A Legacy of Care?

The Biography of Dr Hannah-Reeve Sanders, the first female Chief Medical Superintendent of Groote Schuur Hospital

by

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Leila R. Bloch
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Abstract

Known by the phrase, 'The country girl who did good,' Dr Hannah-Reeve-Sanders was committed to the idea of becoming a doctor from a young age. Through a biographical sketch beginning in 1928 until 1998, this thesis explores the influences that informed her rural Jewish-Afrikaans upbringing in Piketberg. This continues through to her studies in Cape Town and subsequent working life as the first woman to hold the position of Chief Medical Superintendent at Groote Schuur Hospital from 1976 to 1986. Sanders' story, in particular, serves as a critical lens from the perspective of a female doctor into notions of 'achievement' and 'success' within the medical field in South Africa during the middle to late 20th century. By situating Sanders' biographical perspective within the context of the history of South African women in medicine, this thesis brings into relief the tensions between clinical and administrative medicine and the 'costs' of navigating a successful career within a male-dominated profession, as well as an institutional framework under the constraints of external political forces. Through Sanders one can challenge one-dimensional, idealised portrayals of what it means to achieve status as a doctor, by highlighting the gaps and complexities within her life story. This study further illustrates how she ambitiously subscribed to the paradigm of a good doctor from a young age. Hannah's parents' journey to South Africa typifies a South African Jewish migration story. However, it was elements of her Afrikaner identity that would allow her freedom to adapt and lead institutions during her career. From another perspective, Sanders' choice to follow a seemingly unassuming path later into administrative medicine yielded influence and saw her adapt to key historical moments such as the first heart transplant. Bearing in mind the constraints imposed by the provincial government at the time, this study assesses whether she was able to break barriers or to 'toe the line' in her leadership position. With respect to a careful rendering of the historical context, coupled with her later responses in interviews, the study aims to evaluate the extent to which she brought humanising elements and 'integrity' into a 'compromised' institution. It places into relief the environments which influenced her and how she may have influenced her environment. Through her experiences we come to understand issues regarding race, gender, and class in the medical institutions in which she operated, and the extent to which these obstacles determined her responses. Steering clear of hagiography, this study does not seek to idealise or embellish any of her achievements, but rather depict how our subject is situated within the historical context. Sanders'

achievements come to be understood alongside the complex environments from which such ambitions and opportunities to practise medicine emerge. It demonstrates that while there were significant attempts on her part to transcend social and political constraints, she remained accountable to structures of power which may have influenced her actions.

Opsomming

Bekend as, “Die plattelandse meisie wat goed gedoen het,” was Dr Hannah-Reeve Sanders sedert haar kinderjare toegewy aan die idee om dokter te word. Deur ‘n biografiese skets wat in 1928 begin, word die invloede van haar landelike Joods-Afrikaanse opvoeding in Piketberg verken. Haar studies aan die Universiteit Kaapstad, sowel as haar loopbaan as die eerste vroulike Hoof Mediese Superintendent by Groote Schuur Hospitaal (1976-1986) word hierna verken. Sanders se besondere storie dien as ‘n kritiese lens vanuit die perspektief van 'n vroulike dokter, veral met betrekking tot idees van ‘prestasie’ en ‘sukses’ binne die Suid-Afrikaanse mediese veld tydens die middel tot laat 20ste eeu. Deur Sanders se biografiese perspektief binne die konteks van die geskiedenis van Suid-Afrikaanse vroue in die mediese beroep te plaas, belig hierdie studie: die spanning tussen kliniese en administratiewe medisyne; die ‘prys’ van ‘n suksesvolle loopbaan binne ‘n manlik gedomineerde beroep; 'n institusionele raamwerk onder die beperkings van eksterne politieke magte. Deur Sanders kan ‘n mens eendimensionele, geïdealiseerde uitbeeldings van wat dit beteken om status as ‘n dokter te bereik uitdaag, deur die gapings en kompleksiteite in haar lewensverhaal uit te lig. Verder illustreer hierdie studie hoe sy sedert haar jeugjare ambisieus geidentifiseer het met die paradigma van 'n goeie dokter. Hannah se ouers se immigrasie na Suid-Afrika is ‘n tipiese Suid-Afrikaanse Joodse migrasie storie. Dit ten spyt was dit juis elemente van haar verworwe Afrikaner identiteit wat haar die vryheid gegee het om met instellings te identifiseer en daarin leiding te neem. Vanuit ‘n ander perspektief, het Sanders se besluit om ‘n skynbaar beskeie pad na administratiewe medisyne te volg haar invloed besorg en getoon hoe sy aanpas by belangrike historiese oomblikke, soos die eerste hartoorplanting. Die studie poog om aan te toon of sy beduidende verandering kon teweegbring deur haar leierskapsposisie en of sy die status quo gehandhaaf het – met inagneming van die beperkings wat die destydse provinsiale regering opgelê het. Met inagneming van historiese konteks in tandem met haar reaksies in latere onderhoude poog die tesis om te evalueer in watter mate sy daarin geslaag het om elemente van menslikheid en integriteit na “gekompromiteerde” instellings waarby sy betrokke was te bring. Dit belig die omgewings wat haar beïnvloed het en hoe sy moontlik haar omgewings beïnvloed het. Deur haar ervarings kry ons begrip vir kwessies rakende ras, geslag, en klas in die mediese instellings waarin sy gefunksioneer het, en die mate waarin hierdie struikelblokke haar reaksies bepaal het. Hierdie studie wil hagiografie vermy, en poog daarom om nie enige van haar prestasies te idealiseer of te oorskat nie, maar eerder om dit uit te beeld

binne die historiese konteks waarvan sy deel was. Sanders se prestasies word verstaan binne die komplekse omgewings waaruit sulke ambisies en geleenthede om medisyne te beoefen, voortspruit. Die tesis demonstreer dat terwyl sy beduidende pogings aangewend het om sosiale en politieke beperkings te oorkom, sy aanspreeklik gebly het teenoor magstrukture wat haar optrede moontlik beïnvloed het.

