

no longer, we still have the voice of Christ, "Go ye, and make disciples of all nations." It is the voice of one who said, "Ye call me Master and Lord, ye say well, for so I am."

—:0:—

Social Welfare Work For Urban Natives.

Mr. D. G. Shepstone.

Mr. Shepstone declared that it was useless carrying on social welfare work unless family life was fostered so that the family could be dealt with as a unit.

Durban hostels and locations at present provide 8,353 beds and 791 for casuals. 664 houses are available at the various locations. But this is a drop in the ocean when one considers the large numbers of Natives in the city to be provided for.

The Corporation has planned a scheme for Blackhurst Estate and Lamont Location which would provide an additional 1284 houses and 6200 beds. So that ultimately the Corporation would have available 9952 houses, 14553 beds for Native males.

The completion of the scheme had unfortunately been held up at the outbreak of the war due largely to almost the entire engineering staff going on active service.

Mr. Shepstone described the recreational facilities offered and enumerated numerous other services which were being provided.

The registration of court service was valuable as court evidence when unscrupulous employers were being dealt with,

The New Bantu Social Centre at Beatrice Street was built at a cost of £10,000 and would shortly be opened by Colonel Deney's Reitz, Minister of Native Affairs. It will be among the finest in the Union.

The "Prisoners Friend" was started as an adventure of faith. It has been so successful that Government has taken over the financial liabilities connected with the post.

Regarding juvenile delinquency, it is said that every boy up to 19 years of age can now be accommodated in one or the other of the Durban hostels.

An endeavour is being made to establish a home for indigent Native men and women.

Further, the Native Administration Department has agreed to the principle of erecting a home for educated Native women in the centre of the town under the aegis of the Y. W. C. A.

Social Conditions in Johannesburg.

Rev. J. D. Taylor, D.D.

I. The need for social work.

Conditions of life in the Municipal Townships.

- a. Insufficient wages.
- b. Insufficient school facilities.
- c. Need of housing improvement.
- d. Need of recreational facilities.
- e. Need of health provisions.
- f. Need of training social workers.
- g. Need of library facilities.

II. The agencies undertaking social work.

- a. Missions.
- b. Welfare organizations.
- c. Joint council.
- d. Children's aid society.
- e. Boys Club Association.
- f. African Townships Committee.
- g. Native Affairs Committee & Rotary.
- h. Carnegie non-European Library.

III. The Municipality.

- a. Housing schemes.
- b. Sports organizer.
- c. Research worker.
- d. Social worker in townships.
- e. Social welfare department.
- f. Library service.
- g. Municipal clinics.
- h. Milk supply.
- i. Trading facilities.

IV. Types Of Work.

- a. Hostels and residential. Social Settlements.
- b. Housing schemes.
- c. Rehabilitation and relief.
- d. Cultural, Gamma Sigma Club.
- e. Health and welfare. Alexandra Health Centre.
School clinics and Creches under children's aid Society.
Hospitals.

Conclusion.

- a. The large part played by Missions.
- b. The increasingly enlightened policy of municipal Government authorities.
- c. The fine response of Johannesburg to appeals.

Rural Social Work.

Mr. Donald Mtimkulu, M.A.

Not being actively engaged in Rural Social Work I shall speak as a student of Social Conditions in Rural Areas. I shall speak about the work under three heads.

1. The Need for social work.
2. What is being done.
3. What might be done.

I. NEED FOR SOCIAL WORK.

I shall confine my remarks to Christian rural communities because these are the communities I know.

The most powerful disorganizing forces in these communities is industry, or the demands of industry. They draw out a large proportion of the able bodied male population. In some areas in the Cape 55 per cent of the male population has been found to be away in Urban areas. This has affected agriculture. Fields are badly ploughed as a result. Cash crops such as sugar cane is grown where possible. This brings with it the evils of absentee land-ownership. The people depend on the store for provisions and the diet becomes impoverished. Undernourishment, therefore has become a very vital problem.

The dependence on the store has brought with it the problem of debt. The people have to resort to credit. A great part of the rural section is living almost continually in debt,

The absence of men from their homes leaves the children to grow up without proper disciplinary control, which in the Bantu family is generally exercised by the father.

There is a further upset of moral values, brought about by the changed point of view of those who return home after having been in the industrial areas.

