

**MISSIONARY NURSE DOROTHY DAVIS COOK, 1940-1972:
"MOTHER OF SWAZI NURSES"**

by Susan Elaine Elliott

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Dissertation Committee

**Patricia Roth, EdD, RN, Chair
Mary Jo Clark, PhD, RN
Mary Sarnecky, DNSc, RN**

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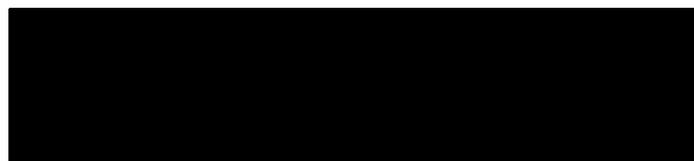
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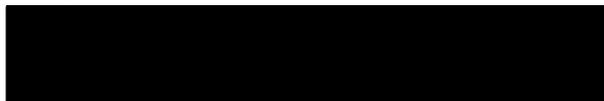
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COMMITTEE:



Patricia Roth, EdD, RN, Chair



Mary Jo Clark, PhD, RN



Mary Sarnecky, DNSc, RN

**MISSIONARY NURSE DOROTHY DAVIS COOK, 1940-1972:
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Dramatically absent from nursing’s historical knowledge and professional recognition are the lives, roles, contributions, and legacies of Christian faith-based nurses. The purpose of this study was to investigate the ministry and service of Sister Tutor Dorothy Davis Cook, Church of the Nazarene missionary nurse in the African country of Swaziland 1940 to 1972. The multi-dimensional, multi-task expanded roles manifested in her integration of Christian missionary and nurse were explored and her legacy identified.

The most significant primary source for this study was Mrs. Cook herself. She was interviewed on three occasions and has provided personal documents, journals, and photographs. Data were also collected from four organizational archives. Other missionary nurses and Swazi nurses were interviewed.

Mrs. Cook obtained her basic nursing education and training in the United States. Following her arrival in Swaziland, she earned her midwifery certification and Sister Tutor diploma. Building on the foundation of a nurse aide program, she upgraded nursing education and established the first state registered nurse program in Swaziland. To assist in this endeavor, she wrote four nursing texts which became the gold standard for similar nursing programs in the surrounding countries. She had leadership roles in the High Commission Territories’ Nursing Council, the Swaziland Nursing Council, and the Swaziland Nursing Association, and co-authored the 1965 Swaziland Nurse and Midwifery Act. For the majority of her service years, Mrs. Cook lived with the Swazi nurses. Mrs. Cook educated several hundred Swazi Christian nurses who continue to

influence the health, socio-economic status, and spiritual well-being of Swaziland today. In honor of her dedication to this cause, she was named the “Mother of Swazi Nurses”.

The findings of this study yield unique teaching examples of missionary nursing, advanced practice nursing, nursing education, and nursing administration, each with a spiritual care emphasis in a transcultural environment. The importance of cultural sensitivity and competence in all areas of nursing is demonstrated. Christian spiritual care as a dynamic component of nursing education and nursing care is prominent.

DEDICATION

No one lives, or writes, in isolation and there are many to whom I am indebted today.

I first give praise and thanksgiving to my Lord and Savior Jesus Christ. In the will of God the Father and in the power of the Holy Spirit, this phase of my personal and professional growth and development, and hopefully ministry, draws to an end. As Matthew 5:16 states, "Let your light so shine before others that they may see your good works and glorify your Father in heaven". In the words of one of my favorite songs, "All that I am or ever hope to be, I owe it all to Thee. To God be the glory great things He has done".

I dedicate this work to my parents, Mr. and Mrs. Chester C. Elliott. They raised me to know the Lord and in the mission of the Church of the Nazarene. They have prayed for me, mentored me, and sacrificed for me. They have listened, encouraged, comforted, cheered, and loved. And they proof-read one more time.

I appreciate the support and prayers of my sister, my nieces, extended family, church family, and friends. Each hug, each word of encouragement, each prayer, each has been offered at the perfect moment in time and I am grateful.

Guiding me through this journey has been a mentor who became my friend. Dr. Roth, with her gentle firmness, genuinely cared about what was important to me. She helped me keep my flashlight focused on one narrow path of progress and I will fondly remember our times of sharing together.

To Dr. Clark and her husband, I must take this formal opportunity to thank for their generous donation of a computer. While it was a challenge to learn, the time saved in footnotes and editing is immeasurable.

And to Dr. Sarnecky, whose command of the English language and historical methodology assisted me both in my qualifying exam and in this work, I too say thank you. As a nurse historian, she has set the standard high and it is an honor to know her and to have her name on my paper.

This study was funded in part by the Sigma Theta Tau Zeta Mu Chapter at Large 1999 Research Conduct Award. My appreciation to nursing's honor society.

There is one more to whom I must say thank you and that is Dorothy Davis Cook. She first role modeled Christian missionary nursing and the joy of serving the Lord. She then granted me the privilege of writing her story. She entrusted me with all of her personal papers and documents and with the responsibility to be true to her and to her God. Thank you Miss Dorothy.

LIST OF ABBREVIATIONS

AD- Autograph document

ALS- Autograph letter signed

ca.- circa

LS- Letter signed

TD- Typed document

TLS- Typed letter signed

TMs- Typed manuscript

n.d.- No date

n.p.- Not published

RFM- Raleigh Fitkin Memorial Hospital

R.N.- Registered Nurse

S.R.N.- State Registered Nurse

S.R.M.- State Registered Midwife

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Personal Collection of Dorothy Davis Cook

Church of the Nazarene Archives, Kansas City

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CHAPTER ONE

The Foundation

Introduction

On prominent display in London's Florence Nightingale Museum, a placard reads, "On February 7, 1837, God spoke to me and called me to His service. Florence Nightingale 1867."¹ It was based on Nightingale's belief in the Christian God and from her call to His service that modern nursing was born.² Nightingale stated, "the highest honor is to be God's servant and fellow worker. The most practical way of living for God is not merely thinking about Ideals, but doing and suffering for Ideals."³

In the process of serving God through nursing, Nightingale did not ignore science in nursing. In her Notes on Nursing, Nightingale integrates learning about the patient and the environment as an essential component in the development of a mature concept of God.⁴ Unfortunately, this perspective did not seem to be persuasive in the development

¹ The Florence Nightingale Museum. 2 Lambeth Palace Road, London SE 1, 7EW. September 3, 1999.

² Jeanne LeVasseur, "Plato, Nightingale, and Contemporary Nursing", Image: Journal of Nursing Scholarship 30(3) (1998), 282; Arlene Miller, "Toward a Theology of Nursing", Journal of Christian Nursing 12(3) (1995), 18, 19.

³ Constance Schuyler, "Florence Nightingale", Notes on Nursing by Florence Nightingale Commemorative Edition ed. David Carroll (Philadelphia: J.B. Lippincott Company, 1992), 4.

⁴ Florence Nightingale, Notes on Nursing, (London: Harrison, 1859) published in Notes on Nursing by Florence Nightingale Commemorative Edition ed. David Carroll (Philadelphia: J.B. Lippincott Company, 1992).

of professional nursing. The issues that were thought to command their attention were role, title and responsibility; licensure, registration, and certification; entry level and curriculum standardization; economic reimbursement; nursing as science versus art; autonomy versus dependency; and nursing research. “Along the way, the religious origins of nursing were lost, some would say systematically sacrificed in the name of professionalism and scientific method.”⁵

There is one subgroup of nurses who never lost sight of their individual call to God’s service and the importance of spirituality in patient care. Dramatically absent from nursing’s historical knowledge and professional recognition are the lives, roles, and contributions of Christian faith-based missionary nurses who have served God in the global arena. The purpose of this study was to investigate the ministry and service of missionary nurse Dorothy Davis Cook, appointed by the Church of the Nazarene to Swaziland, South Africa from 1940 to 1972. The research questions included:

1. What were the forces influencing Dorothy Davis Cook to undertake her work as a missionary nurse in Swaziland?
2. What were the political, social, and cultural factors existing in Swaziland from 1940 to 1972 that influenced her nursing and how did she adapt to them?
3. What were her major accomplishments in her role as missionary?
4. What were her major contributions to nursing?
5. How did she integrate her faith and spiritual life into her role of missionary and nurse?
6. What is the nature of her professional legacy in Swaziland?

⁵ Barbara Stevens Barnum, Nursing Theory, 4th ed. (Philadelphia: J.B. Lippincott, 1994), 128.

7. What are the salient themes that emerge from her life story which could be of value to others as they prepare for and undertake such roles as missionary nurse, nurse educator, international health nurse, or advanced practice nurse?

The Conceptual Framework

The conceptual framework that guided this study is that of Christian missionary. Various world religions and cults utilize missionaries for their cause. However, the concept of Christian missionary is derived from the words of Christ and the related Biblical teachings. "Mission is the People of God intentionally crossing barriers from Church to non-church, faith to non-faith to proclaim by word and deed the coming of the Kingdom of God in Jesus Christ."⁶ This definition is based on a fundamental belief of the Christian that the Bible is the inspired Word of God and is truth. From the call of the first missionary (Abram in Genesis 12) to the expected heavenly celebration with people of every tribe and language and race and nation (Revelation 5:9), the entire Bible is recognized as a missionary manual. The Bible provides mission's mandate, message, power, and model.⁷

The mandate for missions is found in the book of Matthew. The last words of Jesus Christ recorded in the book of Matthew were spoken after His death and resurrection and are referred to as "The Great Commission". Here Jesus said to His

⁶ Charles Van Engen, "Biblical Foundations of Missions" (course syllabus, 1996), Fuller Theological Seminary, Pasadena, CA..

⁷ Susan Fitkin, Holiness and Missions, (Kansas City, MO.: Nazarene Publishing House, 1940). Raleigh Fitkin Memorial Hospital in Bremersdorp, Swaziland was named in memory of her son.; John Stott, "The Bible in World Evangelism", World Mission- An Analysis of the World Christian Movement ed. J. Lewis (Pasadena, CA.: William Carey Library, 1989), 3-7. The Holy Bible, New International Version. (Grand Rapids, MI.: Zondervan Bible Publishers, 1983).

disciples, “All authority in heaven and on earth has been given to me. Therefore go and make disciples of all nations, baptizing them in the name of the Father and of the Son, and of the Holy Spirit, and teaching them to obey everything I have commanded you” (Matthew 28:18-20). Jesus also said, “Go into all the world and preach the good news to all creation” (Mark 16:15).⁸

The message of the Christian missionary is “the good news that Jesus Christ died for our sins and was raised from the dead according to the Scriptures, and that as the reigning Lord He now offers the forgiveness of sins and the liberating gift of the Spirit to all who repent and believe”.⁹ The power to handle the assignment of delivering the message comes from the Holy Spirit. Jesus said, “But you will receive power when the Holy Spirit comes on you and you will be my witnesses in Jerusalem, and in all Judea and Samaria, and to the ends of the earth” (Acts 1:8).¹⁰

The model for missions is as diverse as the peoples and cultures who need to hear the message. Jesus himself was an industrial missionary (a large part of His life was as a carpenter), an itinerant preacher (He moved from town to town preaching and teaching the good news), and He was a medical missionary.¹¹ “Jesus went throughout Galilee teaching in their synagogues, preaching the good news of the kingdom, and healing every disease and sickness among the people. News about Him spread all over Syria and people brought to Him all who were ill with various diseases, those suffering severe pain, the demon-possessed, those having seizures, and the paralyzed, and He healed them”

⁸ The Holy Bible, 915, 936.

⁹ Stott, 5. Taken from the Lausanne Covenant, July 1974.

¹⁰ The Holy Bible, 998.

¹¹ Mary Cove, The Story of Missions, (Kansas City, MO.: Nazarene Publishing House, 1930).

(Matthew 4:23-24).¹² As Christian missionary nursing involves sharing the gospel, in addition to teaching and healing, this nursing practice falls readily into the realm of the biblical model exemplified by Jesus Christ.

Methodology

Historiography, as a valid and recognized nursing research methodology, has been utilized to investigate the missionary nursing of Dorothy Davis Cook. One goal of methodology is to creatively reconstruct, inform, and illuminate a perspective on a previously unexplored chapter in nursing's past. Such an endeavor strives to present a narrative from which nursing and other professions can learn.¹³

An early feasibility study was done on Nazarene missionary nurses and sufficient sources of information and documentation were identified to conduct this research.¹⁴ According to the literature, a primary source is one who has personally witnessed or experienced an event or an original document on which any work on the subject must be based. Unpublished documents, such as diaries, letters, and personal notes found in archives, are deemed to have the greatest credibility and value. Secondary sources are

¹² The Holy Bible, 886.

¹³ Brigid Lusk, "Historical Methodology for Nursing Research," Image: Journal of Nursing Research 29(4) (1997); Christopher Maggs, "A History of Nursing: A History of Caring?" Journal of Advanced Nursing 33 (1996); Lucille Chambers and Patricia Subera, "Nursing History as a Tool for Development of a Professional Identity Within Nursing Students", Journal of Nursing Education 36(9) (1997); Mary Sarnecky, "Historiography: A Legitimate Research Methodology for Nursing", Advanced Nursing Science 12(4), (1990): 1; Patricia D'Antonio, "Toward a History of Research in Nursing", Nursing Research 46(2) (1997).

¹⁴ Susan Elliott, "The History of Nazarene Missionary Nurses- A Feasibility Study." n.p. University of San Diego, 1998.

those who are contemporaries to the primary subject and who are able to independently corroborate and or interpret the primary source.¹⁵

The most significant primary source of this study is Dorothy Davis Cook herself. This researcher has interviewed her on the occasions of February 28, 1998, March 3-4, 1999, and October 8-9, 1999. Davis Cook has presented this researcher with her personal journals, diplomas, transcripts, writings, photo album, home movies, and collection of religious study resources.

Other data sources included family members and friends. Missionary nurses who served in Swaziland with Davis Cook have been interviewed. The researcher attended the April 1999 Samaritan Hospital reunion. Documents were collected from the official archives of the Church of the Nazarene in Kansas City, MO., the archives of Northwest Nazarene College in Nampa, ID., and the archives of the Church of the Nazarene Africa Regional Office in Florida, South Africa. Other documents were provided by the archives of the Royal College of Nursing housed in Edinburgh, Scotland.

In order to validate data and to seek further primary and secondary sources, this researcher traveled the path of Dorothy Davis Cook July 22-September 6, 1999. The site of her midwifery training in Durban, South Africa and of her Sister Tutor education in London, England were visited. Twelve days were spent in the country of Swaziland. Here the researcher was able to interview Swazi nurses who trained under or worked with Davis Cook. The nursing school, hospital, and church that were central to her Swazi life were explored. In February 2000, the researcher participated in a biblical-studies tour of Israel. The Holy Land is both the homeland of Christianity and a place visited by Davis Cook.

¹⁵ Anthony Bundage, Going to the Sources, (Wheeling, IL.: HarlanDavidson, Inc., 1997): 16; G. Garrahan, A Guide to Historical Method, (New York: Fordham University Press, 1946), 106; Lusk, 356.

The integrity and credibility of historical research is influenced by the ideology or worldview of the researcher. The ideology influences the objectivity and subjectivity of the data analysis and narrative write-up and can influence the reader's perception of the researcher's right to give meaning to, or pass judgment on, that history.¹⁶ An assumption of this study is that both researcher and subject share a common theological ideology. Both persons are members of the Church of the Nazarene and both have served as Nazarene missionary nurses in Swaziland.

Formal approval was obtained from the University of San Diego Human Subjects Committee for both the previously mentioned feasibility study and for this focused study of Dorothy Davis Cook. All study participation has been voluntary and Informed Consent was obtained (see appendix 1). Informants were given the nature and purpose of the study. All informants permitted audio and/or visual recording and a still photograph to be taken. While the research findings will not be confidential, each informant has had the option of choosing which memories to share. Therefore risk to the informants remains minimal.

Significance of the Study

Nursing accepted historiography as the profession began to recognize the value of knowing its own heritage. Nursing began to see that who we are and what we do reflects residues, remnants, remainders, and reminders of those who have gone before.¹⁷ Without

¹⁶ P. Novick, That Noble Dream, (USA: Cambridge University Press, 1988), 61; G. Garraghan, 72.

¹⁷ J. Appleby, "The Power of History", The American Historical Review 103(1) (1998): 12.

knowing what was done and by whom, why it was done and what were the outcomes, nursing is at risk of stagnation or repetition of error. Awareness of what was can guide nurse leaders and scholars of today as they prepare for tomorrow.

Professional nursing is vastly limited in its knowledge of the lives, roles, and contributions of missionary nurses. The need for nursing to become informed gives value in placing the lived-experience story of Dorothy Davis Cook into the historical data bases of nursing. The very title “missionary nurse” implies leaving a known professional environment to live, work, and serve in another part of the world. Such a story may prove to be an exemplar of cross-cultural nursing and spiritual care of the patient for general nursing education, international nursing preparation, nurse educator and administrator development, missionary nurse preparation, and nurse practitioner/nurse midwife curricula. This study also establishes a foundation for further historical research on the roles and contributions of missionary nurses.

This study will have value to the Church of the Nazarene, other Nazarene missionary nurses, and all nurses who are members of the denomination. Nazarene nurses are a subgroup of professional nursing. The story to unfold creates a written chapter in their rich heritage of nurses who have served via the church over the last one hundred years. The findings of this study have been requested by the Church’s missions education department and archives department.

Finally, the findings of this study will be significant to the nurses of Swaziland. To date, no written chronicle exists about the woman who established professional nursing in Swaziland or on the impact of her legacy in Swaziland today. In this story, the nurses of Swaziland will find themselves, both as a culture and as nursing clinicians, scholars, and leaders. This is their professional heritage.

CHAPTER TWO

The Nation and the Church

Most unique to the study of Dorothy Davis Cook is the context in which she lived and served as a missionary nurse. Her service required leaving the familiar of home, family, and American nursing, for a new world, a new culture, and a new work environment. She took this journey via the jurisdiction of the Church of the Nazarene, a denomination about which public knowledge is limited. Therefore, to understand the life of Dorothy Davis Cook, exploration begins with her new world and her church.

Swaziland

The Land

The Kingdom of Swaziland is a 6704 square mile country that is land-locked on two sides by South Africa and on the third side by Mozambique (see appendix 2). The Swazi people migrated to this area from Central Africa, under the leadership of King Ngwane, approximately 300 years ago. The current country borders were determined by the British and Dutch colonialists, the Zulu War and the Boer War.¹

¹ United States Department of State, Bureau of Public Affairs, Swaziland. (Washington, DC: United States Printing Office, 1985), 1. Church of the Nazarene Archives. Kansas City, MO.; J. Middleton and A. Rassom, eds. Encyclopedia of World Cultures Vol IX: Africa and the Middle East, (Boston: G.K. Hall & Co., 1995), 329-330; E. Thomas Lawson, Religions of Africa, (San Francisco: Harper & Row, 1984), 14; J. Olson, The Peoples of Africa, Westport, CT.: Greenwood Press, 1996), 540.

There are four distinct topographic regions in Swaziland. The mountainous highveld (inkangala), thick with cultivated forests, borders on the South African Transvaal. These beautiful mountain peaks have caused some to refer to Swaziland as "the Switzerland of Africa".²

East through the Ezulweni Valley (Valley of Heaven) is the middleveld (alive or Ngwane). The middleveld has more palm and jacaranda trees and the soil is rich for avocados, bananas, and other agriculture. The middleveld holds Lobamba, the Royal Kraal, and Manzini (formally Bremersdorp), the city that houses the central mission station of the Church of the Nazarene.³

The lowveld (inlanze), more commonly referred to as the bushveld, has been historically associated with one word- malaria. While malaria did so spread across the country during the fever season that even the horses were given quinine, going into the bushveld was associated with a suffering death. Today the area is the home of cattle ranches and sugar plantations. Rising up out of the bushveld is the Lubomba Plateau. This is the place from which, on a clear day, one can see the Indian Ocean. The altitude of these four regions ranges from 600 to 6000 feet above sea level. The temperatures range from 60 to 95 degrees Fahrenheit during the wet summer (September-February) and from 45 to 70 during the dry winter.⁴

² Louise Chapman, Africa, O Africa. (Kansas City, MO.: Nazarene Publishing House, 1945), 31; Charles Gailey, "Changes in the Social Stratification of the Swazi, 1936-1967." Ph.D. diss., University of South Africa, 1968., 36; Hilda Kuper, Sobhuza II: Ngwenyama and King of Swaziland. (Great Britain: African Publishing Company, 1978), 4; Dirk Schwager and Colleen Schwager, Swaziland. (Mbabane, Swaziland: Websters (Pty) Ltd., 1980), 81; United States Department of State, Bureau of Public of Affairs, Swaziland, 3.

³ Gailey, "Changes in the Social Stratification of the Swazi," 36; Middleton and Rassom, 329; Schwager and Schwager, 81-82; Paul Wardlaw, "General Information on Raleigh Fitkin Memorial Hospital, Manzini, Swaziland" (TD, n.p., n.d.)

⁴ *Ibid.*; Lillian Cole, Piggs Peak, to Brother Anderson, Kansas City, 20 March 1918, ALS,

The Government

Like the changes in season and terrain, so the hands of rule have changed for Swaziland. Woven together are the history and influence of those who wanted to rule this little country and the people who would not let them.

Following the migration lead by King Ngwame II, it was his grandson Sobhuza I who established the capitol and a centralized political system for the people. While the people frequently speak of themselves as “the People of Ngwame”, it is from Sobhuza’s heir, Mswati, that the name Swazi is derived. Ngwame belonged to the Dlamini clan of this Bantu-speaking Nguni group and Dlamini remains the royal clan today.⁵

Before Sobhuza I (A.K.A. Somholo) died, he shared the voice of ancestral wisdom that he had heard in a dream. He instructed the people to never shed the white man’s blood, for to do so would destroy the Swazi nation. He told the people of the pale-skinned people with hair like tails of cattle who would bring two gifts. The gift of the *umcula* (Bible) they were to accept. The gift of the *indilinga* (money), of that they were to be wary.⁶

Within four years of beginning his reign, Mswati sent messengers to find missionaries and invite them to come into the country with the *umcula*. The first Christian missionary to arrive was Wesleyan preacher Rev. James Allison who reached Swaziland in 1843.⁷

Church of the Nazarene Archives, Kansas City, MO.; Kuper, 4; Mary Cove, The Challenge of Africa. (Kansas City, MO.: Nazarene Publishing House 1928), 37.

⁵ Kuper, 12; Middleton and Rassom, 329; Olson, 540.

⁶ Kuper, 20; Schwager and Schwager, 86.

⁷ Kuper, 20.

Unfortunately, behind the white missionary came the Boer, the British, and to some extent, the Portuguese, all in quest for control over the Swazi mineral and land resources. When Mbandzeni was installed as Swazi King in June 1875, a Boer command crossed the border into Swaziland from South Africa. They did not succeed in claiming control over Swaziland but the two governments did enter into an agreement to protect each other. The next King of Swaziland was born at this time and was named Bhunu, which means Boer.⁸

Gold was discovered in Swaziland in 1880 and a significant cross-cultural interpretation of a concept emerged on the issue of land grants. Mbandzeni readily granted land concessions and did not understand why the grantees went to court to fight when he wanted the land returned.⁹ Former Resident Commissioner of Swaziland, A.G. Marwick stated:

In order to understand the Swazi point of view about concessions it is necessary to realize their attitude towards the tenure of land. The private ownership of land was unknown amongst them, and indeed throughout the Bantu world before the advent of the white man... The land was vested in the whole nation and belonged to the generation to follow: only the control of the use of it was in the hands of the ruler. Such use might be given to anybody so long as the land was not needed by the members of the tribe, and it was in the power of the ruler to vary his grant of land and even to cancel them for a good cause arising from the behavior of the grantees and from the needs of the people.¹⁰

This remains an unresolved issue today. The Swazi nation has never regained all of her land.

⁸ Ibid., 21; Schwager and Schwager, 88.

⁹ Ibid.

¹⁰ Schwager and Schwager, 88-89.

As the years passed, the Boer continued their quest for total control of Swaziland. After claiming they had a right to be involved in Swazi affairs, the Boer charged King Bhuna with murder and he was forced to flee to the British. Paul Kruger, President of the South African Boer Republic of the Transvaal, took control of Swaziland in 1894. Tensions then mounted between the British and the Boer, and war was declared by the British October 19, 1899. While the Swazi tried to remain neutral and avoid soldiers from both sides, the British would win the war and Swaziland became a British Protectorate in 1903.¹¹

Much disagreement and argument took place amongst the British themselves on making Swaziland part of the British South African State. Lord Selborne, the British High Commissioner from 1905-1910, wanted Swaziland brought into the Union during the constitutional meetings of 1910. Lord Crewe, Secretary of State for the Colonies, felt such action would eventually take place. However, at this time he used his position to override Selborne and Swaziland remained under imperial rule.¹² The future King of Swaziland, Sobhuza II, was in constant fear that negotiations and decisions would take place without him. He argued through the years that “the Swazi must choose the best of their own culture and the best of that available from outside in order to maintain their national identity and self respect”.¹³

When Bhunu had fled the country, Queen Regent Labotsibeni became the Swazi ruler and she reigned for thirty-two years. Even though under the ultimate dictates of the

¹¹ Kuper, 29-30; Middleton and Rassom, 330; David Torrance, “Britain, South Africa, and the High Commission Territories: An Old Controversy Revisited”, The Historical Journal 41(3) (1998): 751,754.

¹² Kuper, 29-30; Torrance, 751.

¹³ Kuper, 2.

British, it was she who raised Sobhuza II, born July 22, 1899, to be the next Swazi king.¹⁴

Sobhuza II received formal education in British classrooms and Swazi education in Swazi style.

The court of Zombodze was a school of rich experience. There were always people coming and going, and under the large fig tree outside the byre of elders sat and debated, and eloquence and skill were applauded. Sobhuza heard Swazi history not in neat chronological sequence but episodically, often dramatically, listening to people who were living records of unwritten events. In cases of clan disputes, they would refer to early migrations and ancient settlements, and when dealing with rival claimants for succession and inheritance old and intricate family connections would be recounted, genealogies and marriage alliances traced in detail. Memory was an asset, and he remembered well; this served him in later years when many of the cases came before him under new disputants.¹⁵

Sobhuza II became Ngwenyama (the Lion) of Swaziland on Thursday, December 22, 1921 at the Royal Kraal at Lobamba. Following his completion of the Ncwala Kingship rituals, he was granted Kingship by his grandmother. Queen Regent Labotsibeni placed her X mark on the decree that concluded with "the administration will henceforth address all its communication direct to him. Sobhuza II gets his name, title, and position by the right of inheritance from his ancient house and kings who have ruled over the Swazi nation from time immemorial".¹⁶

The British, however, would not recognize him as the King and referred to him only as "the Paramount Chief of a British possession". However, Sobhuza II would reign to see independence from the British in 1968 and on until his death in 1982.¹⁷

¹⁴ Ibid., 18, 73.

¹⁵ Ibid., 45.

¹⁶ Kuper, 73-74; Schwager and Schwager, 85

¹⁷ Mildred Avinell McNabb interview by author, tape recording, Temple City, CA., 5 March 1999. At the time of his death, Sobhuza II was the oldest reigning monarch in the world.

The People

As previously stated, the Swazi people are a part of the Nguni group of Bantu-speaking people. The Nguni group includes the Xhosa (pronounced with a click), the Fingo, the Tembu, the Pondo, and the Zulu. They are related to the Bhaca, Matebele, Shona, and Ndebele. According to the first recorded census, there were 139,000 people living in Swaziland in 1930. In 1936, the records show 153,270 Bantu alone.¹⁸

The Swazi refer to themselves as *ebantu babangwane* (people of Ngwane). A person's last name places one into one of three major subgroups. The Bemdzabukos subgroup are considered the only "pure Swazi" as they are the ancestors of the followers of Sobhuza I. The second subgroup is known as the Emafikamuvas or "late-comers". Their arrival is timed to the Zulu War, after the first Swazi were settled. The third subgroup, the Emakhandzambilis, was ironically already on the land when the "pure Swazi" arrived. While they were absorbed into the Swazi nation, they have never been considered true Swazi. The rank of the clans within the subgroups is determined by their blood-line closeness to the royal Dlamini clan.¹⁹

¹⁸ B. Mitchell, International Historical Statistics: Africa, Asia, and Oceania 1750-1988, 2nd rev. ed. (Great Britain: Bath Press, 1955); Gailey, "Changes in the Social Stratification of the Swazi," 40; Lawson, 12.

¹⁹ Gailey, "Changes in the Social Stratification of the Swazi," 73. In his dissertation, 28/50 elite and 30/50 non-elite rated royalty as the most significant criteria for stratification. The next level was education at 5/50 and 7/50 respectively; Olson, 540.

The Cultural Personality

Three Nazarene missionaries, all serving in Swaziland when Miss Davis arrived, dedicated pages in their writing to the characteristics of the Swazi people. The vast descriptors utilized were musical, happy disposition, love to laugh, respectful, stoical, sociable, not boastful, and quick to forgive. The Swazi were also described as creative, a good speaker, appreciative, slow to action, having great physical endurance, live in the present, and as a good judge of character. While big-hearted, the Swazi were known to enjoy exaggeration and were kept honest by the fear of witchcraft.²⁰

The body of the Swazi was seen as not clean and the body could be seen. “Although clothing seems extremely abbreviated to the minds of those privileged to live in more civilized countries, a black skin somehow never looks naked. Half-nude people, even adults, do not seem unclothed, and little children, with only a few beads around the waist, look very cute.”²¹

Missionary nurse Myrtle Pelley, who arrived in Swaziland in 1922, wrote: “I am much impressed by the grace and carriage with which these native women and men walk and handle their bodies. A ball-room belle cannot match the beautiful neck, arms, and shoulders of these women, always bare. Some have very sweet smiles and are really pretty and graceful.”²²

²⁰ Fairy Chism, Ora Lovelace, and C.S. Jenkins. The Lord's Doing- Nazarene Missionary Achievements in South Africa. (Kansas City, MO.: Nazarene Publishing House, 1941), 19, 31-49.

²¹ Ibid.

²² Myrtle Pelley, (n.p., n.d.). Church of the Nazarene Archives, Kansas City, MO..

Education and Economics

For the education of the Swazi, King Sobhuza had wanted the best teachers that could be found. “The thing we need is knowledge. Our children should go to England, France, America, everywhere, and then when they return they will be able to raise up the nation.”²³

While the King did not always agree with their morality lessons, one group who brought teachers of the world to the Swazi was missionaries. Regarding missions schools, a Mr. Smith wrote, “at least the missions may take credit for having borne the burden hitherto of what is really an Imperial task. Out of their scanty funds, provided largely by the generosity of poor people in the Homeland, they began and have carried on the work”.²⁴

By the 1930’s, Swaziland was home to four mission schools that went to Standard VI and the first high school was opened in 1931. In June 1942, the missions director for the Church of the Nazarene in Bremersdorp reported that “on our mission station we have living 140 school children boarding in our hostels, 20 native nurses, 6 native teachers, 14 teachers-in-training, and about 140 other young men and women working in the different departments of the mission station”.²⁵

²³ Kuper, 105, Sobhuza speaking. At one time the Swazi had to put up \$10,000. in order to leave the country so as to ensure he/she would return with their new education. It is not known if this is still so.

²⁴ Cove, 39.

²⁵ David Hynd, Bits from Bremersdorp. (TD, n.p., 1945) Church of the Nazarene Archives, Kansas City, MO; Kuper, 20.

As of 1985, 100% of Swazi children attended primary school. However, as there are no compulsory years of education, Swaziland's literacy rate is only 68%.²⁶

Sobhuza II had also promoted industrialization. When Miss Davis arrived in this British Protectorate in 1940, she found a country in change and development. In his annual report to the missionary council, Dr. David Hynd stated:

We are not the isolated corner of the British empire that we used to be. From Bremersdorp radiate 6 different routes linking us up with all parts of Swaziland and the adjacent Provinces of Natal and Transvaal, and with Portuguese East Africa. The natives are traveling more and there is a greater interchange of both benefits and disadvantages of our modern civilisation [sic]. Commercial and economic advancement is gradually making its way amongst them. The Government has established both Veterinary and Agricultural Departments in Bremersdorp and the Empire Cotton Growing Corporation has its headquarters near us. These organizations are improving the cattle stock of the natives and are encouraging the growing of various food and commercial crops which should contribute to the improved nutrition of the Swazi and to his economic status. The number of licenses issued by the Government to native dealers in cattle and hides is legion, and stores and butchers shops run by natives in the native areas is increasing. Until recently our common injury-admission to hospital was the fractured skull from the knobkerry [sic] at the beerdrink but the bicycle accident is running it a close second. Bicycles and even second-hand motor cars are replacing the foot as the means of propulsion. A creamery has been established at Bremersdorp and scattered throughout the native area are little dairies which the Agricultural Dept. [sic] has established to which the natives carry their milk for separation and transport to the Creamery, and at the end of each month they receive cash. The outbreak of the war had intensified all this development, for there is a demand for increased production not only for the needs of the population at war but for storage for the needs of the starving post-war population.²⁷

Cattle remain the symbol of wealth and are used for both consumption and ritual.

Through the years the generation to generation skills of basket weaving, wood carving,

²⁶ Parker, 154; United States Department of State, Swaziland.

²⁷ David Hynd "Bremersdorp Annual Report to the Mission Council," Official Minutes of the 17th Annual Council Africa District Church of the Nazarene September 28-October 5, 1940, TD, 33. Church of the Nazarene Africa Regional Office Archives, Florida, South Africa.

smithing of copper and iron, and pottery making met needs for daily use and later became a source of income through tourist and international trade. The main export has become sugar. Other income generating commodities are maize, rice, vegetables, cotton, tobacco, citrus fruits, meat and meat products, iron, diamonds, asbestos, textiles, and forestry products.²⁸

The Home

The Swazi homelife is centered in the kraal. According to Nurse Pelley:

A native hut is built dome-shaped like as if one would cut off the third part of an orange and place the larger part upside down on the table. Then with a pencil mark out a little rounded over hole, low at the side which is the door. Such fun the natives have watching me crawl in and out of these little doors for I am fat now. I always cheer up my patients for I look so funny and leave them laughing heartily inside as I ride off. You see the inside is higher ground than outside to keep out running water when it rains, and one must come out head first or be blamed for bewitching the kraal.

A kraal is the home entire, with 2 or 3 huts or up to 25. The Swaziland king has 50 and I have been there. In front of each hut door is a sort of woven reed (tall) and grass fence built semi-circularly which makes the hut private and keeps out the rain, for it is only about 5 ft. from door to fence. Inside the hut in the middle is a scooped out place in the floor for the fire to be kept in, and smoke everywhere. Overhead are strings of ears of corn preserved for planting. Round the walls are spears stuck into the grass, huge knives, and the sleeping mats of the family tied up in rolls overhead along the sides. Round the floor are the large earthen bowls that they make and bake in the fire to cook in. They are made of certain kinds of mud or clay. In the middle of all these huts is the cattle pen, fenced round with briry [sic] sticks, and any graves of the household, round with stones built up high like a stone pile over each body.

They eat 2 meals a day consisting of corn in different ways, usually ground fine on a stone and cooked into a stiff, coarse mush. It is eaten right from the cook-pot with the fingers, after it cools off. They love bitter tasting things, therefore cook herbs and weeds in which to dip their bites of mush and lick it off the fingers. It is dirty of course and yet I am amazed to see the neatness and dexterity with which they eat. Some are very dignified about it.

²⁸ Middleton and Rassom, 330; Schwager and Schwager, 102.

I have been much impressed by the grace and carriage with which these native women and men walk and handle their bodies. A ball-room belle cannot match the beautiful neck, arms, and shoulders of these women, always bare. Some have very sweet smiles and are really pretty and graceful.²⁹

This domestic scene was also described in another writing. When the wife serves her husband, she “crawls into the presence of her husband and with both hands she places the food before him and slinks out”.³⁰ It is Swazi custom to greet someone in peace with both hands forward. This demonstrates that one is not hiding a sword or other weapon of harm.

Marriage and Family

Marriage in Swaziland can either be arranged by the families or it can be a marriage of love. Sometimes the daughter is given to pay a debt to a much older man. Some girls will physically fight, run away, or take their own lives to avoid marriage. At one time, 32 such girls were living at the Nazarene mission station.³¹

Men traditionally have multiple wives and the paternal ugogo (grandmother) is the social ruler of the family kraal. Puberty triggers the freedom to go courting. The boy and his chosen friends begin to tease the object of his interest, and if she is in favor of the relationship, she and her friends parade to his quarters. Once the girl had made this commitment, the relationship is made public and she is not allowed to see anyone else. The male can pursue as many women as he desires.³²

²⁹ Myrtle Pelley, (n.p., n.d.). Church of the Nazarene Archives, Kansas City, MO.

³⁰ Chism, Lovelace, and Jenkins, 22.

³¹ Chapman, 31-32.

³² Kuper, 122.

The King of Swaziland is given the option of selecting another bride every year from the young women who dance in traditional dress at the Reed Dance. As Father of the Nation, he is to be married to at least one woman in every clan. If selected, the bride must not cry when time to leave her home or it will bring shame on the family. As part of the ceremony, her family must weep and wail to demonstrate their sadness at losing the daughter. Both bride and groom are cut on their sides to mix their blood, and the king is given fertility drugs.³³

During a traditional wedding, red ocher is placed on the face of the bride to symbolize the losing of her virginity. Juliet Ndzimandze, the first Nazarene woman ordained in Africa, started a new custom in Swazi Christian weddings. She took a red cloth and bound together the hands of the couple representing the blood of Jesus uniting them in marriage.³⁴ Christian marriages are to be monogamous and Christian fathers are to care for their children.

At the time of marriage, the woman keeps her clan name and her children take the father's name. Unless one is a member of the royal family, there must be no pregnancy until the marriage as it would disgrace them both.³⁵ In general, a man's status in life is based on how many children he has, but he has no responsibility to raise or care for them.

There is acceptance of both men and women marrying into a higher ranking clan. For any marriage to take place, a bride-price must be paid to the bride's family.³⁶ The

³³ Kuper, 62; Schwager and Schwager, 26. As of 1936, the King had 40 wives (Gailey) and in 1979, he chose a 17 year old.

³⁴ Chuck Gailey, Daughter of Africa, (Kansas City, MO.: Nazarene Publishing House, 1998), 52. Gailey, "Changes in the Social Stratification of the Swazi," 43.

³⁵ Gailey, "Changes in the Social Stratification of the Swazi," 41; Kuper, 60; Middleton and Rassom, 331.

³⁶ Gailey, "Changes in the Social Stratification of the Swazi," 42, 145; Middleton and Rassom, 331.

Lobola “consoles the father for the loss of his daughter and also legalizes the marriage and legitimates the children”.³⁷ “Bride-wealth varies with the rank and education of the bride.”³⁸ Because of the respect for the profession and the potential earning power of being a nurse, this writer was informed she was worth a high Swazi bride-price of 12 cattle. For the marriage of a Swazi princess to a Zulu king, 200 cattle were paid.³⁹

The man had to work at least one day per year in order to pay his family taxes. The fees when Miss Davis arrived in Swaziland were \$1.25 for a dog (which every man had), \$8.75 for one wife, \$16.25 for two wives, and \$23.75 for three or more wives.⁴⁰

Swazis have many children. According to Gailey:

The birth of the child usually takes place in the husband’s village. If the child is born in an unusual fashion, it is not thought of particularly as witchcraft unless the child is dead. The attitude toward twins is indecisive, but they seem to be becoming more accepted. The mores concerning the feeding of the infant are similar to those of other Bantu societies, including the prohibition of breastfeeding during the first 4 days of life.⁴¹

Swazi society identifies distinct life stages of the people. During the first stage of Luswane, it is unclear as to when the baby stops being a thing and becomes a person. Some report it to be after three months when the baby is shown to its father. Others state

³⁷ Volkmar Wentzel, “Zulu King Weds a Swazi Princess”, National Geographic 153(1) (1978): 48.

³⁸ Middleton and Rassom, 331.

³⁹ Wentzel, “Zulu King Weds a Swazi Princess”, 48.

⁴⁰ Chism, Lovelace, and Jenkins, 33.

⁴¹ Gailey, “Changes in the Social Stratification of the Swazi”, 45.

it to be after one moon when the cord string has fallen off and the baby can go outside. If the baby dies during this time, it is buried as a thing.⁴²

The second stage (Ingane) lasts until the child can walk, talk, and is weaned from the breast; having the first set of teeth is a must. The third stage (names now become different for the genders) is that of boy and girl role differentiation. The boy begins to learn about herding the cattle and the economic importance of cattle that will affect him all of his life. The girl is busy learning household chores, neither is rigidly disciplined, and both have their ears cut to demonstrate that they have been given some responsibility.⁴³

During the fourth stage, the children move out of the mother's hut and into a barracks. Of the many instructions they receive from their elders, this is the time of sex education and puberty preparation. The transition from stage four to five is marked by a puberty ceremony. "The boy becomes the romantic, lover, fighter, and warrior. The girls are the objects of affection, but they too have their 'council-of-wars' to decide upon prospective lovers". After the years of marriage and active social roles (stage six), stage seven indicates a diminishing of work responsibilities. During stage eight, one is identified as "almost an ancestor" and therefore considered very wise and sought out for advice and company.⁴⁴

⁴² Ibid., 53.

⁴³ Ibid., 54-55.

⁴⁴ Ibid., 58-59.

Spirituality: Health and Death

Symbolic Anthropology, as the study of meaning in the life of the people, is for the Swazi a study into traditional faith and ritual.⁴⁵ The following cannot begin to explain the “why” and is limited to the “what”.

Common to most Africans, health is a spiritual matter. There are two categories of “healers” central to the Swazi traditional religious faith and belief in the spirit world. Many Swazi mix both traditional and Western medicine. A herbalist uses leaves, bark, and plants for the “good” magical purpose of healing. A diviner, or witch doctor, believes that an evil spirit entered him/her during a long suffering illness. The witch doctor then uses evil and ancestral spirits on others.⁴⁶

When the long, suffering illness is over, the affected person enters “witch-doctor school”.⁴⁷ “When he has finished the prescribed course, he presents himself publicly in a fantastic costume of snake skins and plumes, carrying in his hand an antelope tail which has been doctored with such concoctions as the nose of a hyena, the fat of a hardbacked armadillo, the eye of a lion, and the beak of a hawk.”⁴⁸

⁴⁵ D. Levinson and M. Ember, eds., Encyclopedia of Cultural Anthropology Vol. 4, (New York: Henry Holt & Co., 1996), 1274.

⁴⁶ Winfried Corduan, Neighboring Faiths, (Downers Grove, IL.: InterVarsity Press, 1998), 137; D. Merrill Ewert, A New Agenda for Medical Missions, (USA: MAP International, 1998), 10; Middleton and Rassom, 332; Lula Schmelzenbach, The Missionary Prospector, (Kansas City, MO.: Nazarene Publishing House, 1936), 107. The literature is not clear in the use of combining diviner and witch doctor. Kuper presents them as separate roles. Upvall uses diviner or herbalist and does not address the witch doctor.

⁴⁷ Dorothy Davis, Nursing in Swaziland, (Florida, Transvaal: Nazarene Publishing House, 1975), 6.

⁴⁸ *Ibid.*

“The main duty of the witch doctor is to locate the actual cause of the trouble, and since all trouble, whether it be sickness, disease, accident, death, a quarrel in the family, the home burning down, lightening, hail, drought, or anything else small or great, none of these can come from any natural cause, but because of a witch somewhere.”⁴⁹ The beating of drums, that can be heard for miles around, is part of the witch doctor ritual. After the witch doctor has danced, leaped in the air, thrown spears, growled, shrieked, if his treatment fails, it is certainly the fault of the patient and not his responsibility.⁵⁰ “His concoctions are often made of dried chicken gizzards, snake hearts, powered bones, human blood, and some parts of the human body.”⁵¹

Four bodies were once found outside of the mission station with the organs wanted by a witch doctor missing. “The more potent medicines must have certain parts of a human body. The type, shade of color, age, or sex of the body desired depends upon the use to be made of the medicine.”⁵² All too often, the concoction was slow-acting deadly poison that causes a great deal of suffering for eight to ten days before death. It was difficult for the British to convict the witch doctor of “muti” poison murder for he was long-gone from the community before the victim died. Sobhuza II believed that the true Swazi would regard such practice with disgust and horror and that the death of the evil-doer was important for the well-being of the nation.⁵³ Because of the Swazi

⁴⁹ Schmelzenbach, 107.

⁵⁰ Elizabeth Cole, Give Me This Mountain. (Kansas City, MO.: Nazarene Publishing House, 1959), 16; Davis, 7; Mabel Jane Tustin interview by author, audio/visual recording, Temple City, CA., 28 February 1998.

⁵¹ Schmelzenbach, 108.

⁵² Fairy Chism and Helen Jester, The Glow of the Veld Fires (Kansas City, MO.: Beacon Hill Press, 1949), 15.

⁵³ *Ibid.*; Kuper, 116.

traditional belief in the spirit world, there is much ritual around death. The father is the family link to the ancestral spirits. Family members are added to the same grave, with the first body 12 feet down and filling the grave until three feet from the top.⁵⁴ “The more important the deceased, the more elaborate the rites”.⁵⁵ Even an ex-wife must come back and sit by the grave site for days. A widow is expected to grieve longer than the widower (as he usually has other wives), and then she is sent to live with her late husband’s brother.⁵⁶

It is evident that these pages are but an introduction into this unique nation and culture that would become home to Miss Davis. It was into this world that the Church of the Nazarene brought the gospel of Jesus Christ and health care.

Church of the Nazarene

While Swaziland was dealing with a mixture of old and new, traditional and European, change was also happening on the other side of the world. A new Protestant denomination was born. It was under appointment of this new denomination, the Church of the Nazarene, that Dorothy Davis Cook would go to Swaziland. This history of the Church introduces its foundation, its theology, and its mission to the world.

⁵⁴ Lillian Cole, Pigg’s Peak, to Brother Anderson, Kansas City, 26 November 1916, Church of the Nazarene Archives, Kansas City, MO.; Gailey, “Changes in the Swazi Social Stratification,” 41.

⁵⁵ Middleton and Rassom, 333.