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Introduction

Rationale for the study

In 2014, Margaret Hoffman (Emerita Professor of Public Health at the University of Cape Town) and social historian Adrienne Folb conducted an interview with Dr Hannah-Reeve Sanders with an accompanying collection of photographs. During this period, conversations with Dr Sanders revolved around a potential exhibition on the history of Jewish doctors in South Africa, to be held at The South African Jewish Museum (SAJM). Initially the team considered the title "my son the doctor" an allusion to the notion – widely accepted in Jewish communities – that being a doctor was a marker of great accomplishment.[1] The concept sparked several debates, most significantly regarding the female presence in South African medicine, and the dearth of collections in the Jewish museum archives documenting the contributions of professional women in South Africa.[2] Five years after the exhibition was proposed, the photographs and interviews contributed by Dr Sanders were revisited and the "biographical life of these documents" became a starting point for a full investigation into her life and work.[3] Choosing Dr Sanders as a subject for a biography has historical significance for several reasons.

A study of Dr Sanders' life allows one to connect her path to becoming a doctor within the turbulent history of South Africa through an assessment of her choices and relationships as well as the institutions to which she was affiliated. The records of Dr Sanders' life can be traced in various archival collections: The University of Cape Town (UCT), Groote Schuur Hospital (GSH), The South African Jewish Museum and Drexel University, USA. While Sanders' impact on GSH is documented in *At The Heart of Healing* (2008),[4] to date, no *complete* formal

[1] Howard Phillips, in conversation with the author about Jewish doctors in South Africa, 6 March 2014; Paul Rudnick, "'Mom is he Jewish? 'Me: 'No' Mom: 'Is he smart?'", *The New York Times*, 7 November 2017.

[2] "South African Jewish Museum Archives" [SAJMA], https://sajmarchives.com/.

[3] [SAJMA], Non digitised notes from initial plans for the *My Son the Doctor* exhibition at the South African Jewish Museum, 2014, kept in a group repository of miscellaneous files and reports entitled: Jewish doctor exhibition folder; Marijke du Toit, in conversation with Leila Bloch, Cape Town, 6 May 2019. Du Toit discussed the term "Institution as Biography".

[4] A. Digby, H. Phillips, H. Deacon, and K. Thompson, *At the Heart of Healing: Groote Schuur Hospital, 1938-2008* (Cape Town: Jacana, 2008).

academic or biographical study on Hannah-Reeve Sanders' life has been undertaken nor has an entire critical study of the role she played in healthcare systems been appraised. This work, in part, hopes to fill a few gaps and offer a perspective into institutions from a female doctor's point of view.

Hannah-Reeve Katzeff is referred to as Hannah in the thesis until the date she qualifies as a doctor, after which she is referred to as Dr Sanders. Hannah-Reeve Katzeff Saphra Sanders would adopt many professional and personal names throughout her life, including her titles as doctor, her married name, as well as nicknames,[5] at times for the sake of adaptation, at others out of endearment or respect. Socially, her past allows for a complex interpretation of adaptation across several environments, including her Jewish and Afrikaner upbringing in Piketberg.[6] Sanders entered the medical field after growing up in a sheltered, predominantly masculine environment with a strong National Party (NP) presence. The young Hannah took a very decisive approach towards studying medicine, despite her father's reservations. Emerging from a close-knit family environment of privilege and relative affluence, she availed herself of opportunities which allowed her ambitions to be cultivated. She was able to access the medical field, which for someone in her position was a realistic prospect. This biography looks critically at the way in which her social and economic status allowed her to navigate various social and political obstacles. It can be understood as a socio-historical biography of "the individual-as-exemplar," (as opposed to, say, a political biography) although politics cannot be avoided.[7]

Choosing Dr Sanders as a subject brings the question: who is worthy of having a biography written about them? On the one hand biographies can be reserved for those stories of men and women, who encounter intense conflict or great achievement.[8] While Sanders did inhabit a very public persona and accumulate great honours, this is the life of a person in the highly contested environment of South Africa. Sanders' history as a female doctor is situated among

[5] South African Jewish Museum Archives [SAJMA], Adrienne Folb interview with Hannah-Reeve Sanders, 31 August 2014.

[6] Piketberg Museum Collection [PMC], H-R Sanders, "A Glimpse into Recollections of the Past – and in Honour of the Fifth Commandment", *Temple Israel Newsletter* (2005).

[7] A. L. Landman, "From Volksmoeder to Igqira: Towards an Intellectual Biography of Dr Vera Bührmann (1910-1998)" (MA Thesis: University of the Western Cape, 2019), 8; S. Weiland, "Biography, rhetoric, and intellectual careers: Writing the life of Hannah Arendt." *Biography* 22, no. 3 (1999), 370–98.