Another disrupting cause is Mobility. Almost every large and progressive rural area has taxi service. Town and country have been thus brought closer together than ever before.

II. WHAT IS BEING DONE.

Social Agencies now at work.

Church, Schools, Individual Workers, Youth League, Co-operatives, Markets, Agricultural Demonstrators.

III. WHAT MIGHT BE DONE.

Little is being done in a concerted way to fight the evils which tend to upset the moral values of the Bantu Rural Community. At present the individual efforts at social work are unorganized. Thus there is a certain amount of overlapping and misunderstanding. The church by lending its organizing machinery could do a great deal toward encouraging or even making this desired unity a reality. What is needed is co-operation rather than unified control.

We also need a drive for mass education. We need to educate

people up to their needs.

A great deal of social work fails because things are done for the people instead of with the people.

Teaching in rural schools should be linked up with the land and rural living.

Agricultural Youth Clubs should be organized.

Activities should be organized which would make rural life happier, more interesting and more wholesome for the people in the rural areas.

-----:O:-----

Native Affairs in Parliament.

Senator, The Hon. Dr. Edgar H. Brookes.

The Conference is always pleased to hear Dr. Brookes report on Parliamentary activities regarding Native Affairs, and we appreciate his kindly readiness to share with members of conference his knowledge of these matters.

Dr. Brookes spoke about Senate Procedure and of the outstanding features of the last Session.

Regarding the Workmen's Compensation Act Dr. Brookes remarked that there was not a single change in this Act for the worse but many changes for the better. One provision was the granting of a fortnights leave with pay to Bantu employees annually.

One provision in the Factories Act, however, gave rise to concern, the power given to Government to bring about segregation in factories. In practice this would apply only to certain factories on the Rand, where European females and Native males worked in the same room, quoting Ministerial assurance.

Since the last Conference there had been three wage determinations affecting about 7,000 Natives in Durban, a number of gains being recorded.

The biggest benefit to Natives was the provision of full medical and dental training for the Bantu in Witwatersrand University. The Government had provided five bursaries of £200 each, and is to erect a £20,000 hostel for Bantu Students.

He assured the Conference that if earnest request were made for direct Native representation on Municipal Councils, a suitable recommendation might be made to Government to bring this into effect.

I suggest that when the Commission comes round to any town where members of this society are represented you should include among your recommendations that of representation on Municipal Councils. It is possible, judging the temper of Government from the course of a debate originating during the last session in the Senate, that you may expect such a recommendation from the Commission, as it is related to the whole question of administering

municipal beer halls.

Though I would like to see the Bantu represented in the House of Assembly this is today politically impossible. All we were able to do the last session, therefore, was to increase the power and and prestige of the Senate where the Natives' case is voiced.

Senator Brookes drew attention to the low salaries being paid to Native Ministers of religion, and warned that this profession might be expected to lag dangerously behind other professions unless an improvement was made in this respect.

He also urged the conference to use its influence in the establishment of local Councils for Natives, and advocated an annual Conference lasting three or four days, where the need for greater co-ordination between the tribal authorities and educated groups might be gradually alleviated.

In conclusion Senator Brookes pointed out the duties of Missionaries.

1. Unity, real and effective.
2. Study an interest in these Native Affairs.
3. Prayer in Quiet.
4. Counsel to the People.
5. Influence.
6. Service.

—:O:—

Factors Influencing the Health of Urban and Rural Native Communities.

Dr. F. W. P. Cluver.

The population of Natal, including Zululand, according to the census of 1936 consists of:

Natives,	1,553,629
Europeans,	190,549
Asiatics,	283,661
Coloureds,	18,629

Total, 1,946,468.

The elements comprising the population vary from the highly civilized European to the Zulu living in reserves under primitive conditions which existed prior to the arrival of the White Man in this country. It will be noted, that the Native Zulu comprises more than 75% of the total population of the province.

With the industrial development of Natal the demand for adult male labour has increased enormously. It should be obvious to the Industrialist and Agriculturist that it is to his interest to ensure that the available supply of Native labour is healthy and free from disease.

Some of our leading industries have awakened to the fact that unless steps are taken to safeguard the health of their Native employees they are likely to find themselves seriously short of labour.