⁵⁶ Mary Schmelzenbach, Memories of Africa, (Kansas City, MO.: Nazarene Publishing House, 1993), 34; Middleton and Rassom, 333; Mildred Avinell McNabb interview by author 5 March 1999.

The Formative Years

New Testament Christianity is 2000 years old, and not all decisions and actions done in the name of Christianity have been right or biblically sound. Disagreements on the man-made power of the church and the priest led in part to the Reformation of the 1600's. One product of the Reformation, John Wesley, lead the holiness movement out of which the Church of the Nazarene would emerge.⁵⁷

In 1729 John Wesley earnestly began to study his Bible as the only standard of truth.⁵⁸ After years of involvement in what he described as “a fair summer religion”, John and his younger brother Charles experienced salvation from sin and the filling of the Holy Spirit. A living example, he studied and taught Christianity as being a dynamic process of babe, to young, to mature, He matriculated from Charterhouse Scholar at Christ Church Oxford University. His study of original Greek and Latin texts and of the theologians and philosophers who preceded him continues to be respected today and is considered to be logically and methodically reasoned.⁵⁹

One theologian studied by Wesley was Dutch pastor James Arminius. Arminius fought the Calvinistic tide that offered salvation only to the elect few. Arminius “preached that Jesus died for all, that all could be saved, and that human beings were given free grace. Further, one had to choose God and good to be saved”.⁶⁰

⁵⁷ Wes Tracey and Stan Ingersol, What is a Nazarene? (Kansas City, MO.: Beacon Hill Press, 1998), 32.

⁵⁸ B. Cox, John Wesley's Concept of Perfection. Kansas City, MO.: Beacon Hill Press, 1964), 17.

⁵⁹ R. Green, “John and Charles Wesley Experience Conversions”, in Christian History, ed. K. Miller. (Carol Stream, IL.: Christianity Today, Inc., 1990), 44

⁶⁰ Tracy and Ingersol, 19-20.

Wesley, like Christ, shared his message not only with scholars, but also with the poor, the oppressed, and the disenfranchised. He presented the message of a Christ-centered life and holiness growth through Christ in its fullness and integrity “in plain words to plain people”.⁶¹ “To communicate his vision to ordinary people, John Wesley exercised his genius for putting a whole truth into a simple sentence. He summed up his theology in the four words ‘faith working through love’. He spoke his vision in the phrase ‘the world is my parish’.”⁶²

Wesley brought to this theological heritage an interest in medicine and the care of those in need. He began to read medical texts during his teen years at Oxford. No doubt his personal afflictions of fevers, nosebleeds, consumption, and hands shaking, influenced his continued interest.⁶³

In April of 1741, Wesley began to visit the sick every other day and within one month had to recruit assistance. The care-givers met each Tuesday to discuss what had been accomplished. By 1746-47, Wesley was dispensing medicines to those unable to afford standard health care. In 1747, he published Primitive Physick: or, An Easy and Natural Way of Curing Most Diseases. His book, which would continue to be published until 1880, listed 250 maladies and suggested remedies. Part of this work stressed preventive measures such as nutrition, exercise, and personal and home environmental hygiene.⁶⁴

⁶¹ A. Outler, John Wesley, (New York: Oxford University Press, 1964).

⁶² David McKenna, What a Time to Be Wesleyan!, (Kansas City, MO.: Beacon Hill Press, 1999): 14.

⁶³ E.B. Holifield, Health and Medicine in the Methodist Tradition, (New York: Crossroad, 1986), 29; Harold Vanderpool, “The Wesleyan-Methodist Tradition” in Caring and Curing eds. R. Numbers and D. Amundsen. (New York: Macmillan, 1986), 320.

⁶⁴ Holifield, 32; Vanderpool, 321, 324; John Wesley, Primitive Physic: or, An Easy and

Wesley's theology established what is known as the Holiness Movement.

Holiness, seen as Christ-perfected love in the person via the power of the Holy Spirit, spread across England, Europe, and the Atlantic. "Wesleyan-Holiness denominations sprang up in every section of the country [United States]."⁶⁵

Two New York City women's prayer groups were combined by Sarah Lankford to create the Tuesday Meeting for the Promotion of Holiness. Phoebe Palmer, Lankford's sister, later became leader of the Tuesday Meeting "at which Methodist bishops, educators, and other clergy joined the original group of women in seeking holiness."⁶⁶

A Boston pastor, Timothy Merritt, published the work Guide to Christian Perfection and The National Campmeeting for the Promotion of Holiness was established after the Civil War. "The witness to Christian holiness played roles of varying significance in the founding of the Wesleyan Methodist Church (1843), the Free Methodist Church (1860), and, in England, the Salvation Army (1865). In the 1880s new distinctively holiness churches sprang into existence, including Church of God (Anderson, Indiana) and the Church of God (Holiness). Several older religious traditions were also influenced by the Holiness Movement, including certain groups of Mennonites, Brethren, and Friends that adopted the Wesleyan-Holiness view of entire sanctification."⁶⁷

Natural Method of Curing Most Diseases 24th ed. (London: G. Paramore, 1798); John Wesley, "Sermon 98: On Visiting the Sick" in The Works of John Wesley, Vol. III, ed. A. Outler. (Nashville, TN.: Abingdon Press, 1986), 386. Sermon first presented in Aberdeen, 23 May 1786.

⁶⁵ Tracy and Ingersol, 10.

⁶⁶ Stan Ingersol, "They Shared a Dream", Herald of Holiness 86(6), (1997): 15.

⁶⁷ Ibid.

The Methodist Episcopal Church had been established in 1784.⁶⁸ In a column published for a General conference of the Methodist Episcopal Church, May 1892, was the personal testimony of 54 year old Phineas F. Bresee, DD..

P.F. Bresee, Southern California Conference: Born in a Christian home and converted to God in my youth, I became a member of the Methodist Episcopal Church, the church of my fathers. A few years after I entered into the blessing of entire sanctification, and am rejoicing in the riches of grace and the privilege of preaching the glorious gospel of salvation to dying men. My experience is being miraculously enriched by the refreshing and anointing power of the Holy Ghost. I rejoice in the presence of Him whose blood cleanseth and whose love fills my heart.⁶⁹

Due to later differences on method versus doctrine, Bresee left the Methodist Episcopal conference in 1894. Based in the Pasadena, California area, numerous people of the Holiness Movement surprised Bresee by following him to wherever he was guest preaching. This group of laity took it upon themselves to rent a downtown Los Angeles meeting hall and Bresee agreed to pastor these people. The first meeting was held on October 6, 1895 and the Los Angeles Times reported on the meeting and on Bresee's first sermon.⁷⁰

Anything new in religion is false, and yet everything in salvation is marvelously new to him who finds it. The reformers have not led men into new paths, but back to old truths. Luther and Wesley preached no new truth or doctrine. The tendency of men and of light thinkers is to get away from the simplicity of the gospel... The modern method of educating men into salvation by refined influences and good environment is insufficient in its results. Conversion and sanctification must be experienced.⁷¹

⁶⁸ Ibid., 5.

⁶⁹ Carl Bangs, Phineas F. Bresee, (Kansas City, MO.: Beacon Hill Press, 1995), 13.

⁷⁰ Ibid., 195-196.

⁷¹ Ibid.

The Church of the Nazarene was officially organized on Sunday October 20, 1895.⁷² JP Widney, who would later be president of the University of Southern California, had proposed the name representing Jesus of Nazareth. For Bresee, Church of the Nazarene “expressed his desire for a church where rich and poor alike would be welcome, where all could accept the message of Christ without the encrustations of overgrown ecclesiasticism and formality and without embarrassment over either poverty or wealth”. This concept of equality was also evident in Bresee’s continued encouragement of both men and women to seek ordination and to hold all offices in the church.⁷³

The Church of the Nazarene grew not only by spiritual faith conversions and the opening of Nazarene churches in other cities, but also via the joining of other Holiness Movement congregations. Eight congregations from New York, Massachusetts, and Rhode Island had joined in 1896 to form the Association of Pentecostal Churches of America with Hiram F. Reynolds as their elected leader. At a Chicago 1907 meeting, this group merged with the Bresee led Church of the Nazarene and the Pentecostal Church of the Nazarene was established. Reynolds joined Bresee as a Nazarene General Superintendent. In September, 1908. the Pennsylvania Conference of Holiness Christian Churches became Nazarene.⁷⁴

⁷² Roy Swim, A History of Missions of the Church of the Nazarene, (Kansas City, MO.: Nazarene Publishing House, 1936), 21.

⁷³ Bangs, 197, 210.

⁷⁴ Bryan Merrill, “The Rise of the Church of the Nazarene” (TD, 1992). Church of the Nazarene Archives, Kansas City, MO..

On October 13, 1908 at Pilot Point, Texas, The Holiness Church of Christ, by unanimous vote, also merged with the Pentecostal Church of the Nazarene.⁷⁵ This Pilot Point assembly is considered the official birthday of the Church of the Nazarene.⁷⁶

In the years that followed, holiness congregations from Scotland (1915), London (1952), Canada (1958), Britain (1955), and Nigeria (1988), would become Nazarene. Due to the growing association of the name “Pentecostal” with the speaking-in-tongues movement, the word was removed from the official church name in 1919.⁷⁷

Global Missions

Missions is a biblical theme with active participants long before the birth of the Church of the Nazarene. However, from that moment of birth, the Church of the Nazarene has been a missions-minded church.

Prior to the union of 1908, the various groups were sending missionaries. One active missionary promoter was Dr. Hiram Reynolds. He served almost twenty years as the Secretary of Missions for the Association of Pentecostal Churches of America. Dr. Reynolds later became the General Secretary of Foreign Missions for the Church of the Nazarene. Dr. Bresee was himself “intensely missionary at heart”. He stated “we are debtors to every man to give him the gospel in the same measure we have received it”.⁷⁸

⁷⁵ Church of the Nazarene, Manual. (Kansas City, MO.: Nazarene Publishing House, 1924), 20.

⁷⁶ Tracy and Ingersol, 10; Neil Wiseman, “Who are the Nazarenes in 1997 and What Can We Become?”. Grow 8(2), (1997): 55.

⁷⁷ Merrill, “The Rise of the Church of the Nazarene”.

⁷⁸ Swim, 24, 26-27.

At the time of the Pilot Point meeting, represented mission fields included Eastern and Western India, Cape Verde Islands, Mexico, Japan, China, and Africa. Seventeen missionaries were recorded on the roll that day. The original Manual had already placed missions as a significant part of the church. By 1924, the Manual listed mission fields in three main areas. Area One was Latin America, which was comprised of Mexico, Central America, South America, and Cuba. Area Two was Africa, India, Palestine, Syria, and Cape Verde Islands. Area Three included China, Japan, the Philippine Islands, the Hawaiian Islands, and Australia.⁷⁹

There were key players in these early years of development. Mr. E.G. Anderson served as General Treasurer of Missions from 1910 to 1917 and as General Secretary from 1917 to 1925. Dr. H. Reynolds resumed the General Secretary responsibilities until 1928 when Dr. J.G. Morrison was elected to the post. Morrison served until he accepted the vote to the General Superintendency in 1936. Under the leadership of a former missionary to Japan, C. Warren Jones (1936-1948), the Church of the Nazarene missions survived World War II, expanded fields from 17 to 24, increased the number of missionaries from 69 to 204, and missionary offerings more than tripled.⁸⁰ Today there are Nazarenes in over 120 countries and more than 715 missionaries under appointment.

The Women's Foreign Missionary Society was started in 1899 by Mrs. H.F. Reynolds and Rev. Susan Fitkin. The early society nickname of "Dustpan Brigade" would not be considered complementary by today's standard. On the west coast, the Los Angeles Church formed the Home and Foreign Missions Society of the Church of the

⁷⁹ Ibid.; Church of the Nazarene, Manual; J. Fred Parker, Mission to the World, (Kansas City, MO.: Nazarene Publishing House, 1985), 27.

⁸⁰ Parker, Mission to the World, 39; Swim, 32.

Nazarene in 1903. In that first year, the Society opened a Spanish mission in Los Angeles under the leadership of Mrs. May McReynolds. In 1906, the Society sponsored the Hope School for Orphans and Widows in Calcutta, India. Carrying on under the name of Women's Foreign Missionary Society, the group was officially accepted as a society of the Church of the Nazarene in 1915. This group was forceful and enterprising. Between 1932 and 1936 these women raised \$433,549.00 for missions.⁸¹

Missions in Swaziland

The society, now known as the Nazarene World Missionary Society (NWMS) remains the fund-raising arm of the Church's missions program. Through the years, missionaries like Harmon Schmelzenbach, and later Dorothy Davis Cook, have been supported by the society through both prayer and finances.

After his conversion in Carrolton, Ohio, orphan Harmon Schmelzenbach enrolled in Peniel Bible College of Texas Holiness University. While studying for a missions class and reading the book The Life of Livingstone, he suddenly "saw" Livingstone's "smoke from a thousand villages". These fires represented the places in Africa where the message of Jesus Christ had not yet been heard. "From that moment 'his' people were African and his land was Africa."⁸²

Representing Peniel Bible College, Schmelzenbach sailed from New York on May 5, 1907. Also on board the Durham Castle was a party of nine missionaries from

⁸¹ Ibid., 26; Swim, 37-38. It was Fitkin's son for whom the hospital in Swaziland would later be named.

⁸² Parker, Mission to the World, 15; Russell Delong and Mendell Taylor, Fifty Years of Nazarene Missions, (Kansas City, MO.: Beacon Hill Press, 1956), 183; Harmon Schmelzenbach III, Schmelzenbach of Africa, (Kansas City, MO.: Nazarene Publishing House, 1971), 12-13.

God's Bible School in Cincinnati, Ohio. A member of this group, Lula Glatzel, would become Mrs. Lula Schmelzenbach on June 19, 1908.⁸³

The Schmelzenbachs received word in February 1909 that the Peniel College had merged with the Church of the Nazarene and they could be Nazarene missionaries if they so desired. They readily accepted. With official denominational papers in hand, they could now get government recognition and purchase land. Rev. and Mrs. Schmelzenbach and their two children set out across the miles to find the place to open a mission.⁸⁴

In the north of Swaziland, 15 miles from the town of Piggs Peak, a farm in the British designated "native area" was for sale. The price wanted was \$400.00. However, the Swazi Queen Mother had vowed 15 years prior not to let any more white men move into Swaziland and therefore had to approve this sale. Missionary Etta Innis had joined the Schmelzenbachs and while waiting for the Queen's approval, all lived for over six months on one six by nine foot donkey wagon.⁸⁵

During those months, Schmelzenbach met with the Queen several times. She must have been impressed with both the man and his mission for in August 1911 she not only gave her approval but she donated the land. The Nazarenes were the first missionaries to receive such a land grant and the Swazi government has continued to allow the Nazarenes control of the land. This station was named Peniel Mission Station and then following the death of Schmelzenbach May 22, 1929, was renamed the H.F.

⁸³ Delong and Taylor, 184; J. Fred Parker, Into All The World, (Kansas City, MO.: Nazarene Publishing House, 1983), 15. God's Bible School is a Wesleyan-Holiness institution.

⁸⁴ Delong and Taylor, 185; Parker, Mission to the World, 117.

⁸⁵ Delong and Taylor, 195-196; Parker, Into All The World, 17.

Schmelzenbach Memorial Station.⁸⁶ This is where Miss Davis would spend her first year in Swaziland.

As Schmelzenbach daily walked through the kraals, he was heartbroken by the many sick and hurting. He began to carry a bag of simple remedies and a pair of tooth forceps and before the first nurse arrived in Swaziland, he had extracted over 500 teeth. Most Swazis would come to him only after the treatment of the witch doctor failed. Many were then treated with quinine for malaria, lotions for burns, sulfa ointment for itching, and permanganate disinfectant. With relief granted by these medications, the Swazi began to believe that the bag was filled with magical powers. This gave Schmelzenbach the opportunity to speak of the Great Inyanga (Doctor) who could heal both the body and soul and give eternal life.⁸⁷

He once said that if he had had the funds he would have studied medicine also. As it was, he used simple remedies and cleanliness with massive doses of prayer. So began the medical phase of Nazarene missions in Africa. Schmelzenbach believed that “a Christian could not be indifferent to the physical needs of his fellow man”. He wrote to Kansas City, location of the Church of the Nazarene headquarters and urged the sending of nurses and doctors as well as pastors.⁸⁸

⁸⁶ Delong and Taylor, 189; 188; Parker, Missions to the World, 129.

⁸⁷ William Esselstyn, Nazarene Missions in South Africa, (Kansas City, MO.: Nazarene Publishing House, 1952), 81; Schmelzenbach, The Missionary Prospector, 88; Schmelzenbach, Schmelzenbach of Africa, 40.

⁸⁸ Parker, Into All The World, 19; Schmelzenbach, Schmelzenbach of Africa, 40.

Nazarene Health Care

The First to Go

Lillian Cole, RN, a graduate of the New York Lying In Hospital, the Chicago Lying In Hospital, and the Massachusetts City Hospital, was the first Nazarene missionary nurse to go Swaziland. She was to leave for Swaziland January 1915, was delayed by World War I, and did not arrive there until 1916.⁸⁹

Cole immediately set forth plans for a hospital. She estimated a cost of at least \$1000.00 to build the structure and \$4000.00 to furnish the operating room. Cole suggested a 60 X 26 foot building with a few well lighted rooms, a front screened-in veranda, wood floors and ceiling, sheet iron roof, and a bathroom which she deemed "imperative". She drew a floor plan and included the drawing in an article about the need for a hospital. She also saw the need for a girl's room (for the many orphans), a pantry, and a stable for her horse (the only transportation).⁹⁰

Cole also sent home instructions on the qualities and characteristics she expected in any physician that would be sent to serve in Swaziland. She did not want a woman (due to the loneliness) nor did she want a "mere physician". She wanted a married, settled down, expert surgeon.⁹¹

By 1921 the little hospital had 18 beds and a Dr. CE West arrived about that same time. However, the British government would not accept his American medical training

⁸⁹ Lillian Cole Short, "Biography". (n.p., November 20, 1959). Church of the Nazarene Archives, Kansas City, MO.; Swim, 75.

⁹⁰ Lillian Cole, Piggs Peak, to Brother Anderson, Kansas City, 14-16 August 1916, ALS; 15 September 1916; 25 September 1916, TLS; 29 October 1916. Lillian Cole, "Piggs Peak Africa", The Other Sheep, December 1916, 4. Church of the Nazarene Archives, Kansas City, MO.

⁹¹ Lillian Cole to Brother Anderson, 15 September 1916, 25 September 1916.

and credentials and he was transferred to China.⁹² It is interesting to note that the British did accept American nursing education and registration and not that of physicians.

Physicians were required to be registered in the United Kingdom, Northern Ireland, or the Union of South Africa, and South Africa required three years of training in a British or Canadian medical school. The doctor to arrive who met this criteria, and Lillian Cole's, was David Hynd from Scotland. Arriving in 1925, Hynd was married with two children (Samuel and Isabel), a recent recipient of a Diploma in Tropical Medicine, and a surgeon.⁹³

Dr. Hynd had barely arrived when he received a message of goodwill from the Old Queen regarding Nazarene health care. At the request of the government, Raleigh Fitkin Memorial Hospital had recently relocated to Bremersdorp (later renamed Manzini) which placed the hospital in a more central location in the country. The new facility was officially dedicated on July 16, 1927 with a ribbon cutting by Rev. Susan Fitkin and a speech by King Sobhuza II. A second qualified physician, Dr. Mary Tanner of Scotland, would not arrive until 1930.⁹⁴

⁹² Esselstyn, 81.

⁹³ David Hynd, Glasgow, to Brother Anderson, Kansas City, 26 January 1925, ALS; David Hynd, Bremersdorp, to C. Warren Jones, Kansas City, 15 September 1941, TL. Church of the Nazarene Archives, Kansas City, MO.; Parker, Mission to the World, 126. It would be, many years later, that King Sobhuza II would die in Samuel's arms.

⁹⁴ David Hynd, Bremersdorp, to Brother Anderson, Kansas City, 14 September 1925, TLS. Church of the Nazarene Archives, Kansas City, MO.; Samuel Hynd, A Pictorial History of Manzini Nazarene Mission, (Florida, Transvaal: Nazarene Publishing House, 1975), 6; Swim, 80.

Nursing Education

It is evident that it was nurses who provided and expanded health care in Swaziland in those early years. Following World War I, reinforcements had arrived (see appendix 3). Some came with an idea, a burden on the heart, that Swazi women could be trained as nurse aids and learn to help care for their own people.

The first was Myrtle Pelley (Taylor), who recorded her missionary life in Neath the Warm Southern Cross. She arrived in Cape Town May 29, 1922 on the steamship Mauritania. Initiation to mission life, after a long and tiring horseback ride to Piggs Peak, began with the 5:00 A.M. mission bell and early prayer time that Schmelzenbach required of all. Another early “missionary” task was being called to a kraal to protect a mother and child from a bobcat inside their hut. Other adjustments to this new life included learning how to dodge the deadly mamba snake, sleeping with mosquito netting (under which bats could still make their way to your skin), and remaining on watch for hiding scorpions. Malaria remained one of the worst difficulties through the years.⁹⁵

Pelley took nursing care to the area of Stegi from 1923 to 1930.

Transferring me from the hospital to Stegi was like turning my sunshine into night. I was looking forward to training native attendants. I like taking in the sick and taking care of them, but here I am working more as a doctor would- visiting the sick, ordering medicines, giving instructions, doing all kinds of dressings, a little surgery, extracting teeth and office calls. The first six weeks I traveled 400 miles and gave 140 treatments. They call me the strongest woman in the Stegi district.⁹⁶

I came out with a dream close to my heart of training native young people of this land to become aides for our medical work. There are stacks of nursing measures which they can easily learn with a good missionary to supervise who has this on her heart, which will give her more time to do the technical things. So

⁹⁵ Myrtle Taylor, Neath the Warm Southern Cross. (Kansas City, MO.: Nazarene Publishing House, 1959), 9, 23, 30, 41-42.

⁹⁶ Ibid., 57; Myrtle Pelley, Stegi, to Brother Anderson, Kansas City, 15 September 1923, ALS. Church of the Nazarene Archives, Kansas City, MO.

I am doing what I can with this idea now and hope to follow it up more later as the way opens up.⁹⁷

Pelley finally received a replacement in Miss Mary Cooper and was able to return to Raleigh Fitkin Memorial Hospital in 1930.⁹⁸ Before beginning her new assignment,

I visited hospitals from the coast in the south up to Johannesburg for the purpose of studying ways and means for training native nurses- everything pertaining to their food, housing, uniforms, etc. I found it a very profitable thing which helped us greatly in getting our training going, but we were much hampered by the lack of nurses for training the natives in those first very busy years. I had classes all over the hospital wherever I had patients to watch or uniforms to make.⁹⁹

Pelley sent out a plea for money to expand the now 28 bed hospital. "We have had as many as 90 in-patients at a time and seldom go below 50 any more. Just imagine what it means to bathe fever patients, to kneel down on the cement floor to take care of them. No wonder our nurses have so much trouble with back ache."¹⁰⁰

Pelley was later transferred to open the nursing work in Manjacaze, Gaza, Portuguese East Africa and she never lost sight of being a missionary. Pelley stated that "some of the most effective sermons I have ever preached have been through my fingertips. To my mind the greatest work for a holiness woman is to work among the sick and dying who have come to their last chance in life to prepare for heaven. Nursing is hard but it pays when done for the Lord."¹⁰¹

⁹⁷ Myrtle Pelley, Stegi, to Brother Anderson, Kansas City, 12 March 1924, TLS. Church of the Nazarene Archives, Kansas City, MO.

⁹⁸ Taylor, 58, 69.

⁹⁹ Ibid., 69.

¹⁰⁰ Myrtle Pelley, Bremersdorp, to My Dear Stand-by Friends, December 1933, TLS. Church of the Nazarene Archives, Kansas City, MO.

¹⁰¹ Basil Miller, Missionaries in Action, Part I, (Kansas City, MO.: Nazarene Publishing House, 1941), 49, 51.

Through the years, the need for training Swazis in basic nursing care continued to grow in the minds of many. However, due to either it being against Swazi culture for a young girl to give such care or to the belief that the Swazi girl did not have the capacity to learn nursing, some Swazi and some Europeans did not think it would ever happen. The first Swazi trainee was pulled from the garden one day to be a needed pair of hands during a 1928 surgery. She did so well that two more young ladies joined her in study and in 1931 Kellinal Shongwe, Keziah Mapanga, and Mini Dlamini Masika became the first nursing aide level graduates.¹⁰²

In 1966, Miss Masika received the Certificate for Meritorious Service from Queen Elizabeth for her 34 years of health care to her own people.¹⁰³ “For a heathen African to come into the atmosphere of a mission hospital and be cared for by people of his own tribe who under ordinary circumstances would be afraid to come near him in his sickness is a revelation of a new spirit having come among his people. To see white doctors and nurses give themselves to this service speaks louder still.”¹⁰⁴

Another key nurse in nursing education came to Swaziland. During the Depression Years, the Missions Board was unable to send out salaried missionaries. However, after receiving legal assistance and the prayers of many, J. Evelyn Fox was able to get her personal money out of a now-closed bank and she chose to pay her own way to Africa.¹⁰⁵

¹⁰² Davis, 16. Europeans is the common term for all white people. Esselstyn, 83.

¹⁰³ Ibid.

¹⁰⁴ David Hynd, *Africa Emerging*. (Kansas City, MO.: Nazarene Publishing House, 1959), 79.

¹⁰⁵ J. Evelyn Fox, Nampa, to J.G. Morrison, Kansas City, 3 October 1932, TLS; Jennie Evelyn Fox Obituary, 1947, Church of the Nazarene Archives, Kansas City, MO.

Jennie Evelyn Fox was born in Iowa in 1892 and taught elementary and junior high school before graduating in 1922 from St. Luke's Hospital and Training School for Nurses in Boise, Idaho. She quickly moved into supervisory roles and in the summer of 1928 attended "Administration of Nursing Schools" and "Supervision of Nursing Schools" at the University of California, Berkeley. At the time of her missions application, Fox was Superintendent of the Nursing Training School at Nazarene Missionary Sanitarium and Institute (later Samaritan Hospital) in Nampa, Idaho.¹⁰⁶

In Swaziland, Fox expanded the nurse's aide program from three to four years and added basic midwifery in order to meet the standard set by surrounding countries. The entry educational level was raised to Standard 6 (around 8th grade) and by 1935 nine students had graduated and eight had passed a government test. The government was so impressed that they designated the Nazarene school as the official Swazi nursing program and donated money for its expansion.¹⁰⁷

"It is very interesting teaching native nurses. They ask questions that no white girl would ever think of. Some of them do real well, only they are not very swift. They do have good judgment as a rule. Most of them are very interested in maternity work. They have at least three months special training in this work with the Red Cross nurse who has charge of the maternity and welfare work."¹⁰⁸

Fox was dissatisfied with the living conditions of the nurses. While on furlough in 1940 she wrote:

¹⁰⁶ Jennie Evelyn Fox, "Application of Candidate to General Board of the Church of the Nazarene", 29 June 1932, Church of the Nazarene Archives, Kansas City, MO.

¹⁰⁷ Davis, 17;

¹⁰⁸ J. Evelyn Fox, Bremersdorp, to Miss Emma Word, Kansas City, 31 December 1934, Church of the Nazarene Archives, Kansas City, MO.

Regarding any funds received over and above traveling expense: as you know, my work in Swaziland has been chiefly among the native nurses, and I think I should like to apply any money I may receive on equipment for their home and lecture room, or on extending their living quarters. Until this year the student nurses have lived in rooms at the back of the hospital. They were never away from their work as patients were continually passing their door and often entering their quarters. They had little freedom as they always had to be kept quiet on account of living so near the sick. The Government gave us an appropriation to be used for a home for them and last February we moved into the first unit of their home. By using the corridor for beds, we can now house about half of the students in the new building. One of the missionary nurses lives there with them to direct their home life.¹⁰⁹

Fox would die in Swaziland from a heart condition in 1947.¹¹⁰ At the time of her passing, there were 83 nurses in training and 44 of the current hospital staff were program graduates.¹¹¹

She took up the work of training Native nurses with a skill and thoroughness which is bearing fruit in many a corner of the Swaziland Protectorate, where in mission outstations Native nurses are establishing dispensary or health centers that are proving a blessing to the whole community. Her aim was to produce true Christian nurses efficient in their profession, and the life she lived and the pains she took to secure their spiritual welfare and religious training are giving Swaziland a Christian nursing profession.¹¹²

A window into the world that would be Dorothy Davis Cook's has been opened. This insight is, in part, more than she herself knew when she went to Swaziland. However, the stage setting of a nation and the early work of a missions-minded church

¹⁰⁹ J. Evelyn Fox, Olivet, to C. Warren Jones, Kansas City, 2 December 1940, Church of the Nazarene Archives, Kansas City, MO.

¹¹⁰ Fox Obituary.

¹¹¹ Ibid.

¹¹² David Hynd, "Missionary Nursing Pioneer Passes On", The Other Sheep, (n.d.) Church of the Nazarene Archives, Kansas City, MO.

had been established. Like Schmelzenbach to the fires of a thousand villages, a new missionary nurse was going to Swaziland.

CHAPTER THREE

Before Africa

The Early Years

Dorothy Fay Davis was born to Mr. and Mrs. Hurshel Davis in Hugo, Colorado on 29 March, 1912. Of Welsh lineage, her Davis grandparents had been Iowa farmers before making Colorado their home. Her maternal grandparents owned the M.M. Smith General Merchandise store in Royah, Colorado, and it was there that her parents had met.¹

The Davis grandparents were Quaker and in time they moved themselves, children, and grandchildren (now three young girls) to the Quaker village of Whittier, California. There Dorothy's father became an accomplished plastering contractor who was able to build a new family home. Mrs. Davis was in the home full time. Her father had seen no value in women receiving an education and had denied her the opportunity to attend high school. While he would attempt to place the same limitation on his granddaughters, Dorothy's parents encouraged education. "My mother was always pushing me to get a better education and improve myself."²

The Davis home is remembered fondly. "I enjoyed my home. I enjoyed my sisters. I was a happy child, very happy, and I think my parents made it so. You know they went through the Depression and I never knew we had a Depression. I never knew that we were poor people. I thought we were rich. I really did. They never did complain.

¹ Dorothy Davis Cook interview by author, tape recording, Alhambra, CA., 3-4 March, 1999.

² Ibid.

that we were poor people. I thought we were rich. I really did. They never did complain. They made us, they made a happy home for us.”³ Almost in echo, Dorothy’s sister Evelyn remarked, “I think we had a happy home. It wasn’t perfect but it was happy. We felt very stable because we were in a Christian environment in the home and in the church. Our church was our life. It was wonderful. So while we didn’t have a lot of material wealth, we had lots of comfort and joy.”⁴

In addition to the comfort and joy, there was strict discipline in the home.

You know, in high school I learned to do the Charleston....I was practicing in the hallway and I met my father coming down the hallway...He says ‘Don’t ever, ever, let me see you do that again!’ Oh he was very strict. He was Sunday School superintendent for awhile in Alhambra and my second sister had a lot of trouble with her hair. My hair was naturally curly and hers was not. And she said to my mother, ‘Just go ahead and leave me. I’m not going to church this morning’. He said, ‘Daughter, as long as you live in this house you are going to go to church’. And so, he just waited for her to fix herself and get ready to go.⁵

Both in love and in training, a solid foundation had been laid. In 1971 and in honor of Miss Davis’ pending retirement, Swazi Matron Mabuza would write “We are indebted to her parents who have led her to this way of life”.⁶

Their church home was now the Church of the Nazarene. Herby Overholt, a family friend, had repeatedly invited them to visit the Whittier Church of the Nazarene. Dorothy and her parents first attended the church during a revival meeting and it was on this night that Dorothy accepted Jesus Christ as her personal Savior. “That night we went

³ Ibid.

⁴ Evelyn Sanner interview by author, tape recording, Alhambra, CA., 3 March 1999.

⁵ Dorothy Davis interview by author, 3-4 March 1999.

⁶ A.C.T. Mabuza, “Tribute to Miss Dorothy Davis”, Swaziland Nursing Journal 1(5), (1971): 5. Personal papers of Dorothy Davis Cook, Alhambra, CA.

to the altar and were saved and from then on we were members of the Nazarene church.”⁷

When Dorothy was 14 years old, the Alhambra Church of the Nazarene in Alhambra, California became the family church home. After hearing Rev. Melza Brown during a Saturday evening street meeting on the corner of Main and Garfield, “we went to the Alhambra Nazarene church and never went any place else”.⁸

Dorothy graduated from Alhambra High School in 1930. She then attended the first Nazarene institution for higher education, Pasadena College (now Point Loma Nazarene University), earning her Bachelor of Arts degree in 1934 with a major in education and a minor in religion. There she was actively involved in student life while earning a life membership in the Sigma Phi Mu Honor Society.⁹ Dorothy served on the debate team and argued such topics as American industries adopting a forty-hour work week and that nations should adopt a free trade policy. She belonged to the International Relations Organization and, for physical activity, she played basketball through the Chrysostom Chapter.¹⁰

⁷ Dorothy Davis Cook interview by author, tape recording, Alhambra, CA., 3-4 March 1999. The altars of the Church of the Nazarene are opened to all who would come and pray. Membership in the denominational organization is a distinct personal decision at a later time.

⁸ Dorothy Davis Cook interview by author, 3-4 March, 1999.

⁹ Ibid.; Dorothy Fay Davis, Alhambra City High School Diploma, 19 June 1930, Dorothy Fay Davis, The Pasadena College Diploma 29 May 1934, and Dorothy Davis, Sigma Phi Mu Honor Society Chapter of Pasadena College 25 May 1932; Dorothy Davis Cook, “When God Calls” (n.p., ca. 1980’s). Personal papers of Dorothy Davis Cook, Alhambra, CA.; *La Sierra* (Pasadena, CA.: Pasadena College, 1931) 37, 48; (1932) 44; (1933) 39, 54, 55, 63, 76, 78, 79, 90; (1934) 25, 37, 80, 81, 82, 84, 88, Bresee Alumni House, San Diego, CA.

¹⁰ *La Sierra* .

Throughout her college years Dorothy was active in the student Missionary Society. By 1933, the society was known as the Christian Worker's Association. "The Christian Worker's Association is composed of those students who are definitely called of God to His service. That the purpose of this organization is not in vain has been evidenced not only by the growth in grace of its members, but also by the fact that the consecration of their talents has been instrumental in winning precious souls to Christ."¹¹

Upon graduation, and with a new idea of studying medicine, Dorothy enrolled in Pasadena City College. Soon discovering that she had an inadequate background to handle the demands of zoology, physics, and chemistry while being a victim of that year's flu epidemic, Dorothy failed all three courses. "Then, one evening God spoke to me through the hymn, 'Lean on my breast, dismiss thy fears, and trust me with thy future years.'¹²

Her Calling

Dorothy had been called to missionary service and she was learning to trust God more and more each day. The statement beneath the 1934 college senior photo of Dorothy Davis states "Pasadena College has given many talented people to the mission field. This year we are proud to have one who has consecrated her life to this cause."¹³

A well-worn King James Version Bible, that had once belonged to Miss Davis' father, can be found on the table by her bed today. Psalm 2:8 is underlined and her writing in the margin reads "September, 1928- called".

¹¹ La Sierra, 1933, 55.

¹² Dorothy Davis Cook interview by author, 3-4 March, 1999; Davis Cook, unpublished 1980, 2.

¹³ La Sierra, 1934, 37.

One afternoon, Sunday afternoon, as I often did, I went to pray and closed the door in my bedroom. As I was praying, the Lord blessed me very much and I said in my prayer, 'Oh Lord, I will do anything you want me to do. I never anticipated a call to the missionfield, but I opened my Bible and in the second Psalm it says 'Ask of me and I will give you the heathen for your inheritance and the uttermost part of the earth as your possessions'. I didn't say anything to anyone because I didn't think they would believe me. So, for over a year I just kept this secret in my heart. And then one Sunday night at the Alhambra Nazarene Church, an old man by the name of Hills was preaching. And when he finished he said, 'I usually give an altar call, but tonight God has told me to have all those who are called into full-time service to come forward'. And so I felt that was the time to let people know that God had called me. So I went forward with a number of other young people. And to my surprise, when they came around and shook my hand, they said 'Well, we knew this all the time'. I don't know how they knew it. Even my mother, I was afraid would oppose me very much because she didn't want me to go far away. She said she knew it. So I just took this as a confirmation and I began my preparation while I was still in high school. I went to Pasadena College and graduated with my B.A. degree and qualified to teach elementary school. I thought I was well prepared but I felt called to preach as a missionary and I had finished the course of study for the preachers.¹⁴

Her sister Evelyn remembers learning of Dorothy's call to missions. "I wasn't surprised at all because she was very religious and she was always praying and so, you just thought, 'that's the way it should go'."¹⁵

Miss Dorothy Fay Davis of 120 S. Stoneman, Alhambra, California first applied for missionary appointment September 15, 1934 to the Department of Foreign Missions of the General Board, Church of the Nazarene. "Next to my salvation and the incoming of the Holy Spirit into my life, God's call to the mission field is the most real thing in my life. I can never be happy outside of God's will and plan for my life! I am trusting Him to

¹⁴ Dorothy Davis Cook interview by author, 28 February, 1998, Alhambra, CA., audio/visual recording. Pasadena College, 1933, she belonged to the Ministerial Group which gathered for weekly theological sessions; Davis Cook, n.p.. She shared a room with her sisters. Family knew she routinely went to the room to pray on Sunday afternoons. When the door was closed she was not disturbed.

¹⁵ Evelyn Sanner interview by author, 3 March 1999.

prepare the way for me. Pray that I will know the right steps to take.”¹⁶ In a June 1935 letter to the Church, Dorothy stated, “The call to the mission field is still burning in my heart and I am constantly praying that the Lord will hasten the time I shall have the privilege of giving all my time in His service. Jesus sweetly saves and sanctifies. I am in His hands for whatever He wants. I shall be happy to go any time or to any place that I am needed.”¹⁷

The steps to service were indeed about to change. “The General Board said they didn’t need any elementary teachers. They said I better take nurses training. They needed nurses more than anything. I ended up at Samaritan Hospital in Nampa, Idaho.”¹⁸

Becoming a Nurse

Samaritan Hospital opened on January 20, 1920 “for the purpose of preparing nurses for medical missions” under the vision and direction of Nazarenes Thomas Mangum, M.D. and wife Emily Mangum, R.N..¹⁹ Dr. Mangum believed that “the secret of success of the medical missionary ministry is in creating an atmosphere where heavenly lessons may be more easily learned”.²⁰ Mrs. Mangum expressed “Worldly

¹⁶ Dorothy Davis, Department of Foreign Missions of the General Board, Church of the Nazarene- Preliminary Information Form, 15 September 1934. AD. Church address 2923 Troost Ave., Kansas City, MO. Church of the Nazarene Archives, Kansas City, MO.

¹⁷ Dorothy Davis, Alhambra, CA. to Dr. Morrison, Kansas City, MO. ALS 30 June 1935. Church of the Nazarene Archives, Kansas City, MO..

¹⁸ Dorothy Davis interview by author, 28 February, 1998.

¹⁹ Data on Samaritan Hospital and Samaritan School of Nursing, (n.d.), Northwest Nazarene College Archives, Nampa, ID.

²⁰ Alline Swann, Song in the Night (Kansas City, MO.: Beacon Hill Press, 1957), 98. Church of the Nazarene Archives, Kansas City, MO..

institutions were training nurses, but under conditions that were by no means conducive to spirituality. Just as the Church saw the need for schools and colleges to train our youth in the principles of Christian living and for service in teaching and preaching ministry, so there seemed to be the need for a place where young people could train for service in the field of nursing.”²¹

By 1929, the General Board of the Church of the Nazarene adopted supervision of Samaritan. The members of the administrative staff were not required to be Nazarene. However, they were expected to be in agreement with the doctrine.²² According to Nazarene missionary Lula Schmelzenbach, “It is the only one of its kind in our movement where our missionaries can receive nurse’s training under Christian supervisors and doctors. This kind of training makes the missionaries better qualified for the mission field, especially dark Africa”.²³

The hospital cared for both the citizens of south-west Idaho and Nazarene missionaries on furlough. School of Nursing requirements for this three-year, patient-care directed program, included a high school diploma, two years of approved college work, and being between the ages of 19 and 30. Additionally, “the applicant must have a definite experience of salvation and be in harmony with the doctrine of Sanctification as taught by John Wesley. Each student is expected to attend church services on Sunday and

²¹ Emily Mangum, “The Nazarene Missionary Sanitarium and Institute”. Milestones (Nampa, ID.: Northwest Nazarene College, 1940), Church of the Nazarene Archives, Kansas City, MO.

²² “Department of Foreign Missions as Related to Sanitarium and Hospital Work of the Church of the Nazarene in the Home Field”, (n.p., TD). Church of the Nazarene Archives, Kansas City, MO.

²³ Lula Schmelzenbach, The Missionary Prospector. (Kansas City, MO.: Nazarene Publishing House, 1936).

nurses' prayer meeting unless on duty or ill."²⁴ Since one requirement for future missionary assignment through the Church of the Nazarene was a college degree, Samaritan nurses were encouraged to walk across the street and obtain their Bachelor of Science degree from Northwest Nazarene College (now University).²⁵

With only the faculty as employees, patient care was rotated between the different student class levels and students had a 48 hour work week. Those fortunate enough to have Sunday off were able to have a free day. One was not excused from classes held on other days. Students were required to have completed at least six bed-baths before a 10:00 class session. Enroute to the classroom, either clothes must be changed or the uniform had to be covered. The nursing cap had to be removed.²⁶

Teaching tools included a large doll named Madame Chase and a skeleton named Oscar. Not always treated with reverence, these two would periodically find themselves seated together in the hospital waiting room or occupying the hospital's only guest restroom. The humor was also deemed contagious around Dr. Nolte, who taught homebirths and defied convention. He went so far as to teach nurses, in the name of preparing for the mission field, how to take blood pressures.²⁷

By 1937, the students were advised to seek nursing registration in California to help insure practice mobility across state lines. Due to inconsistency in the California Board of Registered Nursing's requirements, some Idaho graduates had to sit for the California licensing examination and others did not. In addition to those who served

²⁴ Samaritan Hospital School of Nursing, (brochure, 1936-1937), 12-13. Northwest Nazarene College Archives, Nampa, ID..

²⁵ Ibid.

²⁶ Ibid.

²⁷ Ibid.

globally as missionary nurses, Samaritan graduates went on to be nurse educators, administrators, and clinicians in such places as California, Oregon, Washington, Arizona, Ohio, Illinois, Florida, Minnesota, and Alaska. The School of Nursing would close in 1954 as the hospital census did not meet the National League for Nursing requirements.²⁸ The last patient to be wheeled out of the closing hospital on May 15, 1967, was Mrs. Gladys Kinzler. She had previously served as the Samaritan Hospital Director of Nursing for 20 years.²⁹ Graduates of Samaritan would later summarize their time there as “three of the happiest years of my life”.³⁰

Dorothy attended Samaritan from September 1, 1935 through October 4, 1938. Soon after her entry, Dr. Mangum wrote, “We have in our training school now 25 nurses, and altogether in our organization we have 38. During the last year we have run a daily average of 30 patients. God is keeping our group very spiritual and with a missionary vision. It has been our privilege during the last few weeks to have with us three of our returned missionaries.”³¹

Dorothy’s record of theoretical work documents a student who earned primarily A’s and B’s throughout her three years. There were no failures. Completed courses included Anatomy and Physiology, Bacteriology, Chemistry, Communicable Diseases, Dietetics, Drugs and Solutions, Gynecology, History and Social Basis for Nursing,

²⁸ Samaritan Hospital Nursing School Alumni Milestones, (1996), Samaritan Hospital Reunion, April 7-9, 1999.

²⁹ Annie Laurie Bird, “Physician’s Career in Nampa Spans Fifty Years of Service”, Idaho Free Press (1970), Northwest Nazarene College Archives, Nampa, ID..

³⁰ Samaritan Hospital Reunion April 7-9, 1999, Cedar Lodge, Warm Beach Christian Camp, Stanwood, WA..

³¹ Thomas Mangum, Nampa, to J.G. Morrison, Kansas City, 11 December 1935 ALS, Church of the Nazarene Archives, Kansas City, MO..

Hygiene, Medical Nursing, Nursing Principles and Methods, Obstetrics, Orthopedics, Pediatrics, and Surgical Nursing. Her summary of practical work records 1,095 clinical hours.³² This gave her access to 1,966 patients in 1936, 2,027 patients in 1937, and 1,057 patients in 1938.³³ It was during a 1935 class session that Dorothy “felt the Lord saying, ‘This is your work Dorothy, teaching nurses’”.

Louise Wasson Mansfield (Class of 1937) was a housemate of Dorothy’s at 903 Holly and she lists “Dorothy Davis” as one of her most precious Samaritan memories.³⁴ She recalls Dorothy as “very serious minded, very dignified, very respectful, and friendly. She had a good sense of humor but was shocked at other people’s behavior.”³⁵ Mary Kate Wheeler, later Mrs. Paul Schmelzenbach and a missionary nurse in Africa from 1944 to 1949, was Dorothy’s best friend and roommate. Miss Wheeler had a ringing laughter compared to Dorothy’s quiet humor and Dorothy was “the crowd” that allowed Miss Wheeler to break school rules and date at that time. This dear friend was widowed in 1951 and died in a plane crash in 1971.³⁶

Dorothy has positive memories of her Samaritan days.

I was always happy at Samaritan and I felt that was God’s plan for my life. I never doubted that. I enjoyed the three years that I was studying there. I took my nurse’s

³² Dorothy Fay Davis Samaritan Hospital Summary Sheet, (4 October 1938), Northwest Nazarene College Archives, Nampa, ID..

³³ Samaritan Hospital (n.p. TD, 26 August 1952), Northwest Nazarene College Archives, Nampa, ID..

³⁴ Samaritan Hospital Nursing School Alumni Milestones.

³⁵ Louise Wasson Mansfield interview by author, tape recording, Stanwood, WA., tape recording, 8 April 1999.