[8] As reflected in K. Watson, "When the ordinary is extraordinary", in J. Healy (ed.) *Strength of mind: 125 years of women in medicine* (University of Melbourne: Medical History Museum, 2013), 37.

other biographies of South African women before her time. She was neither the first female doctor to qualify in South Africa, nor did she make any noteworthy medical discoveries. There are the early histories of female doctors such as Dr James Barry, the first woman doctor to work in South Africa who had to masquerade as a man in order to exercise her profession; or, Dr Elsie Chubb, "the first woman doctor to obtain an appointment in the Cape Education Department as Medical Inspector of Schools."[9] Biographical work written on female doctors has taken a few turns. For example, *Married to Medicine* (2016) by Jack and Gordon Metz and later biographical work, for example, by André Landman on Vera Bührman, call into question the implications that may arise from rendering an individual's life history.[10]

The approach followed in this thesis is rooted in the notion that all lives to some extent or another are worthy of biography. Sanders serves as a conduit into a particular period within the medical world, within the context of changing opportunities for women's career pursuits in the twentieth century.[11] Sanders actions, however subtle, in compromised institutions, are as much a critical reflection on constrained and problematic circumstances of the time as they are detailed accounts of her influences by, and in turn, on the hospital system. This thesis is neither an attempt to idealise Sanders as the subject, but nor does it exclude the quotidian. It thus makes room for corroboration of evidence in the portrayal of her life, allowing us to address the question of how and to what extent she became 'successful'. Holding fast to her ambitions often within predominantly masculine environments, steeped in the particular racialised politics of the time, she as far as possible chose to use her institutional power to inaugurate changes. The vast majority of interviews from colleagues and friends depict an innocuous, neutral image of her, and personal anecdotes help to establish a clearer picture, but the details of her personal life generally remain hidden. There are those who claim that she was in part responsible for easing racial segregation of the wards at Groote Schuur Hospital before official legislation.[12] Two other major life-choices were of particular significance, namely, following

[9] H. Deacon, H. Phillips, and E. van Heyningen, *The Cape Doctor in the Nineteenth Century: A Social History* (New York: Rodopi, 2004), 91, 114; UCT Libraries, "Guide to the Manuscripts in the University of Cape Town Libraries. Consolidated Version" (Cape Town: UCT Libraries, (June 2013), 57.

[10] J. Metz and G. Metz, *Married to Medicine: Dr Mary Gordon, Pioneer Woman, Physician and Humanist* (Johannesburg: Adler Museum of Medicine, Faculty of Health Sciences, University of the Witwatersrand, 2016); A. L. Landman, "From Volksmoeder to Igqira".

[11] V-S. Belling, "Recovering the Lives of South African Jewish Women During the Migration Years, c1880-1939" (PhD diss., University of Cape Town, 2013), 9.

[12] K. Gottschalk, "Hero against hospital apartheid omitted," *Cape Argus*, 1 February 2018.

the path of administrative medicine as well as clinical medicine, and the choice to remain in South Africa and not go overseas.

Literature review

This thesis draws on primary sources to guide the narrative and shape the story of Dr Sanders' life, while drawing on several other theoretical sources derived from a wide range of subjects: from medical history, writing about women's lives, to biography writing itself.[13] The biography also brings together themes such as inter-cultural adaptation, socio-political, gender issues, and decision-making, within the medical field. In short, insofar as these themes relate to Sanders, they refer to a cluster of elements related to the skills of leadership. Dr Sanders' biography also looks at the achievement of doctors and their supposedly 'elite' standing in society.[14] Notions of the heroic doctor have been explored by South African authors such as Harriet Deacon, Howard Phillips, and Elizabeth van Heyningen.[15] Their collection of essays, *The Cape Doctor,* interrogates the role of doctors and their influence on South Africa's healthcare institutions highlighting how medicine is connected to colonial expansion and has ultimately led to the marginalisation of indigenous medical knowledge.[16] In so doing, they challenge preconceived notions and idealisations of the figure of the doctor in society.[17] The article by Michelle Pentecost and Thomas Cousins, "The Good Doctor", is also a key reference for this study which explores notions around the "figure of the doctor in animated debates around public sector medicine in contemporary South Africa."[18] Furthermore, Vanessa Noble also addresses these notions in her paper, "'People Wherever I Go Believe that I am a Doctor, but in Thinking that

[13] W. F. Bynum and R. Porter, *Companion Encyclopaedia of the History of Medicine*, Volume 1 & 2 (London: Routledge, 1993); S. Ware. "Writing women's lives: One historian's perspective." *The Journal of Interdisciplinary History*, 40 no. 3 (2010), 413–35; R. Rotberg, "Biography and historiography: Mutual evidentiary and interdisciplinary consideration", *The Journal of Interdisciplinary History,* 40 no.3 (2010), 305–324.

[14] H. Phillips. "'A move for the better': Changing health status among Jewish immigrants in Cape Town, 1881–1931", *Journal of Ethnic and Migration Studies* 32 no. 4 (2006), 591–601; M. Pentecost and T. Cousins, "'The Good Doctor': The making and unmaking of the physician self in contemporary South Africa", *Journal of Medical Humanities* (2019), 1–12; G. Lund, "'Healing the Nation': Medicolonial discourse and the state of emergency from Apartheid to Truth and Reconciliation", *Cultural Critique,* 54 (Spring, 2003), 88–119.

[15] H. Deacon, *et al* (eds.) *The Cape Doctor in the Nineteenth Century.*

[16] As discussed in A. Digby, *Diversity and Division in Medicine: Health Care in South Africa from the 1800s - Volume 5 of Studies in the History of Medicine* (Peter Lang, 2006), 345.

[17] T. Jones, "Review of Harriet Deacon, Howard Phillips, Elizabeth van Heyningen," eds. *The Cape Doctor in the Nineteenth Century: A Social History*, *H-Net Reviews in the Humanities & Social Sciences,* (March, 2005), 1–4.

