 year ban on blacks.

Miss Nompumelelo Freddie, 27, and Miss Nocawe Mafu, 28, were the first two black students admitted to study the four year comprehensive nursing course.

Miss Freddie had applied to be admitted at the college since 1984 when she was not aware that blacks were not admitted.

She applied for the third time when she heard that the black ban was to be broken, and she was accepted.

For more details see today's Indaba

**N**URSES have a responsibility to support and care for Aids patients, more than five million of whom will die in the next five years.

This was the message in the keynote address by Mr Richard Wells, a member of the British aids advisory team, to the National Oncology Nursing Symposium in Sea Point, Cape Town, yesterday.

Mr Wells, also adviser on oncology nursing at the Royal College of Nursing in London, said many nurses were reluctant to treat Aids patients.

"We have to bring to those people unfortunate enough to suffer this problem a message of hope," said Mr Wells.

He said Aids presented the nursing profession with many questions to which there were few answers.

"At present no one knows where Aids came from, but the application of responsibility should not be a feature of our care for our patients," Mr Wells said.

He said the emergence of Aids had very little

Sowetan 22/4/88  
**Nurses have duty towards Aids victims**

**SOWETAN Correspondent**

95 **UK EXPERT ON THE DISEASE**

effect on broader society and people believed the impending disaster would not be a problem to them.

"People seemed to say it was not a problem that we did not have a cure as the sufferers — the homosexuals and drug addicts — were on the fringes of society and therefore expendable.

"We saw a marked lack of government concern.

"Many countries only took notice when the virus affected the rest of society.

"Only in 1983 when the HIV virus was

identified did doctors find out how the virus could be transmitted.

"We could then dispose of the myths that it was airborne and could be transmitted on lavatory seats," Mr Wells said.

He said some people with Aids remained asymptomatic for years, while others develop Aids-Related Complex (ARC).

"Only 40 to 50 percent of people who develop Aids die.

"The World Health Organisation has found that there are five to 10 million people today infected with the Aids virus and half of them will die within the next five years.

**Punitive**

"They admit that the majority of them are heterosexual."

Mr Wells said in New York one in every 86 children was born with Aids.

In Harlem, the figures were even higher and Aids had become the single largest cause of death among young women in New York.

He said the duty of the nursing profession was not to only discuss how to care for patients with Aids but where to care for them.

"Unfortunately, there are still members of our profession in favour of punitive treatment — who feel Aids patients should be removed from the rest of society.

"I am dismayed at the amazing reluctance of oncology people to treat Aids patients.

"We're frightened of them."

He said nine health workers in the world had been infected with Aids in seven years, three after accidents with equipment and four ignored the guidelines set down by the profession.

**Best**

"Nine out of 150 000 nurses internationally is not bad," said Mr Wells.

The best way to care for Aids patients was to leave the control of the treatment in their own hands, he said.

"We need to give them the hope and knowledge to carry on."

He said nurses should also help patients overcome their shame.

"Besides their physical problems, Aids patients have to carry the burden of shame which society has placed on them," he said.

Oncology nurses had the satisfaction of seeing

many cancers put in their place, he said.

"We now have the problem of treating patients with incurable cancers.

"We can help by taking the hope for the future of Aids patients and reharnessing them into hope for tomorrow.

"When you are dying, tomorrow acquires a greater meaning in your life."

Nurses were supposed to respond to people's needs, Mr Wells said.

"Do we have the right to refuse to treat a patient with Aids?

"Seventy percent of Aids patients in New York are being care for by volunteers.

"They are stealing our history and we are letting them do it.

**Ignored**

"It seems we are hell-bent on proving we are not needed.

"It seems as though the people who are suffering the most are being ignored."

Mr Wells said nurses should concentrate on supporting those closest to Aids sufferers as well.

"How do you tell someone who has just lost a loved one that they may be carrying the virus and may be travelling the same road?

"We have to help these people build bridges and make memories.

"It is terrible for people to leave only memories of pain and suffering behind."

He said the world needed someone to speak up about Aids.

"Don't hide in a fool's paradise believing this is not a problem for you.

"Let us take out a message of hope to all those who have Aids and all those who care for them," Mr Wells said.

Sowetan 22/4/88  
**Skating for Aids research**

A CAPE TOWN man whose lover died of Aids two years ago plans to roller-skate nearly 6 000 km to raise money for Aids research.

Mr Andre van Zyl (37), who set a world long-distance roller-skating record of 1 400 km from Cape Town to Johannesburg in 19 days in 1970, hopes to raise R5 million by skating 5 920 km from Cape Town to Windhoek, Johannesburg, Durban, Bloemfontein, Port Elizabeth and back to Cape Town.

Mr van Zyl said that since the death of his friend, Mr Hennie van der Wath, he had wanted to do something positive in memory of him.

He hopes the money he raises will be used to build an Aids clinic in Cape Town.

Mr van Zyl plans to leave Cape Town on June 1. — Sapa.



*Handwritten signature*  
 TUESDAY, 10 MAY 1988

1399 1400

(2) The required information is not readily available.

(1)(a)	(b)(i)	(ii)	(iii)	(2)(a)	(b)(i)	(ii)	(iii)
4	Stanger	84/86	214 380	136	Dundee	88/89	4 100 000
24	Utrecht	87/88	522 000	230	Marburg	88/89	6 000 000
207	Oaklands (Verulam)	84/85	7 000 000	2 000	Marburg	89/90	70 000 000
718	Trenant Park	87/88	22 000 000	20	Weenen	88/89	500 000
101	Vryheid	84/85	1 655 000	1	Weenen (Old Age Home)	89/90	1 500 000
54	Vryheid	87/88	1 000 000	50	Dannhauser	88/90	1 500 000
74	Harding	87/89	600 000	150	Ginginhlovu	88/90	4 500 000
102	Belvedere	84/85	6 709 000	60	Ginginhlovu	89/90	1 800 000
59	Westbrooke	85/86	1 720 000	80	Harding	89/90	1 200 000
77	Belvedere (Tongaat)	86/87	932 500	6	Uvongo	88/89	350 000
1	Umhali Beach	84/85	750 000	1 200	Verulam	88/90	40 000 000
300	Umzinto North	84 85	5 000 000	45	Ixopo	88/89	810 000
100	Mooi River	87/88	3 000 000	45	Ixopo	89/90	810 000
20	Mataiele	84/85	3 200 000	Retire-			
107	Bishopstowe	87/88	2 317 000	ment			
22	Northdale	87/88	634 444	Village			
12	Lenville	86/87	206 260	49	Pennington	89/90	1 800 000
380	(Newcastle)	86/87	2 700 000	115	Glencoe	88/89	1 500 000
20	Juchers	85/86	400 000	130	Greytown	88/89	6 500 000
265	Glencoe	84/85	Unknown	36	Greytown	88/89	1 080 000
214	Isipingo	85/86	Unknown	60	Howick	89/90	1 500 000
102	Isipingo	86/87	Unknown	50	Howick	89/90	1 500 000
74	Kokstad	86/87	2 500 000	150	Kokstad	88/89	3 200 000
175	Ladysmith	87/88	3 262 758	83	Kokstad	89/90	2 000 000
2	Ramsgate	84/85	Unknown	115	Kokstad	88/89	2 270 000
1	Shelly Beach	84/85	49 000	104	Ladysmith	88/89	2 750 000
157	Dundee	84/85	2 500 000	173	Ladysmith	89/90	4 196 000
49	Dundee	86/87	960 000	20	Mataiele	88/89	400 000
120	Marburg	84/85	1 590 000	250	Pietermaritzburg	88/89	7 500 000
250	Marburg	87/88	10 000 000	1 000	Pietermaritzburg	89/90	30 000 000
190	Merebank (Durban)	85/86	3 000 000	48	Newcastle	88/89	1 109 000
1 851	Phoenix (Durban)	85/86	18 400 000				
74	Merebank (Durban)	86/87	3 100 000				
1 375	Phoenix (Durban)	86/87	15 700 000				
664	Phoenix (Durban)	86/87	15 200 000				
280	Phoenix (Durban)	87/88	4 500 000				
88	Canclands	87/88	1 400 000				