³⁶ Ibid.; Dorothy Davis Cook interview by author, tape recording, Alhambra, CA. 8 October 1999; In Memoriam- Mary Kate Schmelzenbach Phillips (n.p., January 1972). Church of the Nazarene Archives, Kansas City, MO.

training under the three-year program and then went to NNC and got my Bachelor of Science in Nursing. The practical experience that we were allowed at Samaritan we wouldn't get in some of the big hospitals. I used to go with the doctors to deliver babies. That was very valuable to me when I was in Africa because my first term I did not have my midwifery, but yet I had to take care of maternity patients and deliver babies. I also appreciated the contact I had with some of the great people like Dr. Mangum and Dr. Nolte. I consider them great doctors.³⁷

On 16 November 1938, Dorothy was licensed by the State of Idaho as a Registered Nurse. While continuing to wait for assignment to the mission field, she worked in a supervisory role at Samaritan Hospital. She also taught a one-semester health class for pre-nursing and home economic majors at Northwest Nazarene College.³⁸ She would later return to Samaritan for six months during a 1947-1948 furlough. Dorothy was remembered by her colleagues as “good and kind”, a “wonderful nurse”, and as a “good, strict supervisor”. “You didn't step out of line with her.” “She would let you know the principle when she corrected you.” “She calmed me down.” And with a negative perspective, “She made us scrub the floors and walls to get the blood off, just like we were her black girls in Africa, instead of housekeeping.”³⁹

Her Missionary Appointment

It would be five years of waiting before “the black girls of Africa” would become the center of her world. Dorothy responded favorably to a 1939 inquiry, by the Church of the Nazarene Foreign Missions Secretary, into her willingness to serve in Africa. She also

³⁷ Dorothy Davis Cook interview by author 3-4 March 1999; Dorothy Fay Davis Samaritan Hospital School of Nursing Diploma, 4 October, 1938 and Northwest Nazarene College Diploma, 1 June, 1938. Personal papers of Dorothy Davis Cook.

³⁸ Dorothy Davis State of Idaho Registered Nurse License, 16 November 1938. Resume TD, ca. 1974. Personal papers of Dorothy Davis Cook.

³⁹ Samaritan Hospital Reunion, April 7-9, 1999.

answered his questions on her current health status, interpersonal skills, and spiritual well-being (see appendix 4).

With approval of the Department of Foreign Missions of the Church of the Nazarene, she signed her appointment certificate on 22 November 1939 (see appendix 5). During the January 1940 meeting of the Church of the Nazarene General Board, her appointment to Swaziland became official.⁴⁰ This placed Dorothy into a select group of Nazarenes providing health care through missions. As of summer 1938, the Church of the Nazarene had “3 Hospitals [Swaziland, India, and China], 13 Dispensaries, 4 Physicians, 17 Nurses, 6 Native Physicians, 13 Native nurses, 45000 Patients treated”.⁴¹

According to the 1940 Church of the Nazarene manual:

281. The Department of Foreign Missions shall perform the work of diffusing Christianity more generally by supporting, maintaining and promoting missionary activity and evangelism by the Church of the Nazarene in foreign mission territory. It shall supervise and administer the work of organizing, maintaining and supporting churches, mission schools, dispensaries, hospitals, and orphanages, and providing them with proper buildings, equipment and workers; and do whatever else may be proper and necessary for the welfare and progress of foreign missionary work, subject to the approval of the General Board and the Board of General Superintendents.

Missionaries to foreign mission territory, both lay and ministerial, shall be appointed and commissioned by the General Board from nominations made by the Department of Foreign Missions.⁴²

⁴⁰ Dorothy Davis, personal journal (AD, 1940), 8; The General Board, “Contract for Foreign Missionary Work,” 22 November 1939, TD. Personal papers of Dorothy Davis Cook, Alhambra, CA..

⁴¹ “Medical Missions the Golden Key,” The Other Sheep (July-August 1938): 33. Church of the Nazarene Africa Regional Office Archives, Florida, South Africa.

⁴² Church of the Nazarene, Manual. (Kansas City, MO.: Nazarene Publishing House, 1940), 160-1.

Dorothy's missionary contract provided her with a salary of \$528.00 per year. The first clause was straight forward in design to end the romance of going to the mission field. "She understands that there are and will be many hardships and great difficulties to be met with in the missionary work aforesaid, but nevertheless she is willing and desires to enter upon the work, and does and will assume all risks of sickness, loss of health and personal injury to herself and family, and damages to and loss of her property."⁴³

Dorothy committed that day to the authority of the Church and to the terms of "first party, second party" responsibilities. She agreed to live and work in love, peace, and harmony with "all men" and to obey local civil laws of the land. She agreed to devote all of her time, and to put forth her best effort in, promoting "the spread of Christianity and to apply the principles thereof in everyday practice." This effort included learning the language of the people. If she ever decided to terminate the contract, a three-month notice was requested.⁴⁴

Preparing for Africa

Dorothy began 1940 at a watchnight service and then attended the Rose Parade with family and friends. In her new personal journal, she wrote that New Year's Day that her goals "could be summarized as follows: 1) a life surrendered to God, 2) a life radiating the love of God, 3) a daily victorious life, 4) constant faith in humanity, 5) development of understanding friendships, and, 6) systematic, diligent, efficient work in all that I undertake".⁴⁵

⁴³ The General Board, "Contract for Foreign Missionary Work", 1.

⁴⁴ Ibid.

⁴⁵ Dorothy Davis personal journal. Personal papers of Dorothy Davis Cook, Alhambra, CA.

Dorothy had much to do in preparation for a life in Swaziland. Her shopping list demonstrates, not a woman bound for an African safari, but a lady wanting both the practical and the socially-correct items of a woman of that day. New purchases included a tweed suit, a navy wool suit, four blouses, a hat, a purse, gloves, a shoe poke, a kerchief, and a moth bag. Friends gave her a surprise lingerie shower.⁴⁶

Farewell dinner parties were held in her honor and presents were given. One that would get much use was a movie camera presented to her at a surprise party. In recording her gifts received, no gift was deemed insignificant. One dollar, given by a woman known as "Mother Boone", is listed.⁴⁷

Dorothy met with various women who assisted her with organizational lists and prayer-time support. She attended a nursing conference that "proved to be very beneficial. I especially enjoyed the discussions on hospital problems and the sound pictures on the different body systems". Her time was also filled with numerous church speaking engagements throughout the Los Angeles and San Francisco regions.⁴⁸

By mid-February, the doors into Africa were opening for Dorothy. Her Swaziland Alien Permanent Residence was issued 11 February 1940 and she was informed she would sail for Africa as early as May or June. Word came from Swaziland which gave Dorothy and her family information and reassurance as to where she would go and with whom she would live in that far-off place. On February 24, "Mother received a letter from Fairy Chism today and she thinks I might be stationed with her and Miss Robinson.

⁴⁶ Ibid.

⁴⁷ Ibid.

⁴⁸ Ibid.

It surely will be a wonderful privilege to be associated with these wonderful missionaries. More and more I feel it an honor to have a part in this great work.”⁴⁹

April 14 was Dorothy’s last Sunday at home. While acknowledging the sadness of farewells, Dorothy’s faith conviction in her Lord and in her call to the mission field were expressed in her journal entry of the day. “In some ways it was hard, but not as hard as one would think. This I know-God can mean so much more than things material, than things earthly, than friends and loved ones, that it is easy to say good-bye. Oh how I love Jesus. Truly, I have found that He is sweeter than them all.”⁵⁰

Her last day at home was Thursday April 18. Her photo and an article appeared that day in the *Alhambra Post Advocate*. “FAR AWAY SOUTH AFRICA will be the ultimate destination of Dorothy Fay Davis, 28, of 1950 Ralph Street, Rosemead, who is packing her bags to board a train tonight for New York. Miss Davis will serve as a medical missionary in the service of the Nazarene Church. She expects to spend the rest of her life in Africa.”⁵¹

In expression of love and support, many family and friends came to say goodbye at the train station that night.

At 7:30 we left for the station, where to my surprise over a hundred people were there to see me off. It is a great joy and comfort to know that so many people are back of you.

After all the farewells were given and I was on the train, it seemed to me that God’s presence was never so real.

⁴⁹ Ibid.

⁵⁰ Ibid.

⁵¹ Robert Studer, “Dream of Active Role as Missionary Soon to Be Realized for Local Woman”. *Alhambra Post Advocate* (April 18, 1940). Personal papers of Dorothy Davis Cook, Alhambra, CA.

For years I have known that Jesus loved me,
 but I didn't know He loved me so much.
 'I have made my choice forever
 Twist [sic] this world and God's dear Son
 Naught can change my mind no never
 He my heart has fully won.
 Take this world with all its treasures
 Take them, take them great and small
 Give me Christ my precious Savior
 He is sweeter than them all'.
 I am indeed happy to be on my way to Africa.⁵²

Dorothy journeyed to New York via stopovers in Nampa, Idaho; Denver, Colorado; Dodge City, Kansas; Kansas City, Kansas; and Portsmouth, Ohio. In Nampa she obtained new eye glasses, spoke in a chapel service at Northwest Nazarene College, and did a radio interview. In Kansas City she was able to establish a personal friendship with Miss Word, the Church of the Nazarene Missions Secretary. Other places granted her time with distant family and friends.⁵³

Her train pulled into New York's Penn Station May 1 at 12:55pm. There Dorothy met her fellow missionary shipmates, Lydia Wilke, R.N. (new missionary) and Mrs. H.A. Shirley (returning missionary Bible teacher). Housed for six days at the Prince George Hotel, the ladies spent their days in museums and shops and their evenings in churches and prayer meetings.⁵⁴

Her Journey

After years of expectation, and personal and professional preparation, Dorothy sailed for Africa.

⁵² Davis, personal journal.

⁵³ Ibid.

⁵⁴ Ibid.

May 7, 1940. A last look at old NY and a hurried shopping visit to Macy's. We bought some fruit and it took us seemingly forever.

Bro. Wiman was at the ship to see us off and only God will know what it meant to us. Steamship Charles H. Cramp pulled out of New York at twilight--the last sun set of America was beautiful--so pink, so soft, so peaceful. Just as we pulled away Bro. Wiman threw us a kiss and said 'this is from papa'.

As we slowly moved away from the docks, I think I never saw such a beautiful sight. All of New York was lit up. Then as we passed the statue [sic] of Liberty our hearts were filled with peace, joy, and the very presence of God. True we were leaving behind our homes, our loved ones, our friends, but Christ is greater than all of these.⁵⁵

Dorothy's ship-board days passed with heavy meals, walks, reading, learning to knit, and conducting Sunday worship services. The travelers went through electrical storms and enjoyed the beauty of sunrises and sunsets. On May 23, they crossed the equator and the night sky now displayed the Southern Cross.⁵⁶

Unfortunately, all was not peaceful and calm. Dorothy and the others were very aware that they were crossing the Atlantic Ocean, a war zone of World War II. Lydia Wilke recalled that, "In 1940, there was a war on. We had problems to get there [Africa]. They just zigzagged in the dark all the time. We [Americans] weren't in it. It was just before Pearl Harbor, but the British and Germany and all of them were in it. One night we [roommates Dorothy and Lydia] awakened suddenly because the engines stopped and we looked out our porthole. There was a German ship all dark. It looked like we could reach our hand right out and touch the ship."⁵⁷

⁵⁵ Ibid.

⁵⁶ Ibid.

⁵⁷ Lydia Wilke Howard interview by author, audio/visual recording, Alhambra, CA., 28 February 1998. Lydia's parents wrote to the Church of the Nazarene in January 1940 begging them not to send their daughter across the Atlantic because "while this terrible war is raging and so many ships being sunk". Mr. and Mrs. Geo Wilke, Stearney, NE to My dear friends in Christ, 26 January 1940, ALS. Church of the Nazarene Archives, Kansas City, MO..

Dorothy wrote, "We just listened to the news again. The African coast is successfully mined by the Germans. I know tonight that God is able to deliver us from all our enemies and give us a safe landing. But if it is not His plan for the present and we should never reach the harbor of Cape Town I know this that I shall safely make the harbor on that Celestial Shore and I can think of no happier re-route that I should have taken--enroute to Africe [sic], the land and people to which God has called."⁵⁸

⁵⁸ Davis, personal journal.

CHAPTER FOUR
Decade of Development

In Africa

Dorothy had arrived in Africa. On the momentous day, she wrote:

June 4. Today marks the greatest milestone thus far in my life. I am in Africa, the land God has called me to. It is rather a coincidence that just fourteen years ago tonight I graduated from grammar school. That was a big event in my life--the first step in preparation of the work I am beginning today.

Early this morning Miss Wilke called me to see the first beacon light on the shores of Africa. It was still dark with the faint glow of the early morning. The moon was cupped. An occasional star was in the sky.

To say we were excited puts it mildly. We dressed and had breakfast at 7:30 and then spent the rest of the morning on deck taking pictures etc. About 10:00 we anchored.¹

The travelers overcame their sea-legs and had adequate time on dry ground to lose and then find Dorothy's travelers checks, eat at a little cafe, shop, and enjoy the public gardens. Dorothy's journal stores brochure clippings picturing Table Mountain, flower shops, Dutch-Cape buildings, and Cape Town by night.²

Their steamer then carried the group around the Cape of Good Hope and north to Port Elizabeth and Durban. The last port-of-call was Lorenzo Marques. Dorothy's

¹ Dorothy Davis, personal journal, (1940 AD). Personal papers of Dorothy Davis Cook, Alhambra, CA.; Lydia Wilke confirmed this date in Lydia Wilke, Cape Town, to Emma Word, Kansas City, ALS, 4 June 1940, Church of the Nazarene Archives, Kansas City, MO.

² Davis, personal journal.

ship-board days were over. Four days passed before Dorothy found the time to record her first African days and the final stage of her journey into Swaziland.

June 21, 1940. Bremersdorp, Swaziland, South Africa.

Here I am at last in Africa. The joy of it all, the land, the people, my many mingled feelings do not amount to much on paper, the charm of the life is more easily felt than expressed. Monday June 17 at early dawn the Charles H. Cramp docked at Lorenzo Marques. We were all packed and ready to land. At 8:00 just as we had finished breakfast, Bro. Shirley, Bro. Jenkins, and Bro. Gross walked into the dining saloon. It was indeed a happy meeting for Bro. and Sis. Shirley. In a short time Bro. and Mrs. Hynd, Margaret, and Bertha Parker met us. Dr. Hynd took charge of all our luggage and in a short time we were on our way. Before leaving Lorenzo Marques we had tea at the Club Hotel.

About noon we started for Bremersdorp. For a few miles we enjoyed paved roads but soon came to dirt roads. These however were well graded. After leaving the city the general scenery changed. Stunted bush, a little brown from the winter cold, replaced the more beautiful trees and flowers of Lorenzo Marques. Over the hills and through the bushveld there was very little change in scenery. At first the city born [sic] is oppressed by the solitude of it all. But to know that in these hills and valleys thousands of natives live and know no other world, gives one a sense of awe and presents a challenge unequalled. The land itself becomes in a subtle way impressive.

At our station in Steigi we stopped for only a few minutes. Here we met Bro. and Sis. Savage and the dear baby and Miss Dixson. I was very pleased to see the dispensary and the work Miss Dixson is doing along this line. Here I saw my first native kitchen. The girls were in Mrs. Savage's back yard cooking their evening meal.

About four in the afternoon the little group drove into the little town of Bresmerdorp. It is situated near a small stream, which supplies the town with electricity. We drove through the business section of the city and on the other side, up a small hill to our own Raleigh Fitkin Memorial Hospital. Here we were royally received. From the gate of the station to the door of the hospital native school children, workers, nurses, and missionaries were lined on either side of the road. As we drove in they all waved tree branches and sang 'All the way along it is Jesus'. When we got out of the car and stood on the steps, the natives came in around us and made a semi-circle. Two very small girls came forward with a banner of welcome. The native pastor and Dr. DeToit gave words of welcome. After which Miss Wilke and I responded. Miss Wilke spoke some Zulu and the natives seemed very pleased. I just must learn this language! After prayer, we all went into the veranda of the nurses home and had tea. Missionaries present were Dr. and Mrs. Hynd and Margaret, Mrs. Schmelzenbach, Miss Cole, Miss

Rennie, Miss Fox, Miss Sipple, and Miss Skinner, and Miss Latta, and Bertha Parker.³

Miss Davis and Miss Wilke shared a few days together at Bremersdorp before their learning and new missionary nursing work began in different areas. Miss Davis was going to Indingeni to run the dispensary and Miss Wilke would stay in Bremersdorp to take over the work of Miss Fox. Together they observed Dr. Hynd repair a skull fracture and perform an arm amputation. Dr. Hynd gave them a formal tour of the hospital and the ladies enjoyed tea with various missionaries and natives. Regarding Raleigh Fitkin Memorial Hospital (RFM), Miss Davis observed that, "It is indeed a wonderful institution. The latest addition is the new wing in which the maternity center and European rooms are housed. The furniture and equipment is very practical as well as beautiful."⁴

In Bremersdorp, Miss Davis had joyously seen Miss Fairy Chism again and met Miss Louise Robinson for the first time. These ladies transported Miss Davis to the place where her missionary service would begin.

³ Ibid. Miss Dixon was actually Miss Kathyren Dixon, who had been at Samaritan as the same time as Miss Davis. At a later time, Miss Davis would send nursing students to her for their District training. Thomas Mangum, Nampa, to J.G. Morrison, Kansas City, LS, 11 December 1935; Dorothy Davis Cook interview by author, 8 October 1999. Lydia Wilke wrote, "As we went through Bremersdorp Dr. Hynd kept blowing his horn. When we got to the station we knew why--he was telling them we were arriving. All along the way the children were lining the road with branches in their hands, and flowers which they threw in the car. And what singing! I have never heard trained singers that could beat these folk in their group singing." Lydia Wilke, Bremersdorp, to Dear Friends in the homeland, TLS 22 June 1940, Church of the Nazarene Archives, Kansas City, MO.

⁴ Dorothy Davis personal journal; Lydia Wilke to Dear Friends in the homeland. Official Minutes of the 17th Annual Council Africa District Church of the Nazarene, Bremersdorp 28 September- 5 October 1940, 10. Church of the Nazarene Africa Regional Office Archives, Florida, South Africa.

Dr. Hynd reported;

At Bremersdorp, Swaziland we had the joy of welcoming on a recent Sunday in our native church building two new missionary nurses from USA. They are Miss Lydia Wilke and Miss Dorothy Davis. Miss Wilke remains to enter into the work of the hospital taking the place of Miss Fox who leaves in a few weeks for a much needed furlough.

Miss Davis has gone to Schmelzenbach Memorial Station about sixty miles north of Bremersdorp. She will be in charge of our dispensary and will relieve Miss Robinson who has been adding that work to her many other duties. We wish to express the thanks of the young church in Africa for this gift of missionaries from the older church at home. It is a cause of much inspiration and gratitude in the hearts of our native Christians.⁵

Her First Year

Miss Davis journeyed north to arrived in Endzingini (spelled with either an I or an E, with or without a “z”) to accept the responsibility of the dispensary there. Of her impressions and arrival, she wrote:

June 22, 1940. Today marks the beginning of my missionary career. Yesterday soon after saying good bye to all the folks at Bremersdorp, Miss Chism, Miss Robinson, and I started for Indingeni.

Perhaps before leaving the city of Bremersdorp I should mention our visit to some of the stores. The main one is a typical general country store with everything from canned vegetables to the latest Swazi gowns. The other two are strictly native with bright colored scarves and blankets. We had tea at a tea room run by Jewish Refugees.

Four hours we rode through a country very monotonous because of the sameness and still it was new and interesting. An occasional Kraal could be seen, and some native people. It surely is remarkable how thousands of these people live in these barren lands. Three places we stopped. First, at a creamery--Swaziland creamery) [sic] Here we found twenty five boys and girls with their empty pails. The children bring their milk to these creameries to have the milk separated, sell the cream and milk separate. Miss Robinson stopped the car and had a little service with them. They were a very gracious group. We next stopped

⁵ David Hynd, “Missionaries Arrive and Depart From Africa”. The Other Sheep. (November 1940): 19.

at an outstation and met the school teacher and the preacher's wife. Then we stopped at the store at Balegone.

About four we drove into the beautiful station at Indingini. We had come a day early so they were not expecting us. Alice was quite upset, but ran and presented me with a prayer mat. I have had many gifts but none that have meant more than this one.

We retired early after a group of native workers came in to welcome me. They were a lovely group and I appreciated it so much. We had tea and buns together. My scripture for today is found in James 3:17, 18. The wisdom that is from above is first pure, then peaceable, gentle, and easy to be intreated [sic], full of mercy and good fruits, without partiality and without hypocrisy. And the fruit of righteousness is sown in peace of them that make peace. God especially blessed. At 10:00 I went down to the dispensary and helped Miss Robinson examine four maternity cases. None were in labor but their time is up. We then went over the grounds of the station. It is indeed a spacious farm. If it grows I think you will find it here. The gardens, the trees and the fields are indeed beautiful.

This afternoon I am studing [sic] Zulu. I do so want to learn this language. Today as I met many of the people my heart yearned to be able to talk to them. I am much impressed with these people--from the babies to the old women. Oh, yes I have a little Dorothy besides five other babies to start with.

June 24. 1940 I have been duly welcomed and in a measure have started to fill the place of a missionary. Sunday was a beautiful day. In the morning before Sunday School I was over to Miss Jester's when we noticed a large group of girls gathering. They had come to welcome me. Their songs were beautiful. I don't ever expect to hear better. Then the little children came and sang 'Climb Climb up Sunshine's Mountain' for me. Their sweet faces and most beautiful harmony thrilled me through and through. In Sunday School I visited Miss Chism's class. Then in the closing exercises I greeted the church. Every one present (about 300 people) came forward and shook my hand. In the church service Umfundisi Dlamini welcomed me in the name of the church and presented me with a large grass mat. Then one of the native women came forward and gave me a broom and a bowl of peanuts. It was all very touching and I was greatly moved. We had dinner about 4:30 and then sat around the fire and talked until the cobs all burned up.⁶

⁶ Ibid. In giving an account of her expenses (for self and freight) to New York and then Endingini, Miss Davis reported a total of only \$228.88 This did not include ship fare. Expenses were train ticket and berths for two nights \$44.47, meals \$5.67, tips \$5.45, visas \$5.67, street car fare in New York \$.40, fare to New York Assembly \$1.55, crating and freight to New York \$66.77, hotel bill in New York \$9.50, freight on excess baggage from New York to Lorenzo Marques \$53.00, and duty and freight to Endingini \$36.40. Dorothy Davis, Schmelzenbach Memorial Station to Miss Word, Kansas City, 2 September 1940 ALS, Church of the Nazarene Archives, Kansas City, MO..

Miss Louise Robinson (later Chapman) had been a missionary in Swaziland since 1920. She had been running the Endingini dispensary with only a First Aid class taught by Dr. Mangum at Northwest Nazarene College as background. Miss Davis was impressed with what she found. “She had practical nursing under Dr. Magnum. That’s all...but she was very good. She had the clinic very organized. I wouldn’t improve on that even today.”⁷

“Prayer was the key to Louise’s life. She attacked every problem, every assignment by first praying until God came down on the situation. She did not make plans and ask God to bless them. She first asked God what His plans were and how He proposed to have her accomplish them.”⁸ Miss Davis remembers that Miss Robinson “was there at Endingini with me, trying to orientate me and make me a missionary. She emphasized the fact that we gave our all, no reservations. That was the thing that impressed me so much about Louise and Fairy.”⁹

Rev. Fairy Chism lived across the hall from Miss Davis and she was her Zulu instructor.¹⁰ Language study and proficiency progressed over the ensuing years. By October 1942 Miss Davis would complete her required grammar work and the translation of the Gospel of John. By October 1945 she would meet all requirements for Zulu language certification as set forth by the Church of the Nazarene. The requirements were two years of grammar, translation of parts of the Bible, translation from two books, and

⁷ Ibid.

⁸ Prelude of Louise Robinson Chapman, *Africa, O Africa* (Kansas City, MO.: Nazarene Publishing House, 1945), 6.

⁹ Dorothy Davis Cook interview by author, 3-4 March 1999.

¹⁰ Dorothy Davis Cook interview by author 3-4 March 1999 and 8 October 1999.

two oral examinations.¹¹ Language certification completed one step in her missionary role development.

While Miss Chism proved to be a valuable Zulu instructor, not all interactions between Miss Davis and Miss Chism went smoothly. Apparently, Miss Davis spending time making clothes for a monkey was not looked upon well by Miss Chism or those to whom she reported this at Church headquarters. The Foreign Missions Secretary wrote to Miss Davis regarding the situation. "I have read all about your pet monkey and your making him a red coat and cap and parading him before company on Christmas day. I thought we sent you to Africa to serve as a missionary and here you are down there sewing for a monkey."¹² Miss Davis had taken movies that Christmas day of the monkey sitting on Miss Chism's shoulder and she responded to the letter of reprimand with:

Really things do sound a lot worse on paper than they are. I am sure I do not know what Miss Chism wrote in her circular letter to give you the impression that I had gone into the monkey business. Now lets see one day I helped a poor woman out and bought a monkey; next I wanted to give Miss Chism a Christmas present and the monkey solved the problem. Next I spent about five minutes making a little jacket. I do hope this matter has not caused you to lose any sleep or shortened your life. It must be a problem to keep all your children in the straight and narrow way.¹³

¹¹ Dorothy Davis "Church of the Nazarene (Africa District) Course of Study in the Zulu Language" certificate 5 October 1945. Signed by W.C. Esselstyn, District Superintendent and Fairy Chism, Chair of Board of Examiners. Personal papers of Dorothy Davis Cook, Alhambra, CA.

¹² C. Warren Jones, Kansas City to Dorothy Davis, Pigg's Peak, 26 March 1941 TL. Church of the Nazarene Archives, Kansas City, MO..

¹³ Dorothy Davis, Bremersdorp, to Dr. Jones, Kansas City, MO. 16 May 1941 ALS. Church of the Nazarene Archives, Kansas City, MO.; Dorothy Davis interview by author 3-4 March 1999.

New Responsibilities

During those early months at Indingini, Miss Davis settled into a routine and accepted both nursing and general missionary responsibilities. Responding to a letter of inquiry, in July 1940 she attempted to find the words that expressed the many emotions she dealt with as she learned and adjusted to her new life and work. She did express appreciation for the "splendid foundation" laid by those who had gone before her and for the church that made it possible for her to be there.¹⁴

In September she added,

Perhaps you would like to know what I am doing. First I have taken over the dispensary at this station in Miss Robinson's absence. We have three rooms in the dispensary proper- a maternity [sic] ward, an examining room (which on occasion [sic] becomes the delivery room), and a children's ward. In this room I have my six babies- or perhaps I should say Miss Robinson's. For I only inherited them with my work. We have three beds regularly in the maternity [sic] ward and a fourth when the occasion [sic] demands it. There has been a fourth in most of this month. Then outside we have five huts where the sick and their families stay while here for treatment. This month we had thirty-four different inpatients besides five to twenty-five outpatients daily and forty-four the day Dr. was here. In connection with our medical work we have prayer every morning at nine with the patients and all the friends and family they have brought with them. I feel this is a great opportunity and as I learn the language I will find it an open door. Now some Christian workers on the station here help me.

Just now I am working in the Sunday School, acting as superintendent. It is very interesting work and I am trusting God to lead and direct in this great work. Oh, Miss Word I do love it here. I have found the missionaries so splendid, and the people of Africa are ever a source of inspiration and blessing to me. The only thing that bothers me is the greatness of the task before me. I feel so very small. But I know God will see me through.¹⁵

Miss Davis had the help of school-girl Beta Maluka. As Beta could not read, Miss Davis marked the different bottles with food coloring, thus giving Beta a way to know

¹⁴ Dorothy Davis, Piggs Peak, to Miss Word, Kansas City, MO. 10 July 1940 TLS. Church of the Nazarene Archives, Kansas City, MO..

¹⁵ Dorothy Davis, Piggs Peak, to Miss Word, Kansas City, 2 September 1940.

which medicine was in which bottle. The story is told of a time when a little girl was brought in to the clinic badly burned. Without consulting with Miss Davis, Beta removed the burnt clothing and scrubbed the little girl with the harsh blue soap used for laundry. Miss Davis, in learning the Swazi traditional treatment for burns, did not scold Beta but gently instructed her in the proper care of burns. Beta later went to Bremersdorp and graduated from the nursing program there.¹⁶

The people at home were praying for her and receiving letters from the General Board of the Church of the Nazarene gave her a "home like feeling". Friends also offered to her assist in the work by buying Miss Davis a new horse. However, a horse was available to her at any time and another would only add to the cost of upkeep. As spoiling food was a routine problem, Miss Davis asked for a refrigerator instead. She also suggested the option of a microscope which would be of great value in her work¹⁷

That first winter (July), Miss Davis attended her first campmeeting in Africa. It so impressed her that she wrote her first article about that experience. In part she wrote:

'Nkosozana! Nkosozana! [Daughter of the King] Come see.' It was Alice calling me to see the crowds coming to campmeeting. There they were, young and old; some with a few clothes on, some with more. From the appearance it didn't matter how their clothes were on or what the combination; the important thing seemed to be to have clothes. I was especially amused at some little boys with men's coats and shirts on without trousers.

.....at least 900 were present, all sitting on grass in the big tabernacle. We had services from 6:30 in the morning until 10:00 or 12:00 at night.

There were the afternoon services when the heathen came by the dozens- came in their skins, their beads, their rings, and their bracelets. Mothers came with their little naked babies wrapped in skins on their backs; fathers came with all their

¹⁶ Paul Dayhoff, Living Stones in Africa: Pioneers of the Church of the Nazarene. (Florida, South Africa: Nazarene Publishing House, 1999), 34. The story was told to the Dayhoff by Nurse Freda Hlatshwayo. She stated Miss Davis told the story when teaching surgical nursing.

¹⁷ Dorothy Davis, Pigg's Peak to Dr. Jones, Kansas City, 27 December 1940 TLS, Church of the Nazarene Archives, Kansas City, MO..

native dignity; young men came with their pride (mirrors on their arms being one evidence); young girls came in their carefree attitude; little boys and girls came with their eyes all full of interest.

For the first time at Endingeni [sic] two native preachers, ordained last year by Dr. Morrison, officiated. Then followed one of the sweetest communion services I have ever partaken of. Truly His glory filled the temple. I wept for pure joy- a joy that I had never known before.

As they departed I prayed, "O God, make me bigger, big enough to minister to these great souls and fulfill in me Thy promise to 'give me the heathen for my inheritance.'" All I ask of life is that God will take me and use me in a definite way among these people.¹⁸

To Bremersdorp

While Miss Davis had carried the responsibility of Endzingini, the hospital in Bremersdorp had seen 1473 native inpatients, 172 European inpatients, and about 20,000 out-patients over the last year.¹⁹ Due to this high volume, there was a demand for nurses in the central hospital and Miss Davis was transferred to the position of Sister at Raleigh Fitkin Memorial Hospital in Bremersdorp in the Spring of 1941.²⁰ "Sisters Rennie, Cole, Wilke, and Davis make a fine set of missionary nurses."²¹ Miss Davis shared quarters with Miss Cole and Miss Wilke and they ate their meals with the Hynd family.²²

¹⁸ Dorothy Davis, "My First Campmeeting in Africa", The Other Sheep (1940): 24. Church of the Nazarene Africa Regional Office Archives, Florida, South Africa.

¹⁹ David Hynd, Official Minutes of the 17th Annual Council Africa District Church of the Nazarene, 28 September-5 October 1940.

²⁰ Dorothy Davis, "Missionary Nursing in Swaziland," The Other Sheep (October 1941): 22. Church of the Nazarene Africa Regional Office Archives, Florida, South Africa.

²¹ David Hynd, Bremersdorp, to Rev. C. Warren Jones, Kansas City, 15 September 1941. Church of the Nazarene Archives, Kansas City, MO..

²² Samuel Hynd personal communication with author, 7 August 1999, Manzini, Swaziland.

Unfortunately those early years, first at Endingini and now at Bremersdorp, were shadowed by a dark cloud that lasted from 1939 to 1945. That cloud was World War II.

World War II

During those years, even remote Swaziland could not ignore World War II. Early in 1940, Dr. Hynd wrote, "The fighting has not affected us yet, but the price of all drugs, dressings, hospital linen, and all other commodities has gone up 50%-75% while our income has tended to diminish".²³ A special offering was taken by the missionaries to assist fellow missionaries from England and Scotland who lost financial support from their home churches.²⁴

The quantity of personnel was also affected. As previously stated, there had been risk when Miss Davis and Miss Wilke sailed to Africa. The same risk delayed or prevented arrivals and departures of other missionaries. There was expressed disappointment in a missionary nurse and doctor not being able to come in 1942. The Africa Field Superintendent wrote, "I know they would have had a dangerous and very hard voyage for some missionaries who just arrived on the City of New York said it was a terrible strain to live all those days under the constant threat of a torpedo and never be able to undress and go to bed and sleep".²⁵ For the security of the missionaries already in Africa, Esselstyn also recommended the Church send \$50.00 per missionary to be used as emergency evacuation funds.²⁶ It is unknown if this money was provided.

²³ David Hynd, "Bits From Bremersdorp," The Other Sheep 27(11) (1940): 21-23. Church of the Nazarene Africa Regional Office Archives, Florida, South Africa.

²⁴ Official Minutes of the 17th Annual Council Africa District Church of the Nazarene.

²⁵ William Esselstyn, Boksburg, to Dr. C. Warren Jones, Kansas City, 25 February 1942 TLS. Church of the Nazarene Archives, Kansas City, MO..

²⁶ William Esselstyn, Boksburg, to Dr. C. Warren Jones, Kansas City, 7 November 1942

At one point, the only European nurses at RFM were Miss Davis, Miss Wilke, and Miss Rennie, and Dr. Hynd was the only regular physician. Two German-Jewish refugee physicians, Dr. Kiwi (male) and Dr. Heinimann (female), helped in the hospital for a time. Miss Davis recalled that while they could not have made it without these doctors, “they did not know much”.²⁷

Those who did try to travel from America to Africa during the war were required to submit a special letter of request to the Department of State.

You may take up your case with the Department approximately thirty days before the date of your proposed departure from the United States, advising the Department at that time concerning your travel arrangements and submitting a letter from the missionary organization with which you will perform in Africa; the reasons why it is considered imperatively necessary for you to proceed to that country; whether your presence there will mean an increase in American personnel; whether the work cannot be carried on by persons already there; and whether you will be going to Africa to replace an American missionary who will return to the United States, and if so, the name of the person who will return. Consideration will then be given to your case in the light of conditions prevailing abroad at that time.²⁸

Swaziland, as a “small part of the vast British Empire” was part of the war for the British rallied behind their leader. Winston Churchill, speaking to the House of Commons May 13, 1940, is recorded to have said:

I will say it [our policy] is to wage war by sea, land, and air with all our might and with all the strength that God can give us; to wage war against a monstrous tyranny, never surpassed in the dark lamentable catalogue of human crime. That

ALS. Church of the Nazarene Archives, Kansas City, MO..

²⁷ David Hynd, “Bremersdorp Station and District,” Official Minutes of the 20th Annual Council Africa District Church of the Nazarene, n.p. 1943, 38. Church of the Nazarene Africa Regional Office Archives, Florida, South Africa; Dorothy Davis interview by author 9 October 1999.

²⁸ R.B. Shipley, Washington, DC, to Jennie Evelyn Fox, Ada, OK, 25 February 1942 TLS. Church of the Nazarene Archives, Kansas City, MO. This letter is on official Department of State letterhead and Shipley was the Chief of the Passport Division.

is our policy. You ask, 'What is our aim?' I can answer in one word: Victory! Victory at all costs, victory inspite of all terror. Victory however long and hard the road may be; for without victory there is no survival.²⁹

As the British continued to threaten Swaziland with complete rule, they spoke to Sobhuza II and his people about the evil man called Hitler who was trying to conquer the world. Sobhuza II did make a statement of support for the British cause, but he neither forced nor prevented any Swazi from joining the army. He did appoint two men to be sure that Swazi men in the army were well taken care of "since our people take more pride in military activities than in ordinary labor".³⁰

The Swazi training camp was on the Agricultural Showgrounds immediately adjacent to the Nazarene mission station and hospital in Bremersdorp a view Miss Davis could see every day. One missionary wrote:

Recently I attended a very impressive meeting where two thousand young Swazis are being trained for service. Many of them who had always worn the small, skin about their loins and been decked with beads, now appear in uniform. Their marching was almost perfect and full of grace. Many European leaders were present but none were so graceful as the Swazi king who lifted his high hat, and with a most charming smile saluted the regiments as they passed by, in a broiling sun for more than an hour.... But we cannot help but wonder what the effects will be on the Swazi people, with these young men thrown in contact with European civilization in this manner for the first time. We pray that in some way spiritual leaders may be provided for them, both of their own people and missionaries.³¹

By 1943, 3,836 men had gone to fight in the Middle East. One Swazi to go to the Middle East was Nazarene pastor Rev. Nkhofane Samuel Dlamini. Rev. Dlamini was the

²⁹ J. MacDonald, "During the Darkest Days of World War II, Prime Minister Winston Churchill was the Voice of Freedom," World War II 10(7) (1996).

³⁰ Hilda Kuper, Sobhuza II: Ngwenyama and King of Swaziland (Great Britain: African Publishers, 1978), 136, 138.

³¹ O.V. Lovelace, Stegi, to Dear Friends at Home, December 1941 TL. Church of the Nazarene Africa Regional Office Archives, Florida, South Africa.

grandson of King Sobhuza I and a nephew of King Mswati II.³² He stated:

During the war in the Middle East, the Swaziland government brought a request to the Swaziland Missionary Conference. It asked for a volunteer to go with the soldiers in the war and preach to them, pray with them, and speak to those who were sick and injured in the hospital. The Lord spoke again and I said 'I will go'. In 1942 I left my home, my wife, and my children and went with the soldiers. I preached and prayed all along. The war raged at Tobruck and Tripoli and I was in the front line. My eyes were injured by the sand and sun and one eye was blinded, but I continued to preach and pray. Many soldiers chose the Lord before they died in the battle at Tobruck [sic], and I was glad I had preached and prayed.³³

Rev. Dlamini was promoted to the highest rank option for a chaplain, that of sergeant major.³⁴

Dr. Hynd kept the home church informed of the war's impact on Swaziland. In addition to the news of the military camp being close to the mission station and of Samuel going to war, he stated, "Japan's entry into the Indian Ocean has brought the war very close to South Africa and air raid precautions are being taken in Swaziland."³⁵ That region of the world never came under actual attack.

³² Ibid., 147; Dayhoff, Living Stones in Africa, 22-23; William Esselstyn, Official Minutes of the Nineteenth Annual Council Africa District Church of the Nazarene Bremersdorp, n.p. 3-9 October 1942 TM, 35, Church of the Nazarene Africa Regional Office Archives, Florida, South Africa; David Hynd, Bremersdorp, to C. Warren Jones, 15 September 1941, Church of the Nazarene Archives, Kansas City, MO.. This author did a home health visit to Rev. Dlamini in 1979.

³³ Elizabeth Cole, Give Me This Mountain, (Kansas City, MO.: Nazarene Publishing House, 1959), 47. Samuel later lost all his sight. After the war, he served as chaplain at Mbuluzi Leprosy Hospital. This researcher met "Blind Samuel" in 1979.

³⁴ Dayhoff, Living Stones in Africa, 24.

³⁵ David Hynd, "Bits From Bremersdorp," The Other Sheep January 1943), 10-11, Church of the Nazarene Africa Regional Office Archives, Florida, South Africa.

Even with the concerns of war, there was health care progress in Swaziland. Miss Davis was especially thrilled when the Mliba outstation dispensary (thirty miles from Bremersdorp) was opened. She wrote her friends, in a letter officially censored by number 7739, to tell about this “medical centre in the heart of the bushveld where year after year people have suffered and died because no medical help was available. It is a miracle, one of God’s miracles. He has given this dispensary in answer to the living faith of His people.....They started carrying stones for the building at a time, due to the war, when building was next to impossible....Help us to praise God for this great answer to prayer.”³⁶

The Need for Nurses

In the middle of the war, even Queen Elizabeth II realized the value of medical missions. A message of her support was received at the mission station. “Her Majesty realizes the high importance of the Church’s task of bringing healing for body and soul to all the world, and she realizes with thankfulness the wonderful pioneer work which has been accomplished by Medical Missions. It is her earnest hope and prayer that God’s blessing may continue to rest upon this work of mercy.”³⁷

This work of mercy in Swaziland involved not only personnel and facilities, it also required the missionary nurses to learn about the diseases common to the region while trying to remain current with global nursing information. In order to stay current in nursing while practicing in this Third World country, Miss Davis had requested and was now receiving the American Journal of Nursing. The subscription was paid out of her

³⁶ Dorothy Davis, Bremersdorp, to My dear friends, 1 October 1943 TLS, Church of the Nazarene Africa Regional Office Archives, Florida, South Africa.

³⁷ David Hynd, “Bits From Bremersdorp,” 6 June 1942 TD. Church of the Nazarene Archives, Kansas City, MO..

\$50.00 per month salary and she was pleased with the global nursing information that it provided. The three diseases with the highest morbidity and mortality were syphilis, malaria, and bilhariza. The pandemic/epidemic crisis of these diseases caused the government to provide the hospital and clinics with treatment medications for free.³⁸

In 1929, syphilis was the primary cause of death (57%) in Swaziland. The country's first venereal disease clinics were then opened in Bremersdorp in 1931 and the treatment of bi-weekly injections of neosalvarsan proved to have positive results.³⁹

In 1936 Dr. Hynd reported that:

This disease still provides us with our largest number of inpatients, and keeps our outpatient departments busy. The total number of patients treated was 247, (males, 80; females 128; children 39.).

The congregation of natives of both sexes at beer-drinks is becoming increasingly the chief source of spread of this disease amongst the natives. Previously the majority of our cases could be traced to the townships where prostitutes, native housegirls and nursemaids working for Europeans, and men working for Europeans and Recruiting Corporations kept up the spread of the disease. Although this source of spread has in no way diminished, yet the number of our cases in women and children from the rural area which can be traced, not to the husband, but to other men met at the common beer-drink, indicates a laxity in the native moral code which is distressing in any attempt at venereal prevention.

Beer-drinking..is a very definite element to be contended with in any measure calculated to improve public health amongst the native population. Apart altogether from the injurious and intoxicating effect upon the brain and other organs of the individual, the beer-drink provides us with our largest number of cases of syphilis, fractured skulls and other injuries from knobkerries and spears, burns in infants sleeping in the hut beside the fire with intoxicated mothers, and

³⁸ Dorothy Davis, Schmelzenbach Memorial Station, to Miss Word, Kansas City, 2 September 1940 and 10 January 1941 TLS. Church of the Nazarene Archives, Kansas City, MO.; D. Drew, Mbabane, to The Medical Superintendent, Raleigh Fitkin Memorial Hospital, Bremersdorp, 9 September 1945 TMs, Church of the Nazarene Africa Regional Office Archives, Florida, South Africa; Lydia Wilke interview by author 28 February 1998. Confirmed first salary was \$50.00 per month. Stated, "There were many diseases we had not learned about".

³⁹ Davis, 1975; 41-42.

also definitely affects the variety and amount of the food supply of the kraal, for during the brewing season all work in the gardens is neglected. For the future good of the Swazi race, all interested in the welfare of the Swazi must attack the beer problem vigorously.⁴⁰

Malaria was the second most common cause of death in 1929. Malaria control had been discussed as early as 1921, but a full-time malaria officer, Dr. O. Mastbaum, was not appointed by the British government until 1945.⁴¹ According to an August 1941 report on malaria in Swaziland the main vectors of malaria in Southern Africa were Anopheles gambiae and A. funeatus.⁴² In 1942, malaria was described as,

...an acute to chronic specific fever caused by several species of animal parasites belonging to the protozoa which live upon and within red blood corpuscles of man which they eventually destroy. It is characterized clinically by paroxysms of chill, fever, sweating, and usually enlargement of the spleen. Both sexes are equally susceptible. The high percentage of infections occurs between the ages of one and five years. If malaria occurs in pregnancy, abortion or miscarriage often follows. Malaria is not transported by the mother's milk. The types of malaria include Tertian, Quartan, Entivo-Automnal, Pernicious, and Latent.

Individuals dying of malaria usually have a dusky, brownish hue because of the anemia and the pigmentation of the skin.

Malaria is frequently combined with other infections. Some of the chief complaints are: Acute bronchitis, pneumonia, pulmonary tuberculosis, amoebic or bacillary dysentery, thyphoid fever, gastro-enteritis, nervous prostration, hysteria, acute mania, paralyses, and any of the organic cardiac conditions.

Recurrences occur in 80-90 per cent unless properly treated.

⁴⁰ David Hynd, Annual Report of the Raleigh Fitkin Memorial Hospital, Bremersdorp, Swaziland 31 December 1936, TMs, 4. Church of the Nazarene Africa Regional Office, Florida, South Africa. "Beer is made from kaffir corn, several kinds of mild fruits, the white Indian corn, and yams, or large sweet potatoes. From whatever it is made, the natives have learned how to make it very strong and intoxicating. It is made by the women." Schmelzenbach, The Missionary Prospector, 112.

⁴¹ Davis, 1975, 42-43.

⁴² Both de Meillon, Malaria in Swaziland, in Principal Medical Officer, Mbabane, to Dr. Hynd, Bremersdorp, 15 August 1941 TMs. Church of the Nazarene Africa Regional Office Archives, Florida, South Africa.

Quinine- If given in adequate dosage and absorbed it will cure every malarial infection if given before the patient is practically dead.

Bed rest should be instituted until the active symptoms are over. The diet should be light or liquid during the febrile period; during the convalescence it should be nourishing and easily digested. A saline cathartic or a small dose of calomel is given at the beginning of treatment as it appears to render the specific treatment more effective.⁴³

During malaria season, "people [were] dying like flies. How can they walk to us with temperatures up to 108? When they hear the Ambulance or Dr. Hynd's car they come running from the bushvelt to be examined or telling of someone who is dying."⁴⁴

Miss Davis told her friends at home about malaria.