[18] M. Pentecost and T. Cousins, "'The Good Doctor': The making and unmaking of the physician self in contemporary South Africa", *Journal of Medical Humanities,* (2019), 1–12.

they Flatter Me …': Black Community Health Intermediaries in South Africa, 1920-1959."[19] By focusing on the experiences of different "western trained black health" intermediaries in the first half of the 20th Century Noble highlights the hierarchical nature of medicine and complexifies the reception of doctors within society.[20] Sanders' experiences are situated in a much broader history of medicine and achievement and at times exploitation with the South African Medical world.[21]

The approach to writing women's biographies further opens the discussion regarding the tension between personal and public realms. Noble, in her 1997 Master's thesis placed a group of five South African women and their achievements at the centre of her study.[22] She addresses the fact that history is predominantly written from a masculine perspective and argues that, "to understand the role of different women, and the history of gender relations in South Africa" the biographer must "examine the opposing and contradictory forces located in both the domestic and the public sphere."[23] Feminist biographer, Susan Ware, in *Writing Women's Lives* (2010) emphasises the fact that the personal is always political in the writing of feminist biographers.[24] Ware argues that women's "public lives rarely unfolded in straightforward ways; they were often complicated by struggles to obtain an education, and productive work, or escape the expectations of traditional female roles and other distractions, like marriage or motherhood."[25] In *The Female Complaint* (2008) Lauren Berlant argues that the autobiographical is not necessarily personal, but rather a reflection of a collective experience.[26] Berlant problematizes the idea of focusing on individual life while excluding one's story, which

[19] V. Noble, "'People Wherever I Go Believe that I am a Doctor, but in Thinking that they Flatter Me…': Black Community Health Intermediaries in South Africa, 1920-1059," *Historical and African Studies Seminar Paper* (16 May 2001).

[20] *Ibid.*

[21] *Ibid.*, 1.

[22] V. Noble, "'Ruffled Feathers': The Lives of Five Difficult Women in Durban in the 20th Century. A Study of the Lives and Contributions of Mabel Palmer, Killie Campbell, Sibusisiwe Makanya, Dr Goona, and Phyllis Naidoo" (Honours Thesis: University of KwaZulu Natal, 1997).

[23] *Ibid*.

[24] S. Ware, "Writing women's lives: One historian's perspective." *The Journal of Interdisciplinary History*, 40, no. 3 (2010), 414.

[25] *Ibid.*, 417.

[26] L. Berlant, *The Female Complaint: The Unfinished Business of Sentimentality in American Culture* (Durham: Duke University Press, 2008), viii.

is always a "part of something social."[27] She challenges sentimental ideas regarding what we value in terms of experience in life-writing and her notion of "intimate publics" invites the reader to shift away from "sensationalism" and consider what is a valuable life story.[28] Some of the key themes in this biography reflect this tension between the public–private in Sanders' position as a woman operating within a male-dominated profession. As Liz Walker, following the work of Morantz-Sanchez, emphasises, in her writing on gender, race, and professionalisation of medicine in South Africa, the "late nineteenth and early twentieth century medical women managed to secure a place in medicine by creating a professional role that bridged the gap between public and private."[29] Walker applies experiences relating to North American female medical professionals to the South African experience and, again drawing on Morantz-Sanchez, "suggests that medical women to a very substantial degree colluded in, shaped and crafted the terms of their access to and inclusion within the profession."[30] In particular, she argues that women doctors traded on perceived "natural ability as healers" as a means of entering into the medical field.[31] In general, Walker looks at the "gendered closure of professions" arguing that professionalisation is not a fixed state.[32] Sanders' story is not dissimilar to these other experiences of women entering the medical field. Take for example the British Elizabeth Blackwell, who was denied the ability to practise in male-dominated hospitals. She later became the "first woman to add her name to the UK Medical Register and she inspired Elizabeth Garrett Anderson, the first woman to qualify in medicine in the UK."[33] Sanders' 'achievements' and 'success' work in contrast to the broadly noted global context of predominantly male workers, who relied on "a vast workforce of [female] helpers, regarded as intellectually inferior but altruistically superior" and led, for example, to a "rise of professional nursing" that "freed doctors to pursue the 'pure' objectives

[27] *Ibid*., x.

[28] *Ibid*., 5.

[29] See R. M. Morantz-Sanchez, *Sympathy and Science: Women Physicians in American Medicine* (New York and Oxford: Oxford University Press, 1985); L. Walker, "'They heal in the spirit of the mother': Gender, Race and Professionalisation of South African Medical Women", *African Studies,* 62, no. 1 (2003), 100.

[30] *Ibid.*

[31] *Ibid*., 99.

[32] *Ibid.,* 100.

[33] W. Moore, "Elizabeth Blackwell: Breaching the barriers for women in medicine", *The Art of Medicine,* 397, no. 10275 (2021), 662–663.

of laboratory medicine."[34] Another trend applicable to Sanders' story is the nature of "high status professions," according to social historians Joan Brumberg and Nancy Tomes.[35] They argue that the idea of "philosophical abstraction and distance from human complications characterize their élite cadre."[36] This insight dovetails with Michel Foucault's *Birth of the Clinic* (1963) and his famous concept of the medical "gaze".[37] The notion describes how doctors orientate patients within a biomedical paradigm, exempting the personal elements of their story. The field of medicine thus creates an abusive power differential that focuses on the doctor rather than on the patient.[38] Foucault thus, brings to light the tensions between doctors and patients, emphasising the fact that the medical field is never truly divorced from the political.