(a)

1986	1987	1988
4	7	4

(b)

(i)	(ii)
1	3
R2 755 906	R31 103 518
	R6 000 000

**Crashes: SADF aircraft involved**

48. Mr M RAJAB asked the Minister of Defence: Whether he will furnish information on the number of South African Defence Force aircraft involved in crashes in recent years; if not, why not; if so, (a)(i) how many such aircraft crashed in 1986, 1987 and 1988, respectively, and (ii) in respect of what date is the information for 1988 furnished and (b) what was the cost to the Defence Force in this regard in terms of (i) lives lost and (ii) replacement in respect of each of these years?

The MINISTER OF DEFENCE:  
Yes.

*Handwritten signature*

1401 WEDNESDAY, 11 MAY 1988 1402

HOUSE OF ASSEMBLY

†Indicates translated version.

For written reply:

General Affairs:

(b) 31 December 1987.

Black nurses: institutions for training

944. Mr J J WALSH asked the Minister of National Health and Population Development:

(1) (a)(i) How many institutions for training of Black nurses are there in the Cape Province and (ii) in respect of what date is this information furnished and (b) how many students obtained their initial nursing qualifications at each such institution during the latest specified period of five years for which information is available;

(2) (a) how many persons in each population group are employed as nurses in the Cape Province and (b) in respect of what date is this information furnished?

The MINISTER OF NATIONAL HEALTH AND POPULATION DEVELOPMENT:

(1) (a) (i) Five.

(ii) 29 March 1988

(b) (aa) Nico Malan College of Nursing.

1983 1984 1985 1986 1987

(bb) Farleh Dollie College of Nursing

1983 1984 1985 1986 1987

(cc) Frere College of Nursing

1983 1984 1985 1986 1987

(dd) Charlotte Searle College of Nursing

1983 1984 1985 1986 1987

(ee) Henrietta Stockdale College of Nursing

1983 1984 1985 1986 1987

49 60 47 55 30

Totals R37 644 000 R38 957 000 R76 601 000

(4) No funds were available.

Cost of putting ambulance services on sound footing: estimate prepared

986. Mr M J ELLIS asked the Minister of National Health and Population Development:

(1) Whether, at any time in the past, he instructed the subcommittee on ambulance services to prepare an estimate of the cost of putting ambulance services in South Africa on a sound footing; if so, when;

(2) whether such an estimate was prepared; if not, why not; if so.

(3) whether this estimate was presented to the Advisory Committee on Health Services; if so, what amounts were budgeted for each province;

(4) whether these budgets were implemented; if so, when; if not, why not?

The MINISTER OF NATIONAL HEALTH AND POPULATION DEVELOPMENT:

(1) Yes, on 30 May 1986.

(2) Yes.

(3) Yes. The estimates submitted to the Advisory Committee are as follows:

Province	Non-recurring	Annually	Total 1987/88
Transvaal	16 790 000	19 410 000	36 200 000
Cape	14 432 000	6 648 000	21 080 000
O.F.S.	2 100 000	2 200 000	4 300 000
Natal	4 322 000	10 699 000	15 021 000
Totals	R37 644 000	R38 957 000	R76 601 000

(4) No funds were available.



Development Programmes. The main aim of a Population Development Programme refers to a balance between population size, socio-economic development and natural resources. This places emphasis on demographic programmes (including growth control programmes) as well as development programmes. One can therefore not refer to population development initiatives in Southern Africa as only population growth programmes.

Co-operation between South Africa and the TBVC-states

Substantial progress has been made with discussion between South Africa and the TBVC-states regarding the implementation of Population Development programmes.

Since 1984 SATBVC discussions on population development matters took place in the Multilateral Working Group on Population Development. Substantial SA-TBVC population development co-ordination was established in this working group. To strengthen the negotiation South Africa took the initiative to host the first SATBVC ministerial meeting on population development during February 1987. At this meeting Ministers politically committed themselves to the implementation of Population Development Programmes in the different states. The Ministers further, to strengthen co-ordination, decided to upgrade the Working Group on Population Development to the status of a Multilateral Technical Committee on population development and to establish Bilateral Technical Committees in the RSA and each of the TBVC-states.

During 1987 substantial progress was made between South Africa and the TBVC-states with regard to the implementation of Population Development Programmes in these states. Approval at political level to implement a Population Development Programme in each of the TBVC-states has been obtained. Transkei, Ciskei and Venda have accepted programme structures and is in the process of establishing personnel components. Bophuthatswana on the other hand has thought it fit to establish a separate department for population development.

Co-operation between the RSA Government and Selfgoverning Areas

Progress regarding the implementation of Population Development Programmes was also made in the Selfgoverning Areas. To establish population development discussion and subsequent co-ordination between the RSA Central Government and Selfgoverning Areas, Ministers involved in population development met during March 1987 to discuss joint actions.

The Ministers at this meeting decided to establish a joint Technical Committee between the RSA Central Government and the Selfgoverning Areas. They further decided that joint co-operation should be strengthened by the establishment of Bilateral Technical Committees between the RSA Central Government and the Selfgoverning Areas.

The aforementioned structures materialised during 1987. KaNgwane, Lebowa, KwaZulu and QwaQwa accepted the implementation of Population Development Programmes at Cabinet level and is presently planning the implementation of population development structures and personnel components.

The RSA Central Government is further negotiating with Gazankulu and KwaNdebele to obtain political commitment for the implementation of a Population Development Programme.

- (2) (a) Falls away.  
(b) Falls away.

Resignation of qualified nurses

902. Dr M S BARNARD asked the Minister of Constitutional Development and Planning:

Whether, during the latest specified period of three years for which figures are available, any (a) White, (b) Coloured, (c) Indian and (d) Black qualified nurses resigned from employment in hospitals falling under his Department; if so, how many in each case in each specified year?

The MINISTER OF CONSTITUTIONAL DEVELOPMENT AND PLANNING:

This information was furnished by the different Provincial Governments:

ORANGE FREE STATE

Yes.

The MINISTER OF TRANSPORT AFFAIRS:

Financial year	(a)	(b)	(c)
1981/82	732 544	137 706	316 320
1983/84	415 113	238 095	312 537
1984/85	541 368	161 224	310 885
1986/87	963 589	61 668	227 512

Record is only being kept since the 1981/82 financial year.

Experiments on animals

948. Mr C J DERBY-LEWIS asked the Minister of National Health and Population Development:

(1) Whether any universities in the Republic are conducting experiments on animals for research and other purposes; if so, (a) which universities and (b) what is the nature of the experiments;

(2) whether any control is exercised by the State in this regard; if so, what control?

The MINISTER OF NATIONAL HEALTH AND POPULATION DEVELOPMENT:

(1) Yes.