The malaria season is a busy time, but this year it has been unusually so. Day and night the patients have come, until some times we haven't known where to put them. It is rather a shock at first, but bye and bye one gets accustomed to seeing two in one bed (children only), and to seeing patients under and all around the beds until there is hardly room to walk. However, one never feels quiet [sic] happy about it. We just do our best and go on, and it is really remarkable the way so many recover. We feel it is God's answer to our prayers.⁴⁵

Preventive measures would eventually drop the reported cases of malaria "from 6,850 in 1946 to 33 in 1964 and 61 in 1973".⁴⁶ This drop was not before claiming Miss Davis as one of its victims. During her first term of service, "I had a heavy infection of malaria and Dr. David Hynd gave me intravenous quinine. It was effective and I have not had reoccurrence as some people had." In that first term she also had tick bite fever and several bouts of influenza. "But after my first term, I never missed a day."⁴⁷ "I heard

⁴³ Linus Rausch, "Malaria," *American Journal of Nursing* 42(2) (1942), 124-135.

⁴⁴ Lydia Wilke, Bremersdorp, to Dr. C. Warren Jones, Kansas City, 8 March 1942 ALS. Church of the Nazarene Archives, Kansas City, MO..

⁴⁵ Dorothy Davis, Bremersdorp to Dear Friends, n.d. TLS. Church of the Nazarene Archives, Kansas City, MO..

⁴⁶ Davis, 1975, 42.

⁴⁷ Dorothy Davis Cook interview by author 3-4 March 1999.

someone say that if we ever got control of malaria, there would be no need for a hospital.”⁴⁸ The recommendations of the Church for disease prevention were smallpox, diphtheria, and thyphoid immunizations.⁴⁹

Bilharziasis (*Schistosomiasis haematobium*) was the third disease for which the government provided free medication. “This is still one of the most prevalent diseases in the district and accounts for a great number of chronic ill-health and genito-urinary complaints. Antimony Tartrate injections are given. Nothing more of a preventative nature has been done, apart from encouraging the use of the European swimming pond at Bremersdorp, and teaching in schools the danger of bathing in rivers and pools.”⁵⁰

While not isolated to this region of the world, and in fact present in the United States, another less common disease about which Miss Davis would have to learn was leprosy. No early treatment regimens were found. However, by the time that the Nazarene church had Nurse Elizabeth Cole in charge of the leprosy hospital, Dr. Hynd reported:

Following upon the reports from the Leprosy Research Unit of the British Empire Leprosy Relief Association in Nigeria on the successful results obtained in both the lapromatous and neural types of leprosy treated by Diaminodiphenylsulphone (D.A.D.P.S.) the Medical Superintendent put practically all of the patients (69) on D.A.D.P.S. tablets orally. He is satisfied that there has been steady improvement in the health of the patients during this experiment.⁵¹

⁴⁸ Dorothy Davis Cook interview by author 2 February 1998.

⁴⁹ The General Board, Kansas City, to J. Evelyn Fox, Olivet, IL., 30 October 1941 TL. Church of the Nazarene Archives, Kansas City, MO..

⁵⁰ Hynd, 1936, 4.

⁵¹ David Hynd, “Bremersdorp District and Station Report to the Annual Mission Council,” (TDS, 6 October 1951): 4. Church of the Nazarene Africa Regional Office Archives, Florida, South Africa.

One year later Dr. Hynd was able to report:

The number of discharges is the largest we have had in any one year and this is to be attributed to the use of Diaminodiphenylsulphone (D.A.D.P.S.) in treatment. Recently we have tried a few patients on a new drug, Isonicotinyl hydrazide. The medical treatment, together with the general physical, mental, and spiritual care bestowed upon this unfortunate and needy group of people, has brought new hope to them.⁵²

Training Nurse Aides

The important role of nurses in Swazi health care is demonstrated in the priority set when the Bremersdorp mission station was established. "Work was commenced on the new site, which overlooks the European settlement, Bremersdorp, on 1st [sic] January 1925. The first building to be constructed was the nurse's home in the hope that dispensary work could be carried on before the hospital was completed."⁵³

Then with a growing number of Swazi women being trained as nurse aides, a basic dorm-like home for the students was opened in 1940. It was dedicated to the late Mr. T. Ainsworth-Dickson, former Resident Commissioner who had been very supportive of training Swazi nurses.⁵⁴ Miss Fox wrote:

Thirteen native nurses and I are comfortably settled into our new nurses Home which was made possible by a grant from the government for that purpose...Eight student mid-wives and three student nurses still live in rooms at the back of the hospital. Our new home is planned for a U shaped building and the front part only put up now.⁵⁵

⁵² Hynd, "Bremersdorp District and Station Report," 6 October 1952.

⁵³ David Hynd, Raleigh Fitkin Memorial Hospital, Bremersdorp, Swaziland, Africa, (1927) TD. Church of the Nazarene Africa Regional Office Archives, Florida, South Africa.

⁵⁴ Davis, 1975, 21.

⁵⁵ J. Evelyn Fox, Bremersdorp, to Dr. C. Warren Jones, Kansas City, 8 July 1940 ALS. Church of the Nazarene Archives, Kansas City, MO..

Therefore, when on furlough, she added:

Regarding any funds received over and above traveling expense: as you know, my work in Swaziland has been chiefly among the native nurses, and I think I should like to apply any money I may receive on equipment for their home and lecture room, or on extending their living quarters. Until this year the student nurses have lived in rooms at the back of the hospital. They were never away from their work as patients were continually passing their door and often entering their quarters. They had little freedom as they always had to be kept quiet on account of living so near the sick. The Government gave us an appropriation to be used for a home for them and last February we moved into the first unit of their home. By using the corridor for beds, we can now house about half of the students in the new building. One of the missionary nurses lives there with them to direct their home life.⁵⁶

When Miss Davis arrived in Bremersdorp, she was assigned an active role in this training and it was on this foundation that she would someday establish professional nursing in Swaziland. Like Miss Fox, she integrated the roles of nurse and missionary and provided both physical and spiritual care in the training of the nurses. In her first Christmas letter from Bremersdorp, which was soon published in the Nazarene denominational magazine, Miss Davis wrote:

There is the regular work in the hospital, listening to the many complaints of the patients and comforting them the best we can, teaching and reteaching the student nurses, receiving and carrying out the Dr.'s [sic] orders. There are the daily problems of securing enough milk for our babies, of finding enough beds and spaces on the floor for the sick, making the linen go far enough, seeing that each does their assigned work properly, etc. etc. [sic]. If we give physical comfort only, or if our sole purpose is to train these girls to become good nurses, or if we succeed in properly equipping the hospital with merely the material needs, we have failed—completely failed.

You have been so wonderful in sending sheets, pillow cases, blankets, bandages, etc., [sic] and we trust you will continue to do so; for by these we are able to prepare the way on which our Lord may reach the hearts of these people. But it is more important that you pray for the doors of their hearts to be opened when Jesus knocks. The bondage of sin is great and the power of the devil over

⁵⁶ J. Evelyn Fox, Olivet, to C. Warren Jones, Kansas City, 2 December 1940 TLS. Church of the Nazarene Archives, Kansas City, MO..

these people is not to be overcome by human strength or wisdom. But by the power of God we shall be more than conquerors.⁵⁷

In 1942, Miss Davis was appointed to serve on the Africa District Missions Medical Committee.⁵⁸ By that time she was so impressed with the nurse aide training that she published the article "Training Swazi Nurses". Her goal was to clarify previous mis-information she had given about, and expand Nazarene awareness of, the Swazi nurse aide program.

A short time before I sailed for Africa I gave a talk on Medical Missions to one of our Young Women's Missionary Societies and in my remarks I made a few statements concerning our training school here at Bremersdorp. As I recall that evening I blush with shame that I attempted to speak on a subject I knew so little about. There was not only a scarcity of facts in my speech, but I am afraid some things I said were not so true, at least not true of the training school today. I had drawn my conclusions from old articles and old letters and as a result I was speaking of our beginning efforts to train Swazi girls.

As every department of our work in Africa has advanced, so has our work in training nurses advanced. The standard of nursing had been raised; a finer and better educated class of girls are wanting to take nurse's training; and the opportunities for service are constantly increasing.

At the present time we have eighteen girls in training. Most of them are standard six (eighth grade) girls and a number are standard seven (the first year of high school). All five of the girls we took in this year are standard seven. They all speak English (some better than others). All their classes are conducted in English; all their lectures are given in English and all their examinations are written in English. On the whole they do quite well, but sometimes the way they express themselves would make even a stoic to smile.

The purpose of our school is to provide training in the care of the sick (both in body and in soul), in public health, nutrition, and hygiene so [] that the girls may be able to give their own people and own communities information and instruction that is applicable to the present [] and that shall prepare them to scientifically care for the sick and injured. To meet this demand, the following course has been outlined:

First Year- Nursing Arts, Anatomy and Physiology, Hygiene, Nursing History,

⁵⁷ Dorothy Davis, Bremersdorp, to Dear Friends, ca. 1941 TLS; Dorothy Davis, "The Wonder Working Power of God," The Other Sheep, (February 1942): 19-20, Church of the Nazarene Africa Regional Office Archives, Florida, South Africa.

⁵⁸ Official Minutes of the 19th Annual Council Africa District Church of the Nazarene, 10.

Dietetics, [] Bible.

Second Year- Advanced Nursing Arts, Medical Diseases, Pediatrics, Bible.

Third Year- Surgical Diseases, Operating Room Technique, First Aid, Bible.

Fourth Year- Midwifery, Child Welfare, Bible.

Perhaps you are asking, 'Do African girls make good nurses?' My answer is that they are like girls anywhere you go. Some do and some do not. Some are unusually brilliant, some average, and some just hopeless. One of our present staff nurses is of the brilliant type. The work she does and the burdens she carries would almost place her with the missionaries themselves. There is not a department in the hospital that she could not step into on a moment's notice and carry on the work to at least a moderate degree of success. Besides her regular duties at the present time, she is doing most of our laboratory work which is no small task during the malaria season. The shortage of European staff has put a great deal more responsibility on all of our native nurses and I have been surprised and much pleased with the way they have helped to shoulder these new burdens and carry on the work. The cheerful way in which they work overtime is only one proof that they love their work and feel that they have a personal share and responsibility in all the work of the institution.

Then besides their contribution to the hospital and every part of its work, we find among the nurses some of our strongest and most dependable church members. They are spiritual leaders- girls that are looked up to by all the people. They care for the sick; they comfort the sorrowing, they lead the erring and lost to Christ.

These girls go out from us to other hospitals, to dispensaries, and some to start homes of their own where the standard of living shall be raised and disease shall be fought by the intellectual and trained rather than by the superstitious and ignorant.⁵⁹

Not all lecture content of the day could be rewarded for its accuracy. According to the 1941 child welfare notes by Miss Rennie, pregnant women should have their bad teeth pulled to avoid swallowing the poison and contaminating their blood. Stretching should be avoided (no reason given). A cold bath was to be taken every morning and a warm bath every night. Regarding the newborn, there was concern they were breastfeeding too much (because of more than one "motions" per day). In addition to decreasing the frequency and duration of the feedings, newborns who continued with

⁵⁹ Dorothy Davis, "Training Swazi Nurses," The Other Sheep (November 1942): 16-17, Church of the Nazarene Africa Regional Office Archives, Florida, South Africa.

watery or green stools were to receive one teaspoon of castor oil. The rationale or frequency of that treatment is not presented.⁶⁰

By early 1943, Miss Davis was specifically assigned to teach the Swazi nurses. She placed herself on night duty in the hospital so that her mornings and evenings were free for teaching and clinic visits with Dr. Hynd. Needing divine help to keep her going, the Bible verse she claimed as a promise from the Lord was, “As thy days so shall thy strength be”.⁶¹ One of the school’s early graduates had just completed one year of Bible School and returned to help Miss Davis with the teaching. Eva Manzini, described as a blessing, a great soul winner, and a dependable worker, would later be the first Swazi to become fully licensed as a registered nurse and the first to be promoted to Sister.⁶²

One of Miss Davis’ first students was Mildred Dlamini. In a whispered voice, she recalled:

I began nursing in 1942. I was the first class for Miss Davis and we were only five in the class. And when she teach [sic] we found it very difficult because we were not used to American language. We were used to Scottish English. So the first day when she teach us, we did not understand anything. She walked out and she was disappointed, however she continued to teach us and I complete [sic] my nursing in 1945. Sister Davis, she worked very hard with first year students that come...I do thank Sister Dorothy Davis, what she teach us besides nursing, what she teach us about God. I think Sister Davis was really large to us. She always teach us how to dress ourselves. And you lift your head up. And that was difficult because Swazis are always shy and you always look down. But she tries

⁶⁰ Miss Rennie, “Child Welfare, Lecture 1”. n.p. TD (1941). Church of the Nazarene Africa Regional Office Archives, Florida, South Africa.

⁶¹ Dorothy Davis, Bremersdorp, to Dear Friends, 28 July 1943 TLS, Church of the Nazarene Africa Regional Office Archives, Florida, South Africa. Dorothy Davis Cook interview by author, 3-4 March 1999.

⁶² Dorothy Davis to Dear Friends 28 July 1943; Dorothy Davis interview by author 9 October 1999; David Hynd, “Bremersdorp District and Station Report to Annual Mission Council,” 6 October 1952, TD, 2. Church of the Nazarene Africa Regional Office, Florida, South Africa.

to help us look up and to look at her at all times.

....Spiritual care, spiritual care with the patient was critical. And spiritual care of the patient is related to the relative of patient and to show them the way that God had made the person to go. The first thing that I was taught..when you find the patient with the relative you first talk to the relative first spiritually, then to the patient. The only thing I think is that in those days you only find the patient with the relatives next to the bed. That is why you first speak to the relatives. Then after that you ask her to leave the bed then you start to talk to the patient.⁶³

The First Nursing Text

As Miss Fox had stated earlier, there was a lack of written texts for the training of these nurses. Therefore, in addition to her lectures and clinical responsibilities, in September 1943 Miss Davis published what would be the first of her four nursing procedure textbooks. She described this work as “a collection of nursing notes, compiled for the purpose of assisting the Swazi nurse to perform more efficiently the duties that are placed in her hands”.⁶⁴

The content of this 104 page text mirrors Nightingales’ theory on a clean and quiet environment. The content is divided into two primary sections of elementary and advanced nursing procedures. Elementary procedures include cleaning cupboards, removal of stains, bed making, the bed bath, mouth and back care, rules for taking and giving reports, charting, the cleansing enema, the nutritive enema, procuring lab specimens, application of heat and cold, and changing non-surgical dressings. Advanced procedures included rules for giving medications, gown technique, terminal disinfection,

⁶³ Mildred Dlamini interview by author, tape recording, Manzini, Swaziland, 9 August 1999.

⁶⁴ Dorothy Davis, Nursing Procedures, (Bremersdorp: Raleigh Fitkin Memorial Hospital, 1943), Church of the Nazarene Archives, Kansas City, MO..

venipuncture, hypodermic injections, general post-operative care, and preparation of the patient for delivery.⁶⁵

The chapters are presented as lessons for the students. Some lessons offer a purpose, or a vague scientific rationale, others do not. A list of necessary equipment and supplies for each task is listed and followed by a step-by-step procedure walk-through. Sensitivity to the junior high level education of the students and the background from which they came is shown by Miss Davis in her use of simplicity and a very basic “list” format.

Under the chapter title of “Cleanliness and Order”, Lesson I of this text is “Care and Hygiene of the Ward”.

Purpose:

1. Cleanliness helps to fight disease.
2. Order helps the nurse to do better work.
3. Care of the furniture and equipment saves both time and money.
4. Order and cleanliness make the patient more comfortable and make the ward or room attractive.

General instructions:

1. Have the right attitude toward the work. Cleanliness is essential to patient’s recovery and nurses must not only supervise the cleaning but show a willingness to help when necessary. A real understanding of cleaning is best obtained by doing it.
2. Always have a definite plan of procedure before beginning work in a ward. Save as much time and energy as possible.
3. Keep rooms or wards well lighted, but do not leave artificial lights on if they are not needed.
4. Prevent unnecessary noise.
5. Be saving in the care and use of materials.
6. While in a room always attend to the immediate needs of the patient.
7. When cleaning is finished leave all articles clean and in their proper place.⁶⁶

⁶⁵ Ibid., Table of Contents.

⁶⁶ Ibid., 1.

The lesson goes on through how to dust and clean, how to sweep, how to scrub. Again, it appears so very basic. However, a student who did not start nursing until 1964 expressed the need to be taught at this level. “She was a mother and everything to us. She introduced us...because some of us have never seen a concrete wall or a house, working and sweeping you know, teaching us how to sweep. I come from a rural area. We are not even using electricity. It is the first time to even see any electricity. So she was there in the nursing college and she helped us and introduced us to the nursing service.”⁶⁷

Miss Davis’ text gives insight into normal patient care treatments of that day. What is unknown to today’s nurse, lessons 24 and 25 taught the practices of applying plasters and poultices. Mustard plasters were made to relieve nausea and pain in the stomach, to relieve gas pains, and to relieve the congestion of pleurisy and pneumonia. Mixing one part mustard to four to six parts flour in tepid water created the plaster to be applied to the skin then covered with a hot water bottle. A binder would hold all in place and warmed oil to the skin would remove it after twenty minutes. A plaster of antiphlogistine could be left on for twenty-four hours with reheating every eight hours.⁶⁸

The application of poultices followed a similar recipe. Flaxseed or linseed was used to relieve the pain and congestion of pneumonia, to stimulate the absorption of poisons, and to promote the formation of pus in infections. Mealie (corn) meal appears to be used for the same reasons. A starch poultice could be applied to soften scabs, especially those of scalp diseases.⁶⁹

⁶⁷ Elizabeth Mndebele interview by author, tape recording, Manzini, Swaziland, 10 August 1999.

⁶⁸ Davis, Nursing Procedures, 40-41.

⁶⁹ *Ibid.*, 41-42.

With the lack of adequate sanitation, Miss Davis had to teach the students how to disinfect human waste. Chemicals utilized were chlorinated lime and cresol preparations. It is doubtful the students enjoyed this task.⁷⁰

In those days before “one-time use” products existed in healthcare, syringes needed proper attention and made ready for the next injection. Miss Davis taught the nursing students to boil needles and syringes for three minutes or to place them in lysol for thirty minutes. The needles then required sharpening and rubbing with an oil cloth to prevent rust.⁷¹

During those years, as Miss Davis continued to teach the nurse aide students, it became apparent that in order to adequately teach and to meet the standard of professional nursing in adjacent South Africa, she herself needed midwifery training. What she had learned at Samaritan had served her well, but the time for a formal program of study and certification had come.

Midwifery Certification

While many of the other Nazarene nurses traveled to institutions in Scotland, McCord Zulu Hospital in Durban, South Africa, was the institution selected by Miss Davis for her midwifery training. This now 90 year old hospital, which sits upon a rolling hill overlooking the Indian Ocean, was dedicated to “its work of carrying on a medical service for the non-European people of South Africa subject to priority always given to the Bantu race. The general policy of the aim of McCord Zulu shall be to carry on a

⁷⁰ Ibid., 75.

⁷¹ Ibid., 83.

ministry of health and healing in the name of our Lord Jesus Christ and in accordance with the highest ethical standards of the medical profession.”⁷²

You know, I don't know why I chose McCord Zulu Hospital. I mean I need a senior moment to recall. I think it was the influence of one of the other missionaries. I needed the experience of delivering babies in the Bantu or African setup. I got it there at McCord Zulu. I was assigned to work with the African people and I like that very much because it helped me, to prepare me for the work in Swaziland. I and a Free Methodist nurse were the only Causasians who studied at McCord Zulu Hospital at that time. We studied with the African nurses and I got my certificate in midwifery along with the African nurses.⁷³

The nurse's home, opened in 1939, and the former site of the maternity cottage where Miss Davis lived and learned are located a five minute walk up the hill from the main hospital. Unfortunately, in 1999, water damage was discovered and all of the old records in the archives were destroyed.

Now that Miss Davis was in the Union of South Africa, she was required to obtain nursing registration. She passed her final exam on 14 January 1946 and became a licensed Medical-Surgical Nurse.⁷⁴

At the time of her midwifery training, the Union of South Africa, Department of Native Affairs published its 1945 report of the Inter-departmental Committee of the Social, Health, and Economic Conditions of Urban Natives. As Miss Davis was learning midwifery in an urban setting, and as she would return to the growing urban center of

⁷² Constitution of the McCord Zulu Hospital Board, 1935 TM, Church of the Nazarene Africa Regional Office Archives, Florida, South Africa. While the hospital had not been born under oppression of apartheid in South Africa, the designation of Zulu was formally dropped from the name at the end of apartheid.

⁷³ Dorothy Davis Cook interview by author, 3-4 March 1999.

⁷⁴ Dorothy Fay Davis, The South African Nursing Council Certificate of Registration, Medical-Surgical Nurse, 14 January 1946. Personal papers of Dorothy Davis Cook, Alhambra, CA..

Bremersdorp which mirrored the towns of South Africa, it seems that the content of this report would impact what she was taught, how she would practice, and what she would teach.

The committee first dealt with general public health concern of insanitation. While intensified in the urban setting, the same concern would no doubt be present in the more rural areas of both South Africa and Swaziland.

Insanitation is undoubtedly the principal factor making for ill-health in urban locations. The outstanding insanitary features of the majority of locations are bad housing, inadequate water supplies, insufficient or unhygienic latrine [sic] accommodation and unsatisfactory arrangements for the disposal of domestic waste and for public cleansing generally.

The absence of household latrines necessitates the provision of those aesthetically [sic] repulsive and hygienically dangerous structures known as communal latrines. ...the construction of both household and communal latrines is often very defective, so that fly-borne diseases have every chance of spreading.

The individual Native householder is too poor to build a hygienic house and latrine, too poor to provide himself with proper storage receptacles for refuse and slops, too poor to meet economic charges for sanitary removal services.

Water supplies are usually very inadequate. Even in locations where there is a piped supply, it is exceptional for water to be laid on to the individual houses. Water often has to be carried considerable distances from standpipes, which obviously does not favour [sic] domestic and personal cleanliness. Moreover, because of the absence of a tap within the house or yard, water has to be carried in receptacles which are themselves often unclean, and stored in open vessels exposed to pollution.⁷⁵

Though unable to provide an accurate statistic, with an approximate Native infant mortality rate of 200-300 per 1000 births, the committee also addressed maternity and child welfare services.

⁷⁵ Union of South Africa, Department of Native Affairs, Report of the Inter-departmental Committee on the Social, Health, and Economic Conditions of the Urban Natives, (Pretoria: Government Printer, 1945), 7-9. Church of the Nazarene Africa Regional Office Archives, Florida, South Africa. The very presence of this report in the Archives demonstrates its apparent impact on medical missions and health care in the region.

This rate is three to four times that for Europeans living under identical climate conditions. Among the principal causes of infantile deaths are diarrhoea [sic] and enteritis (diseases of insanitation and ignorance), congenital syphilis (a disease of ignorance, as the prospective mother often does not know she has syphilis in a transmissible form), acute respiratory infections including whooping cough and measles (diseases of overcrowding, poverty, and ignorance).

In addition to miscarriages and still-births due to syphilis, and chronic pelvis disorders and sterility due to gonorrhoea [sic], there is among Native women a still imperfectly recognised [sic] amount of chronic ill-health due to injuries and non-venereal infections occurring at or soon after childbirth.⁷⁶

In order to deal with these major health concerns, in part the committee recommended the expansion of facilities to train Native nurses and midwives. They recommended an increase in the salaries of those nurses working in the districts and a expanded subsidy to facilities involved in maternity and child care. Such money would provide for “prenatal and postnatal clinics, infant clinics, and the issue of adequate rations of milk and other protective foods to necessitous cases among pregnant and nursing women and among children of pre-school age”.⁷⁷

Miss Davis completed her studies and was awarded her midwifery diploma from the McCord Zulu Bantu School for Nurse Midwives on 30 April 1946.⁷⁸ By meeting all requirements for Zulu language study in 1945 and now midwifery in 1946, the second phase of her role development was complete.

Her Ordination

The third phase of her role development had been in progress for many years. “I felt called to preach but that was before I went to Nampa [nursing school]...Dr. A.E.

⁷⁶ Ibid., 10.

⁷⁷ Ibid.

⁷⁸ Dorothy F. Davis McCord Zulu Bantu School for Nurse Midwives Diploma, 30 April 1946. Personal papers of Dorothy Davis Cook.

Sanner was our pastor in Alhambra and I felt called to preach and he gave me my first minister's license. Now I was not ordained before I went to Africa because I had not two years in the pastorate."⁷⁹

Miss Davis first sermon had been given at the Los Angeles Fifth Street Mission when she was just 18 years old. Though nervous and humbled by the invitation to speak, the Lord gave her the Scripture verse Jeremiah 1:7-10. "Thou shalt go to all that I shall send thee, and whatever I command thee thou shalt speak. Be not afraid of their faces: for I am with thee to deliver thee, saith the Lord. Then the Lord put forth his hand and touched my mouth."⁸⁰

Miss Davis included pastoral preparation in her course work during her Pasadena College days. Such work would have included Nazarene church history and theology.⁸¹ John Wesley, the theologian behind the Church of the Nazarene and a product of his own societal norms, was initially opposed to women as preachers. However, through prayer and study of Scripture, he came to believe in and support women in the pulpit. At the founding of the Church of the Nazarene, Phineas F. Bresee insisted that, according to Acts 2:17-18, the Holy Spirit would come upon both men and women. Therefore, women were eligible to hold every office in the church.⁸²

⁷⁹ Dorothy Davis Cook interview 3-4 March 1999.

⁸⁰ Davis Cook, When God Calls. Scripture from King James Version. Dorothy Davis Cook interview by author 3-4 March 1999.

⁸¹ Wes Tracy and Stan Ingersol. What is a Nazarene? (Kansas City, MO.: Beacon Hill Press, 1998), 10. This work states the "Traditional doctrines marked the new Nazarene denomination. These included the inspiration of the Bible, the Holy Trinity, the deity of Christ, and Protestant beliefs in Scripture alone as the Rule of faith and practice, salvation by grace alone through faith alone, and the priesthood of all believers."

⁸² Rebecca Laird, Ordained Women in the Church of the Nazarene, (Kansas City, MO.: Nazarene Publishing House, 1993), 11); Tracy and Ingersol, 12.

In 1922, 1934, 1939, and 1943, the Scriptural passages in I Timothy and I Corinthians which directed women to be silent in church caused some to question the ordaining of women. "Each time the official answer declared that the calling of the Spirit is not limited to gender or race and that the historical position of ordaining women is faithful to the gospel."⁸³

Miss Davis returned to the United States for her ordination ceremony. She and the ailing Miss MacDonald, boarded an airplane for this journey and thus became the first Nazarene missionaries to fly home from a field.⁸⁴ Miss Davis was ordained at the Los Angeles District Assembly on May 28, 1948. Under the title of "The Ordained Minister", the 1944 manual of the Church of the Nazarene states:

214. We recognize but one order of the official ministry- that of the eldership. This is a permanent order in the Church. The elder is to rule well in the Church, to preach the Word, to administer the sacraments of baptism and the Lord's Supper, and to solemnize matrimony, all in the name of, and in subjection to Jesus Christ the great Head of the Church.

215. Those who are called of God to this ministry, and who have fulfilled all the requirements of the church for the same, who have been orderly in the full course of study prescribed for licensed ministers and candidates for ordination, and have been considered and favorably reported upon by a committee appointed by the District Assembly, may be elected to elder's orders by two-thirds vote of the District Assembly, provided they have been active in ministry not less than two years.

217. Then candidate thus elected shall be ordained by the laying on of the hands of the elders, and other religious exercises, under the direction of the presiding General Superintendent.

218. The General Superintendent having jurisdiction shall issue to the person so ordained a certificate of ordination signed by himself and the district secretary.⁸⁵

⁸³ Laird, 144.

⁸⁴ Dorothy Davis Cook interview by author 8 October 1999.

⁸⁵ Dorothy Davis, "Church of the Nazarene Certificate of Ordination" (28 May 1948). Signed by Howard Miller, General Superintendent and L.A. Whitcomb, District Secretary; Church of the Nazarene, Manual (Kansas City, MO.: Nazarene Publishing

In the months before her ordination, Miss Davis returned to Samaritan Hospital to teach and supervise. She taught “Ward Supervision” to both the senior nursing students and the supervisors while updating her own nursing knowledge and skills.⁸⁶ After her ordination, she attended the General Assembly of the Church of the Nazarene in St Louis. There she was reunited with Louise Robinson (now Mrs. J.B. Chapman and General President of the Women’s Foreign Missionary Society). They posed together for a photograph in front of the exhibit hall missions display.⁸⁷

Her ordination enhanced her work in Swaziland. In Swaziland, Miss Davis pastored two churches. “I usually preached through an interpreter. It was safer to do that because there were older people who would understand an interpreter who would not understand my accent.”⁸⁸ Her pastoral training also served her outside of the pulpit. Leadership in the Christian education program of Sunday School remained part of Miss Davis’ missionary career in Swaziland. At her very first annual missions council meeting she was appointed to serve on both the Sunday School and medical committees.⁸⁹ During one term of service she carried the responsibility for all Sunday Schools in the district, each week traveling to visit a different Sunday School. By 1944-1945, the district had 37

House, 1944), 123-126.

⁸⁶ Dorothy Davis, “The Joy of Serving,” Tri.N 2(11) (1948), 1; “Furloughing Missionary on Duty,” Tri.N 2(11) (1948), 1. Personal papers of Dorothy Davis Cook, Alhambra, CA.; Juanita Gardner interview by author, audio/visual recording, Temple City, CA., 27 February 1998.

⁸⁷ Ibid. Photo album of Dorothy Davis Cook. Church of the Nazarene Africa Regional Office Archives, Florida, South Africa.

⁸⁸ Dorothy Davis Cook interview by author 3-4 March 1999.

⁸⁹ Official Minutes of the 17th Annual Council Africa District Church of the Nazarene, 8.

Sunday Schools with an average attendance of 2173.⁹⁰ From one of these Sunday Schools she built a church. "They call that general missionary work."⁹¹

In addition to the two churches Miss Davis pastored, she periodically preached at Sharpe Memorial Church on the mission station and at other surrounding village churches. She rotated with others in preaching at the RFM ward services and in the nurse's chapel. There was a time however, when Miss Davis felt a sense of failure in her pastoral ministry.

"Well, I told Mrs. Hynd one time that she didn't need to put me on the 'road to' anymore because I felt a complete failure in preaching. And she gave me a little speech and she said, 'your name will go on the 'road-to' as usual'. She didn't budge. So I continued.

I wasn't seeing souls at the altar. That was my criteria. Now you see, there was a time when they [the Church of the Nazarene] ask all missionaries to enumerate the number of souls that were saved through their ministry. And I wasn't having much success with many people bowing at the altar.

You see it was very difficult for me to enumerate souls saved. So I felt under pressure but I don't know if anyone else did or not.⁹²

But I want to tell you, its, it was a team effort. I learned this very early. We were supposed to send in a number of converts that we had. So when an old witch doctor comes to the altar when I'm preaching at the hospital chapel, I said, 'I can put him down'. And what do you think...he got up and says he first heard from one of our missionaries in Adalia about this wonderful way of salvation and he just wants to testify that he's going to follow the Lord. It had nothing to do with me or the message, anything. And there was a woman in the ward that was wonderfully saved and I thought now I can count her as my convert. What does she do but go to the government hospital and tell them one of the other missionary nurses prayed with her. She only just gave her testimony to me. So I decided that it was useless to claim any soul. It was a team effort. We worked together to win them for Jesus.⁹³

⁹⁰ Minutes of the Africa Mission Council Church of the Nazarene, October 1945, 59.

⁹¹ Dorothy Davis Cook interview by author 3-4 March 1999 and 28 February 1998.

⁹² Dorothy Davis Cook interview by author 3-4 March 1999.

⁹³ Dorothy Davis Cook interview by author 28 February 1998.

Miss Davis carried on her pastoral ministry call through her missionary years. Nurse Martha Zubuko, a former student of Miss Davis who in 1999 is the nurse and pastor's wife at the Enculwini outstation church, clinic, and school started by Miss Davis, stated:

Dorothy was a preacher. She was not only a nurse, she was a preacher. And she conducted some services in the morning. And she used to attend the prayer and fasting services, very active in all the service. On Sundays she did not have time to attend to someone or to listen to someone who is preaching. She has to go outside and take some nurses outside to go and preach. All those who were interested to go and do that, she had some work in hand to go and do so. And I was one of those whom she helped spiritually. Because she used to call you privately and try to help you if she sees something that is not quite alright. I wish we could have some missionary [sic] who are like Miss Davis these days.⁹⁴

Transitions

As Miss Davis obtained the credentials of midwife and then ordained elder, the dynamics of health care and nursing education in Swaziland were in transition. Three specific events directly influenced Miss Davis and her decision to not return directly to Swaziland at the completion of the furlough during which she was ordained. Miss Davis felt she needed to go to England and earn the degree of Sister Tutor.

The first significant influence was the reaffirming of medical missions within Swaziland. The British government's Deputy Director of Medical Services, D. Drew, expressed in writing an expected separation of missionary work from medical work as a criteria for the receiving of government subsidies of salary support, clinic support, and free medications.⁹⁵ In response, Dr. Hynd remarked:

⁹⁴ Martha Zubuko interview by author, tape recording, Enculwini Church of the Nazarene near Manzini, Swaziland, 8 August 1999.

⁹⁵ D. Drew, Mbabane, to The Medical Superintendent, Raleigh Fitkin Memorial Hospital, Bremersdorp, 17 September 1945 TL. Church of the Nazarene Africa Regional Office Archives, Florida, South Africa.

With regard to paragraph 2 in your letter dealing with medical work carried on by missions or churches, the position of medical missionary work, as stated by the last two World Missionary Conferences at Jerusalem and Madras respectively, is one of being an integral part of the work of the Church. 'In the missionary enterprise the medical work should be regarded as, in itself, an expression of the spirit of the Master, and should not be thought of as only a pioneer of evangelism or as a merely philanthropic agency. The Christian Church should attempt, where-ever [sic] needed, to carry on effectively the ministry of healing.' The need of medical and health work in the Central District of Swaziland was one that was recognized both by our church and by the Government in the earlier part of this century. Our church set about making the meeting of these medical and health needs one of the most important parts of its contribution to the uplift of the country. Medical and nursing personnel were recruited, and schemes set on foot for the training of native personnel.

It has been in this spirit and on these foundations that the medical and health work carried on by our Mission in the Central District has been developing, until now we have our Hospital at Bremersdorp and 6 Health Centres [sic] established. We have 3 doctors, 9 European nurses, 12 trained Swazi nurses, and 17 nurses-in-training.

The policy to which both the British Government and the Union Government are now committed since their National Health Services Commissions have reported is the provision of free medical services for the population, and any proposals for the development of health services in Swaziland should run parallel with policy in the Union where Mission hospitals which have already been established will be subsidised [sic]adequately to enable them to give, in districts served by them, medical and health services to the public under the same conditions of cost to the individual as in districts where the Government is giving the services entirely. Such a policy would seem only fair both to the public serviced and to the Mission which has developed the services.⁹⁶

In the formal agreement proposal draft that followed, Drew utilized the phrase "medical missionary" and all subsidies were granted.⁹⁷

⁹⁶ David Hynd, Bremersdorp, to Deputy Director of Medical Services, Mbabane, 24 September 1945 TLS. Church of the Nazarene Africa Regional Office Archives, Florida, South Africa.

⁹⁷ D. Drew, "Agreement", n.d., TMs. Church of the Nazarene Africa Regional Office Archives, Florida, South Africa. As both RFM and McCord Zulu were mission hospitals, there was correspondence between David Hynd and the Medical Director at McCord Zulu on this issue. David Hynd, to Dr. Alan Taylor, Durban, 3 November 1945 TLS. Church of the Nazarene Africa Regional Office Archives, Florida, South Africa.

The second significant event that influenced Miss Davis going to England was the establishment of the High Commission Territories Nursing Council in 1945. Under proclamation of His Excellency the High Commissioner, the council was concerned with the territories of Swaziland, Basutoland (Lesotho), and Bechuanaland (Botswana). The powers of the council were:

1. To keep the registers.
2. To prescribe the qualifications and conditions for admission or re-admission to the registers, including the nature and period of training required.
3. To prescribe curricula, appoint examiners, conduct examinations and grant certificates.
4. To approve schools of nursing or other places of training.
5. To prescribe the fees for registration, examinations and to issue certificates.
6. To prescribe uniforms, badges or other distinguishing devices.
7. To reprimand or suspend any person registered under the proclamation who has been found guilty of improper or disgraceful conduct.
8. To regulate the holding and procedure of meetings.
9. Generally to do all things necessary or expedient for the performance of all the objects of the proclamation.⁹⁸

One of the council members was to be a sister tutor from a training school for nurses and midwives.⁹⁹ Miss Fox had been in charge of the instruction in Swaziland but did not hold the formal Sister Tutor degree as granted under British regulations.

The third influencing event was the untimely death of Miss Fox. Following rheumatic fever, she died of a cardiac lesion on 15 June 1947 in RFM and is buried in the small cemetery behind the hospital. Miss Fox is credited for developing a basic program that earned state recognition.¹⁰⁰ Many years later, Miss Davis stated:

⁹⁸ Davis, Nursing in Swaziland, 23-24.

⁹⁹ *Ibid.*, 24.

¹⁰⁰ David Hynd, "A Missionary Pioneer Passes On," The Other Sheep (1947). Church of the Nazarene Archives, Kansas City, MO.; "Miss Evelyn Fox Receives Her Crown," Tri-N (n.d.), Northwest Nazarene College Archives, Nampa, ID.

I built on Evelyn Fox. She was a wonderful teacher. And you know I regret many times that people say I started training nurses. I did not....I didn't begin to come up to her but I had the privilege of building on Evelyn Fox's work. When I arrived there were only nurse aides and I did upgrade the nurse's training. That I take credit for.¹⁰¹

Sister Tutor Diploma

The Program

While the nursing school had state recognition, in order for the Nazarene nursing program to obtain state registration, a qualified Sister Tutor was required. Miss Davis was granted a Leave of Absence from the mission field and she began her studies at the Royal College of Nursing in the Fall of 1948.¹⁰²

England's Royal College of Nursing (RCN), founded in 1916, was designed to prepare "experienced state registered nurses for senior positions in the hospital and public health field. It works in close co-operation with schools of nursing and universities throughout the country." The RCN was recognised [sic] by the Ministry of Education as a "Major Establishment for Further Education".¹⁰³

One of several RCN programs, the two year Sister Tutor Diploma course was inspected by the University of London and the General Nursing Council. The school had passed its 1946 review and would be recertified for another five years in 1953.¹⁰⁴

¹⁰¹ Dorothy Davis Cook interview by author, 2 February 1998 and 8 October 1999.

¹⁰² Dorothy Davis, London, to My dear Mrs. Kinzler and Samaritan Hospital Friends, in *Tri.N 3(5)* (1948). Northwest Nazarene College Archives, Nampa, ID..

¹⁰³ The Royal College of Nursing Education Department, *Prospectus*, (London: Royal College of Nursing, 1952-1953), 5.

¹⁰⁴ R.A.S. Knowles, London, to Miss Carpenter, London, 5 January 1953 TLS; M.F. Carpenter, London, to A. McPhee, London, 22 October 1953 TLS. Royal College of Nursing Archives, Edinburgh, Scotland.

The Sister Tutor first year curriculum included biology, chemistry and physics, anatomy, physiology, nutrition, and bacteriology. The Public Health and preventive medicine component required community observation in addition to lecture. Options for community observation included, Acton Special School, two Old People's Homes, Stanhope Day Nursery, Mattock Land Health Clinic, Metropolitan Water Board's works, and Sewage works.¹⁰⁵

The second year curriculum consisted of history of nursing, general education psychology, methods of teaching and practice teaching, and nursing school administration. Practical work was required in area hospitals. The cost to the student was 50 guineas the first year and 42 guineas for the second. Students took the majority of their lectures and had access to a laboratory and library at the RCN building in Cavendish Square. Some lectures were at the University of London.¹⁰⁶

Miss Davis' chemistry and physics partner, Norma Jamison, later authored several nursing texts. Another classmate who remained friends through the years was Betty Kettle. Miss Davis did one day of practical teaching at the London South Hospital, but due to the terrible conditions there would not go back. She also did tutoring at Florence Nightingale's St. Thomas Hospital just across the Thames from Big Ben.¹⁰⁷

The Family

While attending the Royal College of Nursing, "Dorothy" was welcomed into the home of Rev. and Mrs. Maclagan and their children David, Jean, Margaret, and Hamish.

¹⁰⁵ The Royal College of Nursing, Prospectus, 7.

¹⁰⁶ *Ibid.*, 5, 7; Dorothy Davis, interview by author 8 October 1999.

¹⁰⁷ Dorothy Davis Cook interview by author 3-4 March 1999 and 8 October 1999.

The three-story home was located in a poor neighborhood at 12 Hilliar Road, Battersea. The same home remains the manse (parsonage) today.¹⁰⁸

Living with the Maclagans required Dorothy to take a 40-minute ride on London's underground tube each way between housing and school. She traveled between the Clapham South and Oxford Circle stations. "This is quite an experience, especially during rush hour. One gets squeezed, actually squeezed or packed in. I never saw anything like the way people can get on one of those underground trains and then away we go like lightning."¹⁰⁹

Dorothy was given the downstairs bedroom, second door to the right. This placed her between the kitchen and Rev. Maclagan's study. Mrs. Maclagan, known for being "a wonderful little mother", set the coal fire each night in Dorothy's room to help keep her comfortable.¹¹⁰

Staying with the family was:

..an education in itself. The oldest daughter had finished her training and she

was teaching school. But she was still at home. Then we had two young teenage boys and one teenage girl that were in the family. We'd come home and have tea, 4:00 tea, and then we'd all go to our rooms and study. Then we'd come back and have supper, maybe 8:00 or 9:00.¹¹¹

In expectation of the opportunity to tell of the family days with Dorothy, Margaret Maclagan Wood contacted each of her siblings. Speaking as their united voice, Margaret described Dorothy as "a very special person" who had "a great sense of fun and ability

¹⁰⁸ Ibid.

¹⁰⁹ Dorothy Davis to My dear Mrs. Kinzler.

¹¹⁰ B.E.A. Wood, interview by author, tape-recording 31 August 1999, Battersea, England.

¹¹¹ Dorothy Davis Cook interview by author, 3-4 March 1999.

just to cope with family life”, and “we all loved her”. The brothers, both of whom went into the pastorate, expressed specific endearing memories of Dorothy praying with them and for them. All were impressed with “her saintliness. She was very concerned with our spiritual welfare.”

Jean, who was teaching English at the time, was of specific help to Dorothy. Unlike the American routine of multiple choice questions on examinations, the British test in essay form. Jean spent hours helping Dorothy to develop this skill.¹¹²

Socially, Dorothy was invited to participate in all activities with the family, but she spent most of her time studying. She did actively involve herself in their church, the International Holiness Mission. She also preached at Nazarene churches outside of London. “Recently we had Miss Dorothy Davis from Swaziland to take the week-end services at our church and we did enjoy her ministry very much. I also was privileged to talk with her about nursing work and she told me that she trained at the Samaritan Hospital. She did indeed win all our hearts.”¹¹³

Two formal invitations came to Miss Davis which caused great excitement in the Maclagan home. Jean provided a hat, and long gloves were found for Miss Davis to be properly attired for these special events.¹¹⁴

The first event granted Miss Davis the opportunity to meet The Right Honorable Aneurin Bevan, M.P., Minister of Health, at Lancaster House, St James’, on 6 July 1949. The second invitation was for:

¹¹² Ibid.

¹¹³ R.A. Chapman, Ilkeston, to Dear Editor of Tri-N, in Tri-N 3(5) (1948). Northwest Nazarene College Archives, Nampa, ID..

¹¹⁴ Margaret Maclagan Wood, interview by author, tape-recording, 2 September 1999, Cambridge, England.

Miss D.F. Davis

**To Meet Members of the International Council of Nurses from Overseas
HER MAJESTY THE QUEEN has most graciously consented to be
present at a Reception being held by the National Council of Nurses of
Great Britain and Northern Ireland, The Association of Hospital Matrons
and The Royal College of Nursing, on Friday, July 8th, 1949, at the
English Speaking Union, 37 Charles Street, Berkley Square, W.1.
The pleasure of your company is requested.**

The Process

Unfortunately, the first year of her Sister Tutor studies did not go well for Miss Davis. She failed biology and this forced her to return to Swaziland until she could restart the program with a new class the following year. Thirty-four other students had enrolled with Miss Davis and eight others failed. With her awareness that many people on three continents knew of her studies and would learn of her failure, "It was humiliating".¹¹⁵

Even in her humiliation and disappointment, her purpose for obtaining the Sister Tutor diploma remained in focus. It appears that Miss Davis stayed in Swaziland from late 1949 to the end of 1950 or early 1951 before returning to England. Then using her personal vacation time and with a ticket paid for through the generosity of her brother-in-law, Cecil Ewell, she returned to the Royal College of Nursing to retake biology and complete her course work. Miss Davis was awarded her Sister Tutor Diploma on 5 September 1951, with honors in teaching. The now successful Miss Davis returned to Swaziland again.¹¹⁶

In his annual report to the mission council, Dr. Hynd stated:

Miss Davis has been in charge of the Nursing School and shows great devotion

¹¹⁵ Dorothy Davis Cook, interview by author 8 October 1999; Sister Tutor Diploma Results 1948-1953. n.p., TD. Royal College of Nursing Archives, Edinburgh, Scotland.

¹¹⁶ Dorothy Fay Davis Sister Tutor Diploma, University of London having taken training at Royal College of Nursing, 5 September 1951.

to the task of training them in both the academic and spiritual sides of their ministry. We are glad to report that this year she went, without cost to us, to London to sit her final examination for the Sister Tutor's Certificate and passed with distinction.¹¹⁷

Miss Davis had completed her decade of role development. She began in 1940 with mentoring in, and settling into, missionary life. The Swazi nation became her home and she fell in love with the people.

Although she taught and preached in English, Miss Davis met a stipulation of her missionary contract, and opened the channel for cultural communication, by learning to speak, read, and write Zulu. Then, in order to meet the requirements for nursing registration and licensure as set by the British government, Miss Davis completed midwifery at McCord Zulu Hospital and passed all necessary state examinations with honors.

Miss Davis obtained the full authority and responsibilities of an elder in the Church of the Nazarene at her 1948 ordination. Building on a theological and denominational heritage, she began to minister in Sunday Schools, churches, and in hospital worship services.