In the domain of Public Health the advent of the white man has not been an unmixed blessing. Diseases such as smallpox, leprosy, typhus, and malaria, have been largely reduced to very small proportions as a result of the adoption of modern methods of treatment and prevention. In other respects our civilization has reacted deleteriously on the Natives. Diseases such pulmonary tuberculosis and venereal diseases are very much more prevalent now than in the cradle days of the province.

A malnourished population is a fertile soil for disease and it is not surprising, therefore, that a diseases such as tuberculosis is taking an increasingly heavy toll of the Native population.

Economic pressure is more and more forcing adult male Natives to seek work in our industries. The family remains behind. Rarely is provision made for the family. The result is a high incidence of tuberculosis and venereal disease.

Tuberculosis is the result of malnutrition, bad and overcrowded housing. If these conditions are remedied, tuberculosis, which causes an average of 2 deaths in Durban daily, could be eliminated almost entirely.

Venereal diseases is taking an increasing toll of our Native population. The adult male divorced from his family becomes an easy prey to the increasing number of prostitutes who are invariably infected.

Facilities for treatment include not only the establishment of treatment centres, but the provision at Government expense for the free use of the somewhat costly drugs used in the treatment of venereal diseases and for the making of diagnostic tests. Drugs are issued to provincial and certain mission hospitals as well as to special municipal clinics and to district surgeons throughout the country. The annual provision for the service has increased from £11,000 to £20,000 within the past two years. Every large local authority in the Union now maintains venereal disease clinic.

In the rural areas local authority clinics are few and far between. All district surgeons are supplied with the necessary drugs and are charged with the duty of giving free treatment to all cases of venereal disease which are not in position to pay.

In order to provide still further facilities the Union Health Dept. authorizes district surgeons to pay regular visits to distant points within their respective areas for the purpose of treating cases of venereal disease. The Department frequently authorizes special series of visits to centres where several cases of infective syphilis are known to exist.

The Department does itself provide and subsidise a number of mission hospitals which provide hospital accommodation for such

infective cases as come to light.

The campaign against venereal disease would be greatly assisted in the case of Europeans, by a change of social attitudes, and in the case of Natives, by a change in the attitude of employers. If the employer would encourage his employees to report immediately they suspect they are affected and would afford them every facility for regular treatment, he would reduce the incidence among the employees and among the Natives generally. Syphilis ceases to be infective as soon as it is brought under adequate regular treatment.

For many years the Department has issued leaflets in both official and Native languages setting forth information with regard to venereal diseases and their treatment. As most Natives cannot read, considerable importance attaches to the training and employment of Native Health Assistants, or sanitary aids to carry out verbal propaganda among their own people.

The year under review has witnessed the release of a film entitled "Two Brothers" specially made by the National Health Education Committee in collaboration with the Department. This film demonstrates the importance of treatment of venereal diseases.

I would appeal to all employers of Native labour in their own interests to take a greater interest in the welfare of their employees.

Every Native employee should be provided with housing for his family and diet containing the necessary protective foodstuffs.

Some employers are already doing this and those who do find that they are never short of adequate supply of reliable Native labour.

—:0:—

Social Aspects of Medical Work.

Dr. Alan Taylor.

Years ago the advice was given, "Seek to find adjustment to the three great problems in life, Religion, Money, Sex.

Each problem influences ones solution of the other. All are related . . . How do these three problems in Native life influence his medical needs.

I. The Zulu worships his family and tribe and fears the evil spirits which work to bring him as much harm as the family spirits can bring him good. He has all sorts of neuroses arising from his fear of evil spirits. Actually he prefers to imagine his doctor to be possessed of friendly spirits which he can command in the interests of a patient.

Undoubtedly the fear neuroses of the Bantu play a larger part in their lives than does religion as a cause of neuroses among the white races . . Among the kraal Natives fear probably is the commonest cause of illness.

We wait on the effect of education and civilization in destroying the belief which lies back of fear. One could wish that education

were more effective in ridding the Bantu of superstition. The common belief in 'ufufunyana' is a case in point. It is easier to deal with this condition among kraal Natives than among the educated who because of their superior learning can fall farther and stick faster in superstitious slime.

II. MONEY. Many authorities say that all Native problems can be approached through the economic aspect. It certainly influences all phases of his life. Originally as an individual he had no money nor had he need of it. The kraal head assessed the needs and met them. Today the condition or disease of the patient is usually far advanced before the kraal head admits his responsibility and sends the patient to the hospital or dispensary.