(a) No official records are kept of universities which are conducting experiments on animals.

(b) (i) Training in respect of medical and veterinary professions;

(ii) research in connection with the diagnosis and treatment of sicknesses in the medical and veterinary world;

(iii) diagnostic tests in respect of disease conditions in man and animals; and

(iv) testing of substances for use by man, animals and plants.

(2) No, but various state departments and interested organizations are at the moment, preparing a code of ethics for the humane treatment of animals used in research, training, diagnosis and testing of substances in the Republic. Before this code is finalised, it will be discussed with all interested parties including the Committee of University Principals, with a view to the implementation thereof. Control is being exercised over the ill-treatment of animals through the Animal Pro-

	1985	1986	1987
(a) White	261	205	209
(b) Coloured	0	2	7
(c) Indian	0	0	0
(d) Black	71	74	114

NATAL

Yes.

	1985	1986	1987
(a) White	424	404	440
(b) Coloured	29	33	23
(c) Indian	35	59	56
(d) Black	172	143	102

CAPE PROVINCE

Yes.

	1985	1986	1987
(a) White	559	587	567
(b) Coloured	175	203	173
(c) Indian	3	3	10
(d) Black	96	101	121

TRANSVAAL

Yes.

	1985	1986	1987
(a) White	1 055	943	858
(b) Coloured and Indian	51	32	29
(c) Indian			
(d) Black	276	308	283

Zimbabwe/Zambia/Zaire: traffic tonnage handled

934. Mr C J DERBY-LEWIS asked the Minister of Transport Affairs:

What was the traffic tonnage handled by South African harbours for (a) Zimbabwe, (b) Zambia and (c) Zaire in 1980, 1983, 1985 and 1987, respectively?

# Recruiting agent warns hospitals as crisis mounts

By Toni Younghusband  
Medical Reporter

Nurses' salaries and overtime benefits will have to improve dramatically if South African hospitals want to keep their staff, says an American recruitment agent.

Mrs Pam Faulkner, who is in South Africa to recruit nurses for American hospitals, says nurses are professional people who perform a vital role in society, and they deserve adequate compensation.

The rate of resignations by nursing sisters at Johannesburg Hospital, as against new appointments, has been high in recent months.

The nursing sisters say staff shortages at the hospital are forcing those still employed there to work many hours overtime and to do cleaning and administrative work.

"We are exhausted from working overtime but have to fulfil other duties because there is no staff," says one nurse.

She says she fears the level of care for patients will drop because of this shortage.

Mrs Faulkner says American hospitals experiencing staff shortages are responding by offering higher salaries and excellent overtime benefits.

Benefits include time-and-a-half for overtime, more for afternoons, weekends and night shifts, and special bonus payments for those who volunteer to work on their weekends off.

# More and more SA nurses off to US

Star 11/5/88

(95)

South Africans opting for the American offer would be flown to the United States by the hospital, would be offered accommodation at reasonable rental and would be looked after by Mrs Faulkner.

"I will be there if they have any complaints or difficulties and I will inspect their accommodation to make sure they are well looked after," she says.

One of the major reasons for the shortage in the US is that women are no longer going into nursing and men never have.

Mrs Faulkner says diploma courses are now no longer operative and,

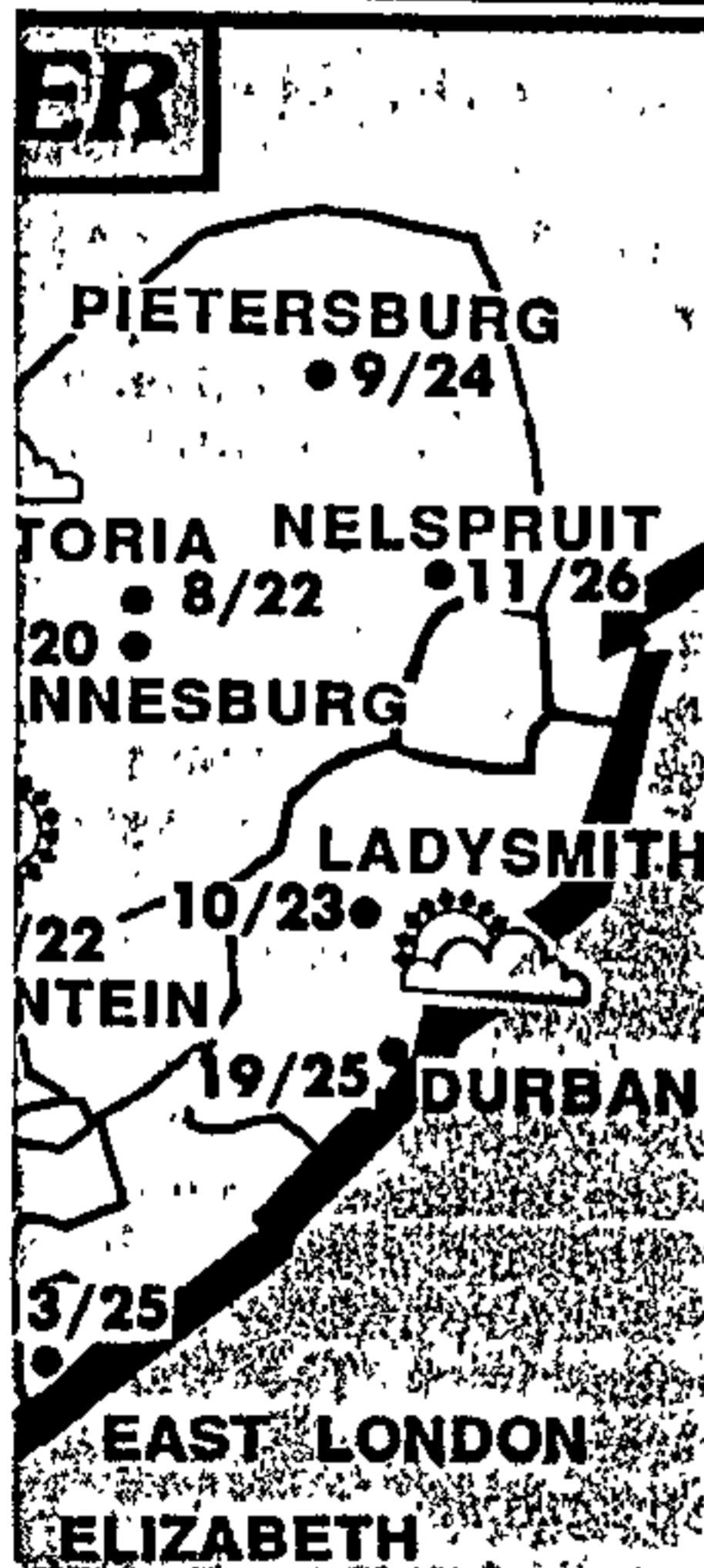
instead, nurses are required to complete a costly university degree.

Mrs Faulkner and her South African partner, Mrs Myra Landau, have launched an extensive recruitment campaign in South Africa.

More than 160 nurses have responded since they launched their campaign just more than a month ago.

Mrs Landau believes the recruitment drive will have a positive effect on nursing in South Africa.

"I believe that if young people see that they have an opportunity to go overseas, many more will go into nursing."



problem with competition on any of its domestic routes, in-

Mrs Botha said: "I happen to be in Johannesburg, South Africa, and I have seven minibus."