The last phase of her decade of role development was the earning of the Sister Tutor diploma at England's Royal College of Nursing. She had earlier accepted the role of nurse aide educator and now Miss Davis returned to Swaziland with the vision of Swazi Registered Nurses. The Sister Tutor degree granted her the empowerment and the credibility to make it happen.

¹¹⁷ David Hynd, "Bremersdorp District and Station Report to the Annual Mission Council" (TDS, n.p., 6 October 1951):, 3.

CHAPTER FIVE

Decade of Advancement

Relevant Change

During Miss Davis' first decade of service and the many months that she was both in the United States on furlough and her two tours of study in England, much happened at the Bremersdorp Nazarene Mission, RFM, and the nursing school. As previously stated, the High Commission Territories Nursing Council (H.C.T.N.C.) had been established. One of the council's early actions was the formal recognition of the Nazarene nursing program, under the leadership of Miss Davis.

On November 2, 1948, with Sir Walter B. Johnson in the chair, it was 'resolved that the Raleigh Fitkin Memorial Hospital, Swaziland, be recognized by the council as a nurse training school for medical and surgical nurses; the training to be completed in not less than four and one-half years'. This was a first; the first training school to become eligible to train nurses for state registration in the three territories.

Two years later, 1950, the hospital was also recognized as a training school for midwives.

Students who had previously passed the Swaziland government nursing examinations were allowed to take the examination of the new nursing council, and if successful, were registered. The South African Nursing Council gave permission for the H.C.T.N.C. to use their examinations the first few years. In 1950 Mrs. Eva (Manzini) Mthetwa, now deceased, was the first nurse in the three territories to become registered with the High Commission Territories Nursing Council. Other nurses availed themselves of this opportunity. In 1950 provision was made by the council that an enrolled nurse under the Executive Nursing Committee could be registered if:

1. She possessed a Junior Certificate with passes in English, mathematics or arithmetic.
2. She did one year further training.
3. She passed the Council examinations at the end of this period of extended

training.¹

In an effort to keep nursing graduates informed about the H.C.T.N.C., their school, and their classmates, Nazarene Nursing News was first published in March 1950. Miss Davis served as editor and Eva Manzini as assistant editor. A front page column brought the graduates up-to-date on the status of registration.²

During the past years the standard of education for entrance to the Nursing School has been gradually increased. In 1935 Standard VI was made the entrance qualification, and since that date the Swaziland government has set the papers and conducted the examinations. Since 1944 Standard VII has been the entrance qualification.

In 1945 the High Commission Territories' Nursing Council was formed under proclamation by the High Commissioner with a view to bringing the standard of nursing education in the three High Commission Territories up to the standard prevailing in the Union of South Africa. In November, 1948, our Hospital was the first in the High Commission Territories to be registered as a Training School for nurses under the new Nursing Council.³

According to Miss Davis, from 1950 until 1961, the students entered either the three years medical/surgical nursing and one year midwifery program of the Swaziland Executive Nursing Committee or the four and one-half year medical/surgical nursing and nine month midwifery program for state registration by the H.C.T.N.C.. In 1956, the later requirements changed to four years for medical/surgical nursing.⁴

¹ Dorothy Davis, Nursing in Swaziland (Florida, Transvaal: Nazarene Publishing House, 1975), 26.

² Dorothy Davis ed., Nazarene Nursing News 1(1) (1950). Church of the Nazarene Africa Regional Office Archives, Florida, South Africa. This paper also confirmed the accreditation of the midwifery program.

³ Ibid.

⁴ Davis, Nursing in Swaziland, 26.

The Nazarene Nursing News listed the newest Swazi nurses, those who had recently passed their examinations. These who were successful in medical-surgical nursing were Miss Louise Magongo, Miss Gertrude Mdhluli, Miss Dora Magongo, and Miss Eleanor Kumulo. Those who were successful in their preliminary exams were Miss Sarah Dlamini, Miss Hosea Dlamini, Miss Minah Mkatshwa, Miss Grace Vilakazi, Miss Katherine Vilakazi, Miss Kezia Dlamini, and Mr. Dingane Nxuinalo. Due to the limitations of their English at this time, the oral examinations were given through an interpreter who had medical knowledge. It is interesting to note the first names common to those of early Nazarene missionaries in Swaziland.⁵

More Missionary Nurses

During 1949-1950 RFM and the dispensaries had cared for 2,926 inpatients and 34, 818 outpatients. "Major operations numbered 237 and x-ray examinations 151. Our motor ambulance traveled 7,786 miles bringing in 291 patients."⁶ Medical help had arrived to ease the load of Dr. David Hynd. Dr. Lauren Seaman served at RFM from 1944 to 1949. Now serving was a Dr. Kenneth Stark and an intern, Dr. L. Dukhie. Dr. Hynd's son, Dr. Samuel Hynd, had just been appointed a missionary by the General Board of the Church of the Nazarene and was expected to arrive back in Swaziland within the next few months.⁷

⁵ Ibid.; Davis, Nazarene Nursing News 1(1), 2.; Dorothy Davis Cook interview by author 3-4 March 1999.

⁶ David Hynd, "Raleigh Fitkin Memorial Hospital," The Other Sheep (1950), 11. Church of the Nazarene Africa Regional Office Archives, Florida, South Africa.

⁷ David Hynd, "Nazarene Nursing News," Nazarene Nursing News 1(1), 1950: 1, 4. Church of the Nazarene Africa Regional Office Archives, Florida, South Africa. Russell Delong and Mendell Taylor, Fifty Years of Nazarene Missions (Kansas City, MO.: Beacon Hill Press, 1956), 214.

The number of nurses present had also expanded over the last few years. Miss Davis, as Matron of the nursing school, was very dependent on these nurses. While some would stay for years in Swaziland and others would be reassigned to other areas or retire from missionary service, all were the ward instructors and supervisors of Miss Davis' students and program graduates (see appendix 3). The following are a few that had key roles in the daily life, work, and teaching of Miss Davis.

Nurse Sylvia Oiness did her nurse's training at Johns Hopkins and arrived in Swaziland November 16, 1946. She lived with the distinction of being a survivor of the an Egyptian passenger ship shelled and sunk in April 1941. According to Miss Davis:

She came to the field, Sylvia Oiness came to the field, when we were desperately in need of a matron or supervisor of the whole church or the whole thing and as a result I was relieved. I was serving as director of the hospital, and teaching in the school, and ever so often somebody would drop out so it made the load.

She came and relieved me of the responsibility of being in charge of the hospital. And she did it very well. She was very well suited for that position. She was very well organized on how to get things done. She also served in the operating room. We call it the theater, but the operating room. And it was very interesting to me. Whenever the nurses came to the operating room, they began to walk like Sylvia, fast, straight, and to the point. That was her and she served very well.⁸

Miss Oiness later reflected:

I can honestly say that I devoted all my energies at the R.F.M. Hospital in service for Jesus and the people of SWAZILAND. My work was the joy of my life, because Jesus was the joy of my life.

My duties were numerous. For 24 of my 30 years I served as Matron of the Hospital, which included the handling of all applications for General Nursing and Midwifery. For 20 years I was Supervisor of the Operating Rooms, and taught O.R. Technique to the Swazi nurses. For 6 years I was Supervisor of the Hospital kitchen. I had charge of various wards, including the Private Ward, where I conducted on Sunday mornings services for the patients-for many years. Praise be to God for those who accepted Christ as Saviour [sic]!

From time to time I had charge of the 2 Nurses' Homes. And then for some

⁸ Dorothy Davis Cook interview by author, tape recording, Alhambra, CA., 8-9 October 1999.

years I had charge of the Mortuary. I cannot describe all that was involved in that assignment, especially before we a refrigerator in the Morgue! I never expected to be a mortician when I went to the Mission field! I did have opportunities to pray with relatives of the deceased.⁹

Nurse Juanita Gardner arrived in Swaziland in October 1950. She completed her nurse's training at Samaritan in 1944 and then worked there intermittently until completing her degree at Northwest Nazarene College in 1947.¹⁰ Miss Gardner, who recorded her missionary service in the book The Promise, spent her first Saturday in Bremersdorp with Miss Davis.

On my first Saturday in Swaziland, Dorothy Davis and I walked to the village of Bremersdorp, now called Manzini [book written 1992]. The dusty streets were filled with people. Many of them were walking, some were riding bicycles, some were driving donkey carts, and a few were in trucks and cars.

Most of the Swazi people wore traditional dress. Some women wore cowhide skirts. Others wore very full skirts of terry cloth with aprons over them. They draped a brightly colored cloth under the right arm and tied it over the left shoulder. These cloths were a variation of colors-reds, blues, browns, oranges, and mixtures of them all-and what designs!

The married women had their hair done up in a beehive-shaped hairdo. Hairpins with beads stuck in their hair. The hairpins were both for decoration and for scratching the head as needed. They wore bracelets, strings of beads around their necks, and beaded anklets, and were barefoot. The children tagged along with their mothers, often running to keep up with them. The little boys had a G-string with animal skins attached in front and back. The little girls wore skirts made from strips of cloth sewed to a band.

The men tied cloths of various colors around their waist, often brown, navy, or maroon. Over this they wore a skin hanging in front and back. A few wore

⁹ Sylvia Oiness biography page (n.d., n.p.). Sylvia Oiness, Baltimore, to Dr. Jerald Johnson, Kansas City, 15 August 1979 TL. Church of the Nazarene Archives, Kansas City, MO.; Sylvia Oiness, "The Miracle Ship and the Rescue of All on Board," Nazarene Nursing News 3(1) (1952): 4. Church of the Nazarene Africa Regional Office Archives, Florida, South Africa. The ship was sunk five days out from Cape Town. 120 of the 202 passengers were missionaries from various Christian denominations and not one received any injury.

¹⁰ Juanita Gardner interview by author, audio/visual recording, Temple City, CA., 27 February 1998.

shirts, but most of them tied a long cloth over the shoulder. Almost every man carried a knobkerrie. It was a branch from a hardwood tree with a knob on the end, which was the joint where the branch fastened to the tree. Ridges were cut into the knob. This was a good weapon against snakes. It was also deadly when used on another person.

We went to all of the stores- three general merchandise stores, the butcher shop, a drugstore, and the bank.

On our trek home, we stopped at the local hotel to have a dish of ice cream. Once a week, the hotel received one gallon of ice cream brought on the bus from South Africa. What a treat, even though it was expensive at 50 (cents) a scoop.¹¹

After weeks of full-time Zulu study, Miss Gardner began her work in RFM.

Nursing supervisors were called 'sisters'. We supervised all the wards. Each ward was supposed to have a staff nurse in charge under the sister. Sometimes it was a senior nursing student. The first afternoon that I supervised on my own, I was shocked to see a young patient with tuberculosis hemorrhage to death. There was nothing at that stage that we could do for him. I felt helpless. And if that wasn't enough for a first day, I assisted in the delivery of twins, one of whom was malformed, and the other one was too small and weak. Neither of them lived.¹²

Miss Gardner also had early impressions of Miss Davis and the nursing program.

Our Nazarene Nurses' Training School was the only such school in the country. Most of the students were from rural homes where water was fetched from the river for household purposes, and cooking was done in a three-legged pot over an open fire. We did wonder where to start with their training.

Miss Dorothy Davis was in charge of the school. I admired her greatly, as she took those girls through basic personal hygiene, principles of cleaning their rooms and the ward units, using toilets and sinks, etc. [sic].

From there Dorothy would move on to the care of patients and hospital equipment. On the wards we observed these young women as they developed confidence and became increasingly efficient. Many of them were born nurses, with innate qualities of caring and observation.¹³

¹¹ Juanita Gardner, The Promise. (Kansas City, MO.: Nazarene Publishing House, 1992), 24-27.

¹² Ibid., 33-34.

¹³ Ibid., 35-36.

Miss Gardner followed the Jacksons at Pigg's Peak, serving alone from 1952 to 1962. She went to Endingini, Miss Davis' first assignment, from 1962 to 1969, and returned to RFM 1970 to 1979. She taught both public health and operating room procedure to Miss Davis' students.¹⁴

The last of this group of nurses who worked with Miss Davis and her nursing students was Mildred Avinell "Nell" McNabb of Little Rock, Arkansas and Samaritan Hospital. Saved as a teenager, Miss McNabb first heard of Swaziland when preparing for a missionary program. When reading The Lord's Doing by Chism, Lovelace, and Jenkins, Miss McNabb felt the Lord calling her to be a nurse in Swaziland.¹⁵

Miss McNabb, known for her expectation that the students clean the hospital, once told the nursing students to scrub the blood off of the walls and floors for "this was not the Passover". Miss McNabb described being ward supervisor as supervising the students, caring for the patients, and "carrying a big load of keys".¹⁶

In her early years, Miss McNabb was in charge of the out-patient department, which included the emergency room, and was drug-room supervisor. There she was responsible for making medications. "I mean mixing stuff together like a cake recipe. I think the only time I was scared was when I was making camphophenique and I had it boiling on a Bunsen burner. And I thought the top of the roof was coming off. I thought its got camphor and its got glycerin, doesn't that make dynamite or something? I had to

¹⁴ Juanita Gardner interview by author, 27 February 1998.

¹⁵ Mildred Avinell McNabb interview by author, audio/visual recording, Temple City, CA. 1 March 1998.

¹⁶ Ibid., Mildred Avinell McNabb interview by author, tape recording, Temple City, CA., 5 March 1999.

dispense medications without training.” At this time, Miss McNabb taught basic pharmacology to the students.¹⁷

Nursing Education

Clinical Sites

As the decade passed since Miss Davis’ arrival, the facilities at RFM had expanded and new dispensaries had been opened. There were “500 people who are always in residence on the station as scholars, teachers, teachers-in-training, nurses, nursing students, maids, workmen, patients in Hospital, and their friends who stay and cook for some of them.”¹⁸ Each new ward in the hospital and dispensary opened served not only the patients but also served as a placement site for Miss Davis’ students during their various clinical rotations and as an optional place for employment after graduation. Improvements also provided the students a better place to live.

The mission station orphanage, and later children’s ward, was a place for the students to learn pediatrics. It had been established by Miss Wilke, who arrived in 1940 with Miss Davis. Miss Wilke stated:

When I arrived there, there were 24 orphan children there, all small. There was one boy crippled about 12 years old, but the rest were all small. They were all, except for the larger boy, they were all in the women’s ward of the hospital with the sick children. They were all there. We hardly had any beds at all.

It was really, the situation was horrible.

Those orphans with all those sick children with all those diseases. So, we wanted these orphans, an orphanage so badly. And the amazing thing the Swazi Missionary Society, it was mostly women, ...their churches raised the funds to build that orphanage.¹⁹

¹⁷ Mildred Avinell McNabb interview by author 1 March 1998.

¹⁸ Hynd, “Bremersdorp District and Station Report” 6 October 1951.

¹⁹ Lydia Wilke Howard interview by author, audio/visual recording, Alhambra, CA., 28 February 1998.

With the almost \$2,500.00 raised by the local Swazis and with donations from Europeans, the orphanage was officially dedicated and opened in December 1941. The delegation in attendance included King Sobhuza II, Mr. R. Armstrong, District Commissioner, Dr. and Mrs. David Hynd, and son of the first Nazarene missionaries to Swaziland, Rev. Elmer Schmelzenbach.²⁰

The house is built as a home- kitchen, pantry, dining room, lovely airy nursery, boys' bedroom and girls' bedroom, bathroom, screened in veranda, room for missionary in charge, room for our own trained staff nurse and a small storeroom for the maids (they sleep in the dining room because of lack of space).

The house would make a lovely cottage for a white family of five or six members- we are 41 including the workers in the home, the laundress and gardener.

Perhaps you are asking what is the purpose of the Children's Home and how did it begin?

It began automatically. That is, children were brought to the hospital desperately ill. They improved. The mothers pleaded for us to take their children and care for them for all their children die at home-they are "bewitched". Others came to us as orphans unwanted and uncared for.

What shall we do with them? Turn them out? Not when you see how they respond to love and care.²¹

The leprosy hospital was the vision and the work of Nurse Elizabeth Cole.

When she arrived in Swaziland in 1935, she came with supplies specifically for those needy "thrown-away people" and she would not allow them to be used on anyone else.²²

²⁰ Samuel Hynd, A Pictorial History of Manzini Nazarene Mission (Florida, Transvaal: Nazarene Publishing House, 1975).

²¹ Lydia Wilke, "Our Children's Home in Bremersdorp, Swaziland," The Other Sheep (July 1943), 12. Church of the Nazarene Africa Regional Office Archives, Florida, South Africa.

²² Elizabeth Cole interview by author, audio/visual recording, Alhambra, CA., 1 March, 1998. Elizabeth Cole, "Swazi Lepers, Nobody Cares," (n.p., TD, 1937). Church of the Nazarene Archives, Kansas City, MO..

By 1935, the British government maintained a small settlement at Enquabanini to which a medical officer would visit once a month and a hospital assistant went once a week. In 1948, the Colonial Development and Welfare Department, with a special fund, opened a leper colony in the mountains near Mbuluzi and Nazarene Nurse Elizabeth Cole was placed in charge. The government carved roads through the mountain and built a hospital, homes, and side-buildings. The homes were given Swazi names for the fruit of the Holy Spirit. They were love (Ekutandaneni), joy (Ekujabuleni), peace (Ekutuleni), long-suffering (Ekubekezeleni), and gentleness (Emuseni). A patient named the hospital, "Rest".²³ After the hospital had been open for a period of time, the patients changed the name of the colony to Temb'elihle, meaning "Good Hope".²⁴

As of December 1950, there were 78 patients living at the colony and one year later there were 57. Thirty-two patients were discharged to home and four passed away..²⁵ Miss Cole became the resident leprosy expert and Miss Davis "took every class to the leprosy hospital...for instruction. She gave them a lecture. You wouldn't believe she could give such a systematic, to the point, lecture on leprosy, but she did. And it was profitable. We used to go up and even stay overnight at the leprosy hospital. But later we got so we went up for the day."²⁶

Miss Cole included a demonstration in the care of the leprosy patients skin in addition to her student lecture. In 1975, Miss Cole recalled, "Quiet growth continued in

²³ Marjory Burne, "He Hath Done All Things Well," The Other Sheep (March 1949): 6-7. Church of the Nazarene Africa Regional Office Archives, Florida, South Africa.

²⁴ Marjory Burne, "A Year Among Swazi Lepers," The Other Sheep (June 1950): 6-7. Church of the Nazarene Africa Regional Office Archives, Florida, South Africa. Davis, Nursing in Swaziland, 51-52.

²⁵ Hynd, "Bremersdorp District and Station Report, 6 October 1952, 4.

²⁶ Dorothy Davis Cook interview by author 8 October 1999.

the medical work until, one by one, positive blood smears for Hansen's disease [leprosy] became negative. Treatment did not restore fingers which were lost nor eyes which were blind; but treatment, if started early and given properly, stopped the progress of the disease in nearly every patient."²⁷

Another clinical site available to the students was the new hospital TB ward. Tuberculosis was an ever growing national health problem and the mortality rate, which included many of the first nurses, was high. The number of reported cases at RFM alone were 174 in 1950, 166 in 1951, 174 in 1952, and 262 in 1953.²⁸ To help with the growing problem, the World Health Organization sent in field workers to train local workers and provided necessary equipment.²⁹

In 1952, RFM began construction of a tuberculosis ward. A \$15,000 grant was received from the General Board of the Church of the Nazarene. A 7,000 pound sterling donation was received for the ward from the British Governor General's British War Fund "in recognition of the valuable services and sacrifices of the African people of this area who enlisted for service in the war of 1939-1945".³⁰ The ward was completed in 1954. In 1968 the National Tuberculosis Control Program took over and this ward became the hospital administration wing.³¹

²⁷ Davis, Nursing in Swaziland, 52-53.

²⁸ "Report of Raleigh Fitkin Memorial Hospital, Bremersdorp, and Health Centres [sic] in District," (TD, n.p., 31 December 1953): 5. Church of the Nazarene Africa Regional Office Archives, Florida, South Africa.

²⁹ Davis, Nursing in Swaziland, 45.

³⁰ David Hynd, "Bremersdorp District and Station Report to the Annual Missions Council". (TD, 6 October 1952). Church of the Nazarene Africa Regional Office Archives, Florida, South Africa.

³¹ Davis, Nursing in Swaziland, 45.

Their Home

A new home addition affected the student nurses directly. When Miss Evelyn Fox was alive she had carried a concern for the living environment of her students. She had seen the basic nursing home built and in her death she provided for a new wing to be added. Her will simply stated, "I bequeath all cash found in my estate after due payment of all debts and accounts to the Nursing School, Raleigh Fitkin Memorial Hospital". Her \$300.00 to \$400.00 was augmented by other donations, and the Fox Memorial Wing was opened on September 7, 1950.³²

As of July 1951 there was a total of thirty-one nursing, midwifery, and nurse aid students and Miss Davis was living in the home with all of them. Therefore, she served not only as their Matron and Sister Tutor, but also as their home mother. Her approximate eight by twelve foot bedroom with fireplace and front window was the first door to the right off of the main entry hall. Through a side door, she could pass directly into the hallway that lead to the common bathroom and kitchen. Miss Davis also shared a common sitting room with the nurses. This situation established a twenty-four hour per day relationship between herself and the students that lasted until 1966.³³

Swazi Voices

When Miss Davis began to publish the Nazarene Nursing News she provided a venue for the Swazi nurses, both students and graduates, to learn to write and express

³² David Hynd, "A Missionary Nursing Pioneer Passes On," *Tri-N* 2(2) (1947), 3 Northwest Nazarene College Archives, Nampa, ID.; Marjory Burne, "Opening of the Fox Memorial Wing to Swazi Nurses' Home, Bremersdorp" (n.p., TMs, November 1950). Church of the Nazarene Archives, Kansas City, MO..

³³ Dorothy Davis Cook interview by author 3-4 March 1999 and 8 October 1999; Hynd, "Bremersdorp District and Station Report," 6 October 1952, 2; Hynd, "Bremersdorp District and Station Report," 6 October 1951., 3

themselves in print. One of the first to do so was S.N. E. Kumalo. She reported the April 28, 1950 capping ceremony at which new students received their caps after the probationary first three months. Being the second class to enter for registration by the High Commission Territories Nursing Council, the newest students were Phina Mamiane, Hope Dlamini, Agnes Dlamini, Ethel Dlamini, and Ruth Dlamini.³⁴

In the Nazarene Nursing News, new student nurse Hope Dlamini told of her first journey to an outstation clinic.

In fact I was rather pleased to go to Mafutheni, though it was a very windy day. I went along with Sister Matchett and others who were going to hold the regular antenatal and child welfare clinic.... We all went in a truck which was so fast that we arrived sooner than we thought we would. When we arrived we found that everything was covered with dust due to the terrific speed of the truck.

First a service was held and the new staff nurse was introduced by the Matron, Miss Davis.

Sister Matchett then began the examination of the mothers and babies. It was pleasing to see the mothers with their little babies coming for physical examination.

After the examinations all the people enjoyed a feast of tea and buns.³⁵

Mrs. Tabita Twala, Nazarene nursing school alumnus, reported on her nursing beyond the borders of Swaziland.

God called me from Melville Combined School where my husband was working, during the year 1948, to come to this poorest country of Maputaland where there is so much heathenism.

When coming down here, many people said I was going to die. Instead we are very happy as we serve the Lord.

The days of the clinics are Monday, Wednesday, and Friday Tuesday [sic], Thursday and Saturday I always go for District work where I enjoy my nursing very much.

I am now able to speak the Tonga language.

³⁴ E. Kumalo, "First Year Nurses Receive Their Caps," Nazarene Nursing News 1(2) (1950): 1. Church of the Nazarene Africa Regional Office Archives, Florida, South Africa.

³⁵ Hope Dlamini, "My Journey to Mafuteni," Nazarene Nursing News 1(2) (1950): 3. Church of the Nazarene Africa Regional Office Archives, Florida, South Africa.

I was appointed a nurse at Threlfall Memorial Hospital, during the month of January 1, 1949, and have been here since that date.³⁶

From Miss Davis

It is evident that Editor Miss Davis did not miss an opportunity to continue to both teach and mother her nurses. Two specific editorials, "Have You Grown Up?" and "The Nurse's Uniform" resound with a mother's voice teaching the advancement of professional nursing.

HAVE YOU GROWN UP?

'When I was a child I spake as a child. I understood as a child, but when I became a man I put away childish things.'

A nurse has chosen one of the most important works- that of caring for the sick. It is a work that demands her best service. The work that she is to do is not the work of a child. It is the work of an adult who has left childhood far behind. Now this does not mean that she does not remember with a thankful heart her childhood days. It does not mean that she forgets how to play. It means that she acts like a grown up person. There are some things that make an adult person different from a child. It is not their height, or size, or age, for some old people are still as children. It is the way one acts that makes them truly a grown up person.

The following are some things that mark grown up people.

1. They do not go about with long faces and weep tears when they are not treated nicely.
2. They do not become angry when they are criticized or corrected.
3. They are not afraid and wish to die when their work takes them away from home.
4. They do not get angry when they cannot have their own way.
5. They can take care of themselves and act in the correct way even when they are alone.
6. They are not always looking for someone to help them. They feel they owe it to themselves to make something out of their life.
7. An adult person has a purpose in life. She knows what she wants to do and works to her goal. She does not faint and stop by the way because of difficulties.
8. She is not always influenced by what others think. She does some thinking for herself.

³⁶ Tabita Twala, "From Our Alumni," Nazarene Nursing News 1(2) (1950): 3. Church of the Nazarene Africa Regional Office Archives, Florida, South Africa.

The Nurse's Uniform

The uniform is a necessary part of the nurse's equipment. It announces to the world in which the nurse lives and works the character of her work. It demands respect from the people and gives the nurse a certain dignity.

Does the nurse stop to think that the way in which she wears her uniform is an index of her character?

If there are pins where buttons should be, if there are stains on the apron, if the cap is crooked, if the hair is untidy, if part of the uniform is missing, it shows that the nurse is lacking in attention to details and is apt to be careless in her work.

A proper uniform includes more than dress and cap. It requires due attention to the laundering. It includes neatness and cleanliness from head to foot. A well trained nurse with a sense of what is proper will not be found wearing rings on her fingers or in her ears, bracelets on her arms, ornaments in her hair, or bright colored shoes on her feet.

The uniform should not be worn when the nurse is off duty., but it should be worn when on duty, yes, even in the most distant bushveldt Health Centre [sic] when the nurse does not expect many patients to attend her clinic.³⁷

In a third editorial, Miss Davis discussed district nursing (public health) in Nazarene dispensaries as a specific nursing role available to the Swazi nurses. Over time the number of Nazarene dispensaries and the numbers of patients had grown. The 1950-1951 out-patient attendance for the Nazarene health centers was:

Health Centre [sic]	Total patients during the year	Daily average
Bremersdorp	26,549	85
Arthur Seat	13,189	42
Acornhock		
Stegi	11,666	37
Blaauwberg	5,272	17
Pigg's Peak	5,011	16
Endingeni	4,722	15
Mafuteni	2,326	7.5
Gazaland	2,065	7
Milba	1,904	6
Manyeveni	1,728	5.5

³⁷ Dorothy Davis, "Have You Grown Up?" and "The Nurse's Uniform," Nazarene Nursing News 1(2) (1950): 2. Church of the Nazarene Africa Regional Office Archives, Florida, South Africa.

Nalegane	1,556	5
Bhekinkosi	940	3 ³⁸

By this time each Nazarene dispensary, and those operated by the government and the Roman Catholic Church, were subject to government inspection by the Medical Officer of Health. Regular inspections included evaluation of the premises, sanitary arrangements, house plans, and food handling places.³⁹ Miss Davis also inspected the Nazarene clinics. Her editorial gives insight into her expectations of district nursing and the impact of the role on the health of the people.

District Nursing

We have tried in this issue of our paper to include more of our District work as carried on through our Health Centres [sic] scattered throughout the country. At each of these Health Centres [sic] we have one or more Graduate nurses or a Nurse-Aid. I would like to express a word of appreciation for the fine work carried on by this band of workers. Most of them are many miles from a hospital or the help and advice of a doctor. However they are all visited by a doctor once a month with the exception of Manyeveni where the doctor visits once in three months.

District Nursing covers a wide field of service. In some aspects the Health Centre [sic] fills the place of a small hospital in the area it serves. There are nearly always in-patients. A few weeks ago I visited three of our Health Centres [sic], Mliba, Bekinkosi, and Mafuteni and found patients in them all. But the Health Centre [sic] is more than a hospital. It is also the centre [sic] for ante-natal, child-welfare, and venereal [sic] disease clinics, and the district nurse uses these opportunities to teach and to help those who attend. The district nurse is a valuable asset to the school. Some of our nurses are teaching hygiene and first aid to the school children.

Then, too, the work of the district Nurse carries her beyond the walls of the Health Centre [sic]. She is called into the homes to treat and care for the sick and suffering. While in the homes, she has a fine opportunity to win the confidence of the people and to help them in many ways. Perhaps in the home more than in any other place, the nurse has the privilege of practising [sic] the teachings of Jesus and helping the people to know Him.

³⁸ "Outpatient Attendance," *Nazarene Nursing News* 2(1) (1951): 4. Church of the Nazarene Africa Regional Office Archives, Florida, South Africa.

³⁹ Davis, *Nursing in Swaziland*, 47.

The district Nurse is a vital part of the community in which she lives. The pastor of the local church and all the people of the community look to her for help and advice. Many district nurses are actively engaged in the work of the church.

Are you a District Nurse? Are you in charge of a Health Centre [sic]? If so, I would like to ask you a few questions.

1. Do you have ante-natal and child Welfare Clinic? If so, do you hold classes for those who attend?

2. Do you visit in the homes and in this way endeavor to help the people live a better and healthier life?

3. Do you help in the Church and Sunday School?

4. Is the number of people increasing who come to your Health Centre [sic] for help? Remember the number of people who attend your clinics largely depends on you. If you do all in your power to help the people; and if you really love them, and are prepared to give of all your strength, they will soon know it. As the days and weeks go by the numbers who come will increase.⁴⁰

Second Nursing Text

The need for the hospital, dispensaries, and nursing education had not changed.

Dr. Hynd wrote that:

Africa's doctor is the native medicine man, who prescribes concoctions that range from plants to crocodiles' eyes and human flesh; her specialist is the witch doctor who can 'without fail' show you the person who is causing your sickness (and what havoc that can play in social relationships!); her nurse is the helpless heathen mother or sister of the patient; her hospital is the little, dark, dingy grass hut that has to do for everything in the home life of the patient from the cradle to the grave.⁴¹

With nursing's new governing body, the High Commission Territories' Nursing Council, and the option to sit the examination for registration, Miss Davis identified the need to upgrade the nursing procedures textbook from which her students learned. This

⁴⁰ Dorothy Davis, "District Nursing," *Nazarene Nursing News* 1 (1951): 2. Church of the Nazarene Africa Regional Office Archives, Florida, South Africa.

⁴¹ David Hynd, "On Medical Missionary Work in South Africa," *The Other Sheep* (June 1952): 10. Church of the Nazarene Africa Regional Office Archives, Florida, South Africa.

1953 edition notes her earned credentials of S.R.N. (State Registered Nurse), S.C.M. (State Certified Midwife), B.A. (Bachelor of Arts), B.Sc. Nursing (Bachelor of Science in Nursing) and “Sister Tutor’s Diploma, Royal College of Nursing (London)”. This edition also shows the fruit of her labors for the co-author of this text was Swaziland’s first registered nurse Eva [Manzini] Mthethwa, S.R.N.. The copy available is also labeled in script “Personal Copy Dorothy Davis” and contains hand written notes in the margins.⁴²

This work, in echo of the first, begins with the basics of cleaning the environment. The specific care of flowers at the patients’ bedside has been added. Directions to not use a wet cloth on electrical fixtures or polished furniture are present. It is evident that the hospital plumbing has been upgraded for the students receive instruction on care of sluices and the plumbing. “Do not throw coffee grounds, hair, thread, pieces of soap, tongue blades, cotton applicators, cotton swabs, sanitary pads, gauze, and anything else that will not dissolve into the lavatory or sluice, sinks or tubs.”⁴³

The advancement of hospital equipment meant the students learned how to care for items made of rubber (i.e.. Mackintoshes, Ryle’s stomach tube, syringes, pessaries, catheters, gloves). Prolonged heat exposure and bending or folding too tightly seemed to be the biggest risk factors for damage. Enamel goods, such as beds and bowels, were to be protected from hard objects which could cause chipping.⁴⁴

Bed making took on distinct categories. The general instructions were to make a tight foundation, not draw bedding too tight over the patient’s feet, not allow the bedding to touch the floor, not waste time and energy, and do all work neatly. The student nurses

⁴² Dorothy Davis and Eva Mthethwa, Nursing Procedures 2nd edition, (Bremersdorp, Swaziland: The Shirley Memorial Press, 1953). Church of the Nazarene Archives, Kansas City, MO..

⁴³ Ibid., 6.

⁴⁴ Ibid., 7, 11.

then had to decide which bed type was required. The options were the open bed (for the average ambulatory patient) , the ambulance bed (for the patient arriving by ambulance), the fracture bed (for fracture of spine, pelvis, or lower limb), the ether bed (for operative or trauma cases who have had anaesthetic [sic]), the rheumatism and renal bed, the cardiac bed, the divided bed (two separate top sheets and blankets for easy access to the patients mid-section), and the stump bed.⁴⁵

After patients were discharged, the mattresses and pillows required attention. Each required a hearty brush and a minimum of six hours in the sun. If the patient's conditions was considered infectious, the time in the sun was twelve hours.⁴⁶

Miss Davis and Mrs. Mthethwa provided a highly detailed outline of day and night shift responsibilities including when vital signs were to be taken. In addition to patient care, the day nurses had to dust and sweep the ward, and the night nurses had to clean all of the instruments. All nurses were given general instructions on the expectations of their quality of character and work. These were:

1. Obedience is the first duty of a nurse. Prompt obedience to the Doctor, Sister, and Senior Nurse is essential in the care and treatment of the sick. The nurse must obey all the laws of the hospital.
2. The nurse should be punctual in carrying out all orders.
3. The nurse must learn to work quickly but she must never sacrifice efficiency for speed. It is more important to take care of a patient than it is to finish on time. In the heart and life of a nurse, her patient should always come first.
4. The nurse should study carefully her specially assigned duties and promptly carry them out. If for any reason it is impossible to do so, she should report to the sister in charge of the ward.
5. The nurse must learn to work with others in the interest of her ward and all the patients in the ward. If any patient has a need or if there is still some unfinished work, a nurse's work is not finished even though she has completed her special assignment. 'Help one another' should be the motto of every nurse.

⁴⁵ Ibid., 15-19.

⁴⁶ Ibid., 8.

6. The nurse should bring a cheerful atmosphere into the ward. She must forget all her own troubles and burdens and do all in her power to bring sunshine and happiness to her patients.

7. The nurse should enter the ward in a quiet dignified manner and do her work in a manner that becomes her profession. At no time should she become loud and familiar with the patients, or other staff members.⁴⁷

In comparison with the first text of ten years past, the uses of plasters and poultices were still being taught. The use of enemas had increased. The specialized enema options were the cleansing enema (to soften stool), the carminative or anti-spasmodic enema (to relieve distention and flatus), the sedative enema (to soothe the irritated mucus membrane of the intestines), the purgative enema (to relieve edema in cardiac and renal cases), the anthelmintic enema (to treat threadworms), the stimulating enema (to prevent and treat shock), the anesthetic [sic] enema (to produce sleep before general anesthetic [sic]), the oil enema (to soften stool), and the nutrient enema (to give nourishment).⁴⁸

Advanced procedures such as abdominal paracentesis and lumbar puncture were taught to the nursing students. Direct donor to recipient blood transfusions were also being done at RFM and the nursing students played an active role in the procedure. Donor and recipient each required a sterile and non-sterile tray of necessary instruments. There is no mention of blood testing, quantity recommendation, the wearing of gloves for the procedure, or monitoring of the patient beyond the immediate procedure time frame.⁴⁹

As this current text was under development, three midwifery students completed the course and passed the examination of the High Commission Territories' Nursing

⁴⁷ Ibid., 26.

⁴⁸ Ibid., 59-61, 67-73.

⁴⁹ Ibid., 118-120, 123-124.

Council. The course was nine months for “qualified nurses’ and eighteen months for “others”. In addition to seeing 2550 antenatal visits, these midwifery students had helped care for:

Total number of confinements	391
Normal confinements	206
Twins	7
Premature births	4
Instrumental	40
Caesarian [sic] sections	23
Stillbirths	12
Macerated foetus [sic]	2
Placenta previa	1
Retained placenta	2
Prolapsed cord	1. ⁵⁰

Therefore, Miss Davis expanded the section on maternity nursing procedures in this revised edition. The same extensive bath, nail clipping, shave, and two enemas greeted each laboring woman. Then the nursing management of routine second and third stages of labor and the care of mother and baby were outlined. The student midwife then clears the baby’s mouth, examines the newborn, waits patiently for the placenta to expel, and must notify the physician if there has been a laceration and repair sutures are needed. Silkworm gut sutures that required removal in seven days were used. No specific length of hospital stay is mentioned.⁵¹

The Classroom

Wherever Miss Davis went, “I always took some of the nurses with me and used it as a teaching point”.⁵²

⁵⁰ “Report of Raleigh Fitkin Memorial Hospital,” 31 December 1953.

⁵¹ Davis and Mthethwa, Nursing Procedures, 135-136, 140.

⁵² Dorothy Davis Cook interview by author 3-4 March 1999.

They always seemed keen to learn so that wasn't a problem. Lack of equipment would be a great problem. My first classroom was next to the morgue. When someone died in the hospital during the night, we couldn't have class in that little shack. And so we had to find a place for our classes.

It was just really a shack with a petition between us, nothing over the top. So every morning I never knew where I was going to teach. Sometimes we taught outside under the trees and sometimes we taught in the wards. That was good to have to actually teach in the wards. And then we had access to the meager equipment they had in the wards.⁵³

One teaching-moment ward experience, that Miss Davis recalled with humor, began with a new-Christian wanting her hair washed. By Swazi custom, married women do not wash their hair and after accepting Jesus Christ as Savior, washing of the hair was often one of their first acts of change. This day Miss Davis took the lady's request as an opportunity to demonstrate washing a patient's hair in bed. The Swazi woman had the typical bee-hive hairdo. When Miss Davis began the process, she discovered hidden away in the hair, all of the pills given to the patient during her hospital stay. The woman was getting better without any of her ordered medications.⁵⁴

One of Miss Davis' students during these days was Freda Hlatchwayo, former Shagangu. "I trained at the Nazarene College of Nursing and was with Miss Dorothy Davis from 1951 to 1954. I did general nursing and then in 1957 I did midwifery, 1957 to 1958." Mrs. Hlatchwayo says Miss Davis taught by repetition. Miss Davis told her "you just have to repeat, repeat, repeat, and never say that a person knows. And whenever you were working in the ward, she always expected you to report to someone next, senior to you, so then you are free from getting into a problem. So if you don't give a report, you are always going to have to answer for your excellence."⁵⁵

⁵³ Dorothy Davis Cook interview by author 28 February 1998.

⁵⁴ Dorothy Davis Cook interview by author 8 October 1999.

⁵⁵ Freda Hlatshwayo interview by author, tape recording, Manzini, Swaziland, 10 August 1999.

The wards were full with a variety of patient complaints about which and through which Miss Davis could teach. The number of malaria patients jumped from 55 in 1952 to 259 in 1953. In 1953, the hospital cared for 296 new cases of syphilis and 2745 re-attendances. There were 173 new cases of gonorrhoea. While the efforts to clear the local streams of the parasite carrying snails that caused bilharziasis were helping, the nurses still had access to 243 cases that year. As previously mentioned, the tuberculosis cases were up to 262, and other admissions included dysenteries and diarrheas, influenza, and thyphoid.⁵⁶

In addition to her “teaching point” philosophy, Miss Davis changed the formal format of nursing education.

In 1952 the ‘block system’ of education was established. In this system the student was sent to the nursing school for a specific period during which time she was not assigned to the hospital wards. During the time spent in the wards, the nurses kept in touch with the school through case study assignments and set questions. Doctors’ lectures and demonstrations were also given during this time.

In 1956 a separate nursing college was erected with money provided by the Governor-General’s National War Fund. This building provided a lecture room, a demonstration room, a dietetic laboratory, a science laboratory, a library, and an office.⁵⁷

Spiritual Care

From the first day of class on, spiritual care of the student and spiritual care of the patient was an integrated part of the training process. There were morning chapels and evening prayers. Miss Davis taught Scripture to the nursing students every day. “And I

⁵⁶ ‘Report of Raleigh Fitkin Memorial Hospital,’ 31 December 1953.

⁵⁷ Davis, Nursing in Swaziland, 21. W.C. Esselstyn, Africa Mission Council Church of the Nazarene 33rd Annual Council Report 1956 (Kansas City, MO.: Nazarene Publishing House, 1956), 29. Church of the Nazarene Archives, Kansas City, MO..

often said, if I can't instill into these young ladies...the deep desire to be what God wanted them to be, it was no use. I just didn't see any value in upgrading nurses except that they might be missionary nurses."⁵⁸

When the new students received their caps at the end of the preliminary training session, part of the ceremony included singing the song:

Nursing oh my Lord, shall I give my all,
Out and out for Jesus, seeking souls for Him.
Never dying souls, bond by doubt and sin,
What a privilege to help to bring them in.⁵⁹

Special Times

April 1, 1956 found Miss Davis writing a letter from 2415 Porter Ave., Altadena, California. She had been home on a short furlough.

It has been wonderful to see so many of you and to enjoy your fellowship once more. Your offerings and gifts have been generous and will be of great assistance as I return to the field to continue our work for Christ and His Kingdom. But greater than all has been the spiritual uplift that I have received as we have sung, prayed, and worshiped [sic] Him together. My heart is filled with praise and gratitude for all that you have done to make my furlough so profitable and so pleasant. With all my heart I want to say thank you.

Today as I am returning to Africa for my third term of missionary service, my earnest prayer is that God shall continue to give us 'the treasures of the darkness'.

I hear that sixteen new nurses have been taken into the Preliminary Training School and will be receiving their caps soon after my return. Pray that God's blessing shall continue to be on the training school and that these girls will surrender their lives to Christ for service in His Kingdom.⁶⁰

⁵⁸ Dorothy Davis Cook interview by author 3-4 March 1999.

⁵⁹ Freda Hlatshwayo interview by author 10 August 1999. As soon as Freda began to quote the words, other nurses present in the room joined in with her.

⁶⁰ Dorothy Davis, Altadena, to My dear Friends, TL 1 April 1956. Church of the Nazarene Africa Regional Office Archives, Florida, South Africa. Esselstyn, Africa Mission Council, 1956, 26.

Miss Davis was reappointed to Africa, and by May 1956, her salary was \$95.00 per month, that being the same as all missionary nurses regardless of when they arrived. Dr. David Hynd was making \$170.00 per month, which included extra for traveling to clinics and teaching in the nursing school.⁶¹

In addition to her teaching responsibilities, that July Miss Davis was in charge of the men's ward while Sister Mthethwa was on holiday [vacation]. By November she had the same responsibility in the maternity ward. The day of her writing a Christmas letter, there had been eighteen mothers and babies in the ward. During these days, Miss Davis also invested time in training Swazi Sunday School teachers on how to teach lessons with a flannel graph. One of her students "took what I had given and added to it and made it really live in the minds and hearts of these people. My effort seemed very feeble after hearing her."⁶²

1956 caused Miss Davis to say goodbye to a special group of students. The document that records their story is not signed, and authorship is only implied to be that of Miss Davis and that of a student. The story is of fourteen students who being the largest class size to date, had the privilege of being the first to use the new desks and chairs, the first to be welcomed in the new chapel, and the first and last to be capped in the chapel.⁶³

⁶¹ Dorothy Fay Davis "Certificate of Missionary Appointment General Board of the Church of the Nazarene" 1 April 1956. Personal papers of Dorothy Davis Cook, Alhambra, CA.; Swaziland District South Africa Mission Field Church of the Nazarene Ledger. Entry 1 May 1956. Church of the Nazarene Africa Regional Office Archives, Florida, South Africa.

⁶² Dorothy Davis, Bremersdorp, to My dear friends, TL 1 November 1956. Church of the Nazarene Archives, Florida, South Africa.

⁶³ "The Fourteen of Them," (TMs, n.p., 1956.) A hand written note on the page states "The class of Sister Annah Dlamini 1956". Church of the Nazarene Archives, Kansas City, MO..

From the moment of their selection, they had been prayed over and their quality of character and quality of time with Miss Davis seems to be what bonded them together. This special group began their nursing studies in February 1952 and:

The FOURTEEN OF THEM were a perfect team. They were hard workers and good students. Before the P.T.S. [Preliminary Training School] was over these girls were able to do all the nursing in the ward besides many duties usually assigned to Staff Nurses. They checked charts and prepared for Doctor's rounds; they completed charts of discharged patients; they took responsibility in watching seriously ill patients and were very good in reporting.

We not only worked together, lived goether [sic], and prayed together—we often played together. There were the basketball games, the picnic out at the river, the tours to the creamery, laboratories in town, and to the water plant. Then the over-night tour to the Leper Hospital was a fitting climax to four years of study work and play.⁶⁴

Time Passing

As the end of another decade approached, change remained a dynamic constant. Swaziland was progressing in transition from a “primitive pastoral and agricultural people to the stage of becoming industrialized”. A new operating and x-ray block had been opened at RFM. The hospital now had 120 beds. “Last year we treated 2,892 inpatients in the wards and there were 27, 250 attendances at the hospital outpatient department. More heathen people pass through our hospital and dispensaries every week than pass through our churches, and the evangelistic opportunity which this presents is rewarding.”⁶⁵

The orphanage currently was home to 29 children. The leper colony was down to forty patients, with twenty declared cured and able to go home that year. “Our Nursing

⁶⁴ Ibid.

⁶⁵ David Hynd, “Church of the Nazarene Bremersdorp Station and District Report to the Annual Mission Council,” (TD, n.p., 29 September 1958): 1, 4. Church of the Nazarene Africa Regional Office Archives, Florida, South Africa.