Lastly, the writing of the German philosopher, Hannah Arendt, can be incorporated into the theoretical basis of this biography on several levels, opening the discussion to some of the philosophical and sociological factors as well as the process of biography writing from a female perspective. Arendt records the psychological elements in biography writing as well as the reporting of facts. She explains how "the pride of the individual rests within the emotive, narrated reality as well as the evidential."[39] In one of Arendt's earliest works, *Rahel Varnhagen: The Life of a Jewes*s, Arendt discovered Varnhagen's (1771-1833) writings and began to reimagine Varnrhagen's inner life as she wrote her biography in the 1920's.[40] Writing Varnrhagen's biography was her first exploration of German-Jewish identity and the possibility of Jewish life in the face of unimaginable adversity. On a broader theoretical level this biography also bears in mind Arendt's notions such as the 'banality of evil,' which demonstrates that a subject's actions cannot be evaluated in ignorance of the historical context. An example of this would be Arendt's fastidious attention to the context of Adolf Eichmann's actions when she covered the Eichmann trial for *The New Yorker* in Jerusalem in 1961, and

[34] J. J. Brumberg and N. Tomes, "Women in the professions: A research agenda for American historians", *Reviews in American History*, 10, no. 2 (1982), 288.

[35] *Ibid.*

[36] *Ibid.*

[37] M. Foucault, A.M. Sheridan (trans.) *The Birth of the Clinic* (London: Routledge, 2003). First published as *Naisssance de la Clinique* (France: Presses Universitaires de France, 1963).

[38] D. Misselbrook, "'Foucault' in Out of Hours: An A–Z of Medical Philosophy", *British Journal of General Practice* (June 2013), 312.

[39] H. Arendt, *Rahel Varnhagen: The Life of a Jewess* (Johns Hopkins University Press, 1997), 187.

[40] *Ibid*.

subsequently published, *Eichmann in Jerusalem* (1963).[41] Dr Sanders' dilemma, by contrast, was that she was "doing good" in an ethically and politically compromising situation, which she had inherited, whereas in the case of Eichmann he arguably *chose* to be an active participant in a recently arrived-at orthodoxy, namely Nazism. He dispensed with – or was wilfully ignorant of – the ethical dimension of his position within the functionary of the system. Whereas Dr Sanders realized that she was compromised simply by virtue of being a white person in authority, but within her powers she tried to counter the deleterious effects of the prevailing political situation; she did not exacerbate it. The tensions between action and passivity in light of unjust circumstances in society has informed some of the thinking regarding judgments and ways in which individuals have conducted themselves over time.

Within South Africa, biographies are known to be one of the most popular forms of nonfiction.[42] The biographies mentioned by Danelle van Zyl-Hermann written in post-apartheid South Africa, grapple with the complex narratives of South African individuals with a rigorous approach that does not seek to idealise.[43] Van Zyl-Hermann provides us with a sample of such biographies. Whether referring to Lindie Koorts's "cradle-to-the-grave" biography entitled *DF Malan and the Rise of Afrikaner Nationalism* (2014), or Jacob Dlamini's struggle story, *Askari: A story of collaboration and betrayal in the anti-apartheid struggle* (2014), following Glory Sedibe, or Jonny Steinberg's portrayal of a refugee in *A Man of Good Hope* (2014), these complex narratives address contemporary issues in South African biography writing with an emphasis on individual choices and the way these occur in varying contexts.[44] Trends within the historiography of medicine in South Africa have generally focused on public health and broader social histories of medicine in the Cape, apparently without biographical focus on those undertaking clinical work. However, according to Digby,

[41] Eichmann was an infamous member of the Nazi bureaucracy, in particular, he was the head of section IV B 4 of the *Reichssicherheitshauptamt*, the combined office of the security service of the Nazi party and the security police of the Nazi state (*Gestapo*). In his role, he was at the head of those engaged with the coordination and deportation of Jews to the concentration camps to carry out the 'Final Solution' of the Jewish question. The Jerusalem District Court, to which Arendt was an observer, sentenced Eichmann to death on 12 December 1961. For more of these particulars see K. Ambos, "Adolf Eichmann", in W. A. Schabas (ed.) *The Cambridge Companion to International Criminal Law* (Cambridge: Cambridge University Press, 2016), 275–294.

[42] D. van Zyl-Hermann, "History Made Human: Confronting the Unpalatable Past through Biographical Writing in Post-Apartheid South Africa", *African Historical Review,* 47, no. 2 (2015), 115–131

[43] *Ibid.*

[44] *Ibid*., 118; L. Koorts, *DF Malan and the Rise of Afrikaner Nationalism* (Cape Town: Tafelberg, 2014); J. Dlamini, "Life Choices and South African Biography", *Kronos,* 41, no. 1 (Nov 2015): 339–346.

a few individual biographical works do stand out; such as the correspondence of Jane Waterston (1843-1932), who came after James Barry and was the first registered female doctor to arrive in the Cape.[45]

Methodological challenges for the research

Form of the biography

Historical and political geographer, Jake Hodder, makes a distinction between biography as a subject and the methodology used in construction of a biography. In general, however, he suggests that biography offers a type of coping mechanism to "deal with abundance" of information.[46] This could be applied to this thesis, in the sense that the task requires a distillation of information to create an accurate portrayal of an individual life. After consideration, the structure of this exploration of Dr Hannah-Reeve Sanders' life follows a firm commitment to chronology. However, this is not the only methodology for biographical writing. Theories of "temporality" can challenge the biographer's ideas about the way in which biography should be written.[47] Moving from a purely individual focus, archaeologist Kristján Mímisson brings together ideas such as "multi-temporality" and "materiality" to biography writing.[48] Using the Heideggerian notion of *Dasein* (being-there) he supplies the ways in which we interpret biography by starting with the proposition that biographies can be viewed in multi-faceted ways. In this sense, "being", is the *interpretation* of the individual precisely as much a part of their circumstances and relationship to their environment as opposed to merely being an exposition of their experiences which works in a linear process. The 'idea' of the individual being written about extends on a temporal level into presences that are "simultaneously of the past and present as they are rooted in the future."[49] What he is referring to is the individual as an 'idea' of possessing as much significance as the experiences of the said person in changing