Star 18/5/88  
95

# Patients face 3-year wait for operations

By Toni Younghusband,  
Medical Reporter

A shortage of nursing staff and surgeons at the Johannesburg Hospital had resulted in some patients having to wait three years for an operation, the hospital's superintendent, Dr Reg Broekmann, confirmed yesterday.

Reacting to criticism by surgeons working at the hospital that operating time had been cut back considerably, Dr Broekmann said waiting lists existed in most disciplines. He said the

worst off was the ophthalmology department which had a waiting list of up to three years.

This was due not only to a shortage of nursing staff, but also to the fact that Johannesburg was a referral hospital and was experiencing a shortage of surgeons.

Surgeons interviewed by The Star said theatres were shared by different medical disciplines, each being allocated a certain amount of operating time due to the shortage of theatre nurses.

"The delays are serious

— some patients with incapacitating joints have to wait six to nine months for a knee replacement. The situation is critical," one surgeon said.

He said the situation would not be resolved until salaries were increased. "Any nurse moving into the private sector could get R500 a month more," he said.

Since September last year, 26 theatre nurses had resigned. The theatre nurse establishment had dropped from 59 to 37 but, said Dr Broekmann,

# Star reader gives 50 mattresses

Star 14/5/88 By Carina le Grange

A reader of The Star has donated 19 mattresses to Baragwanath's department of medicine because she could not bear the thought of ill people sleeping on the floor with nothing but a blanket beneath them.

two wards of the department, 144 people had to lie on the floor, 53 of them without mattresses.

The reader did not wish to be named. Her gift of 19 was matched by another 19 bought by doctors of the department. Doctors have bought 50 mattresses, five toilet seats and 50 cushions for wooden benches this year.

# Bara doctors upset by the 'nurse-drain'

Star 16/5/88 By Carina le Grange

Doctors at Baragwanath Hospital are upset by the "nurse-drain" of highly qualified sisters going to the Johannesburg Hospital.

"The Johannesburg Hospital is experiencing a nurse crisis — but it has 1 932 nurses for less than 1 000 beds used

in the hospital. "At Bara, in only one department, as few as 60 nurses were responsible for more than 800 patients one night last week," the doctors, who asked to remain anonymous, said.

"Johannesburg Hospital has less than 1 000 beds used, but has almost 2 000 nurses...there has always been a much higher patient/nurse ratio than at the white hospital.

"Despite this, the best qualified people — such as the intensive care sisters — are siphoned off to go and work at the Johannesburg Hospital. This leaves Bara in an

even worse position.

"Black nurses do not normally resign as easily as white ones since their employment opportunities are lower, but they work under the terrible conditions of overcrowding, battling to do all that is required of them.

"One cannot blame them if they grab the chance of working elsewhere where the workload is not as heavy," one of the doctors said.

He said it was ironical that the Johannesburg Hospital should speak of a crisis — reported in The Star last week — when they had fewer patients in the whole hospital than in only one department at Baragwanath Hospital.

**ER**

PIETERSBURG • 6/25

ETORIA NELSPRUIT

8/25 • 8/26

5/25 • 8/26

JANNESBURG

US hospitals have been recruiting nurses in South Africa, which can ill afford to lose them. The American problem is examined by The Economist.

Star 24/578

# American SOS

95

## for more nurses

America has almost 2 million registered (fully qualified) nurses, about 14 percent more than in 1980 and 35 percent more than in 1977. Hardly, it seems, a shortage. Yet hospitals are frantic.

Their cries are directed, in the first instance, at the Immigration and Naturalisation Service (INS) for its decision early in April to send home about 5 000 foreign nurses. All had entered the United States legally. They came in answer to appeals from hospitals all over the country, especially in New York and California. The nurses' visas entitled them to stay for five years and, for about 1 000, their right to stay is about to run out.

The turn of the other 4 000 will come in due course unless hospital administrators can persuade the

INS or Congress to change the law.

They will argue that the nurses reach their point of greatest usefulness at the end of five years and that, given the acute and increasing scarcity of qualified nurses, it may take months to fill even one post.

The reply may be that more American nurses would come forward if hospitals paid them more, gave them better conditions, more flexible hours and prospects of promotion.

All these changes would help to solve the problem in specific places, such as New York and New Jersey. In New York City the hospitals are struggling to cope with the Aids epidemic (the number of patients at present in hospital is expected to double by 1991), with a rising number of extremely sick babies, and more drug-related and psychiatric illnesses.

Most of the Aids patients are in private hospitals, but they are beginning to spill over into the hard-pressed municipal hospitals, which lost 13 000 beds during the past decade as part of a drive to contain costs. They are in no position to push up the pay scales for nurses. Instead, New York hospitals are busy recruiting more foreign nurses.

### PENNY-PINCHING

More generally, the shortage of nurses is attributable to a different kind of increase in demand, one largely prompted by penny-pinching. Hospitals have been under heavy pressure to cut their costs, especially since 1983, when the federal government changed the way it reimburses them for treating elderly patients in the Medicare scheme.

The odd result is that hospitals have been recruiting registered nurses, the most highly paid, as never before. Their reasoning is that they can do both the skilled work for which they were trained and the work of less qualified nurses as well. Moreover, they need less supervision and, in some situations, can also act as a substitute for a (much more highly paid) doctor.

By 1986, according to a survey carried out by the American Hospital Association, hospitals employed almost 33 000 fewer licensed practical nurses than they had in 1984 and 38 000 more registered nurses.

This shift may save money, but it wastes the skills of fully qualified nurses and may even put some off nursing. It also accounts for the rush to hire agency nurses at costs far above the wages paid to regular staff. Now that women have a much wider range of career choices, fewer and fewer are enrolling in schools of nursing. So the problem is likely to get worse.

## Baragwanath Star 3/6/88 unmanageable, claim nurses 95

AP Pretoria Correspondent

Quality care in Baragwanath Hospital is not possible while overcrowding is allowed to continue, says the South African Nursing Association.

"Overcrowding made quality nursing care impossible even though diagnosis and medical treatment may have been good," the association says in the latest edition of *Nursing News*.

The association said it believed the proper planning and use of health care centres and smaller hospitals would relieve the patient load at Baragwanath, while adjustments to the staff establishment would create a manageable workload.

### REVITALISATION

It stressed that the revitalisation of nursing management was needed.

"Most important is good general personnel management in order to remove daily irritations which give rise to dissatisfaction and frustration.

"If the Government wants to provide academic hospitals for the training of medical and other health personnel, adequate provision must be made for proper facilities and proper staffing as well as proper management."

According to the association, the hospital has been allowed to grow to an unmanageable size with its 2 750 beds and 4 045 nurses.

Added to this, economic pressure has forced the authorities to keep nursing posts vacant and this results in the severe overburdening of nursing staff, the association says.

# Nurses to get pay offer for overtime

Star 9/6/88 95

By Toni Younghusband  
Medical Reporter

Johannesburg Hospital authorities will apparently offer overtime pay to theatre nurses at a meeting with staff today.

Sources told The Star theatre sisters would be offered R7 an hour overtime pay. Hospital authorities were not available for comment at the time of going to Press.

This move, which appears to be an attempt by authorities to curb the rapid rate of nursing staff resignations at the hospital, has been dismissed as "ludicrous" by the sisters.

Many feel R7 is "hopelessly inadequate" as the average overtime remuneration at private hospitals is R15 an hour.

One sister, who is also a qualified

midwife and theatre sister, takes home little more than R900 a month after five years of study and additional working experience.

She pointed out that theatre sisters at the Johannesburg Hospital were also not offered a "special unit" allowance which most other hospitals gave.