School has continued to function successfully under the care of Miss Davis as Sister Tutor. We have 42 African girls in training as nurses, and we had 30 passes and 12 failures in the various examinations (preliminary and final) during the year.”⁶⁶

Student Experiences

Maggie Makubu graduated from the Nazarene Nursing College with both her general nursing and midwifery in 1958. During her midwifery training, she was the only student and therefore received one-on-one instruction from Miss Davis. She was impressed that Miss Davis could stay up all night with a laboring woman in her kraal and still be alert and ready to teach nursing the following day.⁶⁷

In September 1958, Miss Davis wrote:

‘Nurse take care of the mother, I will take the baby.’ This I said as I took the first born son of a humble African home. At birth the baby did not breathe. He lay limp and motionless. However, the beat of the little heart gave us hope. It had been an all night vigil in a candle lighted Swazi hut. The sun was just coming over the eastern horizon. The mother’s labour [sic] had been long and hard. As we faced the problem of bringing life to this newly born infant, we prayed, ‘Oh, Father, give this little mother her son. May her labour [sic] not be in vain’. I placed the wee infant between warm blankets, cleared the air passages with a mucous extractor, lowered the head and as there was no available oxygen, I began to give mouth to mouth respiration. There was a gasp—a feeble attempt to cry and then the baby was breathing! ‘He is all right’, I almost shouted, ‘He is alive.’ The mother relaxed, tears of joy fell down her checks as she expressed what we all felt, ‘Nkhulunkhulu wami si yakubonga’. (My God we thank you.)

In the joy of the morning we soon forgot the labour [sic] of the long night. Fatigue and sleep vanished as we prepared for a new day. A son had been born.⁶⁸

⁶⁶ Ibid., 4-5.

⁶⁷ Maggie Makubu interview by author, tape-recording, Mbabane, Swaziland, 9 August 1999.

⁶⁸ Dorothy Davis, Bremersdorp, to My dear friends, TLS, September 1958. Church of the Nazarene Africa Regional Office Archives, Florida, South Africa.

As Maggie Makubu was finishing her years of nursing education and experience with Miss Davis, a new group of seventeen first year students was dedicated. In addition to choosing a Scripture verse to read, the inductees each made a statement about how they felt upon entering the profession of nursing. These statements grant insight into how each interpreted both nursing and Christian service. What is unknown is what statements truly represent the personal convictions of the student or what was said as expected by Miss Davis and the other missionaries. A sample of the student's statements clearly reflect the lessons taught by Miss Davis.

Elizabeth Dlamini: I sincerely promise with my heart and soul that I will do my work faithfully in the right way. My aim is to do whatever the doctor tells me to do. I will help him and respect him as well as all those in authority.

My desire is to work for God among the sick and help them in their souls as well as in their bodies.

I promise in all my life to honour [sic] and respect my hospital and the nursing profession. I will cling to Christ and lift up His name among the Swazis.

Enid Strachan: it is my earnest desire to fulfill all that is required of the profession which I have undertaken. I wish to be a help to the doctors with whom I work. I desire to help the sick and needy in all ways regardless of Nationality or Creed.

My prayer is to save the lives of people, and to do them good and not harm, not to merely earn money, but to serve Him who is over all.

I will always remember to pray, for I know that without God I will fail. I ask for His help throughout my training.

Annie Rae Vilakazi: My desire is to [be] a child of God. I want to work for Him among patients and be a light to all those still in darkness. I will not knowingly administer any harmful drug. I will do my work faithfully and in the way I have been taught even when I am alone. I promise that I will never go off duty and leave my work undone and will bear all difficulties and heartaches without giving a complaint as long as I do the will of Him who called me.

My aim in this work is not to earn money, but to serve God who called me to help the Swazies [sic] physically and spiritually.⁶⁹

⁶⁹ "Dedication of First Year Nurses," (TD, n.p., 1958). Church of the Nazarene Africa Regional Office Archives, Florida, South Africa.

Another Nursing Text

“Miss Davis has been in charge of our Nurse’s Training School where we are training Swazi Christian girls who are forming the foundations of a Christian nursing service in and through the church. 48 girls are undergoing training this year.”⁷⁰ “The work in the hospital has been extremely busy. The daily [sic] average of in patients [sic] has almost doubled. It is now running around 200. It has been as high as 228. Due to the shortage of Sisters, I have been helping in the hospital between classes. God has helped us in this work also.”⁷¹

Through the teaching of Miss Davis, professional nursing in Swaziland was not only growing in numbers, it was also expanding in knowledge and scope of practice. The influence of their 1953 text had also crossed beyond the borders of Swaziland. This led Miss Davis and Mrs. Mthethwa to co-author yet another nursing procedures text. For this text, the authors not only reviewed nursing texts from the United States and Britain, they also utilized suggestions from other Sister Tutors in the South Africa region.⁷²

Cleanliness remained the first order of the day. New cupboards needing attention were those designated for linens, medications, and food. The convenience of a refrigerator brought the student responsibility for periodic defrosting and scrubbing with hot water and soap. The students dealt with surface stains by soaking them in hydrogen

⁷⁰ David Hynd, “Church of the Nazarene Bremersdorp Station and District Report to the Annual Mission Council,” (TD, n.p., 3 July 1959). Church of the Nazarene Africa Regional Office Archives, Florida, South Africa.

⁷¹ Dorothy Davis, Bremersdorp, to My dear friends, TLS September 1959. Church of the Nazarene Africa Regional Office Archives, Florida, South Africa.

⁷² Dorothy Davis, “Preface to Third Edition,” in Dorothy Davis and Eva Mthethwa, Nursing Procedures Manual (Roodepoort, Transvaal: Roodepoort Mission Press, 1959). Church of the Nazarene Archives, Kansas City, MO..

peroxide and ammonia (old blood), lemon juice and salt (ink or rust), soap, salt, and chalk (mildew), and alcohol or methylated spirits (Gentian Violet).⁷³

Examination gloves were not for one-time use only. After each usage, gloves were to be first rinsed in cold water and then washed in hot soapy water. After a thorough air-dry, the student had to inflate the glove to check for holes. When air-tight, powder was applied. If the glove had been used for a vaginal or rectal examination, an additional treatment of a five-minute boil was done.⁷⁴

Ward patients had bedside tables, a personal water jug and glass, a chair, and “a signal light or call bell of some variety”. Private or semi-private rooms were now available and patients had the addition of an armchair, a dresser, a portable screen, and a foot stool. The numerous bed-making options were still present with the addition of a “wet-plaster” bed.⁷⁵

RFM patients received a bed bath upon admission with 110 degree water carried to the bedside in a jug. While bed bath technique is taught, it is not clear if a daily bath was given. A bath tub was available for those patients who did not have a temperature more than 99 or less than 96, who had not had surgery or had an open wound, who did not have breathing problems, who did not have a fracture of a lower limb, and who were not “subject to fits of any kind”.⁷⁶

Nurse Esther Dlamini recalls, with humor, the day Miss Davis surprised her on the ward and found her not following the exact bathing procedure.

⁷³ Ibid., 1-4, 8-10.

⁷⁴ Ibid., 12. Similar care was done to the gloves when this researcher was in Swaziland in 1979.

⁷⁵ Ibid., 15, 18.

⁷⁶ Ibid., 25.

And I also remember the day I was in the ward, I don't remember one of the wards, I was bathing a patient when we did the PTS, I think because something got confused. I must have done something to my procedure. I didn't see, hear, I didn't know that she was around and looking at me through the screen. I was busy. And she just went on 'Nurse!' I was so startled that I think I dropped the soap and the soap basin and everything just got disorganized. And the patient was surprised, but because we knew the minute Miss Davis approaches we ought to be doing exactly the right thing. The right procedure at the right time. So I think I must have done something wrong and I got disorganized. And she started helping me put up, putting back the things together and everything.⁷⁷

Returning to the text content, mouth and back care are introduced. Back care, to the helpless patient, was ordered for every four hours. This care included a massage with soapy lather, application of methylated spirit, and a dusting with powder. If the patient was incontinent, oil replaced powder as the final step. Mouth care was to be done twice a day. Dentures were removed and carried in a bowl for cleaning in the sluice room. Soft toothbrushes or moistened swabs held in artery forceps were used orally. An unknown ointment, glucerine, or liquid paraffin was then applied to the lips.⁷⁸

In this text, nursing students were instructed in the uses of the bed cradle, air rings, sand bags, and ring cushions. They were also taught the now common medical terminology for patient positions in bed and the indications for each.⁷⁹

It was the student's responsibility to have all the necessary equipment at the bedside when the physician was ready to begin a physical examination. Equipment included wooden tongue depressors, a small receiver or paper bag, a face towel, a percussion hammer, a torch [flashlight], red and blue pencils, a tape measure, safety pins, a tuning fork, glass slides, a sphygmomanometer, and a stethoscope. The nurse is guided

⁷⁷ Esther Dlamini interview by author, tape recording, Mbabane, Swaziland, 9 August 1999.

⁷⁸ Davis and Mthethwa, Nursing Procedures Manual, 32-33.

⁷⁹ *Ibid.*, 36, 39-41.

in the step-by-step process of what she must do during each phase of the examination. The students are also guided through the step-by-step process of preparing the patients for diagnostic procedures such as gastro-intestinal x-rays, excretion urography, and cholecystography.⁸⁰

One category of patient treatment, referred to as formentation or stupe, was the application of moist heat. The general purposes were to relieve pain, to relieve tympanites (gas), to reduce swelling, or to absorb poisons. Various ingredients utilized were soda (for arthritis), hypertonic saline, turpentine (for swelling), and Belladonna and opium (as a sedative). Dry heat was also available. Infrared [sic] lamps helped with poor circulation, sinus infections, asthma, sprains, perineal lacerations, and rectal disease. Ultraviolet rays had a four-fold purpose. These were:

1. It forms vitamin D from the sterols which are present in the subcutaneous tissues.
2. It improves the metabolism of calcium, phosphorus, and iron in the body.
3. It is used in the treatment of certain skin conditions, such as erysipelas, acne vulgaris, and impetigo.
4. It may be used in treatment of intestinal tuberculosis or tuberculosis of the bones, spine, lymph nodes, or larynx.⁸¹

Care in giving medications was improving. Intravenous drugs were still given by direct push. "Dangerous" drugs were still double-checked by a state registered nurse. However, the general rules and general instructions demonstrate the nurse's expanded responsibility and understanding of the medications being given.⁸²

Nurse Jessie Maguba Thwala remembers her punishment when she did not follow the proper medication procedure. When students arriving in chapel found Miss Oiness

⁸⁰ Ibid., 48-49, 51-52.

⁸¹ Ibid., 63-64, 66-67.

⁸² Ibid., 82-83.

playing the organ and singing “Open My Eyes That I May See”, the students knew that someone was about to lose their nursing cap, a discipline that caused dishonor. Nurse Thwala recalled:

And she [Miss Davis] used to give us de-capping if we had done something really wrong. I remember I was de-capped. I gave a patient tablets, pills. I just put them on bottle top and gave them to the patient, not putting them in a medicine cup. And the patients knew about it if you were de-capped because the cap meant so much. So de-capping would be done in the chapel in the morning.⁸³

Another nursing procedure text was completed and so was another decade. Miss Davis had been in Swaziland for twenty years. The population of the country had more than doubled during that time.⁸⁴ Over 500 people were now living on the Bremersdorp Nazarene Mission Station. In estimation, the number of Swazi nurse aides and registered nurses was close to one hundred.

During the 1950's, Sister Tutor Davis raised the first generation of Swazi registered nurses. She lived with them and lectured to them. Her teaching was in the classroom under a tree or the classroom made of cement block. She taught them in the hospital wards, the dispensaries, and in Swazi huts. Miss Davis taught them to express themselves in printed word and gave venue through the Nazarene Nursing News and, to Mrs. Mthethwa, in two nursing texts.

Miss Davis carried on her ministry in Sunday Schools and churches as well as with her nursing students. She taught the students Scripture, prayed with them, and spoke to them about Jesus. The words of the nursing students leave no doubt that she cared for their spiritual well-being while she taught them to care for the same in each patient.

⁸³ Jessie Maguba Twala interview by author, tape recording, Manzini, Swaziland, 10 August 1999.

⁸⁴ B. Mitchell, International Historical Statistics Africa, Asia, and Oceania 1750-1988 2nd revised ed (Great Britain: Bath Press, 1995).

CHAPTER SIX
Decade of Legacy

Swazi Nursing

For Miss Davis, “my first problem of 1960 was to find enough beds and enough space for thirty nurses. This large class is making history. It is the largest ever admitted. Most of them are Swazi girls, but one comes from the Cape, one from Durban, and one from Basutoland. They come from many different homes and schools.”¹

After getting the new arrivals settled into the nursing home and the new school year underway, Miss Davis and Miss Oiness invited the graduates of the nursing school to attend a special dinner reunion. The opening paragraph of the letter of invitation read:

Thirty-two years ago the first class of nurses started training at R.F.M. Hospital. One of the first class, Minah Masika, is still nursing. She is the nurse at the Mliba Health Centre [sic] and God is blessing her ministry of healing. Since that time, over one hundred and fifteen have complete their training in the Raleigh Fitkin Memorial Hospital. This year we have sixty-five nurses in training.²

As the number of nursing students and graduates increased, so did the number of patients coming to RFM and the fifteen Nazarene clinics. During 1961, the hospital cared for 38,695 outpatients, 5,895 inpatients, and 839 confinements. The clinics cared for

¹ Dorothy Davis, Bremersdorp, to My dear friends, TL February 1960. Church of the Nazarene Africa Regional Office Archives, Florida, South Africa.

² Dorothy Davis and Sylvia Oiness, Bremersdorp, to Dear Alumni, TLS October 1960. Miss Davis went home on a six month furlough in December 1960. She was looking forward to seeing her mother and father. Dorothy Davis, Bremersdorp, to My dear friends, TL August 1960. Church of the Nazarene Africa Regional Office Archives, Florida, South Africa.

38,902 outpatients, 1,562 inpatients, and 548 confinements.³

Professional registration options had progressed for these nurses. By the end of 1961, certification through the Swaziland Executive Committee was eliminated. Therefore, all Swazi nurses were preparing for full registration by the High Commission Territories' Nursing Council. Their standard of education and registration now equaled that of any European nurse training in the Union of South Africa.⁴

It is a challenge to follow the progression of councils that governed nursing and nurses' registration. In her work, Nursing in Swaziland, Miss Davis stated:

In 1962 the South African Nursing Council ruled that nurses trained under the Swaziland Executive Nursing Committee could be enrolled as Auxiliary Nurses with the South African Nursing Council. It was likewise ruled that Auxiliary Nurses enrolled with the South African Nursing Council could be enrolled as nurses under the Executive Nursing Committees of the countries concerned.

By 1962 the following number of nurses were recorded on the register of the Nursing Council:

	Total	Doubly Qualified	General only	Midwives only
Basutoland	135	97	30	8
Swaziland	121	74	40	7
Bechuanaland	41	34	5	2

In 1963, attention was drawn to the fact that a number of nurses working in Swaziland were not registered with the High Commission Territories' Nursing Council or enrolled with the Swaziland Nursing Committee. It was ruled that all nurses who worked in the territories should become registered or enrolled and that it was necessary for them to wear the epaulettes and badges of the High Commission Territories' Nursing Council.

It was decided that the distinguishing devices for the nurses of Swaziland should be white washable epaulettes with the Nursing Council badge and red ribbons for state registration, maroon ribbons for enrollment, and navy blue for midwifery registration.

³ Samuel Hynd, "Swaziland Council Reports," (TD, n.p., 1962): 5. Church of the Nazarene Africa Regional Office Archives, Florida, South Africa.

⁴ "Manzini Matters...Swaziland to Lose Pioneer and Outstanding Public Character-Retirement of Dr. David Hynd," The Times of Swaziland 59(14) 7 April 1961, 1, 4. Church of the Nazarene Africa Regional Office Archives, Florida, South Africa.

The High Commission Territories' Nursing Council continued to carry out its duties and responsibilities until 1967 when the duties regarding the training and examination of students were transferred to the Nursing Examination Board of Lesotho, Botswana, and Swaziland. The duties relating to registration were transferred to the Nursing Councils of the respective countries.⁵

Miss Davis periodically served on the High Commission Territories' Nursing Council. Dr. D.G. Standing reported serving with her on the council in the 1950's. He was impressed by her patience in presenting an opinion, knowing that when she so offered, the opinion would be a well-reasoned one. "I appreciated the vast store of knowledge and experience that we had in Miss Davis."⁶

Dr. J. Klopper reported Miss Davis being appointed to the Council in 1961 by Dr. B. Whitworth, Director of Medical Services and Chairman of the Council at that time. Other 1961 members were Mr. J. Gardner, Miss F.M. Pepper, Miss E.W. Peterson, Miss S. Maquthu, Dr. A.M. Meriweathed, Dr. David Hynd, and Miss M.G. Barnes. Their specific roles and credentials are not recorded.⁷

The Nazarene Nursing College remained the only nursing program in Swaziland. "The good work of the school and Sister Tutor Miss Davis, is reflected in the examination results in which the candidates sitting the final examination of the High Commission Territories' Nursing Council and midwifery did."⁸ In 1962, all students passed the final examination.⁹

⁵ Dorothy Davis, Nursing in Swaziland (Florida, Transvaal: Nazarene Publishing House, 1975), 27-28.

⁶ D.G. Standing, "You May Go Now", Swaziland Nursing Journal 1(5), 1971: 3. Personal papers of Dorothy Davis Cook, Alhambra, CA. At the time of this publication, Dr. Standing was Chairman of the Examination Board of Botswana, Lesotho, and Swaziland.

⁷ J. Klopper, "Miss D. Davis Member of the Swaziland Nursing Council," Swaziland Nursing Journal 1(5), 1971: 4. Personal papers of Dorothy Davis Cook, Alhambra, CA.

⁸ Raleigh Fitkin Memorial Hospital. Health Centres. Leper Colony Review (Florida, Transvaal: Nazarene Publishing House, 1961), 3-4.

According to Nurse Elizabeth Mndebele:

And another thing that was really fun with Miss Davis was when you had returned from exam, she was the first person to be very nervous. She was nervous that if we don't pass it means that she has failed. She had failed teaching us. She had tension with us, you know waiting for the results. Cause [sic] see at that time, our results were not done in the school here, they were done outside by the nursing council. So, and so she was so afraid also. And when the results come back and they are positive, the people had passed...and those that failed, she was mothering people in a way that you would give you hope. She was a woman of hope that you can make it.¹⁰

Miss Davis was able to help her students for she too had experienced failure.

“Success is written on our hearts, but I had failed. I used that over and over. The Lord sustained me and helped me.”¹¹

Moral Lessons

Miss Davis continued to live in the nurses' home. She states that her most challenging missionary nurse experience was, “Well, I think that the greatest problem that I faced was when the young girls got pregnant during their nursing training and we had to discontinue their training. That was a real blow to me to have to take care of that

⁹ S. Hynd, Swaziland Council Reports, 1962, 5. Also during 1962, Dr. Thomas Mangum, who founded the Samaritan Hospital that had trained Miss Davis and so many of the other missionary nurses, came to Swaziland with his second wife Frances. Frances was a Registered Nurse who worked and taught at Samaritan. Together they gave lectures and worked in the hospital for several months. Raleigh Fitkin Memorial Hospital, Health Centres, Leper Colony Review (Florida, Transvaal: Nazarene Publishing House, 1962), 3. On this document Bremersdorp is called Manzini.

¹⁰ Elizabeth Mndebele interview by author, tape recording, Manzini, Swaziland, 10 August 1999.

¹¹ Dorothy Davis Cook interview by author, tape recording, Alhambra, CA., 8 October 1999.

situation.”¹²

Nurse Anna Mduli remarked:

She has been very our mother. We knew when we got the cap on our heads what it means. When you are out on the hospital grounds with it, each time you come out of the hospital ground the cap should be insight because it was a pure symbol of saying you were a nurse and you look after patients. Even when she came with Mr. Cook, when she got married [1975], all the nurses wanted to see her when she was around. They were eager to see Miss Davis back with a husband. We never through she was going to get married. We were all surprised. We wanted to see if she really married. Because of her strictness when she was seeing us going around naked, to find one of us getting pregnant. She was really crying with that person and that person was pregnant.¹³

If pregnancy broke Miss Davis’ heart, it is not difficult to understand why “she didn’t want us to mix with boys....when we came back she would stand at the door to make sure all of us were inside. Anyway, at that time we didn’t mind a lot because it was, because we know that boys are just like wolves or something like that.”¹⁴

Nurses Martha Zubuku and Esther Dlamini both reported an incident that caused Miss Davis to laugh, cry, and get very flushed. According to Nurse Dlamini:

Miss Davis was a person of very, very good morals. And she, she inforced that on us. Like I remember the day the mangos were almost ripe. And then some people started stealing them from the trees. And then Miss Davis wrote on the board in the dining hall of the nurses’ home, ‘All mangos are mine, I will share them when they are ripe’. And one of the naughty nurses sometime during the day, she wiped the g-o-e-s, and then it remained ‘All man are mine. I’ll share them when they are ripe’. And when Miss Davis went to the dining hall, we were not there. They say she just broke down. And she was surprised and she got flushed and all that. And when she came to, I think it was the morning prayer,

¹² Dorothy Davis Cook interview by author, audio/visual recording, Alhambra, CA., 28 February 1998.

¹³ Anna Mduli interview by author, tape recording, Manzini, Swaziland, 10 August 1999.

¹⁴ Jessie Maguba Twala interview by author, tape recording, Manzini, Swaziland, 10 August 1999.

when she came to the class with the prayers in the morning she started telling us what she saw on the board. And she again became very red and flushed. So we really remember her and she didn't want to associate herself with what was written on the board.¹⁵

Nurse Maggie Makubu believed Miss Davis' goal was to raise them all to be responsible citizens. "I didn't have a chance of crossing paths with Miss Davis because she was very strict. I wouldn't call it now that I'm an adult that she was strict."¹⁶ Miss Davis accepted Maggie into the nursing program against government policy for she had "some kind of infirmity of her foot and she couldn't pass the physical examination. But I took her in and Maggie turned out to be a very good nurse. A very good nurse."¹⁷ In fact, Nurse Makubu became the first Swazi nurse to earn her Ph.D. and the first to be elected to the Swazi Senate.¹⁸

In discussing Miss Davis as the mother of Swazi nurses, Nurse Elizabeth Mndebele stated, "I think you remember when I talked to you on the phone to say half of the nurses in Swaziland, especially the old nurses, all are from his hand, from her hand. And she, she has been grooming you, not just as a teacher, but she was a teacher with a purpose to make you somebody." She also related this story.

And then you know where we were in the nursing college, there was this funny thing. You have to report when you fall in love. So I am one of those people who didn't report. So one day, our letters were being opened you know and read. And then the homemother read my letter from my boyfriend....She said take this letter and go and give it to Dorothy, Miss Davis. Just imagine you are taking this letter to this, to your teacher...She had gone to Engculwini...And when I am going

¹⁵ Anna Mduli interview by author 10 August 1999.

¹⁶ Maggie Makubu interview by author, tape recording, Mbabane, Swaziland, 9 August 1999.

¹⁷ Dorothy Davis Cook interview by author 8 October 1999.

¹⁸ Maggie Mabuku interview by author 9 August 1999.

back I met her along the way....Being a mother, one of the finishing things is that when she meets you she will bring you and sit with you down....then I gave her the letter. She read it. 'Ah, you love this man?' I said yes. She said 'Let's pray'. And then she prayed. I was crying and she was crying...The mother kept me from going. She was that mother. I told myself, 'the mother will mother me'.¹⁹

Elizabeth's punishment was de-capping. She did marry her boyfriend and she has been married to him for thirty years. They have four children.

Engculwini

In addition to the lessons of life Miss Davis taught in the nursing school and home, Rev. Dorothy Davis continued to carry on her ministry in the community. Rev. Joseph Penn wrote that:

Although Miss Davis is know primarily as a Sister Tutor, she has also given herself to the spiritual healing of those about her. In all her duties she has tried to maintain an evangelistic emphasis. Before she arrived in Swaziland she had already become a Licensed Minister, and then during her first furlough she was ordained a Minister of the Gospel. Miss Davis is a preacher and has taken her turn regularly at the Sharpe Memorial Church in Manzini [formally Bremersdorp]....Perhaps her most visible work, materially speaking, is the station at Engculwini. Although there was nothing there when she arrived in 1961, there is now [1971] a church, a school, and a clinic. This, we believe, is symbolic of what is going on in the lives of the people there because of Miss Davis' concern for them.²⁰

When Miss Davis returned from her 1960 furlough, she was asked to take charge of an out station Sunday School. A group of elderly ladies had been coming into town for services and it became too difficult for them to travel the thirteen miles by foot each

¹⁹ Elizabeth Mndebele interview by author 10 August 1999.

²⁰ J.F. Penn, "Rev. Dorothy Davis," Swaziland Nursing Journal 1(5) (1971): 10. Personal papers of Dorothy Davis Cook, Alhambra, CA.

week. On land donated by a former orphan raised by Miss Robinson, Miss Davis and the people built a church, school, and clinic.²¹

We gathered the stones from the hillside, I had a landrover at that time, and the old men and the old women ground down these rocks so we didn't have to buy concrete, and we built the church.

And they carried the sand from the river and I brought water from Manzini in the barrels my father packed used clothing, etc., in. So we built the church and a clinic and a first class of students in the grade school were seven. And when my husband and I went out in 1980, there were 97 in the school.²²

By 1962, Miss Davis was going to Engculwini every Wednesday and Sunday for one full term. All did not go well for the local chief was against the church while his assistant chief was for it.

Our Sunday School had reached a high mark of 112---then the devil hit. A baby died near the home of one of [the] church members. We all went to pray and offer our sympathy. But the father was not satisfied. He went off to a Zionist Prophet (this is a cult that practices witchcraft) to find out who killed the baby. The Zionist prophet pointed to a member of our church. The father of the baby proceeded to nealy [sic] beat the woman to death. She was admitted with depressed fracture of the skull and a broken arm. Needless to say our attendance dropped with a bang down to 31(not because the woman was beaten but because they fear she was a witch and would kill other babies).

Then the chief who continued to offer opposition warned his people that if they came to church or sent their children to school, he would take their land away from them. (He could do this because all native land is granted by the chief. They

²¹ Dorothy Davis, "Engculwini Church of the Nazarene" (TMs, n.p., 1963) Church of the Nazarene Africa Regional Office Archives, Florida, South Africa. This first-person writing is not signed. It has been determined that it was written by Dorothy Davis as the content is consistent with other documents and interviews. The date was determined by content story line.

²² Dorothy Davis Cook interview by author, tape recording, Alhambra, CA., 3-4 March 1999; Money needed to build the church was raised by placing the names of those who gave ten cents on a cement block. Some bought multiple blocks. A family friend of Miss Davis contributed a large quantity which Miss Davis brought to the church in small offerings. The church was dedicated on December 2, 1962 and could not hold the 300 people present for the celebration. Davis, "Engculwini Church of the Nazarene".

do not own their own land.) This threat of course kept others away.²³

But the mission went forward. School opened February 1, 1963 with 10 boys and girls. A Swazi woman was the teacher. A home was soon built for her on the station. A new dispensary was opened in early 1968.²⁴

Upon the death of Miss Davis' husband, Ralph Cook, memorial monies added to this station with the building of a parsonage. Since 1976, former student of Miss Davis Martha Zubuko, has been the nurse at Engculwini and her husband is the pastor. Today the original fireplace that Miss Davis built by hand for the Swazi nurse stationed there still stands. There is still no running water. One drain and faucet, recently hand dug by the church people, allows rain water from the hill to be utilized. Nearby, a lone tree stands, planted in 1998 by Princes Charles, William, and Harry of England.²⁵

Upon seeing a photo of Engculwini today, Mrs. Cook (Miss Davis) exclaimed: "You know, the Lord gave me a vision for that out-station. And I was able to see it fully developed. The church and the school and the clinic and the pastor's home."²⁶

²³ Davis, "Engculwini Church of the Nazarene".

²⁴ Ibid.; Dorothy Davis, Manzini, to My dear Friends, (TL, 1968). Church of the Nazarene Archives, Florida, South Africa. Date determined by content.

²⁵ Martha Zubuko interview by author 8 August 1999. Interview conducted at the Engculwini Church of the Nazarene Mission Station. After author was introduced to the people, Mrs. Zubuko led the congregation in the singing of one of Miss Davis' favorite choruses. "Thank you Lord for saving my soul; Thank you Lord for making me whole; Thank you Lord for giving to me, Thy great salvation so full and free."

²⁶ Dorothy Davis Cook interview by author 8 October 1999.

Writing a Legacy

When 1965 arrived, Swaziland was in the third year of drought and famine. The mission farm crop had failed and cattle were sold to cover expenses. Dr. and Mrs. Howard Hamlin from Chicago had joined the medical staff and Dr. and Mrs. David Barton from Santa Monica, California came for short-term service. Dr. Ralph Barton also came for a short-term, serving as the first dentist to come to the region. Miss Eileen Figge and Miss Elizabeth Mishler had come as missionary nurses.²⁷ Nurse Figge was a graduate of the General Hospital and the University of Louisville in Louisville, Kentucky. She was teaching nursing before going to Africa and would serve until 1969. Nurse Mishler first attended Bethany Nazarene College and then did her nursing in Kansas. She served in Swaziland until 1979.²⁸

The Times of Swaziland reported that nineteen out of twenty-eight nursing candidates had just passed their examinations for general nursing and all sixteen midwifery students had passed. There were at present seventy-one students in the Nazarene Nursing School which included thirty-six from Swaziland, eight from Bechuanaland, and seventeen from Basutoland.²⁹

Dr. Hamlin added that six of the students had passed with an honor rating.

This spectacular achievement, for the High Commission Territories' examinations are extremely difficult. Credit for the fine record of our nurses goes to Nurse Dorothy Davis, who is in charge of the College, and her staff of assistants. Miss Eileen Figge serves half-time in the college; and others, both

²⁷ Samuel Hynd, "Swaziland Council Report," (TD, n.p., 1964). Church of the Nazarene Africa Regional Office Archives, Florida, South Africa.

²⁸ Eileen Figge biography sheet (TD, n.p.); Elizabeth Mishler biography sheet (TD, n.p.). Church of the Nazarene Archives, Kansas City, MO..

²⁹ "Territories Nursing Exams," Times of Swaziland (Friday January 22, 1965). Church of the Nazarene Archives, Kansas City, MO..

missionary nurses and doctors, give lectures throughout the year. In addition, there is the bedside teaching that all of us share.

The Nursing College at our R.F.M. Hospital is the only one in Swaziland. Our graduates are given top priority by the government when they fill vacancies in their own nursing rosters.

Most of our Nazarene outpatient dispensaries are staffed by graduates of our own nursing college. Many of the nurses have married young Nazarene preachers, and these couples man isolated outstations deep in the bushveld, with the husband preaching and the wife caring for the dispensary.³⁰

At this time, due to the pending independence of the High Commission Territories, the Swaziland legislature passed the 1965 Nurse and Midwifery Act of Swaziland. According to Miss Davis' former student and current Chief Nursing Officer for the Kingdom of Swaziland, Nester Thembisile Shongwe, one of the most significant nursing legacies of Miss Davis is the co-writing of the 1965 Nurses and Midwives Act. Other than minimal periodic change, the 1965 act was so well written that it is only today under major revision.³¹

The Act

The act established the nine-member Nursing Examination Board for Botswana (formally Bechuanaland), Lesotho (formally Basutoland), and Swaziland. The board was to write and conduct all nursing examinations for nurses and midwives, determine the nature of the nursing curriculum, approve nursing schools, collect nursing fees, determine who could use the title of registered nurse or midwife and who could wear the uniform and badge of a registered nurse or midwife, and keep a register of all student

³⁰ Howard Hamlin, "Nazarene Nurses Win Honors," (TMs, n.p., June 1965). Church of the Nazarene Archives, Kansas City, MO..

³¹ Nester Thembisile Shongwe interview by author, tape recording, Mbabane, Swaziland, 9 August 1999. The copy of this Act, as proved by Mrs. Shongwe to author, includes an official 1996 stamp of approval; Davis, Nursing in Swaziland, 28.

nurses and graduates. The members were to include the director as chairman, one medical practitioner, one education officer, one matron (hospital or ward supervisor), one sister-tutor, one registered senior nurse (elected by registered nurses), one senior registered nurse (elected by student nurses), one enrolled senior nurse, and one Chief Nursing Officer (officially added in 1974).³² Miss Davis served first on the examination sub-committee with Professor C. Searle, Miss C. Harvey, Miss D. Rhind, Miss M. Partington, Miss E. George, and Miss P. Hollamby. This group met in Pretoria, South Africa and their final recommendations were approved in 1968. Upon nomination by the Chief Medical Officer after consultation with the Minister of Health, Miss Davis then served on the Nursing Examination Board as the Sister Tutor from 1968 until her retirement in 1972.³³

The 1965 Nursing and Midwife Act also established the Swaziland Nursing Council. The objectives of the association were “to provide an efficient and adequate nursing and midwifery service in Swaziland; to raise the status, maintain the integrity and promote the interests of the nursing and midwifery professions in Swaziland; and to consider and, subject to this Act, deal with all matters affecting nurses and midwives, and student nurses and pupil midwives in Swaziland.”³⁴ Miss Davis served on the council from 1968 to 1972. Their first official meeting was held on February 23, 1968. Other members included Swazi nurses Mrs. A. Mabuza and Mrs. N. Dlodlu.³⁵

³² Swaziland Government Health Department. The Nurses and Midwives Act. (1965), 4-6, 9. Country names was clarified by W.C. Esselstyn, tape-recording November 1999, answering author’s written questions.

³³ Davis, Nursing in Swaziland, 30-31. Dorothy Davis and Freda Hlatshwayo, “The Answer Corner,” Swaziland Nursing Journal 1(3) (1971): 16-17. Church of the Nazarene Africa Regional Office Archives, Florida, South Africa.

³⁴ Swaziland Government Health Department, 13-14.

³⁵ Davis, Nursing in Swaziland, 33-34.

The Act also established the Swaziland Nursing Association. The Association first met in October 1968 with Miss Davis presenting a paper of the history of nursing in Swaziland and an address by Matron Priscilla Mdiniso. Out of this organization would come the Swaziland Nursing Journal, of which Miss Davis was the founding editor.³⁶

The Act required all nursing schools to be directly associated with a hospital or group of hospitals that maintained a sufficient number of male and female patients. "The person in charge of a college shall be a registered general nurse and midwife and should preferable hold a Sister Tutor's qualification recognised [sic] by the Board." Each school and hospital was required to be certified by the Board. Requirements for admission into a nursing program included passing the Junior Certificate Examination for adequate knowledge of English and arithmetic or mathematics, a certificate of good health, a certificate of good character from two sources, and evidence of being at least seventeen and one-half years in age.³⁷

The training period was established as four years, with a thirty-day leave per year. Each student was to have one day off per week and sick days were adjusted with the leave time or with an extended period of study. A six-month leave of absence was permissible with penalty. Beyond that time, the student was required to repeat previous course work.³⁸

Clinical rotations were established as a minimum of twelve weeks in Male Medical, Male Surgical, Female Medical, Female Surgical, Gynecology , and Pediatrics. Eight weeks were required in theatre (operating room), and four weeks were required in

³⁶ Ibid., 37-38.

³⁷ Swaziland Government Health Department, 21-22, 30.

³⁸ Ibid., 22-23.

Casualty (emergency room) or Out-patient Department and Infectious Diseases. As these programs were hospital staff dependent for clinical teaching, the student-registered general nurse ratio was set at four to one.³⁹ The syllabus for general nurse training established the lecture content and the need for additional applied teaching (see appendix 6).

Two professional examinations were required for general nursing. The students sat the first examination at the end of their first nine months of training. This exam covered the natural and biological sciences, the history of nursing, a portion of the lectures on the science and art of nursing, and First Aid. The exam included both a written and practical section, and a score of fifty percent was passing.⁴⁰

In order to sit for the final professional examination, students had to have completed all subject lectures and clinical rotations and provide documentation of not missing more than thirty days per year. The final examination consisted of three parts. Section One required the student to write for three hours on medicine and medical nursing which included pediatrics, three hours on surgery and surgical nursing that included gynecology, and two hours on preventive and promotive health that included health education. Section Two was the oral and practical examination which was to last between thirty and sixty minutes. This component, conducted jointly by a general nurse and medical practitioner on the Board, examined the “principles of professional practice and practical nursing problems”. Section Three was another thirty to sixty minute oral examination on ward administration and teaching which was conducted jointly by two general nurses appointed by the Board. A passing score was again set at fifty percent.

³⁹ Ibid., 24-25, 32.

⁴⁰ Ibid., 25-26.

Students were classified as “passed”, “passed with merit” (sixty-five percent), or “passed with honors” (seventy-five percent).⁴¹

This 1965 Act, as written by Miss Davis and her colleagues, also set the criteria for the education and examinations required for midwifery certification. After completion of the general nursing, and for some, after work experience, the student had the option of a twelve month or twenty-four month, slower-paced program in a Board approved midwifery program. The number of required lectures included the history of midwifery (two), anatomy and physiology, embryology, and fetal development (ten), and the physiology, diagnosis, and management of normal pregnancy (thirty). High risk situations included the diagnosis and management of abnormal conditions of pregnancy (ten), diseases of pregnancy (five), and abnormal conditions in labor and obstetrical emergencies (twenty-five). The curriculum also had to include lectures on both normal and problematic post partum (eighteen), normal and high risk newborns (thirty-six), family planning (twenty-five), and rules of professional practice (nine).⁴²

In addition to the lectures, each midwifery student was required to complete a minimum of four weeks in nursery and premature nursery, sixty hours in prenatal clinics, and twenty hours in post partum clinics. An additional, yet unspecified, number of hours was required for prenatal and postnatal care and delivery in patient homes. The student had to observe a minimum of 10 deliveries and deliver, under supervision and instruction, not less than twenty-five. Another thirty unsupervised births was then required for certification.⁴³

⁴¹ Ibid., 26-28, 41.

⁴² Ibid., 46-47.

⁴³ Ibid., 38-39.

As with general nursing, the midwifery students had to pass two examinations. The first, which required a passing score of fifty percent, was taken at the end of the first nine months and mirrored that of the first general nursing examination. The final examinations consisted of two sections. During the first, the student had to write three hours on midwifery, two hours on the care of the infant, and two hours on 'preventive and promotive health in relation to the midwifery service'. The second section was an oral examination and practical demonstration administered by a midwife and medical practitioner appointed by the Board.⁴⁴

The Nurse and Midwifery Act devotes specific pages of instruction to midwives on the care of her person, clothing, and equipment. How and what records were to be kept and the conditions of drug administration are presented. Internal examinations of the patient are to be at a minimum. Breastfeeding promotion was the standard.⁴⁵

While all the writers of this Act are not known, when Miss Davis wrote Nursing in Swaziland, she specifically credited some whose expertise in nursing was invaluable to her. It is possible that these women had a role in writing the Act. They most definitely influenced the work of Miss Davis.

Neriah Norma Dlundlu came to Swaziland as a nurse with post graduate education from the Union of South Africa and Israel. Miss Davis credits her work in the public health of Swaziland. Anne C.T. Mabuza also did her basic nursing in the Union and then took courses in ward and hospital administration at the Royal College of Nursing in London. She also brought to Swaziland expertise in writing nursing examinations and tropical nutrition. Both of these ladies served on the Nursing Council of Swaziland with Miss Davis. Daisy Bhengu was the first president of the Swaziland Nursing Association.

⁴⁴ Ibid., 40-41.

⁴⁵ Ibid., 48-51.

Alline Lobohlope S. Dlamini had studied public health in India and family planning in Korea. She became Swaziland's Matron of the Public Health Unit.⁴⁶

Member of the British Empire

Upon completion of the laborious task of co-writing the Nurse and Midwifery Act and in recognition for her work in developing professional nursing in Swaziland, Miss Davis received a personal and confidential request to allow submission of her name to Her Majesty the Queen for the award of "Honorary Ordinary Member of the Civil Division of the Most Excellent Order of the British Empire".⁴⁷ Permission was also obtained from the United States Government and Miss Davis' award was made known on January 1, 1966 (see appendix 7). "Your work over the last twenty five years has made an invaluable and vital contribution to the present high standard of the Nursing Service in Swaziland, and all sections of the community owe a great deal to your unselfish and devoted service."⁴⁸ "At the investiture at the Oval, Mbabane, on June 11th 1966 she was decorated with the M.B.E. [Member of the British Empire] medal which her Majesty, Queen Elizabeth was graciously pleased to award to her in recognition of her long and devoted service to the country."⁴⁹

From that day forward, Miss Davis' credentials after her name were to include M.B.E..

⁴⁶ Davis, Nursing in Swaziland, 54-55.

⁴⁷ F. Edmonds, Mbabane to Miss D. Davies [sic], Manzini 18 November 1965. (TLS). Dorothy Davis Cook personal papers, scrapbook

⁴⁸ Frank Loyd, Mbabane, to Dear Miss Davis, Manzini, 1 January 1966. (TLS). Dorothy Davis Cook personal papers, scrapbook.

⁴⁹ David Hynd, "Sister Dorothy Davis Retires," Swaziland Nursing Journal 1 (5) (1971): 9. Personal papers of Dorothy Davis Cook, Alhambra, CA.

Needed Rest

In need of rest, Miss Davis took an extended furlough to the United States in 1966. As she prepared to return to Swaziland, she wrote friends to summarize her time at home.

My dear friends,

It has been a wonderful furlough and I have so much enjoyed being with you again. My physical strength has been renewed, my heart has been blessed, and my vision has been expanded.

My activities have included:

1. TEACHING AT PASADENA COLLEGE

Here I met many fine young people and am looking forward to seeing some of them in Africa, and to hearing that others have gone to other mission fields. It was also a privilege to be associated with the faculty and to have a part in the great work they are doing.

2. NURSING

It has been good to revise nursing procedures and to bring myself up-to-date in some of the great advances in Medical Science. Then it has been a real thrill to nurse once more in the U.S.A.

3. SPEAKING IN THE INTEREST OF MISSIONS

My heart is very grateful to all the churches and missionary societies that have asked me to share with them the great things God has done for us in Africa.

4. VISITING WITH MY FAMILY

I have been at home for the longest period since I left to take nurse's training in 1935. Words are inadequate to express my deep appreciation to my dear father and mother, and my two sisters and their families for all they have done for me. It has been good to fellowship with them once more.

5. FELLOWSHIP WITH FRIENDS AND WORSHIPING TOGETHER IN OUR BEAUTIFUL CHURCHES

I am especially grateful to my Alhambra and Pasadena friends for allowing me to be just one of them once more. My soul has been blessed and inspired through the messages of our fine pastors.

Now my eyes are turned toward Africa. My furlough year will soon be over and immediately after Christmas, on December 30, I will take wings to fly to the 'Beloved Country'.

Thank you for your prayers, for your offerings that are being used to complete the dispensary at Engculwini, and thank you very, very much for your support of the NAZARENE WORLD MISSIONARY PROGRAM that makes it possible for me to return to Africa.⁵⁰

⁵⁰ Dorothy Davis, Manzini, Swaziland on letter head but implied Alhambra, CA., to My

Green Gables

Throughout all of the years of service, Miss Davis had continued to live in the nurses' home. While on this furlough, the Los Angeles District of the Church of the Nazarene and the Davis family decided it was time for Miss Davis to have a real house. Matching the money, Sylvia Oiness joined Miss Davis in building a green cottage, named "Green Gables", behind the nurses' home. The ladies had lived together in the nurses' home and were good friends. They did however, build the cottage so that each would finally have a private bedroom and private bathroom.

We lived together. For some reason, the other missionaries weren't overjoyed with Sylvia's, what shall I say, her emphasis on perfection. She was a perfect person. I loved it. And so we got along very well...So she was a partner in the teaching of the nurses and also a close personal friend.

It was good enough to take a bath in a galvanized bathtub in the kitchen. That's the way I started. But it was nice to have two bathrooms, my own bathroom. Sylvia's schedule, as Matron of the hospital, was very erratic and sometimes she would come home late at night and I would be in bed. I got up early in the morning, took my bath, and started the day at 5:00. But she was still asleep. You see we needed the privacy of individual bath.⁵¹

Miss McNabb later lived in the cottage for over ten years. She made the second bedroom available to short-term missionaries and medical students. Today a Swazi member of the hospital staff lives there.

Nursing Faculty

By this later half of the 1960's, the nursing program had expanded and the hospital census grown. During 1967, Raleigh Fitkin Memorial Hospital cared for 68,512

dear friends, (TL, 1966). Church of the Nazarene Africa Regional Office Archives, Florida, South Africa.

⁵¹ Dorothy Davis Cook interview by author 3-4 March 1999.

patients.⁵² A nursing shortage had existed in the hospital created in part by the government hospital paying a higher salary, nurses wishing more freedom than offered in mission station life, and with an improving Swaziland economy, husbands no longer wanting their wives to work.⁵³

It was variously reported and rumored that there exists a surplus of graduate nurses in Swaziland. Actually, there is no surplus of properly trained graduate nurses at the present time.

The recent increase in Staff Nurses' salaries has brought the R.F.M. Hospital scale of salary and benefits to a nearly equal level with the Government.

The present Governmental starting wage for a doubly qualified Staff Nurse is R [Rand] 636.00 per year. Out of this she must pay rent, buy her own food, and furnish her own uniforms.

At R.F.M.H. the starting wage of a similarly qualified nurse is R475.00. In addition she is furnished her housing, food, uniforms, and laundry. Broken down to a monthly stipend, she is receiving all of these side benefits for R13.00 per month-the difference between the Government scale and ours.⁵⁴

Miss Davis' dependence on the assistance of the other missionary nurses and Swazi graduates deepened as the student class sizes grew and the regulations for licensure were established. Some previously mentioned nurse faculty remained central to her role and new ones were added. Each taught the now seventy-five nursing students and one hundred percent of those student who had sat for recent examinations had passed. To assist the faculty in their endeavor to teach, UNICEF donated a Volkswagen bus to the nursing college.⁵⁵

⁵² H.K. Bedwell, "Regional Supervisor's Report," Swaziland Regional Council, Africa Mission Field, Church of the Nazarene (Florida, South Africa: Nazarene Publishing House, 1967), 33-34. Church of the Nazarene Africa Regional Office Archives, Florida, South Africa.