[45] A. Digby, "The Medical History of South Africa: An Overview", *History Compass,* 6, no. 5 (September 2008), 1194–1210; L. Bean and E. B. van Heyningen, (eds.), *The Letters of Jane Elizabeth Waterston, 1866-1905* (Cape of Good Hope: The Van Riebeeck Society, 1983); E. B. van Heyningen, "Jane Elizabeth Waterston - Southern Africa's First Woman Doctor", *Journal of Medical Biography*, 4, no. 4 (1996), 208–213.

[46] J. Hodder, "On Absence and Abundance: Biography as Method in Archival Research", *Area (Oxford, England)*, 49, no. 4 (2017), 452-459.

[47] C. Leccardi, "Facing Uncertainty: Temporality and Biographies in the New Century", *YOUNG*, 13, no. 2 (May 2005), 124.

[48] K. Mímisson, "Twisted Lives: On the Temporality and Materiality of Biographical Presences", *International Journal of Historical Archaeology*, 16, no. 3 (2012), 456.

[49] *Ibid.*, 461.

temporal contexts. For example, and to relate this back to Dr Hannah-Reeve Sanders' life history, the idea of the female doctor carries weight and significance across varying time frames and in changing socio-political contexts. Biographical narratives are therefore not just "the life stories of particular notable or ordinary persons, but a cultural idea of what a human life should be,"[50] and the discussions that these ideas evoke. Therefore, an individual written about is not just a "fixed entity" but a dynamic production of ideas which can be explored in various contexts, "continuously in a state of becoming."[51] These ideas challenge the traditional order of biography writing and open the discussion to alternative ways of reading the subject at hand. While it is useful to broaden one's understanding of varying ways in which biographical writing can be interpreted, the approach for this particular biography, nonetheless, follows wherever possible the emerging narrative device or analysis that occurs within the writing process, and which crucially remains reliant on sequencing. Therefore, this year-by-year account of Sanders' life allows significant events to unfold without shaping their occurrence, presuming causality, or colouring her interactions within a predefined argument.

Historian J. W. Sewell argues for the importance of chronology in historical biography. Chronology, he states, is "crucial because it tells us within what historical context we must place the action we are attempting to interpret and explain."[52] For him, "historical scholarship is defined and qualified by its careful use of archival material and primary sources, by its insistence on chronological accuracy, and by its mastery of narrative."[53] Wherever possible, sources are used which serve as a reflection of the past and have been assessed and selected to portray the unfolding of significant events and experiences within Sanders' life. Secondary sources shift the focus from Sanders as an individual characterisation or a psychological study to a broader study of the events within their context. Biography writing, according to biographer Egonne Roth, "seems irrelevant if it doesn't discover the overlap between what the individual did and the life that made this possible." "Without discovering," she says, "you have shapeless happenings and gossip."[54] Taking the "cradle-to-present day" approach and starting

[50] *Ibid.*, 457.

[51] *Ibid.*, 461.

[52] W. H. Sewell Jr., *Logics of History: Social Theory and Social Transformation* (Chicago and London: The University of Chicago Press, 2005), 11.

[53] *Ibid.*, 3.

[54] E. Roth, "Lessons in Writing the Biography of the Crossover Poet, Olga Kirsch." *Tydskrif vir letterkunde* 54.1 (2017), 74.

with her formative years in Piketberg from 1928, this thesis considers Sanders' life until she was awarded her honorary doctorate in 1998.[55] An attempt has been made to find Hannah's "ruling intellectual universe" and in this case, the subject's professional quest and to view the trajectory of her life along various themes.[56] To this end the study of Dr Sanders' life is divided into four phases: "Circumstance", "Adaptation", "Survivalism", and "Legacy."[57]

Lindie Koorts (Korf) uses Carl Rollyson's distinction between "high biography" and "low biography".[58] Here, "the difference between a good and a poor biography is not found in its presentation, but rather views biography as a form of literature, and therefore a literary approach to writing is mandatory."[59] If research precedes the biography's composition, then biographers in other words, need to regard themselves primarily as historians, and not only as authors or novelists. The biographer may "present material in an imaginative fashion, but their imaginations may not be given free rein that could lead them to digress from their research material."[60] The literary elements of biography writing have been explored with a brief introductory literary vignette at the start of each chapter, pointing towards the possibility of a complete literary text. However, the basis of this particular thesis is reliant on source work, informed by both primary and secondary material.

Sources

The way in which Dr Sanders' biography is written considers, as van Zyl defines it, a careful "articulation between context and character, structure and agency."[61] With Dr Sanders as the key focus, her circumstances, choices and context rendered are based on manuscripts such as letters, newspaper articles, speeches, published and unpublished academic work, meeting minutes, statistics and interviews. Together, with reflective elements found in interviews, the sources move from a mere impression of Dr Sanders to a reliable portrait of elements in her life through the corroboration of evidence. Ultimately, her biography becomes a dynamic site

[55] L. Korf, "D.F. Malan: A Political Biography" (PhD diss., University of Stellenbosch, 2010), 2.