The staff shortage crisis which has plagued the Johannesburg Hospital since it opened in 1979 is escalating.

One theatre sister said nurses were forced to "moonlight" at private hospitals after hours.

However, often this "moonlighting" had to be abandoned when nurses were forced to work overtime.

"Sometimes the theatres are so fully booked that we work 12 to 14 hours at one stretch and don't get home until late at night. But we get nothing for it," she said.

# Proposal for a lottery to boost health

By Toni Younghusband  
Medical Reporter

95  
A lottery should be established to finance South Africa's struggling medical services, suggests a nursing recruitment agent.

Mrs Myra Landau, South African representative of an American nursing recruitment agency, says it is time the public called for a lottery to finance the hospitals, nurses' salaries and those members of the public who can "no longer afford to get sick".

South Africa's medical services are in dire financial straits. Hundreds of nurses are leaving provincial hospitals for better-paid positions in private clinics, medical-aid patients are being turned away from provincial hospitals and theatre time has been cut as hospitals battle to cope on their limited budgets, she says.

## CONDONED

"As long as horse-racing is condoned we have every right to ask the public's opinion on financing this very worthy cause. There is a hospital crisis and this is a solution," says Mrs Landau.

She points out that it is all very well for churches to object to lotteries but until they can produce the money for medical services, they should "keep quiet".

Mrs Landau says she has been inundated with applications from nurses wishing to work in the US, where salaries are virtually double those offered here.



95

Own Correspondent

PORT ELIZABETH. — A prominent Port Elizabeth doctor has called for the urgent appointment of a commission of inquiry by the cabinet to investigate the shortage of nurses in provincial hospitals.

The doctor made the call in a letter in the latest edition of the South African Medical Journal.

The situation had been deteriorating gradually for the past few years and had now assumed "disastrous proportions", he said.

The doctor claimed that a large number of urgently needed wards in many provincial hospitals had been closed because of lack of staff.

The great majority of the South African population could not afford the large-scale privatization of medical services and he called on the government to reconsider the issue.

A reliable source told our correspondent yesterday that on

# Cabinet probe call on nurse shortage

most days there were about 130 empty beds in the Port Elizabeth provincial hospital because of the staff shortage.

"The beds are empty because there are no staff to look after the patients, not because there are not enough patients. People sometimes have to be turned away and sent to private hospitals," he said.

At the last count there had been just over 50 posts available for senior professional nurses (formerly called sisters) at the hospital.

"The positions have been advertised but there are no qualified nurses to fill them."

There were several reasons for the countrywide shortage of qualified staff.

"Some of the reasons are the expansion of private hospitals, working conditions and salaries," he said.

Last week a nurse at the provincial hospital said that, because of the staff shortage, nurses with little training — sometimes only a month — had to look after wards containing 30 or more patients.

In some sections, all the staff had left to go to private hospitals.

The problem was critical in the children's wards and at the Sanford maternity clinic, she said.

# Sanctions or not, US still <sup>ster 25/6/88</sup> wants one top SA product <sup>95</sup>

**T**HERE'S one home-grown South African product Americans seem pretty keen on importing right now, never mind sanctions.

I'm not talking about the one million-ton wheat surplus farmers are expecting, nor am I referring to minerals, precious metals nor yet enriched uranium.

The commodity that's being keenly negotiated for is something of far more value to all of us, no matter what colour we are, no matter how old, no matter how rich or poor.

This asset is not unique to South Africa although it's produced and refined here, but we have a reputation for the quality of our product.

In fact, up till now, we've hardly credited its existence, and we tend to take it very much for granted.

But within the next few months, if we're not careful, it's going to quietly slip away under our noses.

And we're not going to notice until we need it most — in fact, this loss will hit us when we're lying down.

It's our nurses the Yanks are after, you see.

This week it was reported that at least 240 nurses have responded to a US recruitment drive in this country. One is already working in New York, four others are about to leave, we are told, and 33 are ready to write the US Foreign Nurses examination. That's enough to staff a small hospital.

Why do they want to leave, apart from the lure of travel abroad and the chance of more experience?

Well, says the report, "benefits offered by US hospitals include time-

**BETWEEN  
THE LINES**  
**Margaret de  
Paravicini**



and-a-half for overtime, more for afternoons, weekends and night shifts, and bonus payments for volunteers to work on their weekends off".

It does not offer a comparison with nursing conditions in South Africa, but we can draw our own conclusions.

There's been a nursing drain for as long as I can remember, not of raw recruits unable to cope, but of qualified staff who've opted for commerce and other fields. One does not change careers in mid-stride without some soul-searching. It takes seven years plus to produce a doctor, but a lifetime of dedication goes into a fine nurse.

I've worked with several ex-nurses. Says one, who's now a magazine layout artist: "I really loved nursing and I miss it terribly, but I couldn't cope with continuous 12-hour shifts. I was so tired, I found I was making mistakes. It wasn't fair to the patients."

So they leave, graduating to better conditions. And can we blame them?

To the enticing Americans, a good nurse from the land of Chris Barnard and the Bara twins can only gratefully echo the words of Florence Nightingale when she was handed the insignia of the Order of Merit on her deathbed: "Too kind — too kind."

**THE MINISTER OF NATIONAL EDUCATION:**

No. The Department of National Education does, however, keep statistics on first-time entering undergraduate students. A first-time entering undergraduate student is defined as a student who has not previously been registered at any post-secondary education institution.

Headcount of first-time entering undergraduate students by population group enrolled at universities in the RSA: 1983 to 1986

University	POPULATION GROUP				
	(a) White		(b) Coloured		
	1983	1984	1985	1986	1986
Cape Town	1 877	1 638	1 584	1 657	199
Durban-Westville		32	26	42	60
Medunsa			0	0	0
Natal	1 988	1 858	1 871	1 723	46
North			0	4	0
Orange Free State	1 525	1 570	1 554	1 542	22
Port Elizabeth	663	791	824	915	34
Potchefstroom Univ for CHE	1 383	1 453	1 603	1 465	4
Pretoria	2 987	3 012	3 561	3 727	2
Rand Afrikaanse Univ.	1 313	1 334	1 430	1 474	52
Rhodes Univ.	642	611	631	609	41
Unisa		4 915	6 151	5 402	375
Stellenbosch	2 220	2 353	2 480	2 479	110
Western Cape		3	10	23	54
Witwatersrand	2 920	2 843	2 696	3 021	13
Zululand			1	0	0
Vista			4	0	51

**POPULATION GROUP**

University	(c) Indian					(d) Black				
	1983	1984	1985	1986	1986	1983	1984	1985	1986	1986
Cape Town	58	44	47	54	75	52	59	58	75	267
Durban-Westville		1 866	1 660	1 661	267	33	33	60	173	150
Medunsa			0	11	150	94	156	227	150	1293
Natal	206	258	349	350	1 293					
North			1	0	2					
Orange Free State	0	0	0	0	4					
Port Elizabeth	3	8	4	3	1					
Potchefstroom Univ for CHE	0	0	0	1	9					
Pretoria	1	0	0	0	1					
Rand Afrikaanse Univ.	0	0	0	0	1					
Rhodes Univ.	27	38	45	48	97					
Unisa		636	1 098	936	2 892					
Stellenbosch	0	0	0	0	0					
Western Cape		70	105	73	159					
Witwatersrand		248	213	289	351					
Zululand	196		0	1	559					
Vista			2	2	6 614					

HOUSE OF ASSEMBLY

**Certain person: national service**

1274. Mr C J DERBY-LEWIS asked the Minister of Defence:

- (1) Whether a certain person, whose name has been furnished to the South African Defence Force for the purpose of the Minister's reply, has undergone any form of national service training; if so, (a) for what period and (b) what rank did he attain;
- (2) whether he will disclose the name of this person; if not, why not; if so, what is his name?