Another effect of this dependence on the kraal head is seen in the length of time patients remain at the hospital, unnecessarily. I discharge a patient today and find she has to wait a week for her father or husband to come in from the country. The result is often unnecessary crowding of hospital wards.

There is a growing class of patients now coming from the country districts who have neither financial backing at home nor a city address. In theory country paupers are properly a charge on the Government through the local magistrate. Actually it does not work out.

It is fortunate that most kraal tribal Natives have relatives who work in Durban.

Unlike his country prototype the urban Native is seldom solvent. The urban Native certainly is up against it. He and his family need to dress better, eat better, pay more for clothes, pay more to educate their children. They do not have the advantage of gardens and there is the constant temptation to needless spending. The effect of this is he cannot pay for adequate medical services.

Why should not all medical work be left to governmental agencies. The answer is found in another question, "Why do Natives go elsewhere when they can get free treatment at government clinics? Patients have often answered that question for me,

"The doctors, the nurses do not love the Bantu."

"They did not tell me what was wrong with me."

"I had to wait too long to see the doctor."

"I did not get better so I must try something else."

Government institutions are handicapped by the necessity of employing as members of their staff, individuals who accept Native work as just another job or as a new ground for experience, rather than because of philanthropic desire to help a needy people.

Non-governmental institutions need to be subsidized when they are doing good work.

Effort should be made to secure for heads of government institutions men and women who have philanthropic motives.

III. SEX. Today I am more concerned with the social aspects of sex among the Bantu and its relation to disease other than V.D.

Under the old tribal laws, the absence of V.D. and the type of home as we know it, allowed more freedom, especially among the unmarried than obtains generally among Europeans.

The enforced waiting before marriage was relieved by the tacit acceptance of pre-martial relations which seldom proved disastrous to the individual or to the tribe.

Today one does not find sex seriously affecting the health of the kraal Native who observes the tribal customs and laws. It is as they break these customs as they come to work in the city that they become a prey to V.D. In the hospital we meet not only those infected with V.D. but we meet too children doomed at birth.

Conclusion. While waiting for the effect of education, there must be provision for control and treatment centres compatible with the needs of the moment.

—:o:—

CONSTITUTION OF THE NATAL MISSIONARY CONFERENCE.

I.—Objects.

1. To further Christian Missions in Natal and other parts of South-East Africa.
2. To encourage fraternal intercourse and co-operation amongst Ministers, Missionaries and others interested in Mission work belonging to the various denominations.
3. To disseminate information among the public generally with a view to arousing a sympathetic understanding of missionary operations.
4. To further the education and general advancement of the Bantu.
5. To collect Missionary statistics.
6. To obtain papers on subjects relating to Missionary work.
7. To consider all questions that may bear, through legislation or otherwise, upon the religious, economic, social and educational interests of the Bantu.
8. To examine into the methods of Missionary work with the object of securing, as far as practicable, uniformity of action in dealing with Native customs, needs and developments.
9. To co-operate with Joint Councils, Missionary Conferences, and other bodies working for Native benefit.

II.—Membership.

1. (a) The Conference shall consist of Ministers, Missionaries and others connected with any Christian communion or society.

(b) New members shall ordinarily be admitted by vote of the majority of the Conference on nomination by a member or members present.

(c) Otherwise applications for membership may be made to the Executive through the Secretary, the Executive to have the power to admit such to membership.

2. All members shall be entitled to speak and vote at any meeting of the Conference.

3. (a) An annual subscription, payable in advance, shall be paid by each member, as follows: Europeans 5/-, Bantu members 2/-.

(b) Any member failing to pay the subscriptions for two consecutive Conferences shall be deemed to have forfeited the right of membership.

4. Corresponding members may be admitted by the vote of the Conference in the usual way, or by Executive action.

III.—Meetings.

1. An annual meeting shall be held at the time and place appointed by the Executive.

2. During its session Conference shall be opened each day with the reading of Scripture and prayer and devotional exercises, and each adjournment shall be accompanied with prayer.

3. The meetings of the Conference shall be presided over by the President, or, in his absence, by a Vice-President.

4. The order of proceedings shall be arranged by the Executive.

5. Subjects for discussion shall not be introduced without notice, except by permission of the Conference.

6. Sittings shall be held with open doors unless the Conference, in any special case, decides otherwise.

7. A report of the proceedings shall be prepared by the Secretary, and printed, if funds permit.

8. A Balance Sheet shall be prepared and printed with the Report of Proceedings.

IV.—Officers.