[56] S. Weiland, "Biography, rhetoric, and intellectual careers: Writing the life of Hannah Arendt." *Biography* 22, no. 3 (1999), 373.

[57] *Ibid*.

[58] Korf, "D.F. Malan: A Political Biography", 2.

[59] *Ibid.*, 2.

[60] *Ibid.*

[61] Van Zyl-Hermann, "History Made Human", 127.

of production through which one may explore various historical intersections, subjectivities, and experiences. Even a listed phonebook found in Special Collections offers the possibility of a range of networks within her life, a lens into the working world of GSH.[62] A wealth of public relations material exists on Dr Sanders including a long list of pleasantries, collegial and personal exchanges, and overseas itineraries.[63] This thesis has endeavoured to look beyond the face-value elements of this material to record the significance of and highlight the gaps in Sanders' story within its historical context. Many of the sources were found in collections at the following institutions:

As mentioned above, the digital archives at The South African Jewish Museum (Sajmarchives), was one of the main resources from which an initial set of archival material on Dr Sanders was derived.[64] Her collection is part of a wider social history of South African Jews in the form of photographs, film, and oral-history interviews.[65] A small collection of Dr Sanders' photographs, films, and video interviews has been digitised in this archive. Within the archive and museum there tends to be a rather uncritical over-emphasis on individual and communal achievement. Therefore, the biographical form offers a point of departure towards a more nuanced understanding of an individual's life in its complexity.

The Piketberg Museum has extensive information on the presence of Jews in Piketberg and an entire section dedicated to Dr Sanders' father, Jankel Katzeff. While these displays line the walls tracing the influence of Jews in the area, there is also material dedicated to Dr Sanders in the form of letters, school reports and a biography, which was written by a Piketberg school pupil in 1993.[66]

While there is a gap in information on Sanders, specifically in the Western Cape Archives and Records Service, they have been immensely helpful in terms of context-related material such

[62] Groote Schuur Hospital Archives [GSHA], Hannah-Reeve Sanders [HRS] files, 'Telephone Book', nd.

[63] [GSHA], [HRS] files, folder entitled: "Travel file on Medical Women's international Association XIX Congress in Vancouver Canada 26 July - 4 August 1984".

[64] The South African Jewish Museum Archive [SAJMA] See website: https://sajmarchives.com/.

[65] [SAJMA], Notes from initial plans for the 'My Son the Doctor' exhibition at the South African Jewish Museum, 2014.

[66] Piketberg Museum Collection [PMC], S. Coetzee, A History of the Jewish Community in Piketberg and Surrounds (Piketberg: Piketberg Hoërskool, mimeographed in 1995). A biography written on Hannah-Reeve Sanders for a school project in 1993.

as early town-meeting minutes from Piketberg. The National Library of South Africa has been an invaluable resource in terms of general newspapers tracing the presence of Dr Sanders, key events in her life, as well as key moments at GSH. This includes *Die Burger*, *The Cape Times*, and of significance the *Piquetberg Herald* from 1928-1932 which gives insight into the context of Piquetberg during Hannah's parents' arrival and early childhood.[67] One of the only newspapers from Piquetberg housed within the National Library of South Africa, the Jewish presence and general impressions and focus on what was happening at the time are depicted, including the status of women at the time.

Special Collections at the University of Cape Town has housed a specific collection contributed by Dr Sanders [BC1525]. The other boxes on GSH give broader insight into the hospital such as guest books, comments and notes from staff and patients. An extensive inventory has been drawn up and includes notes, business cards and public relations material in the form of newspaper clippings, event-planning and speeches – all of which are under Dr Sanders' name.[68] Sadly, the Special Collections Unit is still recovering from the fire that affected the University of Cape Town (UCT) in May 2021.[69] Some of Dr Sanders' papers had been put aside and although located in the reading room which was almost entirely destroyed, some of her material was left relatively unscathed. Due to Covid-19 protocols and the delicate recovery process after the fire, a lot of this material was unable to be revisited. However, Special Collections had scanned copies of the Tony Saphra papers, kindly donated by Dr Sanders which briefly traces her association with the Union of Jewish Women of SA.[70]

Sanders donated a substantial collection of documents to the Medical Women's International (M.W.I.A) archive at Drexel University (1989-1998).[71] This charts her involvement in the organisation and includes information on her networks and international travel for conferences over the years. Sanders clearly was aware of the significance of her role by setting a precedent

[67] *Piquetberg Herald*, 1928-1931.

[68] For example, UCT Special Collection [UCTSC], Doctors [BC1525] File, P.R. Lunches, Invitation: 'Launch of Equator,'The Tastic Ladies Club, Thursday 16 August 1990.

[69] O. Ngcuka, "Table Mountain Fire that gutted UCT library, a 'malicious act', investigation finds," *Daily Maverick,* 24 June, 2021.

[70] [UCTSC] Toni Saphra Papers [BC1390], until 2013.

[71] Drexel University Archive [DUA], Hannah-Reeve Sanders Collection, 1989-2001, Medical Women's International Association [MWIA].

and legacy through her donation of archival material. Furthermore, she was very involved in the establishment of the Cape Medical Museum.[72]

The Health Sciences Library as well as the Groote Schuur Archive at Groote Schuur Hospital, house the GSH annual reports from 1976-1986 which provide insight into institutional history.[73] These detailed reports serve as a guideline that helps provide context to Dr Sanders' life story, specifically during her time as Chief Medical Superintendent. Furthermore, three cabinets of unorganised files have been preserved, tracing the working life of Dr Sanders.