**The MINISTER OF DEFENCE:**

- (1) The person served as an officer from 1 November 1949 until 31 March 1952 and achieved the rank of lieutenant. Furthermore, he was closely associated with Project BUTTERMILK and contributed largely to the successful implementation thereof.
- (2) Yes, the name supplied to the SA Defence Force by the honourable member.

**Security legislation**

1277 Mr C J DERBY-LEWIS asked the Minister of Law and Order:

- (a) What total amount was spent by the South African Police on assistance granted to each specified category of dependants of persons detained in terms of security legislation in each of the latest specified five financial years for which figures are available and (b) how were these grants assessed?

**The MINISTER OF LAW AND ORDER:**

- (a) and (b) No provision is made for financial assistance to dependants of persons who are detained in terms of the Internal Security Act, 1982 (Act 74 of 1982) and the Security Emergency regulations.

**SAP: border duty**

1301. Mr C J DERBY-LEWIS asked the Minister of Law and Order:

- Whether all members of the South African Police, regardless of race, are required to perform border duty; if not, (a) why not and (b) what exceptions are made in this regard?

**The MINISTER OF LAW AND ORDER:**

Yes  
(a) and (b) Fall away

**Nursing trainees: tuition fees**

1302 Mr C J DERBY-LEWIS asked the Minister of National Health and Population Development:

- (1) Whether nurses are at any time during their training called upon to pay tuition fees in respect of such training; if so, what are the relevant details;
- (2) whether this tuition is provided for in the salary package for nursing trainees; if not, why not; if so, in what manner?

**The MINISTER OF NATIONAL HEALTH AND POPULATION DEVELOPMENT:**

- (1) Yes, but not by all authorities. Nursing students who follow degree courses pay the fees required by the relevant university as do all other university students throughout the RSA. Nursing students who follow diploma courses at Colleges of Nursing are paying the following fees required by the various Provincial Administrations:  
Natal Provincial Administration: R300,00 (per annum)  
Cape Provincial Administration: R7,50 (per month)  
Transvaal Provincial Administration: no tuition fees  
Provincial Administration OFS: no tuition fees
- (2) No, nursing students receive a salary.

**Trainee nurses: board and lodging fees**

1304. Mr C J DERBY-LEWIS asked the Minister of National Health and Population Development:

- Whether any trainee nurses were subjected to an increase in board and lodging fees from R70 to R177 per month within any twelve-month period over the past five years; if so, (a) within what twelve-month period and (b) why?

**The MINISTER OF NATIONAL HEALTH AND POPULATION DEVELOPMENT:**

- No.  
(a) and (b) Falls away.

HOUSE OF ASSEMBLY

## Langa/Nyanga/Guguletu: housing

1210. Mr K M ANDREW asked the Minister of Constitutional Development and Planning:

- (a) What total number of persons can be accommodated in the (i) houses and (ii) single quarters presently available in (aa) Langa, (bb) Nyanga and (cc) Guguletu without there being undesirable overcrowding and (b) in respect of what date is this information furnished?

## The MINISTER OF CONSTITUTIONAL DEVELOPMENT AND PLANNING:

This matter vests in the Administrator of the Cape Province and he furnished the following information:

(a)	(i)	(ii)
(aa)	11 852	9 179
(bb)	7 420	8 116
(cc)	31 560	9 277

(b) May 1988

## Cape Peninsula: Black population

1212. Mr K M ANDREW asked the Minister of Constitutional Development and Planning:

- (1) What is the latest estimate of the (a) *de facto* and (b) *de jure* Black population of (i) Old Crossroads and (ii) each specified other township in the Cape Peninsula in respect of (aa) adult males and females, respectively, and (bb) children;
- (2) in respect of what date is this information furnished?

## The MINISTER OF CONSTITUTIONAL DEVELOPMENT AND PLANNING:

The honourable member is referred to my reply to Question 159 put by Mr P G Soal.

## Fire-arms

1216. Mr K M ANDREW asked the Minister of Constitutional Development and Planning:

- (1) Whether, with reference to his reply to Question No 332 on 7 October 1987, he will now furnish information on whether any bodies or organizations falling under the jurisdiction of the (a) Cape, (b) Orange Free State, (c) Transvaal and (d) Natal Provincial Administration have been authorized to issue fire-arms; if not, why not; if so, (i) what bodies or organi-

zations, (ii) for what purposes, (iii) subject to what conditions, (iv) what categories of fire-arms are involved, (v) how many fire-arms of each category had been issued by these bodies or organizations as at the latest specified date for which information is available and (vi) to whom were these fire-arms issued;

- (2) in respect of the above-mentioned fire-arms, (a) how many were (i) lost, (ii) stolen and (iii) recovered during the latest specified 12-month period for which information is available and (b) (i) on how many occasions is it estimated were they used subsequent to being so lost or stolen and (ii) how many persons were (aa) injured, (bb) seriously injured and (cc) killed as a result?

## The MINISTER OF CONSTITUTIONAL DEVELOPMENT AND PLANNING:

I do not regard it in the interest of either the country or the public to furnish this information.

## Aliens illegally in the Republic

1217. Mr K M ANDREW asked the Minister of Justice:

- (a) How many aliens were (i) charged with and (ii) convicted of being in the Republic illegally in 1987 and (b) in terms of what statutory provisions were they (i) charged and (ii) convicted?

## The MINISTER OF JUSTICE:

The information is not readily available in the Department or at the Central Statistical Services. The Honourable Member's attention is also drawn to my reply to Question No 35 of 10 March 1986 (Hansard Col. 399 of 1986).

## Black nurses: Western Cape

1219. Mr K M ANDREW asked the Minister of National Health and Population Development:

- (1) Whether there are facilities available for the training of Black nurses in the Western Cape; if not, (a) why not, (b) how many Black nurses are employed by the State in the Western Cape, (c) where are the nearest training facilities situated and (d) what plans are there to provide such training facilities in the Western Cape; if so, (i) what specified training facilities, (ii)

where are they situated, (iii) when were these training facilities opened, (iv) what courses are offered and (v) how many students (aa) applied for admission, and (bb) were admitted, to each specified institution in 1988;

- (2) whether there is accommodation available for Black student nurses at training facilities in the Western Cape; if not, (a) why not, (b) where are the nearest accommodation facilities situated and (c) what plans are there to provide accommodation facilities; if so, (i) what accommodation, (ii) where is it situated, (iii) since when has it been available and (iv) how many nurses can be accommodated?

## The MINISTER OF NATIONAL HEALTH AND POPULATION DEVELOPMENT:

In view of the fact that the status of the different existing facilities and student numbers has not changed since my reply to Question 639 of 8 October 1987, I am not at this stage, in a position to furnish the Honourable Member with meaningful new statistics in this regard.

However, with regard to question (1)(d) and (2)(c) the following additional information is supplied.