1. The officers shall consist of a President, a European Vice-President, a Bantu Vice-President, and a Secretary Treasurer, chosen at each Conference for the ensuing Conference, and to take office at the close of the Conference at which they are elected.

2. The Executive shall consist of the four officers, together with the retiring President and Vice-Presidents, and one lady member.

3. A Nominating Committee of five shall be chosen early in each Conference to present nominations, two names to be presented

for each of the four vacancies.

(b) Other nominations may be made by members.

(c) Voting shall be by ballot.

4. In the event of the President and Vice-Presidents being absent, Conference shall elect a new President at the beginning of the Conference.

5. Four shall constitute a quorum for meetings of the Executive.

Honorary Roll.

Miss Caroline Frost, Retired, U.S.A.

Dr. George Gale, Health Officer, P.O. Box 386, Pretoria.

Dr. J. B. McCord, Retired, U.S.A.

Rev. J. D. Taylor, D.D., 17 Priscilla St., Belgravia, Johannesburg.

Emeritus Roll.

Rev. T. Ballantine, P.O. Box 303, Durban.

Rev. N. Braatvedt, Mapumulo.

Rev. John Bruce, Scotland.

Rev. James Dewar, 5 Milbourne Rd., P'Maritzburg.

Rev. K. Johanson, 129 Hartley Rd., Overport, Durban.

Rev. K. Hallendorf, 10 Davies St., Johannesburg.

Rev. P. A. Rodseth, KwaMondi, Eshowe.

Active Roll.

Aadnesgaard, Rev. L., Entumeni.

Abraham, Rev. R. L., Groutville.

Adolfson, Dr. M., Box 88, Dundee.

Ahleby, Rev. J., Sweeden.

Astrup, Rev. Supt. John, D.D., Kranskop.

Barker, Miss Marianne, Pisgah M.S., Harding.

Bartholomew, Mr. B. V., Christian Book Room, Mark Lane, Durban.

Bates, Mr. W. G., Illovo Beach.

Beattie, Rev. T. O., Canberra Ave., Durban North.

Bergland, Rev. A., Ekutuleni M.S.; via Melmoth.

Bhengu, Rev. and Mrs. Nicholas, P.O. Box 35, Rustenburg, Tvl.

Bhengu, Rev. O. K., St. Faith's, Carlisle St., Durban.

Bohlin, Miss Greta, Umpumulo Inst., Mapumulo.

Botterel, Miss Inez, Dumisa.

Bradley, Rev. A. C., Christ Church, Addington, Durban.

Brittenden, Miss R. L., Inanda Seminary, Phoenix.

Brookes, Senator the Hon. Edgar H., Adams M.S.

Brookes, Mrs. Edgar H., Adams M.S.

Brueckner, Dr. K. R., Adams M.S.

Caluza, Rev. F. M., 47 Sydney Rd., Durban.

Carter, Miss M. E., Inanda Seminary, Phoenix.