⁵³ H.H. Hamlin, "Swaziland Council Reports" (TD, 1967), 3. Church of the Nazarene Africa Regional Office Archives, Florida, South Africa. At this time, Dr. Hamlin was Medical Superintendent of R.F.M..

⁵⁴ *Ibid.*, 3-4.

⁵⁵ *Ibid.*, 4.

Missionary Nurses

Sylvia Oiness continued as Matron in the hospital and co-taught surgical nursing with Juanita Gardner. Miss Gardner also taught public health (district nursing).

Nell McNabb, who had come to Swaziland in 1952 and completed her midwifery training in Johannesburg in 1957, was now the primary midwifery classroom and clinical instructor. Two specific cultural adjustments were experienced by Miss McNabb. One was the sending home of the placenta after a royal family member birth for an unknown ceremony. The other was the witch doctor. One family, whose baby was born with ABO incompatibility, forced ashes from the witch doctor down the baby's throat and the baby died.⁵⁶

Miss McNabb prepared the students for both hospital births and home births. She once received a call to a witch doctor's kraal to assist a young woman who had been laboring for many hours. She took two nursing students with her into "probably the most filthy place in the world". Twelve women had the laboring woman lying in cow dung on the floor and they were pressing on her stomach. The woman could not be transferred to the hospital for the man in charge of her would not be available for two weeks to grant his permission. Therefore, Miss McNabb spread newspapers on the floor and proceeded to get her white uniform, hose, shoes, and cap very dirty.⁵⁷

As all Swazi women respond to "mother", the "real mother" was asked to stay and all others to leave. One witness was necessary in case the birthing mother or baby did not fare well. Both survived due to the skill of Miss McNabb, warm blankets, and penicillin. However, it is the Swazi custom for a new mother not to move until the birth

⁵⁶ Mildred Avinell "Nell" McNabb interview by author, audio-visual recording, Temple City, CA. 1 March 1998.

⁵⁷ Ibid.

attendant gives permission. When Miss McNabb returned in one month, the new mother was still lying in the same place.⁵⁸

Miss McNabb recalls working with Miss Davis. She recalls that Miss Davis, when not in uniform, usually wore second hand dresses that came in boxes from the states. “She didn’t worry about herself but she liked to dress up and look like a real lady.”

Dorothy was different from anybody. She went straight on down the road. And no matter who was against her, no right or to the left. I remember the one time Dr. Hynd said ‘You have a bee in your bonnet’ and she said ‘No, you have a bee in your bonnet’. And she was talking to the big Chief of Staff of the whole thing in Swaziland. But she usually got what she wanted.

If she asked you for help, she didn’t want an explanation. She just wanted a yes or a no.⁵⁹

One day Miss Davis came into the maternity ward and began to tell Miss McNabb to get screens on the windows immediately. Miss Nabb responded, “Dorothy, I think you work in the nursing college. Would you like to go back. I’m too busy to take care of you and the patients too. And we didn’t fall out. We went on the next day like nothing happened. We had a good rapport.”⁶⁰ According to Miss Davis, “Nel McNabb...was in charge of our maternity ward for years. She used to teach the interns that came to get their midwifery experience at Raleigh Fitkin Memorial Hospital. She was very good.”⁶¹

⁵⁸ Ibid.

⁵⁹ Mildred Avinell McNabb interview by author, tape recording, Temple City, CA., 5 March 1999.

⁶⁰ Ibid.

⁶¹ Dorothy Davis Cook interview by author 3-4 March 1999.

Nurse Phyllis McNeil (later Hynd) arrived as a graduate of St. Luke's Hospital in Kansas City, MO. in 1966. She initially taught ward supervision while working in R.F.M.. In 1968, she moved full-time into the nursing college. Miss McNeil became editor of the Swaziland Nursing Journal when Miss Davis retired. She and Dr. Samuel Hynd still live in Manzini.⁶²

Sister Elizabeth Cole continued to give the leprosy lectures to the nursing students. By 1971, over 700 patients were able to leave the leprosy hospital and return home symptom free.⁶³

Dr. Paul and Nurse Martha Riley arrived in 1968. Sister-in-law, Nurse Faye Riley also came to serve in Swaziland. Due to her expertise in teaching, Miss Davis had hoped to have Faye Riley take over as principal of the nursing school when she retired. The missions board did not agree.⁶⁴

The position was filled by various missionary nurses through the mid-1980's. Since that time a Swazi nurse has held this honored post. One of the first Swazi nurses to join the faculty in the nursing school and then later serve as the principle was Freda Hlatchwayo.

I trained at the Nazarene College of Nursing and was with Miss Dorothy Davis from 1951 to 1954. I did general nursing and then in 1957 I did midwifery, 1957 to 1958. From 1960 I worked in the Nazarene Nursing College at the suggestion of the administration of the hospital which included Dr. Samuel Hynd and Miss

⁶² Phyllis McNeil Hynd interview by author, written, 9 August 1999, Manzini, Swaziland. Mrs. Hynd personally assisted this researcher in Swaziland. Her name and reputation opened doors of opportunity for data collection.

⁶³ Elizabeth Cole, "Leprosy- Its Diagnosis and Treatment," Swaziland Nursing Journal 1(4) (1971): 5-6. Church of the Nazarene Africa Regional Office Archives, Florida, South Africa.

⁶⁴ Dorothy Davis Cook interview by author 8-9 October 1999; The Rileys biography sheet (TD, n.p.). Church of the Nazarene Archives, Kansas City, MO..

Davis and others. So from 1960 to 1996 I was teaching in the nursing college. From 1989 I was given the responsibility of being administrator of the nursing college until I retired.⁶⁵

It cannot be forgotten that other missionary nurses and Swazi nursing graduates staffed the various outstation dispensaries that served as public health clinical sites for the current students. Those nurses continued to practice advanced role nursing in rural and isolated environments where a doctor only visited one time per month. During 1968, the sixteen Nazarene dispensaries cared for 48,387 out-patients and 1,075 in-patients.⁶⁶

Specific to Miss Davis as teacher, Swazi nurses Jessie Twala, Elizabeth Mndebele, and Nester Shongwe all reported the same method of team teaching that existed between Dr. Samuel Hynd and Miss Davis. According to Nurse Twala:

...like if Dr. Hynd reports, finds out that you didn't know anything that was participating in the teaching, then go and write this thing so many times. Like maybe you forget one word. Go and write it 100 times. You bring it to him then you send it to the Tutor, or he would form 'Miss Davis, what have you taught this student? She doesn't know this and this and this.' Then she would call you and scold you. But it kept us tip-top. It kept us tip-top. What else can I say.⁶⁷

Nurse Shongwe recalled that when Dr. Hynd sent you to Miss Davis:

She is already standing at the door awaiting you, really red that you actually did your doubt. So you are already shaking... Then the teaching you get, the lecture she gives. I think we enjoyed it. We enjoyed everything. But she was a very good teacher. Oh, she was a very good teacher. I don't know when she had time to prepare. To me she almost teaching the whole day. She was explanatory when you listened to her. That's why we passed.⁶⁸

⁶⁵ Freda Hlatchwayo interview by author 10 August 1999.

⁶⁶ "Medical Superintendent's Report R.F.M. Hospital Leper Settlement Clinics," (TD. n.p., 1968). Church of the Nazarene Africa Regional Office, Florida, South Africa.

⁶⁷ Jessie Twala interview by author 10 August 1999.

⁶⁸ Nester Themsisile Shongwe interview by author 9 August 1999.

Nurse Mndebele added, “They were a really good team, the hospital and the school. What you learned in the school you would practice it in the hospital....She used to emphasize. She wanted you to understand it, to know that thing.”⁶⁹

Swaziland Independence

Through the years, the people of Swaziland never lost sight of their hope for independence from British rule. In preparation for the final development of a Swazi constitution and independence, a formal agreement was signed at Lobamba, the Royal Kraal, on Monday 24 April 1967. Those signing the Swaziland Protected State Agreement were His Excellency, Her Majesty’s Commissioner, Sir Frances Loyd, on behalf of Her Majesty Queen Elizabeth II, and the Ngwenyama of Swaziland, Sobhuza II.⁷⁰

This document, most definitely written by the British government, maintained Her Majesty’s control over Swaziland during the time of constitutional development. It promised the British continued protection of the land in the event of war. This document gave the Queen the right to revoke the document at any time.⁷¹

In promise of future independence, this document did finally acknowledge Sobhuza II as the King of Swaziland. A formal swearing-in ceremony was held. Recorded in both English and Zulu, the “Oath for the due execution of the office of The King of Swaziland” was so sworn by King Sobhuza II on that day of celebration.⁷²

⁶⁹ Elizabeth Mndebele interview by author 10 August 1999.

⁷⁰ “Kingdom of Swaziland- Ceremonies on 24th, 25th April, 1967”. (TD, n.p.). Church of the Nazarene Africa Regional Office Archives, Florida, South Africa.

⁷¹ Ibid.

⁷² Ibid., 8.

Miss Davis received a personal and formal invitation to attend the Independence Ceremony at the National Stadium on Friday 6 September 1968. In a letter labeled "MERRY CHRISTMAS from THE KINGDOM OF SWAZILAND", Miss Davis told her home friends about Independence Day.

SWAZILAND INDEPENDENCE- September 6, 1968.

These days of celebration will long be remembered by all who were able to attend. They were an unusual combination of the traditional and the modern; and while there was a gala air of festivity, all was carried out in an atmosphere of quiet and peace.

NATIONAL DAY OF PRAYER

The celebrations were climaxed by a day of prayer in which the whole nation participated.

'Surely God was in this place' was the comment of a woman who was present to hear Dr. Samuel Hynd speak under the anointing of God. He preached from Joshua 24:24, 'The Lord our God will we serve'. Three thousand people were present.

Dr. David Hynd was asked by the King to speak at the prayer services held at the New National Stadium. Our hearts said a loud AMEN, as he spoke on the topic 'Let us thank God'. Surely, words are inadequate to praise God for all that He has done for us in Swaziland this year.⁷³

⁷³ Dorothy Davis, Manzini, to Dear Friends, (TLS, December 1968). Personal papers of Dorothy Davis Cook. On the back page of her letter, Miss Davis wrote the English translation of the new Swaziland National Anthem.

O God, bestower of the blessings of the Swazi;
 We are thankful for all our good fortune,
 We give praise and thanks for our King
 And for our country, its hills and rivers.
 Bless those in authority in our land.
 Thou only are our Almighty;
 Give us wisdom without guile;
 Establish and strengthen us,
 Thou Everlasting.

In praise to God for the umculu (Bible) coming to Swaziland and for His hand on the nation of Swaziland, the annual "Somhlolo Festival of Praise" is held around Independence Day. The festival is eight days of Christian praises and celebration led first by King Sobhuza II and now by King Mswati III. "Somhlolo Festival Of Praise '99" (Swaziland Newsletter, 1999).

Clinic Inspections

Even in celebration, care of the patients continued. As previously stated, the Nazarene dispensaries (clinics) were nursing student clinical sites and ministry sites of the Church of the Nazarene. Miss Davis was given the responsibility to inspect each one. In her written report, Miss Davis explained that, "The Report aims to give information that might explain the present condition of our Clinics. The nurses were not notified of the visit. However, the Nurses at the last Clinics I visited had obviously been warned of the possibility of such a visit." The following clinics and nurses were visited by Miss Davis:

Engculwini	Staff Nurse Nellie Vilakazi
Mafuteni	Staff Nurse Calara Twala
Malinda	Staff Nurse Eva Lukhele
Bhekinkosi	No nurse
Balegone	Staff Nurse Katherine Dlamini (Relieving)
Mliba	Staff Nurse Faith Nkambule
Lalela	Staff Nurse Patricia Magagula
Shewula	No Nurse ⁷⁴

At each clinic, Miss Davis reported the time of her arrival, the state of professional dress of the nurse, what the nurse was doing at that moment, whether patients were waiting to be seen, the cleanliness of the clinic and equipment, whether the nurse kept adequate records, whether the nurse ran Child Welfare and Antenatal Clinics, and the spiritual work done by the nurse.⁷⁵

In all, Miss Davis was very disappointed with her findings. Five of the clinics were found "unspeakable dirty". Most were found in need of paint and repair. The Balegone toilet was broken and even the nurse was again using the bushes nearby. In

⁷⁴ Dorothy Davis, "Report of Clinic Inspection April and May 1969," (TDS, 1969). Church of the Nazarene Africa Regional Office Archives, Florida, South Africa.

⁷⁵ Ibid.

general, the nurses were not holding Child Welfare and Antenatal Clinics, and for those that did, the census was down. Record keeping was good in some. At Engculwini, the nurse gave up trying to keep records and made a new card out every time the patient came. The Malinda clinic scored high in all areas. Even a visitor from the World Health Organization came the same day and found the only clinic that completed his forms correctly.⁷⁶

The spiritual work of the nurses included teaching children's classes, being the local Sunday School superintendent, regularly praying with patients, holding or arranging services for the patients, or allowing the "Missionaries from Manzini come to do all the spiritual work".⁷⁷

In her conclusion, Miss Davis both recognized error and supported the nurses. She stated that:

The key to our clinic problem is the NURSE.

We can of course close all the clinics and dismiss the nurse. This would be one solution. However, when I think of this, I am reminded of the man who buried his one talent and of the children of Isreal [sic] who 'Being armed turned back in the day of battle'. We have an invaluable arm of the church in our medical work and it was never so well equipped.

It seems wise to revitalize our clinic Nurses rather than to abandon them. This could be done by appointing a sister, even on a part time basis to supervise the clinics.⁷⁸

With the use of a UNICEF grant, Miss Davis first held a refresher course for the nurses. When the Swaziland Nursing Journal went into publication, it became a source for further education. By 1971, missionary nurse Juanita Gardner was supervising the

⁷⁶ Ibid.

⁷⁷ Ibid.

⁷⁸ Ibid.

clinics and she noted a marked improvement. Nurse Anna Mduli now holds that supervisory position. Sixteen Nazarene clinics remain open in Swaziland today.⁷⁹

The Fourth Nursing Manual

Before leaving Swaziland and her nursing program behind, Miss Davis left those who would teach and learn an updated nursing procedures manual. Miss Davis credits Nurse Phyllis McNeil for assisting in writing new procedures and Nurses Anna Sutherland and Freda Hlatshwayo for their manuscript review. Absent from this edition is the purpose for the procedures. This is consistent with the required lecture component of nursing education.⁸⁰

This fourth edition begins with the now standard emphasis on environmental and patient cleanliness. The fundamentals of soap, water, sweeping, and dusting are present. Miss Davis gives the new students the details of bed-making, bath-giving, and shift assignments for patient care. New additions include how to wash hair in the bed and how to lift and move a patient.⁸¹

The manual continued with the techniques for obtaining vital signs, assisting the doctor with a physical examination, and the collection of specimens and cultures. Miss

⁷⁹ A.L. Dlamini, "Social Medicine," Swaziland Nursing Journal 1(3) (1971): 18-19; Juanita Gardner, "Nazarene Health Centre Clinics," Swaziland Nursing Journal 1(3) (1971): 9. Church of the Nazarene Archives, Kansas City, MO; Anna Mduli interview by author 10 August 1999; "Hospital Board of Administration" (TD, n.p., July 29, 1969). In this same report, Miss Davis asked that the Netherlands Aid Grant be used in part to add a classroom on the nursing college. Also stated is the efforts of the local Rotary Club to raise money for a new cardiac monitor and defibrillator. Church of the Nazarene Africa Regional Office Archives, Florida, South Africa.

⁸⁰ Dorothy Davis, Nursing Procedures Manual Fourth Edition (Manzini, Swaziland: The Shirley Press, 1971), preface, 180. Church of the Nazarene Archives, Kansas City, MO..

⁸¹ *Ibid.*, 1-30.

Davis expanded and detailed the section on oral and written reports. A kardex now existed on every patient. Official R.F.M. forms had been created. The bedside chart was to include a TPR graphic sheet, doctor's order sheet, a history and physical, lab and x-rays reports, nurses' notes, intake and output if ordered, and consent for surgery.⁸²

The higher level of knowledge and expectation of the nurses is evident in the nursing assessment to be made during each encounter with a seriously ill patient. Miss Davis' required specific systems assessment that is comparable to that of the nurse today. With respect to treatments, Miss Davis carried forth the application of heat and cold, poultices and packs, and the variety of optional enemas. The later did give a statement of purpose for each.⁸³

Injections were still given with reusable syringes and needles but the technique directions were more specific. Such steps as expelling the air bubbles and the angle of insertion were added. Used equipment received either steam sterilization or twenty minutes of boiling in water. Use of medicated vaginal pessaries was introduced. Made with coca-butter or paraffin, medications that could be administered via a pessary were Devagan, Stovarsol, Penicillin, Cargazine, and Diodoquin.⁸⁴

Disease and symptom specific treatment options had expanded. Nursing care procedures now included gastric lavage, colostomy and tracheotomy care, and non-patient-to-patient blood transfusions. Thoracentesis and indwelling catheters were available.⁸⁵

⁸² Ibid., 35-52.

⁸³ Ibid., 57-81.

⁸⁴ Ibid., 82-87 94.

⁸⁵ Ibid., 109-137, 151.

Lastly, infection control was more focused and strict. However, the mattresses still had to be placed in the sun after each use.⁸⁶

Farewells

An updated procedure manual was complete and both missionary and Swazi nurses were in place to carry on the nursing education and the nursing profession in Swaziland. Although she would not leave Swaziland until January 1972, the first farewell celebration for Miss Davis was held during the annual missionary council meeting . Over sixty Nazarene missionaries gathered on 18 August 1971 to honor both Miss Davis and retiring school teacher Miss Bertha Parker. Dr. David Hynd, who could not be present, wrote:

During my 37 years in charge of the work on the Manzini Mission Station I have known no more devoted, talented, self-sacrificing and industrious colleagues than these two, and it was always a pleasure to work with them and to help them make the most of the opportunity God had given them of fulfilling their calling as missionaries to the people of Swaziland.

Each in their own sphere of service has influenced for good the lives of innumerable young people, and their lives are being reflected in the lives of hundreds of people who as students in teacher-training college and nursing college got the vision of a life of dedicated christian [sic] service from the example of these two pioneers whose academic standards and spiritual quality could not but leave it's stamp upon those who sat under them.⁸⁷

The certificate presented to Miss Davis that night read, "In appreciation, this certificate is presented to Miss Dorothy Davis in grateful appreciation for faithful service to The Swazi People as a Nazarene Missionary". The cake made in her honor

⁸⁶ Ibid., 155-164.

⁸⁷ David Hynd, Mbabane, to Phyllis McNeil, Manzini, 27 July 1971 (TLS); Your Swaziland Missionary Family, farewell card. Personal papers of Dorothy Davis Cook, Alhambra, CA..

acknowledged her contribution to Swazi nurses. Made in the shape of a nurse's lamp, the cake simply read, "Farewell Mother of Swazi Nurses".⁸⁸

The date of the final farewell for Miss Davis with the Swazi nurses is unknown. A farewell gathering is implied by the handwritten speech notes found in the scrapbook belonging to Miss Davis. It is evident from this speech that Miss Davis was held in high regard as their mother, as a woman of prayer and sensitivity, and as a teacher and role model. Excerpts from the farewell speech include:

Miss Davis we are very grateful to God who called you to Africa, to your parents who willingly offered you to God's service and above all your obedience to the will of God. You have held out this light to the people of Swaziland. They have seen you good works and are glorifying God.

To Miss Dorothy Davis Sister Tutor, to show appreciation for her faithfulness in the work, for her loyalty to the hospital and her coworkers [sic], to the one who had the riches of earth and fame pass her by that we may gain eternal life. All what we are and hope to be, we owe to Mother Davis.

The last nursing graduation for Miss Davis was on 30 April 1971. In honoring her, the Prime Minister, Prince Makhosini, and other members of the Royal Family were in attendance. The address, which both gave tribute to Miss Davis and commission to the graduates, was presented by Professor Charlotte Searle from the University of South Africa. Turning to speak directly to Miss Davis, it is recorded that she stated:

The thing that struck me the most is the shining example you have set to all of us , we South Africans. You have shown us what it means to be a professional nurse, what it means to be a great teacher, what it means to be a servant of the Lord. Professional nursing in Southern Africa has been immeasurably enriched by the fact that you have served this country.⁸⁹

⁸⁸ Certificate of Appreciation (18 August 1971). Photo album. Personal papers of Dorothy Davis Cook, Alhambra, CA..

⁸⁹ "Professor Searle Addresses Nurses at Graduating and Capping Ceremony," Swaziland Nursing Journal 1(3) (1971):, 10; "Nursing College," Nazarene Health Service-Swaziland Annual Report 1971 (TD, 1971), 9. Church of the Nazarene Africa Regional Office Archives, Florida, South Africa.

An entire issue of the Swaziland Nursing Journal was dedicated to Miss Davis, her life, her work, and her accomplishments. Those who wrote their praise about and farewell to Miss Davis included Dr. D.G. Standing, Chairman of the Examination Board of Botswana, Lesotho, and Swaziland, Dr. J. Klopper, Chairman Swaziland Nursing Council, Matron A.C.T. Mabuza; Norma Dlodlu; Dr. David Hynd, Rev. J.F. Penn, Field Superintendent Swaziland Church of the Nazarene, Student Nurse Elizabeth Dlamini, Dr. Samuel Hynd, Medical Superintendent R.F.M. Hospital, Matron Sylvia Oiness, Sister Freda Hlatshwayo, Sister Annah Dlamini, Sister Daisy Bhengu, and Staff Nurse Clara Thwala. Their comments repeatedly referred to her as the Mother of Swazi Nurses.

Miss Davis' final farewell message to the nurses of Swaziland was also recorded in that journal. She wrote:

Finally Farewell.

'I thank my God for you all every time I think of you; and every time I pray for you, I pray with joy, because of the way in which you have helped me in my work of the gospel, from the very first day until now. And so I am sure of this: that God, who began this good work in you will carry it on until it is finished in the Day of Christ Jesus. YOU ARE ALWAYS IN MY HEART!' (Philippians 1:3-7).

I CAME

I came young and inexperienced. I came to give my all without reservation. I may have given something to you. You have given me more. Forever I am in debt to you.

I HAVE LIVED

I have lived among you, been one with you, and in LIVING have found complete fulfillment and supreme joy.

You are my children. I delivered some of you. Most of you have been in my classes. It has been my great privilege to work with many others in nursing and administration. Having lived, I have learned. You have taught me so much.

I do not forget your sweet and loveable [sic] ways, the times we laughed and played together. The times we have cried and prayed together.

I do not forget how you have made my work load in routine hospital duties.

I do not forget how you have sung for me and helped in hospital and out station services.

THANK YOU

For loving me, for understanding my strange foreign ways, for your patience, for your kindness. Today I am rich because of YOU. You are my inheritance.

I AM GOING

The time of my departure is at hand. I have finished the work God gave me to do in Swaziland. I wish I could have done better. However, it is a great comfort to me to know that you have grown up and that the work is in good and efficient hands.

FINALLY FAREWELL

Your Mother and your Teacher, Dorothy Davis.⁹⁰

Legacy of Swazi Nurses

When Miss Davis wrote Nursing in Swaziland in 1975, she not only gave a history of the profession's development, she also credited certain Swazi nurses who had left their mark in that history (see appendix 8). In time, other former students of Miss Davis became her legacy as the nursing leaders of Swaziland today.

Nester Themisile Shongwe (class of 1966) is the Chief Nursing Officer for the Swaziland Minister of Health and Social Medicine. She is completing her nursing doctorate at the University of South Africa in leadership and "management strengthening". According to Mrs. Shongwe, there are now three nursing schools in Swaziland. "The government hospital is the product of Miss Davis because it is her products that teach in the school." Miss Davis' students became the first principal, the second principal, and now the Acting Dean. Esther Dlamini (class of 1964) is Swaziland's Deputy Chief Nursing Officer. Both of these women referred to the mothering qualities and actions of Miss Davis.⁹¹

Anna Mduli (class of 1964) is in charge of the sixteen Nazarene Health Clinics distributed throughout the four regions of Swaziland. Jessie Maguba Twala was in Miss Davis' last graduating class (1971). She did post graduate work in community health and

⁹⁰ Dorothy Davis, "Finally Farewell," Swaziland Nursing Journal 1(5) (1971): 2. Personal papers of Dorothy Davis Cook, Alhambra, CA.

⁹¹ Nester Themisile Shongwe and Esther Dlamini interview by author 9 August 1999.

has been a sister/matron in RFM. since 1976. Magdeline Maziya also completed her training in 1971. She taught in the Nazarene Nursing College for ten years and recently accepted a management position in RFM.⁹²

Maggie Makubu is the nurse Miss Davis accepted into nurse's training despite a deformity of her foot. Nurse Makubu received a scholarship from the World Health Organization and studied public health in India. She served as president of the Swaziland Nurses Association from 1971 to 1974. She was the first principal and program developer of the Swaziland Institute of Health and Sciences and then became the Chief Nursing Officer of Swaziland. In 1988, "I am the first Swazi nurse to get a doctorate". Earning her degree at the University of South Africa, Dr. Makubu's dissertation was on "community involvement in rural health care in Swaziland". She most recently retired from a three year appointment to the Swaziland Senate. When elected, many nurses called to say it was their honor to have nursing recognized in such a high position.⁹³

Dr. Makubu was very impressed with Miss Davis' hard work ethic, hands-on nursing, and "even with the heavy teaching load had time to spread the Word of God". "And this is how I managed the college even though it was a government college. It was the role model that I got from Miss Davis which made me help the students."⁹⁴

Nurse Elizabeth Mdebele (class of 1964) remembers Miss Davis training them to be multi-purpose nurses where there is no doctor, teaching nursing not as a job but as a calling. Miss Davis, as a mother should, knew her children individually. She saw the

⁹² Anna Mduli and Jessie Thwala interview by author 10 August 1999; Magdeline Maziya interview by author 9 August 1999.

⁹³ Maggie Makubu interview by author, tape recording, Mbabane, Swaziland, 9 August 1999; "Association News," Swaziland Nursing Journal 1(3) (1971): 2-3.

⁹⁴ Ibid.

talent for teaching in Mrs. Mndebele and gave her a typewriter so she could learn a new skill in preparation for that role. Nurse Mndebele studied public health in India and since 1976, under director of the World Health Organization and the Swaziland Minister of Health, has been the program coordinator of the rural health education program. Under her leadership and instruction, over 3000 lay persons have been trained as local community health workers.⁹⁵

Nurse Winnie Nhlengethwa never met Miss Davis but she knows her face and she is part of her legacy. Miss Davis' photograph is mounted, next to that of J. Evelyn Fox, just to the right as one walks into the Nazarene Nursing College in Manzini today. Mrs. Nhlengethwa, a graduate of the program, is now the principal of the school. Soon to start her doctoral studies, Mrs. Nhlengethwa is one who carries the torch of Miss Davis for professional Christian nursing education and practice in Swaziland.

Going Home

Leaving a nation, its women and its healthcare, forever changed by her leadership, instruction, mothering, and ministry, Miss Davis left Swaziland on January 3, 1972.

Taking the long road home, Miss Davis traveled north through central Africa and on to Israel. "My heart was strangely moved as I walked the stoney [sic] roads where Jesus walked and stood and where he stood and wept over Jerusalem." From Israel, Miss Davis went on to India and spent one month there with other Nazarene missionaries. She then traveled to New Guinea, where the Nazarene medical mission work was relatively new. Before arriving in Los Angeles, Miss Davis also saw the poverty-stricken streets of the Philippines and the modern, crowded streets of Hong Kong and Tokyo, and Hawaii. "In Los Angeles I was welcomed by my own family and friends. It was good to see them

⁹⁵ Elizabeth Mndebele interview by author 10 August 1999.

all. Then the welcomes and receptions given by the different churches has filled my heart to full and overflowing.”⁹⁶

Miss Davis returned to her Alhambra Church of the Nazarene where Rev. Harold Bonner welcomed her into the pulpit immediately after she settled in. When not speaking in other churches, and as long as she was physically able to attend, Alhambra church was where she worshiped. She served as the local missionary society president for a number of those years.⁹⁷

Home became the Nazarene missionary retirement center known as Casa Robles, 6355 North Oak, Temple City, California 91780. By tradition, career missionaries are offered their own newly painted, newly carpeted cottage. “The greatest of all material blessings has been a home with all the luxurious furnishings at Casa Robles. It is a wonderful place to live--beautiful, peaceful, and among the people that mean so much to me.”⁹⁸

Miss Davis’ nursing career was not over. She worked for three years as the evening supervisor of the Continuing Care Unit at Arcadia Methodist Hospital. She also worked in maternity. She then served as Director of Nursing for one year at the Monte Vista Medical Center and Retirement Home for Presbyterian pastors and missionaries. This position required her to take a fifty-three hour course in psycho-social care of the elderly.⁹⁹ “My greatest problem was how to use disposable equipment. We had to do

⁹⁶ Dorothy Davis, Temple City, to My dear friends, December 1972. TLS. Personal papers of Dorothy Davis Cook, Alhambra, CA..

⁹⁷ “Dorothy Davis returns home; Alhambra Nazarene will host”. (Newspaper article, n.p., n.d.). Photo of Miss Davis with Rev. Bonner; Harold Bonner, “The Touch of One Life,” Herald of Holiness 61(20) (1972), 8-9. Personal papers of Dorothy Davis Cook, Alhambra, CA..

⁹⁸ Ibid.

⁹⁹ Ibid., “Former Missionary Nurse Now on Methodist Staff,” (Arcadia, CA.: Arcadia

everything from scratch in Swaziland those years and when I came home I didn't know what all of this disposable equipment was for. So I had a hard time adapting."¹⁰⁰

Formal Achievement Honors

Distinguishing Service

Miss Davis received formal honors for her years of missionary nursing and pastoral service in Swaziland, including the recognition of the Nazarene colleges from which she had obtained her degrees. First, in the presence of those attending a banquet on June 3, 1972, Dr. Henry A. Ernst presented Miss Davis with the Pasadena College Alumni Association Ministerial Distinguished Achievement Award. Similarly, on April 30 1979, the Alumni Association of Northwest Nazarene College presented Dorothy Davis Cook with their Professional Achievement Award at the Northwest District Missionary Convention meeting in Spokane, Washington. The Alhambra Church of the Nazarene presented the Nazarene World Missionary Society Distinguished Service Award to both Mr. and Mrs Cook on April 29, 1977. Ralph A. Cook was honored for twenty-nine years of missionary service in India, Trinidad, and Jamaica. Dorothy Davis Cook was honored for thirty-two years of outstanding service in Africa.¹⁰¹

Methodist Hospital) (TM, n.d.); Dorothy Davis, Temple City, CA., to My dear friends, September 1975. TLS. Personal papers of Dorothy Davis Cook, Alhambra, CA.

¹⁰⁰ Dorothy Davis Cook interview by author 3-4 March 1999.

¹⁰¹ Henry Ernst "Distinguished Achievement Award, Minister-1972: Dorothy F. Davis," (TD, 1972); The Alumni Association of Northwest Nazarene College, "Professional Achievement Award- to Dorothy Davis Cook," (TD, 1979); "Distinguished Service Award to Dorothy Davis Cook", certificate, April 29, 1977; "Distinguished Service Award to Ralph A. Cook", certificate, April 29, 1977. Dorothy Davis Cook personal papers, Alhambra, CA..

Dorothy Fay Davis Silver Medal

Second possibly to being made a Member of the British Empire for her nursing in Swaziland, was the honor given to Miss Davis in the creation of The Dorothy Fay Davis Silver Medal (see appendix 9).

It is with the greatest pleasure that I inform you that the Nurse Examinations Board of Botswana, Lesotho, and Swaziland has established a silver medal to be styled as above.

This medal [sic] is to be awarded to the nurse who has passed in the Final Professional examination at the first attempt and who has secured the highest marks for the year in this examination provided the aggregate of the marks obtained is not less than seventy-five percent (75%).

It is in recognition of your tremendous contribution to nursing education in Southern Africa that this medal has been established.¹⁰²

Miss Davis was requested to travel to Africa and present the award personally.

With monies from the United States State Department, Miss Davis, who was amazed to be returning to her beloved land, flew Johannesburg on April 20, 1974. From the time of her arrival, her non-sleeping moments were spent in meetings. Miss Davis met with various nurse leaders of South Africa, Swaziland, Botswana, England, and Wales. She met for teas and dinners with missionary friends such as Nel McNabb, Elizabeth Hynd, and Eileen Figge. Miss Davis also shared special moments with former students Norma Dlundu, Mildred Dlamini, and Freda Hlatshwayo, so impressed that these ladies had traveled five hundred miles to see her and share in her day of honor.¹⁰³

Miss Davis also spent up to two hours per day meeting with her Lord. She read the Bible, prayed, and worshiped. She wrote in her journal that, "My heart is greatly

¹⁰² J.L. Molapo, Maseru to Miss Davis, 8 October 1973. TLS. Personal papers of Dorothy Davis Cook, Alhambra, CA. Dr. Molapo was from the Lesotho Ministry of Health.

¹⁰³ Dorothy Davis, personal journal April 21, 1974-May 1974. Personal papers of Dorothy Davis Cook, Alhambra, CA..

burdened regarding the trip to Botswana. My prayer that God will give me great freedom in witnessing and give me a message of hope and inspiration.”¹⁰⁴

Miss Davis traveled on to Gaborone, Botswana to present the award on 26 April. Over one thousand attended the ceremony held in Christ the King Cathedral. The formal speech, given by Dr. J.L. Molapo, reviewed nursing involvements and accomplishments of Miss Davis during her years of missionary service. The first recipient of the Dorothy Fay Davis Silver Medal was Nurse B. Habangana of Botswana. Miss Davis described her as a “nice girl” and Miss Davis felt she personally handled the award presentation well.¹⁰⁵

Back in Johannesburg, eight nursing leaders from South Africa and England hosted a dinner party in honor of Miss Davis. At the conclusion of her “lovely evening”, she humbly wrote in her journal, “I still cannot understand why I am receiving so much honor. I really haven’t done all that much. Still praying God to make me worthy.”¹⁰⁶

On May 4, Miss Davis was thrilled to again walk on the soil of Swaziland. Viewing her journey as a miracle, her days were filled with special reunions with missionaries, nurses, and the townspeople of Manzini. She was able to preach in a number of churches, visit some of the Nazarene clinics, and on her last day in Swaziland, speak at the Nazarene Nursing College graduation. “The crowd was beyond description.

¹⁰⁴ Ibid., April 24.

¹⁰⁵ Ibid.; Department of Health Services Ministry of Health, Labour [sic] and Home Affairs, “Graduation Exercises of the National Health Institute Gaborone, Botswana and the presentation of The Dorothy Fay Davis Silver Medal”, (TD, 26 April 1974). Ceremony program. Dorothy Davis Cook personal papers- scrapbook, Alhambra, CA.

¹⁰⁶ Davis, personal journal April 29, 1974.

Many stood outside the church for two hours- many stood inside the church and many sat on the floor. God helped me speak. It was a beautiful occasion.”¹⁰⁷

Enroute to America, Miss Davis had another special reunion in England. There she was able to have a short visit with the Maclagans, her family during her sister tutor education days. She was able to hear Hamish, one of the young sons for whom she had prayed, preach. It was a heart-warming moment for her. Swazi nurses who were then studying in England also called on Miss Davis at the Maclagan home. “Wonderful fellowship” was enjoyed with Beauty Makubela and Dorothy Mbelu.¹⁰⁸

In the passage of time, the countries of Botswana, Lesotho, Swaziland each developed their own nursing governing bodies and eventually the Dorothy Fay Davis Silver medal ceased to be given. No one is sure when this happened. Many of those interviewed spoke of the medal, however the information received was conflicting.

Mrs. Cook

When Miss Davis first came home from Africa, she was again able to be part of her central family. Her sisters had visited her in Swaziland, but her parents had not. Miss Davis was granted one special year with her father before he died in 1973. Her mother was very healthy and they enjoyed much time together until her death in 1984.¹⁰⁹ Sister Evelyn continues to live hereby and visits her regularly.

In retirement, Miss Davis gained a new family through marriage. When she spoke of being single on the mission field, she stated that singleness helped her tremendously.

¹⁰⁷ Ibid., May 24; Dorothy Fay Davis, Temple City, to My dear friends, TL, September 1974. Personal papers of Dorothy Davis Cook, Alhambra, CA..

¹⁰⁸ Ibid.

¹⁰⁹ Ibid.

“I was able to give my full-time to the teaching of the nurses.” And then she met retired missionary and widower, Ralph Cook at Casa Robles.¹¹⁰

Actually it was a surprise to me. I didn't intend to marry. I had given up that hope, and it was a real hope. I had given up that hope. I said to my friend that if I ever got married, I'd have to marry an old man and I'm not prepared to marry an old man. And Ralph Cook was 73 and I was 63 when we got married. That's pretty old. Anyway, we had a wonderful relationship and a wonderful marriage.¹¹¹

In marriage, Mrs. Cook gained a step-son, Franklin, and grandchildren who still watch over her today. The Cooks traveled together, including a 1980 trip to Swaziland. They were greeted by thirty of her former students, all singing “Let's us praise the Lord”. A letter from the Cooks to friends at home stated, “This was too much for Dorothy and she was nearly overwhelmed and over-joyed [sic] to be back in Manzini to see her 'children'. Dorothy has been busy at the Nursing College teaching and interviewing all the first year students and generally creating a revival atmosphere in the school.”¹¹²

Unfortunately, Mr. and Mrs. Cook had only seven years together. After her husband's passing, Mrs. Cook continued to live at Casa Robles and remained active in the local and denominational missions program.¹¹³ For as she stated, “Once a missionary, always a missionary!”

In 1984 Mrs. Cook was thrilled to attend a Samaritan Hospital reunion in Nampa, Idaho. By 1989 her health failed to the point that she could no longer live independently and Mrs. Cook moved across town to the Episcopal Kensington Home in Alhambra,

¹¹⁰ Ibid.

¹¹¹ Ibid.

¹¹² Ralph and Dorothy, Manzini, to Dear Friends, 25 August 1980. TL. Personal papers of Dorothy Davis Cook, Alhambra, CA.

¹¹³ Dorothy Cook, Temple City, to Dear Brother Gates, Kansas City, 28 June 1984. ALS. Church of the Nazarene Department of World Missions, Kansas City, MO.

California. Today she lives in the constant pain of severe neck and back arthritis in the continuous-care unit. While physically down, she testifies to being spiritually up. Frequent visitors include her dear friends, former missionary nurses Lydia Wilke Howard, Elizabeth Cole, and Nel McNabb.¹¹⁴

Legacy to the Profession

Unique to professional nursing is the vast number of diverse arenas, legislative bodies, and specialties in which and through which one can practice. Beginning with a baseline training or education, nurses have the opportunity to care for the biological, psychological, social, and spiritual health of humanity around the globe. Wherever a nurse may serve, a legacy is created. Miss Davis' legacy to the profession is found in dimensions and results of her service as a missionary nurse in Swaziland.

Dorothy Davis (Cook), missionary nurse to Swaziland from 1940 to 1972, dared to do the impossible and became the "Mother of Swazi Nurses". "Mothers are not identified by fixed biological or legal relationships to children, but by the work they set out to do...To adopt is to commit oneself to protecting, nurturing, and training particular children."¹¹⁵ Miss Davis adopted the women of Swaziland. She actively protected, nurtured, and trained the girls who would be women; the women who would be nurses. She taught them the basics of personal hygiene and housekeeping. She comforted and guided them through their homesickness, their romances, their studies, their successes, and their failures. She worked hard to instill in them a sense of self-esteem, self-worth,

¹¹⁴ Dorothy Cook, Temple City, to Dear Dr. Nees and Department of World Mission, Kansas City, 27 October 1984. ALS. Church of the Nazarene Department of World Missions, Kansas City, MO. Dorothy Davis Cook interviews by author.

¹¹⁵ Sara Ruddick, *Maternal Thinking* (Boston, MA.: Beacon Press, 1995), xi, 51.

and a strong moral character. Miss Davis prayed for and with each of her children, mentoring them in biblical ways and into a personal relationship with Jesus Christ.

As she raised the individual, she raised the profession. Miss Davis applied the same maternal characteristics to her establishment of nursing as a strong and valuable entity in which her children could serve, be proud, be independent, honor God, and carry on without her. When Miss Davis felt the call of God on her heart to missions, what she read in Psalm 2 was that God would give her a special inheritance. The Nazarene Nursing College and Raleigh Fitkin Memorial Hospital in Manzini, Swaziland continue to train Swazi nurses. Today there are no missionaries involved in this endeavor. The children and grandchildren of Miss Davis are Swaziland's nurses, nurse educators, and nurse leaders. They are her inheritance.

Missionary

In her willingness to leave home and go to Africa, Miss Davis personally demonstrated courage, steadfastness, patience, determination, strength, humility, compassion, faith in God, and obedience to God. In her commitment to professionalism, she remained constant in her pursuit of knowledge, in her determination to be a change-agent, and in her advancement and high standards set for nursing education in Swaziland.

Every nurse has a philosophy or ideology through which he or she views the world and nursing practice and that view often becomes a central theme of their legacy to the profession. The dedication that Miss Davis brought to her work as a nurse was firmly grounded in her theological call to be a Christian missionary. While nursing was the method through which she cared for others, Miss Davis never lost sight of her primary purpose for being in Swaziland. Miss Davis knew that she had been called by God to go. The missionary message she consistently shared in the classroom, one-on-one with the

students and patients, and the in pulpit, was the biblical gospel of Jesus Christ. Miss Davis believed she was empowered by the Holy Spirit, and she accomplished great things in the name of God. In service, Miss Davis followed the preacher, teacher, and healer model of Jesus Christ. With this in view, Miss Davis served not within the human confines of a theory of nursing, but within the divine empowerment and possibilities of a theology of nursing. Her thoughts, words, and deeds were continually centered in a vision of God.

In all of this, Miss Davis was not a saint. She was a real person with the challenges and conflicts that are normal in life. However, no implication or documentation was found that Miss Davis ever turned from her walk with God or from her primary purpose for being in Swaziland. In all that was done, Miss Davis lived the theme of her favorite song, "Oh to Be Like Thee" (see appendix 10).

Cultural Sensitivity

Her success as a missionary nurse began with respect for the people that grew into love for the people. It is only in recent years that professional nursing has emphasized the respect of cultural diversity as having a major influence on an individual's interpretation of wellness, illness, disease, environment, care, coping, spirituality, and death. Without the benefit of formal cross-cultural training, Miss Davis was early aware of, and demonstrated a sensitivity to, those to whom she had been sent to serve.

Miss Davis' inculturation went beyond the Church's requirement of learning the language. Miss Davis immersed herself in the nation and the people. She strived to learn the cultural norms and the significance of those norms to her patients and her nurses. She adapted to a new health care system and new health care needs. While never forsaking her personal values or belief system, her process of inculturation required continuous

listening, learning, questioning, processing, evaluating, interpreting, coping, discarding, and accepting.

Also qualifying Miss Davis in the eyes and hearts of the people was how she treated them personally. As the Civil Rights movement slowly progressed in the United States and then apartheid oppressed just beyond the borders of Swaziland in South Africa, Miss Davis held no thought of racial superiority. She did not set herself above or separate from the Swazi. She lived with them, ate with them, laughed with them, cried with them, prayed with them, ministered to them, taught them, loved them. She not only brought the message of equality in Jesus Christ, she lived the message. Though she no doubt dealt with episodic times of culture shock, her cultural sensitivity and personal acceptance endeared her to the people, influencing her ministry and ability to establish nursing in their land.

Educational Leadership

Miss Davis' legacy to the profession is in how she taught the nurses and how she led the training program. She began by personally overcoming the adversity of failure. She earned all nursing credentials as required by law in the United States and the British Empire rule in Swaziland in order to build on the foundation laid by others and establish a nursing program that qualified its graduates for nursing registration. Out of her classroom came the first Swazi woman to become a State Registered Nurse, and under her leadership the Nazarene Nursing College became the first nursing program formally recognized by the High Commission Territories' Nursing Council. Miss Davis set the standard to which other such programs in the region would be compared.

The demands of administration often remove the educator from the current nursing knowledge base required in the classroom and from direct student interaction. However, throughout her years of serving as Sister Tutor, or Principal, of the Nazarene

nursing education program, Miss Davis remained actively involved in the realities of teaching in both the classroom and clinical setting. Miss Davis, whose favorite class was anatomy, began teaching next to an open-air morgue and under a tree. She completed her teaching in a formal school classroom with desks, a laboratory, and a library.¹¹⁶ Miss Davis never let the dusty footpath between the nursing school and the hospital “grow cold”. She was frequently found caring for patients or checking on students as they cared for patients, thus amazing her students with her ability to be “all places at all times”. She instilled in her students such independence and competence that they are the leaders of Swaziland nursing today. Many have gone outside of Swaziland to pursue bachelors, masters, and doctoral degrees in nursing.

Miss Davis served the profession beyond the borders of her program and the country. She identified areas of political and educational need and became actively involved with other nurse leaders in the establishment and function of the High Commission Territories’ Nursing Council, the Nursing Examination Board of Botswana, Lesotho, and Swaziland, the Swaziland Nursing Council, and the Swaziland Nursing Association. For her high standard in all of these endeavors, Miss Davis was honored by her colleagues when the territory’s highest academic award was named the Dorothy Fay Davis Silver Medal.

During her thirty-two years of service, Miss Davis wrote four nursing procedure manuals that were considered the gold standard of the day. She also published a newsletter and the Swaziland Nursing Journal, both of which provided a channel for Swazi nurses to continue to learn and a place for them to develop their own writing skills. This gave the nurses a sense of pride in self and pride in their profession. Miss Davis also wrote numerous articles for the Church of the Nazarene’s denominational

¹¹⁶ Dorothy Davis Cook “When God Calls,” (TD, n.p., n.d.). Personal papers of Dorothy Davis Cook, Alhambra, CA.

magazine. These articles granted those at home who supported her, both financially and in prayer, a window into her work and the work of the Church in Swaziland. After her retirement, Miss Davis summarized the foundation of Swaziland's nursing education in her booklet, Nursing in Swaziland. It is the only known document to exist on this history.