- (1) (d) (i) In addition to facilities currently available the planning of a Nursing College on the proposed "Cape Flats" Hospital premises is under way,
- (ii) on premises still to be finalised on the "Cape Flats",
- (iii) still in the planning phase,
- (iv) to commence with the four-year Diploma in Nursing Science and Midwifery, and as the need arises, post registration courses,
- (v) (aa) and (bb) fall away;
- (2) (c) (i) nurses residence,
- (ii) on the premises of the proposed "Cape Flats" Hospital,
- (iii) project still in the planning phase,
- (iv) 1 000 nurses

Langa/Nyanga/Guguletu: family housing units

1225. Mr K M ANDREW asked the Minister of Constitutional Development and Planning:

- (1) How many new family housing units were provided in (a) Langa, (b) Nyanga and (c) Guguletu in 1987;
- (2) how many of these units in each township were converted from hostel units?

## The MINISTER OF CONSTITUTIONAL DEVELOPMENT AND PLANNING:

This matter vests in the Administrator of the Cape Province and he furnished the following information:

- (1) (a) 51
- (b) Nil
- (c) 295

(2) None.

## State President: official residences

1227. Mr C J DERBY-LEWIS asked the Minister of Public Works and Land Affairs:

- (1) (a) How many official residences are available for use by the State President, (b) where is each situated and (c) what was the cost of maintaining them during the latest specified period of 12 months for which figures are available;
- (2) (a) how many other official residences are in use at present and (b) (i) by whom and (ii) for what purpose are they being used?

## The MINISTER OF PUBLIC WORKS AND LAND AFFAIRS:

- (1) (a) Two
- (b) At Pretoria and Cape Town
- (c) Separate figures are not kept in respect of maintenance costs for official residences since those costs form part of the total amount which the Department spends in maintaining state buildings.

- (2) (a) 175
- (b) (i) Ministers, Deputy Ministers, certain office bearers of Parliament and the Presidents' Council, Administrator-General of South West Africa, Commissioner-Generals, Heads of RSA

# Forty arrested after dispute

DURBAN. — About 40 the scene and the arrests of nurses and workers at Kingsleigh Lodge Con- valaescent Home here were dismissed and 24 arrested for trespassing after a dispute over working conditions.

Workers said they were all fired when they in- dress them. Management was only prepared to see them individually.

Police then arrived on the scene and the arrests confirmed by police took place.

A nurse said trouble started when the owner of the home, Mr J Peel, returned from abroad last month. Peel reversed all the progress made during his three-year absence. Several residents left the institution because of the sudden drop in standards. Nurses had their days off reduced from 14 to four a month, while half of their leave was to be unpaid.

Anyone found asleep while on night duty was dismissed, "although we only have a 15-minute break for the whole night shift," the nurse claimed.

The previous manager preferred to deal with their union and held monthly staff meetings, but on their return Peel banned all union activities.

The entire cleaning staff was fired, apparently for union activities, and replaced by a cleaning service company.

The rest of the staff was told they had been re-employed and had to sign a new contract prohibiting strikes.

Management repeatedly refused to comment.

Those arrested have an option of either paying a R20 admission of guilt fine or appearing in the magistrate's court on July 29. — **CONCORD NEWS**

# Battlelines drawn

Two Cape Town hotels have asked the Supreme Court to restrain 100 former employees from dis-

The 100 workers from the Townhouse and Vineyard hotels were fired after observing a three-day

## Threat to act against nurses

A YEAR after Natal Settlers Home nurses took part in a one-day strike in protest against low wages, the South African Nursing Council has brought charges of improper or disgraceful conduct against them.

The nurses will appear before a disciplinary committee on July 4.

The action has caused concern among nurses, who fear they will be struck off the roll. Many have sought legal advice.

About 150 nurses and workers went on strike on July 28 last year in support of higher wages and better living conditions.

Before the work stoppage, the lowest-paid qualified nurse earned R177 and a worker R122. Management and the union representing the workers later agreed on a minimum wage of R235, a new grading system and rationalised working hours.

Unlike public sector nurses, those in the private sector are covered by the Labour Relations Act. This allows them to join unions, go on strike, and negotiate wages and working conditions.

But the Nursing Council does not allow strikes. — **CONCORD NEWS**

## 900 Numsa

## Dismissals slammed

## 3 000 nurses on strike in Transkei

UMTATA — More than 3 000 nurses from the Umtata and Chest Hospital in Transkei have gone on strike.

Since 6.30 am they have been assembling outside the hospital gates while security police are maintaining a presence in police vehicles.

Last Thursday pamphlets were distributed outside the hospital gates calling for more wages and that the "Big 5", apparently a reference to the military council, should address them.

Only labourers were seen moving into the hospital this morning while patients were left unattended. — Sapa.

Star  
10/78

CPM-7015 23/1/88  
95  
**Nursing  
college for  
Cape Flats**

**Political Staff**

A NURSING college for blacks is to be opened on the site of a proposed Cape Flats hospital, the Minister of National Health and Population Development, Dr Willie van Niekerk, said yesterday.

The site of the hospital and college, which were still in the planning phase, had not yet been finalized, he said in reply to a question from Mr Ken Andrew (PFP, Gardens).

The college would commence with a four-year diploma in nursing science and midwifery and, as the need arose, post-registration courses would be included.

# NURSE SHORTAGE UPSSETS 'CARE'

by KAREN STANDER  
Weekend Argus Reporter

PATIENT care in provincial hospitals is suffering as nurses are lured away to private institutions and other professions by the promise of higher salaries and better working conditions.

While hundreds of potential nurses are turned down every year because they cannot be accommodated in training programmes, provincial hospitals are unable to fill their vacant posts because of a shortage of nurses.

In an interview with Weekend Argus this week, senior nurses at Groote Schuur Hospital talked of the excitement and challenge of the "caring profession".

But why are nurses in scarce supply if the work is so rewarding?

Mrs Anna-Marie van der Walt, chief nursing service manager (human resources, management and education), said provincial hospitals trained enough nurses for their own needs, but the number was insufficient to staff the mushrooming number of private hospitals.

Except for a few private hospitals in Natal, provincial hospitals are the only institutions which undertake basic training.

"We don't have nurses to fill vacant posts because not enough are being trained to feed the provincial services as well as the private sector."

## "Not enough funds"

"With the expansion of further hospital beds within the province, we haven't got enough posts. But if more posts were created tomorrow we wouldn't have enough applicants to fill them."

"The private sector will need to start training programmes or at least put funding into our programmes. We have the facilities to increase the

number of trainees, but not enough funds."

Colleague Mrs Pat Chaffey, chief nursing service manager (clinical), said Groote Schuur was not "within spitting distance" of the ideal ratio of nurse to patient.

"On a day to day basis, if many people are off sick and we feel we haven't enough staff, we have to ask the doctors to limit what they would be doing."

"We decide what is essential to be done for each patient."

Mrs Chaffey said provincial hospital and private clinics were in competition for staff.

"The number of private hospitals has increased phenomenally over the last few years. Most of these hospitals are situated in the suburbs."

"The private sector has always had short-term drawcards, but they don't offer long-term benefits like housing subsidies."

## Financial rewards

Many nurses leave nursing when the financial rewards offered by other professions beckon.

"It is a social phenomenon. Years ago when I trained, teaching and nursing were the professions women went into. But since then country has changed, industry has changed, the whole social structure is changing."

"Now with black nurses we are finding the same thing. Nursing and teaching are the careers with status, but increasingly banks, shops and other professions will take precedence."

"But there are always some women who want to give of themselves. It is the people with this type of commitment who come into nursing."