Cawston, Dr. F. G., 14 Britannia Bldgs., Durban.
 Cele, Rev. S. R., Adams M.S.
 Chapman, Rev. T., 3 Hazel Rd., Durban.
 Christofersen, Rev. A. F., Ifafa M.S., Esperanza.
 Craig, Rev. James, 39 Nicolson Rd., Durban.
 Dahle, Rev. S., 150 Bellevue Rd., Durban.
 Dear, Miss I. S., Pisgah M.S., Harding.
 Dent, Mr. S. R., P.O. Box 395, P'Maritzburg.
 Dube, Mr. Charles, 37 Queen St., Durban.
 Dube, Rev. J. L., Ph.D., Ohlange, Phoenix.
 Dube, Mrs. Marie, Adams M.S.
 Eliasson, Sister R., Box 88, Dundee.
 Falck, Rev. S., Box 88, Dundee.
 Farup, Rev. J. Oscarsberg, Rorke's Drift.
 Fogelquist, Rev. Erik, P.O. Kingscliffe, via Dalton.
 Follesoe, Rev. N. M., Ungoye M.S., Mtunzini P.O.
 Forrest, Miss Louise M., 95 Windermere Rd., Durban.
 Frostin, Miss S., Appelbos, via Dalton.
 Genheimer, Rev. W. A., Makowe M.S., Mtubatuba.
 Genheimer, Mrs. W. A., Makowe M.S., Mtubatuba.
 Geschwend, Rev. J., Leratong, Bethlehem, O.F.S.
 Gibbs, Pastor E. S., Izingolweni.
 Gilje, Miss B., Umpumulo Inst., Mapumulo.
 Goddard, Rev. Frank, 62 Edmunds Road, Durban.
 Goodwin, Rev. Henry W., 430 Manning Rd., Durban.
 Gumede, Rev. Posselt, Inanda M.S., Phoenix.
 Gumede, Dr. Innes, Inanda M.S., Phoenix.
 Gumede, Rev. Enos B., 26 Somtseu Rd., Durban.
 Haldorsen, Rev. M. C., Kangelani M.S., P.O. Samungu, Inyoni
 Rail.
 Halland, Mrs. A. W., Izotsha.
 Hallendorf, Sister S. G., Box 88, Dundee.
 Harika, Mr. Matthew, Seyamu School, Edendale.
 Hawkins, Mrs. W. L. Batten, Landowne M.S., Somkele, Zululand.
 Hawkins, Miss Lilian, Landowne M. S., Somkele, Zululand.
 Helander, Rev., Appelsbosch, via Dalton.
 Hervey, Rev. P. J., 26 Somtseu Rd., Durban.
 Hervey, Mrs. P. J., 26 Somtseu Rd., Durban.
 Johanson, Rev. K. J. 129 Hartley Rd., Durban.
 Jones, Miss E. H., Box 779, Durban.
 Jones, Mr. Evan, Box 779, Durban.
 Jones, Mr. Edward, Box 779, Durban.
 Jonsson, Miss S., Box 88, Dundee.
 Junge, Rev. D., Bethal M.S., P.O. Gluckstadt, Vryheid.
 Kaiser, Rev. W., Hermannsburg.
 Kjelvlei, Rev. Supt. J., Otimati, via Stanger.
 Krause, Rev. G., P.O. Koenigsberg, Newcastle.
 Kriel, Miss M. M., Y.W.C.A., Esplanade, Durban.

Krook, Miss H., Kingscliffe, via Dalton.
 Kuboni, Mr. E. W., Ekupumleni M.S., Empangeni Rail.
 Kumalo, Rev. E. E., Methodist Inst., Grey St., Durban.
 Kumalo, Rev. P. S., 37 Wiggins Rd., Durban.
 Larrington, Rev. L. M., 704 Stamford Hill Rd., Durban.
 Larsen, Miss E., KwaMondi, Eshowe.
 LeBarre, Miss Margaret, 130 Wood Rd., Montclair, Durban.
 Lee, Bishop Wm. of Zululand, P.O. Box 18, Vryheid.
 Leisegang, Rev. T. M., Umpumulo, Mapumulo.
 Luthuli, Chief Albert, Groutville.
 Luthuli, Mrs. A. J., Groutville.
 Mahon, Mr. A., Drycott Rail.
 Mahon, Mrs. A., Drycott Rail.
 Mahon, Mrs. J. D., Mooigelegen, P.O. Kransfontein, O.F.S.
 Magnuson, Rev. E., 129 Hartley Rd., Durban.
 Makanya, H. M. S., Mbumbulu M.S.
 Makanya, Mrs. H. M. S., Mbumbulu M.S.
 Makanya, Miss Sibusisiwe, Mbumbulu M.S.
 Malcolm, Mr. D. McK., P.O. Box 395, P'Maritzburg.
 Mbata, Rev. A., Appelsbosch, via Dalton.
 Miles, Mrs. A. C., 71 Anglo-African House, Smith St., Durban.
 Miller, Rev. Vernon, 88 Gordon Rd., Durban.
 Mpanza, Rev. A. D., Ekupumleni M. S., Empangeni.
 Mpanza, Rev. M. J., KwaMondi, Eshowe.
 Mtimkulu, Rev. A., 79 North St., Durban.
 Mtimkulu, Mrs. A. T., 79 North St., Durban.
 Mavundhla, Rev. W. M., 145 May St., Durban.
 Narbeth, Mr. B. M., 16 Ridge Rd., Centre, Durban.
 Ndaba, Rev. Moses D., P.O. Umsinsini, via Umtwalume.
 Ndawonde, Rev. W. S., Inanda, via Phoenix.
 Ndhlovu, Rev. S. S., 86 Beatrice St., Durban.
 Ndwandwe, Rev. N. L., Inkwali M. S., P.O. Illovo.
 Nduli, Rev. N. M., Imfume M.S., Esperanza.
 Ngcobo, Rev. R. M., P. O. Umzumbi.
 Ngcobo, Mr. Selby, Adams M. S.
 Nomvete, Rev. B. M. G., Amahlongwa M. S., via Umkomaas.
 Ntanzi, Rev. D. A., Mbumbulu M.S.
 Nzimande, Rev. A. V., Impolweni.
 O'Hanlon, Miss K., 95 Windermere Rd., Durban.
 Olsson, Sister F., Box 88, Dundee.
 Pakendorf, Rev. G., 115 Topham Rd., P'Maritzburg.
 Palm, Sister Martha, Mahlabatini, Zululand.
 Rawley, Rev. W. G., 5 Castle Arcade, Durban.
 Regal, Rev. Paul, New Germany, Pinetown.
 Reuling, Mr. John, On furlough, U.S.A.
 Robinson, Rev. Herbert S., Nongoma, Zululand.
 Sandberg, Sister A., Holsmund, Sweeden.