Spiritual Care

Miss Davis' legacy to the profession is manifested in her routine spiritual care of the patients and the nurses. As she advanced the science of nursing, Miss Davis did not abandon spirituality as a vital dimension of nursing care. She did not place her role of missionary at the edge of her nursing, but actively integrated spiritual care into all aspects of nursing, both academically and clinically.

Biblically grounded, the spirituality of Miss Davis was not that of self-transcendence to godlikeness common to nursing literature. As the Church of the Nazarene does not hold itself to be "the way" into heaven, Miss Davis' spirituality was not based in a legalistic mandate for church baptism or membership. With Jesus Christ in her heart, Miss Davis had found forgiveness, love, joy, peace, and hope, and she shared that message at every opportunity. Following the example of Jesus Christ, the patients physical needs were always attended to first. However, no one was deemed well, nurses included, until one was spiritually well. Miss Davis completed a spiritual needs assessment (asked if he/she knew Jesus as Savior), implemented a plan (with permission, shared the gospel), evaluated the intervention (asked if the person accepted Jesus as Savior), and arranged for follow-up care (such as a visit from a local pastor). Miss Davis demonstrated the nursing process in spiritual care and she taught spiritual care as a fundamental component of nursing. Her pastoral ordination aided her in this work.

Nurses need not share Miss Davis' beliefs to learn from her example. Nurses require an understanding of patient spirituality and how to provide spiritual care. As Miss

Davis discovered in Swaziland, in many global cultures there is no separation of spirituality from health. Health care cannot be provided without spiritual care and to care for one is to care for the other. There is a growing body of research to support this concept in all humanity.

Clinical Practice

As a nurse clinician in Swaziland, Miss Davis was an advanced practice nurse. Twenty-five years before the nurse practitioner was born in the United States, Miss Davis practiced nursing with abundant autonomy and independence. Without the benefit of a nurse practitioner education and associated clinical experience, she immediately had the responsibility of patient assessment, diagnosis, management planning, and follow-up care. Miss Davis cared for her patients in the isolation of rural dispensaries and their homes, and in the collaborative setting of the hospital where medical coverage remained minimal. Her midwifery training served to further expand both her nursing abilities and the demand for them.

Toward the Future

While missionary nurses in the past instantly became advanced practice nurses, in more recent years local regulatory bodies have been established in Second and Third World countries. These governing agencies, such as Swaziland's Chief Nursing Officer placed in the Government's Ministry of Health Department, now monitor those who practice within the country and a standard of education and credentialing is maintained. Therefore, the time has come to prepare and send missionary nurses and, in some situations, international health nurses to the field as advanced practice nurses. The next generation of foreign-field nurses need to leave home with a Masters-level nurse practitioner degree. These nurses need to be ready to serve in a community-based

practice where autonomy, independence and advanced clinical skill is required from the start. Curriculum for such a specialty is lacking in nursing education today and the work of Miss Davis provides a grand historical exemplar for such a program.

With the passage of time and the amazing advancements in diagnostic and treatment modalities, an assumption could be made that the nursing practice and curriculum of Miss Davis would be markedly out-of-date. That assumption has some truth in the Western World. However, in many regions of the world, the nursing care taught by Miss Davis is still the fundamental need. As tomorrow's missionary and international health nurse is prepared as an advanced practice nurse, the nurse must also learn to deal with such public health basic needs as community sanitation and pure water supply. The nurse must learn about the diseases of Miss Davis' day. The morbidity and mortality of malaria, tuberculosis, syphilis, leprosy, malnutrition, dysentery, and maternal-child health complications continue to claim the lives of millions around the globe every day. With the exception of the Acquired Immunodeficiency Syndrome epidemic, not much has changed. A more thorough analysis of Miss Davis' nursing procedure manuals might yield a significant practical guide for advanced practice nurses who serve in Third World countries.

An advanced practice missionary nurse curriculum requires administrative content. Like Miss Davis, nurses from the Western World continue to find themselves placed either in isolated practices or in leadership roles. Business management and computer skills are now essential to field assignment.

The cross-cultural issues currently addressed in American university classrooms are inadequate for the realities of life on the mission field. American-based nurses deal with small clusters of culturally diverse patients within the world and health care environment which is the norm for the nurse. Change is usually temporary and adjustment is minimal. Not so with the missionary nurse. This nurse is transposed into

another time and place where nothing can be taken for granted. Every minute dimension of life is altered and must be interpreted differently.

Curricula designed for missionary nurse preparation must include intense study of regional cultures, nurse personality testing, evaluation of coping mechanisms when routine support systems are absent, and transcultural health care experience. While short-term assignments are limited in their need for adaptation, initial issues of cross-cultural conflict are often identified and the inculturation process can be aided at that time.

The missionary nurse also needs a strong theological, missiological, church history, and doctrinal education. The essence of nursing and nursing theory needs to be explored through the eyes of faith and a personal theology of nursing developed. This nurse needs a sense of nursing as ministry where spiritual care is more than abstract procedures learned and practiced. This missionary nurse must, like Miss Davis, see missionary work as the reason for being so called and so assigned by God.

Miss Davis defined a missionary as one who accepts the call of God to go into all the world and preach the gospel. She defined a missionary nurse as one who lives the gospel as she teaches and heals the sick. According to Miss Davis, a missionary changes lives and changes history. The very presence of the missionary and the message that is shared will forever affect the culture in which one is placed. While serving as a missionary, Miss Davis believed that one should remain as professional as possible and at the same time, dare to do the impossible.¹¹⁷

Miss Davis repeatedly stated that her work was team work. With over two hundred nurses appointed for missionary service by the Church of the Nazarene alone,

¹¹⁷ Dorothy Davis Cook, "The Missionary Nurse," (TD, n.p., n.d.). Personal papers of Dorothy Davis Cook, Alhambra, CA.

further research is warranted into the lives and roles of other missionary nurses who answered the call of God to serve in Swaziland and in other global regions. Various methodologies, both qualitative and quantitative in nature, could be applied to such investigations.

The spiritual legacy of Missionary Nurse Davis is evident in personal testimonies of the nurses but only the Lord knows the soul-story of each. Only in that day, as Christians believe when Jesus Christ returns, will those who came to know Jesus as Lord because Miss Davis went to Swaziland as a missionary nurse be known.

With tears running down her now wrinkled face, Dorothy Davis Cook expressed:

My life has been very worth while. You know, it was a great privilege, a very great privilege to have a part in this work. Some people talk about sacrifice. There's no sacrifice, not at all. To know that you are in the center of God's will, nothing is a sacrifice.

I'm so glad I had the privilege of serving in that era. That was a wonderful time.

And I thank the Lord for those who supported me. They are responsible for everything I accomplished. The work has expanded from Swaziland to the far north and you will find our nurses all over the world.¹¹⁸

The work of Miss Davis was finished. Her legacy in Swaziland and to professional nursing carries on.

"Ungdzinwa Nangemuso Ma Davis! Ubuyele Eswatini Ungaphumula!"

(May God go with you Mother Davis, bless, return to Swaziland and have a good rest).¹¹⁹

¹¹⁸ Dorothy Davis Cook interview by author October 8, 1999.

¹¹⁹ Daisy Bhengu, "Contribution to the Nursing Association," Swaziland Nursing Journal 1(5) (1971): 15. Translated October 8, 1999 by Dorothy Davis Cook.



University of San Diego

Committee on the Protection of Human Subjects

Project Action Summary

Action Date: August 9, 1999

Note: Approval expires one year after this date.

Type: New Full Review New Expedited Review Continuation Review

Action: Approved Approved Pending Modification Not Approved

1999-08-032

Susan Elliott SD-N

Dr. Patricia Roth, FA-N

Sister Tutor Dorothy Davis Cook: Missionary Nurse,

Swaziland 1940-1972

Approved: August 9 1999

Note: We send CPHS correspondence regarding student research to the faculty advisor, who bears the ultimate responsibility for the conduct of the research. We request that the faculty advisor share this correspondence with the student researcher.

Modifications Required or Reasons for Non-Approval

None.

The next deadline for submitting project proposals to the Provost's Office for full review is _____.
You may submit a project proposal for expedited review at any time.


Jane M. Georges

Chair, Committee on the Protection of Human Subjects

5998 Alcalá Park, San Diego, California 92110-2492 

Susan Elliott, nurse practitioner, is a Doctor of Philosophy in Nursing candidate at the University of San Diego and a member of the Church of the Nazarene. The purpose of her research is to investigate the life and nursing service of Nazarene missionary nurse Dorothy Davis Cook.

The data obtained from this study may be used as part of a doctoral dissertation and may be used for publication. Results of this study may be contributed to the Archives Department of the Church of the Nazarene and may be utilized in the education of future missionary nurses.

In order to complete this study, Susan would like to interview Nazarene missionary nurses, other missionaries, Swazi nurses and other Nationals, and friends and family of Dorothy Davis Cook.

All interviews will be audio taped and/or visually taped to insure that information shared can be validated as being in the participants own words. Informants names and faces will be utilized. Photographs might be taken. This is not confidential research.

If I agree to participate, I will be asked to share information about missionary nurse Dorothy Davis Cook. I may be asked to share documents and photos. While Dorothy Davis Cook and the Church of the Nazarene have given their support to this study, I understand that my individual participation is voluntary. I may withdraw at any time. If I choose to end the interview, I understand that the researcher will honor my request to not use what information I have provided, to destroy the tape, and to remove me from the research data base.

I understand that there is no expense or financial gain to me now or in the future for participation in this study. I see the potential benefit of this research in the development of a historical record on the life of Dorothy Davis Cook.

The researcher has explained this study to me and answered my questions. If I have other questions about my participation, I may reach Susan Elliott at [REDACTED] or [REDACTED].

There are no other agreements, written or verbal, related to this study beyond those expressed with this consent form.

I, the undersigned, understand the above explanations and, on that basis, I give consent to my voluntary participation in this study.

Print Name

Participant's Signature

Date and Location

Researcher's Signature

Date

PROTECTION OF HUMAN SUBJECTS: 19

Committee on the Protection of Human Subjects
University of San Diego

FORM B - EXPEDITED REVIEW

I (we), the undersigned, agree that the research to be conducted by
Susan Elliott.

entitled Nazorene Missionary Nurses - A Historical Perspective

does not put any human subject at risk, and should be approved by expedited review.

[Redacted Signature]

Faculty Advisor if Researcher is a Student

[Redacted Signature]

College/School/Administrative CPHS Representative

2-13-98
Date

2/13/98
Date

Informed Consent

Susan Elliott, nurse practitioner, is a Doctor of Nursing Science student at the University of San Diego and a member of the Church of the Nazarene. The purpose of her research is to gather historical information on the lives and roles of Nazarene missionary nurses.

The data obtained from this study may be used as part of a doctoral dissertation and may be used for publication. Results of this study may be contributed to the Archives Department of the Church of the Nazarene and may be utilized in the education of future missionary nurses.

In order to complete this study, Susan would like to interview Nazarene missionary nurses, their families and friends, other Nazarenes, other missionaries, and any person with knowledge on the subject. Interviews may last from a few moments to several hours, with breaks as needed. A short questionnaire will also need completed.

All interviews will be audio taped and/or visually taped to insure that information shared can be validated as being in the participants own words. Participants names and faces will be utilized. This is not a confidential research.

If I agree to participate, I will be asked to share about the life and role of the missionary nurse. I may be asked to provide documents. Should I wish to discontinue an interview and resume at another time, I may do so.

While the Church of the Nazarene has given permission for this study, I understand that my individual participation is voluntary. I understand that I may withdraw at any time. If I choose to end the interview, I understand that the researcher will honor my request to use what information I have provided or to destroy the tape and remove me from the research data base.

I understand that there is no expense or financial gain to me now or in the future for participating in this study. I see the potential benefit of this research in the development of a historical record on the lives and roles of Nazarene missionary nurses.

The researcher has explained this study to me and answered my questions. If I have other questions about my participation, I may reach Susan Elliott at [REDACTED].

There are no other agreements. written or verbal, related

to this study beyond those expressed with this consent form.

I, the undersigned, understand the above explanations and, on that basis, I give consent to my voluntary participation in this study.

Print participant's name

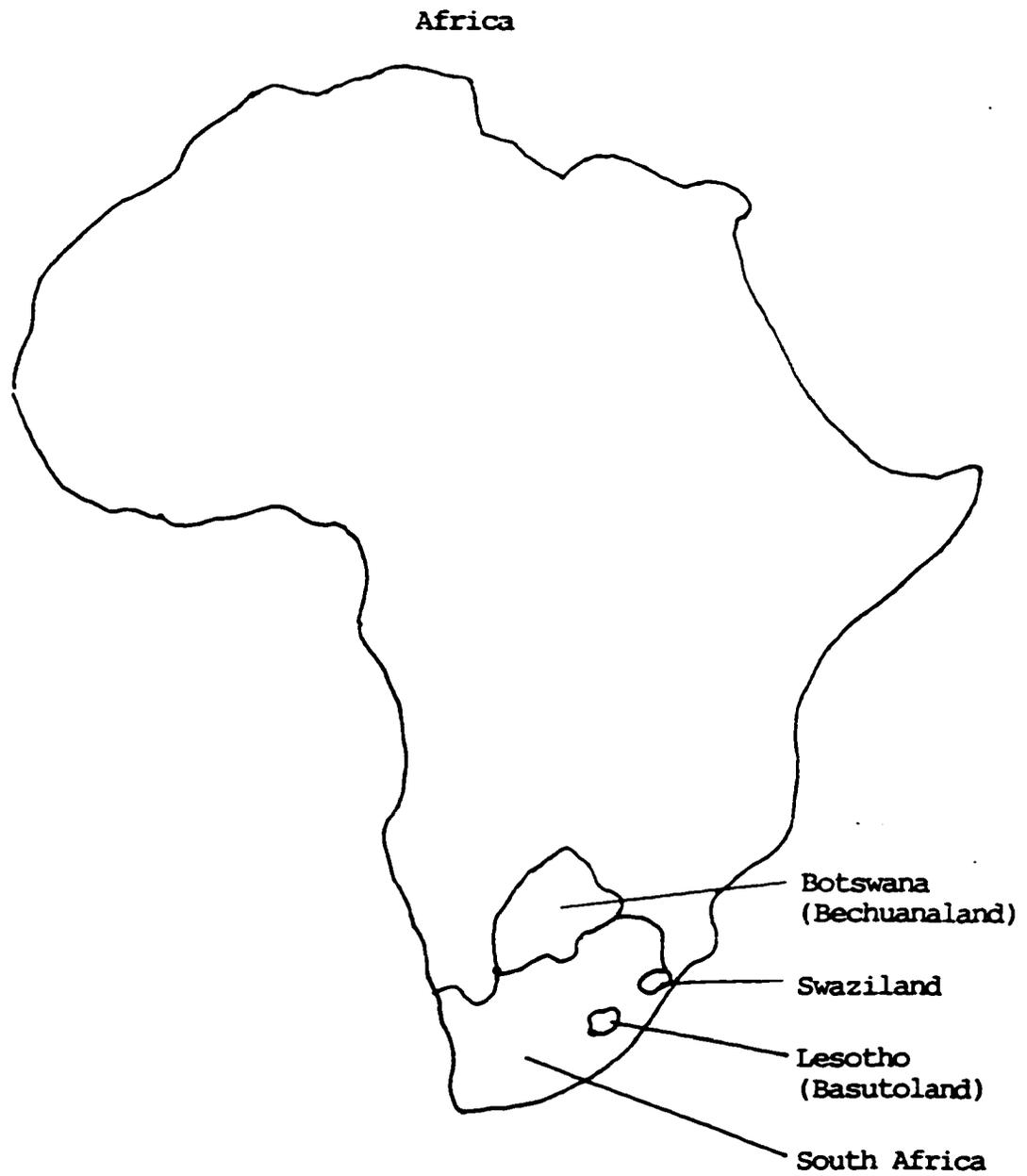
Participant's signature

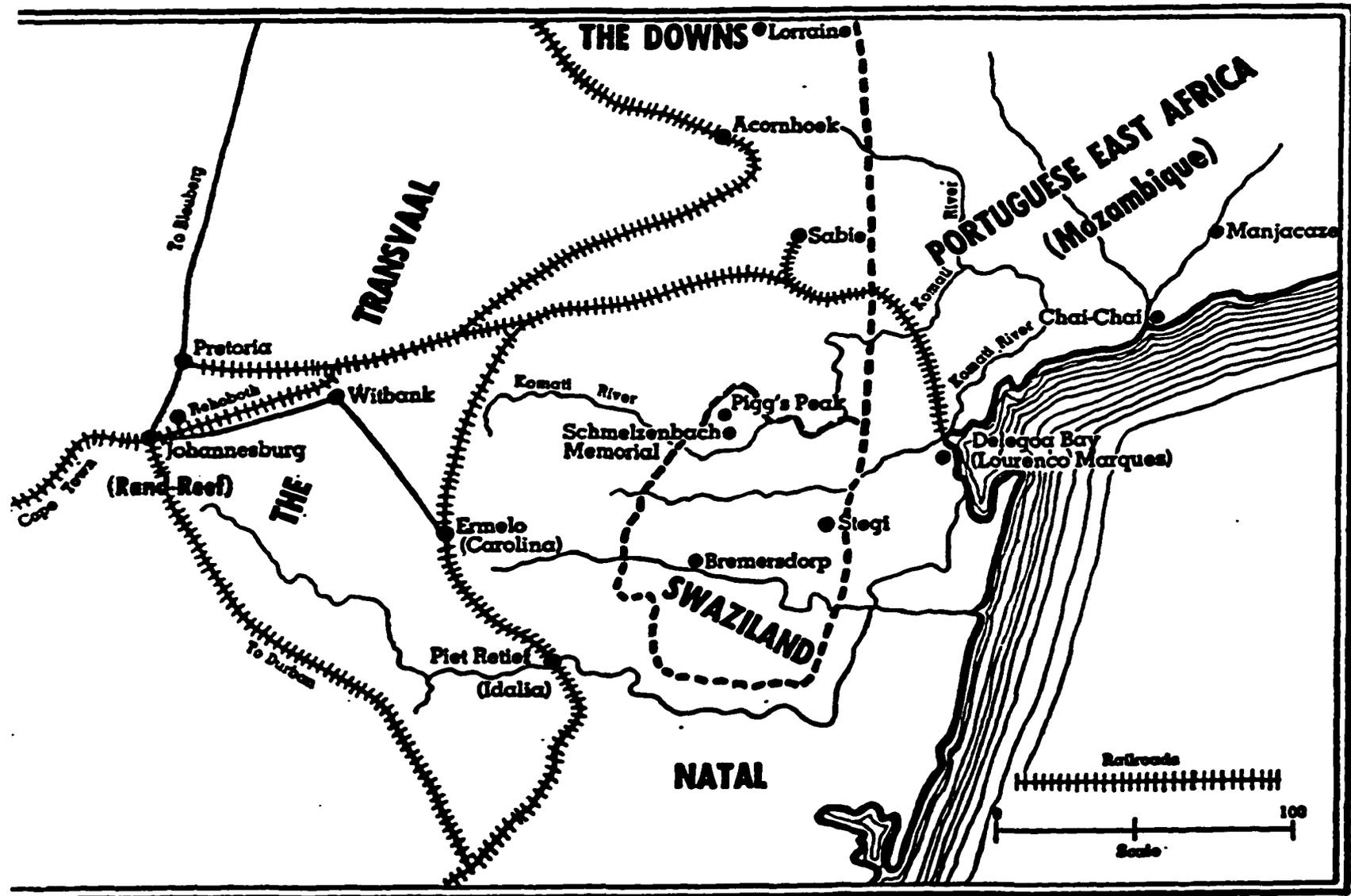
Date _____

Location (city, state, country)

Researcher's signature

Date _____





Louise Chapman, Footprints in Africa (Kansas City, MO.: Nazarene Publishing House, 1959).

Other Nazarene Missionary Nurses in Swaziland

Susan Penn and her husband Joseph arrived in May 1919 and went directly to Piggs Peak. For the next five years, Mrs. Penn did “kraal visiting, teaching, nursing, and dispensary work”. The Penns were then transferred to open new area work across South Africa.¹ In addition to her nursing legacy, several of the Penn children and grandchildren became Nazarene missionaries and pastors in Swaziland, South Africa, and the United States.

Miss Minnie C. Martin, part of the 1919 arrivals, stayed only three months at Piggs Peak before being transferred to start health care at the native kraal called Grace Station. Martin, exhausted from malaria and the heavy work load, spent one year in bed. After much prayer during that time, she returned to service with the new assignment of Director of the Girl’s School at the Peniel Mission Station. She was able to rejoin the hospital nursing staff in Bremersdorp in November 1927.²

Nurse Pearl Jenkins is recorded as serving in Swaziland from 1920-1922 and in other African locations through 1964.³ No data on her early work was found.

Dora Carpenter traveled to Africa with Myrtle Pelley and with only one furlough in 25 years, served as a missionary nurse until 1947. She is known for saving the life of a young boy whose intestines were hanging out of the abdomen and covered with pus. She

¹ Susan Powers Hall Penn, biography page (n.p., 30 November 1955), Church of the Nazarene Archives, Kansas City, MO.

² Amy Kinshaw, Messengers of the Cross in Africa, (Kansas City, MO.: Nazarene Publishing House, ND), 26-27.

³ J. Fred Parker. Mission to the World. (Kansas City, MO.: Nazarene Publishing House, 1985), 655.

did the abdominal repair alone and the patient was without anesthetic.⁴ Most of her writings addressed the spiritual needs and victories of the people.

Greetings from Africa. How glad I am this last day of the old year that I'm saved and in Africa for Jesus' sake. Wouldn't want to be anywhere else for I feel sure of a Divine call to the needy land. The past months have been times of battles and victories in the new hospital.

Surely God has been good to us to give us such a beautiful hospital with as much equipment as we already have. And we hope as time goes on that more will be given to carry on the needy work for these 'other sheep'. And best of all God has been putting His seal of approval upon the work in giving us precious souls among the patients. We not only minister to their physical needs but pray for and with them about this wonderful salvation which put this love in our hearts so we were willing to leave homes and loved ones to tell them about our blessed Savior who had done so much for us.⁵

More nurses came. Sarah Munro served from 1927-1931. Margaret Esselstyn was in Swaziland from 1928-1938 and then in South Africa 1939-1961. Anna Lee Cox was there from 1928 to 1946 and Bessie Seay, transferring from India in 1931, stayed until 1937.⁶

Nurse Estella MacDonald, born in Springfield, Massachusetts, felt called to the mission field at age 13. She graduated from Samaritan Hospital School of Nursing in 1932. She arrived in Swaziland in 1934, spending her first year at RFM and the duration of her time at Piggs Peak.⁷

⁴ Dora Carpenter, Temple City, to Miss Scott, Kansas City, CA., 23 November 1959, TLS. Church of the Nazarene Archives, Kansas City, MO.; Lula Schmelzenbach. The Missionary Prospector (Kansas City, MO.: Nazarene Publishing House, 1936), 93.

⁵ Dora Carpenter, Bremersdorp, to Dr. Reynolds, Kansas City, 31 December 1927, Church of the Nazarene Archives, Kansas City, MO.

⁶ Parker, Mission to the World, 647-9, 659, 664. Esselstyn's children and grandchildren also became missionaries to Africa

⁷ Estella MacDonald Biography Sheet (TM, n.d.). Church of the Nazarene Archives, Kansas City, MO.

Elizabeth Cole arrived in 1935 with leprosy patients on her heart. Soon after her arrival, she went with Dr. Hynd to Enqabaneni and saw “the thrown-away people” with leprosy. That day she prayed “give me this mountain” and waited to open her work. It would be 13 years before the British government allowed the Nazarene leprosy hospital to open in the beautiful mountain area of Mbuluzi. In the early 1950’s, Queen Elizabeth commissioned a BBC movie to be made about her work and in 1960 the Queen made Cole a Member of the British Empire for her outstanding care of the British Swazis.⁸

Following midwifery training in Scotland with Myrtle Pelley, Kathyren Dixon arrived in Swaziland 1938. Dixon was a graduate of the Emanuel Hospital Training Program (1928) and worked as head nurse at Samaritan before going to Swaziland. Like so many others, her major adjustment was working outside of a hospital where there was no physician.⁹

Nurse Jessie Rennie hailed from Scotland. A graduate of the Southern General Hospital, she worked in Bremersdorp from 1939 to 1946.¹⁰

Mary Schmelzenbach, daughter-in-law of Harmon and Lula, started her missionary service in a dispensary. She too had to learn how to make such medications as ointments for burns and scabies, cough syrup, and diuretics. Mary was continually aware that she could bring into her house what she had been exposed to in the clinic. She

⁸ Elizabeth Cole. Give Me This Mountain. (Kansas City, MO.: Nazarene Publishing House, 1959), 14, 27; Elizabeth Cole Retirement Bio, Church of the Nazarene Archives, Kansas City, MO.

⁹ Kathyren Dixon, Bremersdorp, to C. Warren Jones, Kansas City, 10 June 1939, Church of the Nazarene Archives, Kansas City, MO.

¹⁰ Jessie Skinner Rennie, Biography Sheet and “In Memoriam-Jessie Rennie 1920-1981” (TD, n.d.). Church of the Nazarene Archives, Kansas City, MO.

wondered when her son Harmon would get “diphtheria, measles, whooping cough, tuberculosis, scabies, leprosy, anthrax, and other things too numerous to mention”.¹¹

Nurse Lydia Wilke arrived with Miss Davis. Raised in Nebraska, she attended a Bible Training School for one year in Colorado, earned a Bachelor of Arts from Bethany Peniel College, and received her nurse’s training at the Royal Alexandria Hospital in Edmonton, Alberta Canada.¹²

Nurse Ivis Hopper, another Samaritan graduate, served at RFM from 1945 to 1962. At that same time, Mae Thompson Hetrick arrived.

Nurses Agnes and Elizabeth Clark were sisters. Agnes arrived in 1942 at a time when the hospital was in desperate need of help. She was known for her bright smile and excellent work and she served as acting sister tutor while Miss Davis was in England. Elizabeth, served in Swaziland from 1946 to 1953 where she was in charge of the maternity and child welfare departments.¹³

Lorraine Schultz served as a nurse only during her first term. For the next eighteen years she was principal of the Bible School in Mozambique. Little is known about Esther Thomas who served in Swaziland from 1946 to 1972. She did spend a period of her time at the leprosy hospital. Nurse Irma Koffel served there from 1945 to 1985.¹⁴

¹¹ Mary Schmelzenbach. Memories of Africa. (Kansas City, MO.: Nazarene Publishing House, 1993), 29.

¹² Lydia Wilke Howard interview by author, audio/visual recording, Alhambra, CA., 28 February 1998.

¹³ Agnes Clark Biography Sheet and Elizabeth Clark Biography Sheet (n.d., n.p.). Church of the Nazarene Archives, Kansas City, MO.

¹⁴ Lorraine Schultz, Only One Life (Kansas City, MO.: Nazarene Publishing House, 1997); “Another Sister Called to the Lepers,” Nazarene Nursing News 1(2), 4; Irma Viola Koffel Biography Sheet (n.d., n.p.). Church of the Nazarene Archives, Kansas City, MO.

Robert and Lela Jackson have the distinction of being the first missionary nurse couple assigned to Swaziland. They and their two boys arrived there with two years missionary nurse experience in Argentina. Both had graduated from Samaritan Hospital with Lorraine Schultz and Robert was Idaho's first male registered nurse.¹⁵

The Jacksons served in RFM for two years. Robert was in charge of the out-patient department and the pharmacy and Lela's specific role is unknown. Both recorded having worked closely with Miss Davis. The Jacksons then served at Pigg's Peak from 1948 to 1951, running the 11 bed dispensary and the missions station. Due to Robert sustaining a major back injury, the Jacksons returned to the United States in 1951 and entered the pastorate. Lela served as the General President of the Nazarene World Missionary Society from 1980 to 1989.¹⁶

Another nurse was Ruth Matchett. Hailing from Ohio and then Samaritan Hospital, Miss Matchett spent her first five African years at RFM. Giving tri-weekly injections for bilarziasis is the number one disease she recalled. She also saw many patients for kwashiorkor.

So many mothers would waste time at the witch doctor and bring the child to our clinic when critically ill. I treated hundreds of these babies and children-keeping them as inpatients until they recovered sufficiently for the mother to continue treatment at home. I bought skim-milk, ProNutro cereal, and protein soup powder in large bags and sold it at cost price. Many mothers came weekly to buy these foods.¹⁷

Nurse Fairy Cochlin, another Samaritan Graduate, spent the majority of her first two years learning Portuguese. While awaiting permits to enter Portuguese East Africa

¹⁵ Robert and Lela Jackson questionnaire (9 May 1999) for Elliott, "Nazarene Missionary Nurses".

¹⁶ Ibid.

¹⁷ Ruth Matchett questionnaire (May 1998) for Elliott, "Nazarene Missionary Nurses".

(Mozambique), she worked part of 1948 in RFM.¹⁸ Nurse Nellie Storey of Manchester, England, first went to Africa in 1949 as a missionary for the International Holiness Mission. When this denomination merged with the Church of the Nazarene in the early 1950's, Miss Storey began her Nazarene service in Swaziland.¹⁹

Nurse Ruth Brickman had served as a missionary nurse for two years before the communist takeover of China forced her and the other missionaries to leave. She came to Swaziland in 1951 and left in 1961.²⁰

Nurse Mary Bagley was born in Victoria, Australia. A product of Nazarene missions in Australia, Miss Bagley attended Bible School and nurse's training before arriving on the mission field in 1952. Appointed that year was Nurse Grace Alba who only stayed for three years.²¹

¹⁸ Fairy Cochlin biography page (n.d., n.p.). Church of the Nazarene Archives, Kansas City, MO..

¹⁹ Nellie Storey biography page (n.d., n.p.). Church of the Nazarene Archives, Kansas City, MO..

²⁰ Ruth Brickman biography page (n.d.,n.p.). Church of the Nazarene Archives, Kansas City, MO..

²¹ Grace Alba biography page (n.d., n.p.) and Mary Bagley biography page (n.d., n.p.). Church of the Nazarene Archives, Kansas City, MO..

1950 Ralph St.
Rosemead, Calif.
Sept. 23, 1939



C. Warren Jones, D.D.
2923 Troost Ave
Kansas City, Missouri

Dear Dr. Jones:

I have in hand your letter of September 19 asking if I were interested in going to Africa. I can assure you that nothing would make me happier than the privilege of serving God and the church in this field. I feel that it will be an opportunity to answer the constant call of God that has been on my heart the past eleven years.

I shall try to answer your questions as accurately as possible. Before leaving Nampa last May, Dr. Nolte gave me a complete physical examination including all the laboratory tests. The results showed that I was normal in every way. I have not been ill for over eighteen months. At that time I had my appendix removed and my recovery was normal. At present as far as I can determine, I am in perfect health. However, if you wish the results of my former examination verified, I shall be glad to have a complete examination here.

In reference to my ability to co-operate, I can only give my point of view. Since joining the Nazarene Church I have sincerely endeavored to co-operate with my fellow laborers, my pastor and District Superintendent. I have never had any difficulty. I surely would not think of going to the missionary field if I felt that I could not co-operate with the other missionaries and the District Superintendent. However, in order that you might have a fairer view of my ability to co-operate, I have asked my pastor, Rev. J.W. Henry, my District Superintendent, Dr. A.E. Sanner, and the Superintendent of Nurses under whom I worked the last four years, Miss Mary Jackson, to write you and give you their side of the question.

Now as to my spiritual condition--it is the one subject I can speak on with the greatest assurance, for I know that I know that Jesus saves, that the Holy Spirit abides. I was saved when I was twelve years old and sanctified at the age of fourteen. Since that time God has given marvelous victory and I have had no relapse of christian experience. To God be all the Glory. At present I rejoice in the experiences of the past few years that have drawn me closer to the Lord and have revealed to me in a greater way some of the heights and depths and lengths and breadths of the boundless love of God. I have been carrying a burden for the lost and God has given me the privilege of seeing some of my prayers answered.

Looking forward to going to Africa, I am,
Yours in His Service,

Dorothy Davis

Certificate of Appointment as Missionary

General Board of the Church of the Nazarene

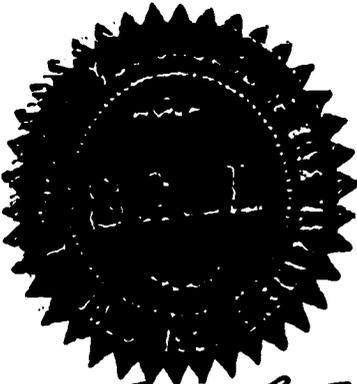
Department of Foreign Missions

2923 Croost Avenue, Kansas City, Missouri

To whom it may concern:

This is to certify that Dorothy Fay Davis
has this day been appointed a Missionary of the Church of the Nazarene by the General Board
of said Church, her field of labor to be Africa

Done at Kansas City, Missouri, this 22nd day of November 19 39



General Board of the Church of the Nazarene

George Van Dusen President

Warren Jones Secretary

Dorothy Fay Davis
Signature of Appointee

1965 NURSE AND MIDWIFE ACT

1. Basic Sciences.

(1) **Social Sciences.** An introduction to Man; Man as a biological, as a human and as a social being. Nursing as a service by man for man.

Sociology: Basic principles of social relationships. Factors and forces which determine the distribution of people and institutions; individual and population problems. Social interaction-all in relation to health. 15 lectures.

Psychology: Human development. Human behaviour [sic], including motivation emotions and the concept of personality. Frustrations, Conflict. Defense mechanisms. Failure of adjustment. Maintaining the vital balance. Psycho-somatic medicine. 15-20 lectures.

(2) **Natural Sciences.**

Basic physics:

(i) Scientific measurement and metric system; henght [sic], mass, weight, density, energy, work and time. Conversions.

(ii) Physical elements; Molecule, mechanic, sound, heat, magnetism, electricity, light, X-rays, pressures.

Basic Chemistry:

(i) Basic organic chemistry.

(ii) Basic inorganic chemistry.

(iii) Reactions.

20 lectures.

(3) **Biological Sciences**

Anatomy, Physiology. 80 lectures.

Basic microbiology and parasitology. 20 lectures.

2. Science and Art of Nursing.

(1) **History of Nursing.**

A short outline of nyrsing [sic] from primitive times to the present day, with some reference to the nursing history of the country in which the school is situated. Objectives of nursing. 8 lectures.

(2) **First Aid.** 12 lectures, 12 Practical Demonstrations.

(3) **Basic Pharmacology.** 20 lectures.

(4) **Dietetics**

(a) Nutrition in relation to the health needs of the community. Health Education technique. 25 lectures.

(b) Diet Therapy. 12 lectures, 6 Practical Demonstrations.

(5) **The Lying-in Woman and the Newborn.** 6 lectures.

(6) **Medical and Geriatric Health Conditions in relation to all Systems, of the Body.** 80 lectures, plus 20 Doctors' lectures.

Surgical Conditions in relation to all Systems of the Body. Therapeutic

Procedures; Operating Theatre Technique and Principles of Anaesthetics

[sic]. 60 lectures, plus 20 Doctors' lectures.

- (7) Gynaecology [sic]. 15 lectures, plus 5 Doctors' lectures.
- (8) Paediatrics [sic]. 20 lectures, plus 5 Doctors' lectures.
- (9) Preventative and Promotive Health, including Principles and Techniques of Health Education. 40 lectures, plus 10 Doctors' lectures.
- (10) Content of Science Principles of underlying all nursing procedures. Observation Procedure. Recording. Communication. Special diagnostic and therapeutic skills. 100 lectures.
- (11) Principles of Professional Practice.
The ethical basis of nursing. The conduct of professional practice. The Nursing Act and the regulations regarding the conduct of registered nurses which shall constitute improper or disgraceful conduct. Personal and Professional responsibilities of a registered person.
- (12) Ward Management and Teaching. 30 lectures.
- (13) Disaster Nursing. 10 lectures.
- (14) Practical Instruction.
Practical instruction [sic] shall be carried out as detailed in the Record of Practical Instruction and Experience for the Certificate of General Nursing issued by the Nursing Examination Board of Botswana, Lesotho, and Swaziland.



GH/201

GOVERNMENT HOUSE,
MBABANE
SWAZILANDPERSONAL AND CONFIDENTIAL

31st December, 1966

Madam,

I am directed by His Excellency, Her Majesty's Commissioner, to inform you that Her Majesty the Queen has been graciously pleased to confer the following honour on you for services in Swaziland -

Honorary Ordinary Member of the Civil Division
of the Most Excellent Order of the British
Empire.

This award will be published on the 1st January, 1966, and is confidential until publication.

I have the honour to be,
Madam,
Your obedient Servant,

Private Secretary

Miss D. Davis,
Nazarene Mission,
MANZINI.

**BUCKINGHAM PALACE**

16th February, 1999

Dear Miss Elliott,

The Queen has asked me to thank you for your letter of 29th January enquiring about Miss Dorothy Davis and Miss Elizabeth Cole who you understand were awarded "honorary British citizenship" following their work in Swaziland as missionary nurses.

I think there may be some confusion here, since both Miss Davis and Miss Cole were awarded Honorary MBEs (Members of the British Empire). At the time of their award (in 1966 for Miss Davis and 1960 for Miss Cole) the ladies were United States citizens, and there is no record on our files that they later obtained British nationality.

Such awards are made by The Queen on the recommendation of Ministers to those who have given outstanding service to a country. In the case of the Misses Davis and Cole, consent for the recommendation would first have been sought from the United States Government. Her Majesty, as Sovereign of the Order of the British Empire, in recognition of the contribution made by each person, gives her approval for appointments to the Order. Both ladies would have received, with their insignia, a Warrant of Appointment signed by Her Majesty.

I hope this information is useful for your research.

The Queen was interested to see from the photograph which you enclosed that your parents celebrated their Golden Wedding in 1996: it must have been enjoyable for them to attend a special service at Westminster Abbey on their anniversary.



MRS. DEBORAH BEAN
Chief Correspondence Officer

Miss Susan Elliott

EARLY SWAZI NURSE LEADERS

Priscilla Titiza Mdiniso trained at RFM. before state registration and completed her degree in nursing at McCord Zulu Hospital in Durban. Her post graduate work was in operating room technique and nursing service administration in London. She served as matron over various government facilities and became the Chief Nursing Officer of Swaziland in 1972.¹

Joyce Vilakazi Mamba entered RFM. at the age of three, abandoned by her witch doctor mother. She was raised by the nurses and then became a nurse. She and her classmates were the first to be registered as students by the High Commission Territories' Nursing Council and become state registered. She worked at the leprosy hospital and then began to teach in the nursing college as clinical instructor in 1952. After study of nursing education at the Royal College of Nursing in London, Mrs. Mamba developed a program to upgrade enrolled nurses for registration.²

Amy Joyce Manthata, born at the Endingeni Mission Station, graduated from Miss Davis' nursing program and became the first Swazi nurse to be appointed to Matron of RFM. Hospital. Beauty Phakathi Makhubela also trained under Miss Davis and she became the first Swazi nurse sent to London for the Sister Tutor's course. Ellen Magongo was the second.³

¹ Dorothy Davis, Nursing in Swaziland, (Florida, Transvaal: Nazarene Publishing House, 1975), 56-57.

² *Ibid.*, 58-59. It is reported that Mrs. Mamba died in July 1999.

³ *Ibid.*, 60-61. In 1999, Mrs. Makhubela had just completed her Ph.D. in nursing as Case Western University.

As previously stated, Eva Manzini Mthethwa was a graduate of RFM., the first registered nurse in Swaziland, and the first to be promoted to Sister. She co-authored the 1946 nursing procedures manual with Miss Davis and was elected by the nursing students to be their representative on the newly formed Swaziland Nursing Council.⁴

Freda Zodwa Hlatshwayo was born in Manzini and was too was raised on the Nazarene Mission Station. She became of the first state registered nurses in Swaziland. As previously stated, Mrs. Hlatshwayo served for many years in the Nursing College both as faculty and then as principal. She also assisted Miss Davis with a nursing procedure manual and became the assistant editor of the Swaziland Nursing Journal.⁵

⁴ Ibid., 57-58

⁵ Ibid., 59.

Citation written by Prof. C. Searle

- Whereas: It was the conviction of DOROTHY DAVIS that nursing education is the key to the development of professional nursing and so to the provision of an adequate health service to the community:
and
- Whereas: she came from her home-land, the United States of America, to serve the people of Southern Africa through service in Swaziland:
and
- Whereas: she devoted herself tirelessly and with distinction for the furtherance of nursing education and to the development of the nursing profession in Southern Africa by:
- serving at the Raleigh Fitkin Hospital and the Nazarene Nursing College, Manzini, Swaziland, as a teacher of nurses and as a friend and succourer of the sick for period of 31 years.
 - serving as a member of the High Commission Territories Nursing Council from ~~its inception~~ until its closure.
 - serving as a member of the Nurses Examination Board of Botswana, Lesotho and Swaziland from its inception until November 1971.
 - serving as a member of the Swaziland Nursing Council from its inception until November 1972.
 - serving as a member of the Swaziland Nursing Association from its inception until December 1972.
 - serving on many committees concerned with nursing and health problems throughout her service in Southern Africa.
 - assisting with the development of nursing education programmes which will ensure that nurses qualified in the countries which are constituent members of the Nurses Examination Board of Botswana, Lesotho and Swaziland would be eligible for registration in many countries outside the borders of their own country.
 - studying international nursing education trends and contributing her wide knowledge of nursing education to the common pool of experience and knowledge of members of the Nurses Examination Board of Botswana, Lesotho and Swaziland.
 - contributing to the establishment of the first professional Nursing Journal in Swaziland, thereby:
 - assisting the professional nurses of that country to develop the literature essential for professional growth and international contact,
 - devoting her great talents and enthusiasm to the cause of health of the people of Swaziland.
 - demonstrating at all times that nursing is a belief in the essential worth of every human being: that it is a desire, indeed a longing to be a worthy servant of mankind and an effective instrument of the science of medicine, that indeed, it is the touch of life itself and is love made visible.

Now Therefore: The Nursing Examination Board of Botswana, Lesotho and Swaziland take pleasure in announcing the establishment of the Dorothy Fay Davis Silver Medal, which has been made possible through the generosity of Barclays Bank International. This medal is being given in recognition of the tremendous contribution made by Miss Davis, in the field of nursing education, in the three countries served by this Board. This medal will be presented annually to the nurse obtaining the highest marks in the final examinations set by the Board.

Dorothy Davis Cook's Favorite Song

"Oh to Be Like Thee"

O to be like Thee, blessed Redeemer-
This is my constant longing and prayer.
Gladly I'll forfeit all of earth's treasures,
Jesus, Thy perfect likeness to wear.

O to be like Thee, full of compassion,
Loving, forgiving, tender, and kind.
Helping the helpless, cheering the fainting,
Seeking the wand'ring sinner to find.

O to be like Thee, lowly in spirit,
Holy and harmless, patient and brave.
Meekly enduring cruel reproaches,
Willing to suffer- others to save.

O to be like Thee! Lord I am coming,
Now to receive th' anointing divine.
All that I am and have I am bringing;
Lord, from this moment all shall be thine.

O to be like Thee! While I am pleading,
Pour out Thy Spirit, fill with Thy love.
Make me a temple meet for thy dwelling;
Fit me for life and heaven above.

Refrain-

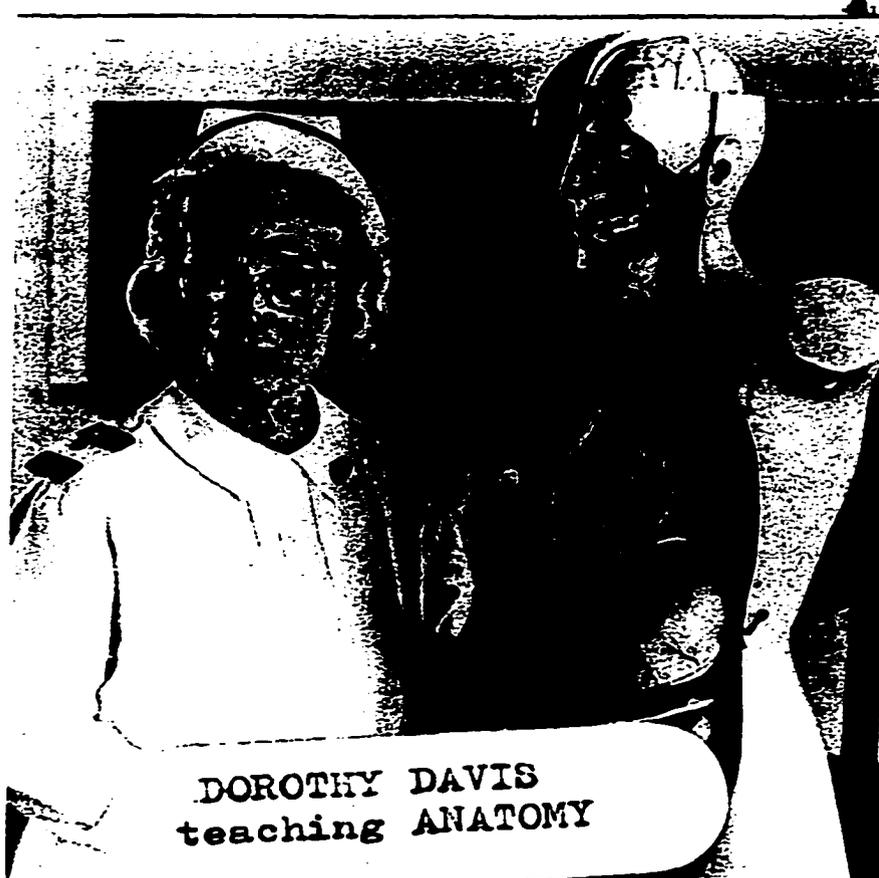
O to be like Thee: O to be like Thee.
Blessed Redeemer, pure as Thou art!
Come in thy sweetness, come in Thy fullness,
Stamp Thine own image deep on my heart.

T. Chisholm and W. Kirkpatrick, "Oh to be Like Thee" Sing to the Lord (Kansas City, MO.: Lillenas Publishing Company, 1993), 490-1. The song was written in 1897.



Miss Dorothy Davis
Swaziland, Africa

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Dorothy Davis personal photo album. Church of the Nazarene Africa Regional Office Archives, Florida, South Africa.



Dorothy Davis personal photo album. Church of the Nazarene Africa Regional Office Archives, Florida, South Africa.

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