"A big drawback today for those who are financially less well-off is that students get paid while they are being taught."

"Nurses are not so badly off compared to other professions these days. We have parity throughout the profession, so salaries are equal."

Mrs Van der Walt said salaries had been improved in 1982 and again in 1986.

"Salaries are revised every four years. But like all other government employees, if we don't get an annual adjustment we fall so far behind commerce that we can never catch up. This is what is happening now."

"In 1986 it looked good but since then it has slipped back again. The starting salary is less than for someone with a university degree, less than for teachers."

Mrs Van der Walt said salaries in private hospitals were roughly the same as in provincial hospitals.

"In some instances they might be slightly better, but mostly they are the same. But staff do save money by not having to travel because the hospitals are situated nearer their homes."

"There is probably also less stress, so working conditions are better."

Mrs Chaffey said the one thing private hospitals could not match was the academic environment.

"We've got the university on our doorstep and we cover all specialties from before birth to death in a lot of research the doctors and nurses are pushing back frontiers. It is very exciting to be involved."

One finds that staff who go to the private sector get bored very quickly, particularly if they've grown up in an environment like this."



Some of Groote Schuur's senior specialist nurses who talked about their profession are, back from left, Miss Sharlata Scello (contraception advisor), Mrs Maureen Ross (medical), Mrs Gisela Gustafson (infection control), Miss Nabwiyah Jones (surgical) and, front from left, Mrs Terry Babs (nursing informatics), Miss Lulama Gengwa (oncology), Mrs Meg Camm (personal development) and Miss Nomandla Xaxa (theatre).



Ward nurses busy at work at a nurses' station in Groote Schuur's new hospital are, from left, student nurse Angela McDaniel, staff nurse Amelia Petersen and senior sister Mercia Collop.



-g... things.

# Fund to be set up to help tragic families

*Sowetan 21/11/87*

THE Professional Society of Black Occupational Health Nurses (Tvl) have requested the *Sowetan* to set a fund to help families of victims of Tuesday's massacre in Pretoria.

A spokesman for the society, Mrs Stella Mohlamme, said at the weekend that members of PSBCHN had contributed an amount of

**SOWETAN REPORTER**

R378.

"We had a meeting at which we contributed R378 from our pockets to help the families of the six victims of the Pretoria shooting.

We believe this is a gesture to be shown by each and everyone of us in this country.

"We also decided that

the *Sowetan*, as the main paper for our people would have to set up a fund so that everybody can contribute to it," said Mrs Mohlamme.

A white man who did not identify himself also phoned the *Sowetan's* offices on Friday and said he had "a couple hundred rand" which he wanted to donate for the families.

# Medics attack plan to drop nurse category

Medical Reporter

AR645 23/11/88 (95)

THE "desperate" shortage of nursing personnel would be greatly aggravated by the decision to scrap an entire category of nurses, the superintendent of Groote Schuur Hospital and a senior medical academic have said.

Groote Schuur superintendent Dr Jocelyn Kane-Berman and Professor G R Keeton, of the department of medicine at UCT, criticised the South African Nursing Council's move to abolish the enrolled-nurse training course.

Writing in the South African Medical Journal, they called on "all those concerned about the care of patients" to lobby the council.

The enrolled nurse formed the middle layer of the old training system, between professional and assistant nurses.

## TWO CATEGORIES

Enrolled nurses needed a Standard 8 certificate and did a two-year training course. Matriculants could become professional nurses after three years.

Assistant nurses, with Standard 6, were trained in service.

In future there will be only two categories — professional nurses with four years training and assistant nurses with one year (Standard 8 entry). A bridging course is planned for enrolled nurses to upgrade their training to professional nurses.

The doctors said: "The health services cannot function without the enrolled nurse. There are many nursing functions which do not justify or require a professional nurse's attention, yet require more knowledge and training than the new assistant nurses will possess."

## Couple die in divorce

CAPE TIMES  
7/12/88

# Kane-Berman: Questions answered

Staff Reporter

THE provincial chief executive in charge of hospitals, Dr George Watermeyer, says that Dr Jocelyn Kane-Berman was a good prospect for promotion before she was transferred from her post as chief supervisor at Grootte Schuur Hospital.

Dr Watermeyer yesterday answered a list of questions put to him by the Cape Times concerning Dr Kane-Berman's sudden move to the post of Western Cape Regional superintendent.

She was transferred after her light-hearted comments on a probable future cabinet had been published in the Weekend Argus.

A storm of protest has burst since Dr Kane-Berman's transfer, with official medical bodies labelling the move as "unjust" and an "outrage".

Dr Watermeyer would not divulge when a merit assessment had been done on Dr Kane-Berman, but said that she had been found to be a good prospect for promotion.

He also said she had been given a hearing before she was transferred and that the new post was not a demotion. Her grading and salary are not affected by the move.

Early yesterday the MEC in charge of hospitals, Mr Andre van Wyk, admitted that Dr Kane-Berman had been "punished" for her comments to the press.

In reference to a meeting with UCT representatives before and after Dr Kane-Berman's transfer, he told a reporter that "all (at the meeting) accepted that what Dr Kane-Berman said was wrong for a civil servant, but they disagreed with the severity of the punishment".

In reply to what other factors played a role in Dr Kane-Berman's transfer — besides the reference to Mr Nelson Mandela as a future prime minister — Dr Watermeyer said that "the Western Cape region has to be re-organised".

"Dr Kane-Berman was the most senior medical supervisor. It was considered advisable that she head up the new region."

The commission for administration, MEC, Provincial Secretary and the executive director, hospital and health services, had made the decision to move Dr Kane-Berman.

According to Dr Watermeyer, her move was discussed by the executive committee.



Dr Kane-Berman



# Ex-councillors demand return to elected body

ARC 45 13/12/88

By KAREN STANDER and VERNON BRENT  
Staff Reporters

FORMER provincial councillors today slammed the "non-accountability" of the provincial executive following the axing of Groote Schuur Hospital chief Dr Jocelyn Kane-Berman.

They demanded the re-introduction of an elected provincial legislature who would be subject to public scrutiny and unable to take decisions "behind closed doors".

Mr Herbie Hersch, leader of the opposition in the last provincial council, said: "Under the old system, through debates and asking questions, one could unearth any can of worms, or simply bring issues to the public's attention through the media.

"Now there is no longer any accountability. The result is that autocrats and bureaucrats can do almost as they like."

## Common roll

He called for the re-introduction of a non-racial provincial council elected on a common voters' roll.

Mr Jan van Eck, MP for Claremont, said an elected body was needed "to put an end to dictatorial actions by little men hiding in Wale Street".

The man responsible for Dr Kane-Berman's dismissal, MEC Mr André van Wyk's decision would "never have survived" had he been subject to open public debate.

Mr van Eck said that since the old system was abolished in 1986, the Administrator, Mr Gene Louw, had merely appointed MECs.

Before, they had had to be elected from the ranks of practising MPCs.

"Now the Provincial Administration falls under the Ministry of Constitutional Development and Planning.

## Sits for week

"The parliamentary standing committee that deals with provincial administration sits for about a week, whereas before the Provincial Council would sit for six weeks.

"Obviously this is highly unsatisfactory and there is no way this could be seen as accountability."

Mr Jan van Gend, MP for Groote Schuur and Dr John Sonnenberg, both former MPCs, supported the calls.

Mr van Gend criticised the way the province was administered, "by men appointed by government".

"The Kane-Berman issue is a clear example of how things can go wrong", he said.