Sandstrom, Rev. J., Rorkes Drift.
Satchell, Rev. W. H., 13 Bewsey Lane, Durban.
Scott, Miss Lavinia. Inanda Seminary, Phoenix.
Scoombie, Rev. G. A., Emmanuel Mission, Port Shepstone.
Shepstone, Mr. D. G., 88 North Ridge Rd., Durban.
Sibiya, Rev. J. M., Box 88, Dundee.
Sililo, Rev. T., Groutville.
Sivetye, Rev. G. M., Umtwalumi M. S.
Skarin, Miss A., Ceza, Zwartfolozi.
Skavang, Miss M., Kwa Mond, Eshowe.
Söderström, Dr. E. D., P.O. Ceza, Zwartfolozi.
Söderström, Miss K., Ceza, Zwartfolozi.
Stick, Rev. H. A., Adams M. S.
Sundkier, Dr. B., Ceza, Zwartfolozi.
Suter, Rev. F., Dumisa.
Swensson, Rev. K. K., P.O. Box 88, Dundee.
Taylor, Dr. A. B., McCord Zulu Hospital, McCord Rd., Durban.
Walker, Miss Nellie, Adams M. S.
Warmington, Rev. W., Methodist Inst., Grey St., Durban.
Waters, Rev. H. M., St. Augustine Mission, Reunion.
Webb, Mr. Maurice, 123 Manning Rd., Durban.
Whiteman, Mr. H. W., 41a Prince St., Durban.

The A. C. Press

Collection Number: AD1715

SOUTH AFRICAN INSTITUTE OF RACE RELATIONS (SAIRR), 1892-1974

PUBLISHER:

Collection Funder:- Atlantic Philanthropies Foundation

Publisher:- Historical Papers Research Archive

Location:- Johannesburg

©2013

LEGAL NOTICES:

Copyright Notice: All materials on the Historical Papers website are protected by South African copyright law and may not be reproduced, distributed, transmitted, displayed, or otherwise published in any format, without the prior written permission of the copyright owner.

Disclaimer and Terms of Use: Provided that you maintain all copyright and other notices contained therein, you may download material (one machine readable copy and one print copy per page) for your personal and/or educational non-commercial use only.

People using these records relating to the archives of Historical Papers, The Library, University of the Witwatersrand, Johannesburg, are reminded that such records sometimes contain material which is uncorroborated, inaccurate, distorted or untrue. While these digital records are true facsimiles of paper documents and the information contained herein is obtained from sources believed to be accurate and reliable, Historical Papers, University of the Witwatersrand has not independently verified their content. Consequently, the University is not responsible for any errors or omissions and excludes any and all liability for any errors in or omissions from the information on the website or any related information on third party websites accessible from this website.

This document forms part of the archive of the South African Institute of Race Relations (SAIRR), held at the Historical Papers Research Archive at The University of the Witwatersrand, Johannesburg, South Africa.