

X To begin with we have taken 5 years training in medicine matriculation. At the end of the final year we were each given a "Diploma in Medical-Aid". Strange to say this 'Diploma' is not recognised in the medical world, in fact, it is unknown. Once a man decides to leave Government service this 'diploma' is useless to him. He is just as good as a man who has never done "this course".

6 Nobody seems to know exactly what the "medical aids" are supposed to do and what they are not supposed to do. We are supplied with stethoscopes and have been trained to use them. In the field, it has been pointed out to us that it is illegal for us to use stethoscopes because we are not qualified. When we appeal to those people who trained us we are told that we should only use our stethoscopes when nobody sees us, i.e., use them privately.

4 About 50% to 60% of our work is doing dressings. In fact, one of us does nothing else but dressings the whole year round. About 70% of our training has been wasted. A medical aid can be told to do anything. In fact, there is nothing *infra dig.*, for a medical

Medical needs for Natives in the Union.

opportunities for training of natives here as well as abroad. She must not rob herself of the contribution that the African may make if given an opportunity. The African should be trained for the same qualification as the European any differentiation will reflect unfavourably to both. Bursaries must be provided for able but poor Africans who wish to study abroad until such time as our government will be willing to establish training facilities for natives.

Of recent date much has been said about the so-called health assistants trained from two to three years. Although they may render useful service under strict supervision and surveillance by medical practitioner, they would be redundant and unnecessary in our system of medical practice. We have established a high standard for both European and Africans and we must maintain it. These men trained in the same school as medical assistants will pose as doctors and practise medicine. It must be remembered that the ordinary patient will not stop to examine their qualifications. Their misdeeds will reflect very unfavourably upon the skill and knowledge of all African practitioners. Some say these men would be assigned to treat venereal diseases and diagnose infectious disease. Such suggestions cause one to smile, because most of us have found by experience and extensive observation that the treatment of venereal diseases like that of midwifery calls for special skill and specialized training. As to the ability of these men to diagnose we can only say men who have trained scientifically ~~only say~~ 5 - 10 years often find themselves unable to make this snap and spot diagnoses expected of these men. These Health assistants will not be necessary in our health scheme. They would do some good, I admit, but the possibilities for doing harm that is irreparable outweigh the advantages. They will direct and indirectly be unfair competitors to the medical practitioners as a whole and will thereby tend to lower the standard of the profession in South Africa.

Nurses and midwives we need, and people are beginning to appreciate their work. There is scope for them in urban and eventus will be in the territories if sound medical services can be established with visiting nursing staff under the district surgeon or his ass

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