Dr Sanders' private collection of archival material consists of letters, photographs, speeches, meeting notes and professional correspondence with colleagues during her time at GSH. Some of this material is housed at UCT, while the remainder is filed by date, not theme, nor is there any official catalogue or inventory for this material, which will be appraised and appropriately housed. As part of the research process, these additional sources generally provide insight into Dr Sanders' role at GSH; however, they generally consist of professional correspondence. One exception is a series of interviews conducted by her nephew with Hannah's mother and father in the early 1980s.[74] These interviews chart her parents' experience from Mažeikiai, Lithuania to Piketberg. Yad Vashem has also provided access to letters between Sanders' parents and relatives who stayed behind during the Second World War. However, these letters are currently being translated from Yiddish and at this point only indicate the close relationship that was maintained between Sanders' parents and their relatives left in Europe.[75]

Where relevant, visual materials such as photographs from Special Collections (UCT), the Piketberg Museum and Dr Sanders' private collection have been used.[76] Cultural theorist, Marianne Hirsch, notes the role of the photograph in documenting history. She sees the photograph as a relic and focuses on the "indexical" purpose it can serve in orienting a person's

[72] Cape Medical Museum [CMM], Minutes Cape Medical Museum Management Committee Meeting 27 October 1992.

[73] [GSHA] Groote Schuur Hospital Annual Reports [AR], 1976-1986.

[74] Hannah-Reeve Sanders Personal Collection [HRSPC], Interview with Sonia Pelts conducted by Jeremy Levin, "Ouma – Childhood Recollections", 1985.

[75] Yad Vashem Archives [YVA], Item ID: 10425470, Letters sent by family members in Vilna, the Feldafing DP camp and Nicosia to Jakob and Sheina (Pelc) Kacevas in South Africa, 1946-1949.

[76] [UCTSC], [BC1390] Toni Saphra Papers, 1967-2005, photograph of Hannah-Reeve Sanders, September 2013.

life history. More directly, however, she focuses on the role of the photograph in "intensifying" an individual's life by allowing them to be remembered in a tangible way.[77] Wherever possible, visual materials in the form of photographs have been used to trace people and places in Dr Sanders' life. A number of secondary sources and readings are also employed, including J.H. Louw's *In the Shadow of Table Mountain: A History of the University of Cape Town* (1969), Howard Philips', *UCT 1918-1948* (1993), Ralph Kirsch's two edited volumes, *The Forman Years* (1984) and *UCT Medical School at 75* (1969), as well as medical biographies, such as David Cooper's, *Christiaan Barnard: The Surgeon Who Dared* (2017) and Stuart Saunders' personal account *Vice Chancellor on a Tightrope* (2000).[78] Moreover, there are Dr Sanders' journal articles that provide a factual underpinning to the events of her life as they unfolded.

On the subject as 'source'

While there exists a substantial amount of archival material, to explore multiple perspectives, interviews have also played an integral part in this study. By incorporating interviews with Hannah and her friends and contemporaries leading up to the present day, this biography has in part been reliant on interviews with Sanders and members of her networks. Several interviews with Sanders specifically have been a reliable source from which to supplement additional primary sources. These interviews took place with Anne Digby (2006), Adrienne Folb (2003 and 2014). Several interviews with the author were conducted between 2018-2021, including filming that took place with Dr Sanders in Piketberg. The interviews serve as an opportunity to enrich the study through the documentation of relationships and experiences with Dr Sanders as well as to corroborate descriptions of events and people. During the process of constructing this biography, voices from her surrounding network were considered. As Robert Rotberg notes, biographies with their conversational elements, help one move beyond a mere impression to a reliable portrayal of a person's life through corroboration of evidence found in the sources at hand.[79] He further comments that biographies move through all

[77] M. Hirsch, *Family Frames: Photography, Narrative and Postmemory* (Cambridge, MA: Harvard University Press, 2012), 19.

[78] R. Kirsch, *The Forman Years* (Cape Town: UCT Press, 1984); R. Kirsch and Catherine Knox, *UCT Medical School at 75* (Cape Town: UCT Press, 1987); D. K. Cooper, *Christiaan Barnard: The Surgeon Who Dared* (Fonthill Media, 2017); S. Saunders, *Vice-Chancellor on a Tightrope: A Personal Account of Climactic Years in South Africa* (Cape Town: David Philip Publishers, 2000).

[79] R. I. Rotberg, "Biography and historiography: Mutual evidentiary and interdisciplinary consideration", *The Journal of Interdisciplinary History,* 40 no. 3 (2010), 307.

disciplines, "examining every facet of their subjects' lives, turning them this way and that, subjecting them to all manner of interdisciplinary tests."[80]

This project is driven by the sources available which, according to historian John Tosh involves, "surveying sources of the past, not the intrusive questions of a present-minded enquirer."[81] History itself is an imaginative act, and as in the case of biography, one has to place oneself in the situation or context of the subject and try to imagine the responses and reactions of a person in a given situation far removed in many cases from the present. It is unsound practice to impose the notions fashionable or prevalent in the present onto a subject which can easily be someone who lived centuries before or might even still be alive. As Sanders reflected during the process of writing this thesis, "you are trying to define a way of doing a life of a person, without emotional interfering, without stories or lies, but simply fact."[82] Dr Sanders herself has participated in the study, an unusual exercise for biography writing. The ethical considerations needed when writing the biography of a doctor who is a living participant in a study on her life have been explored – examining what it means to navigate and document Dr Sanders' life story while forming a critical relationship in close proximity to the subject. While the subject does not dictate the writing, there is, however, an awareness of the "privileged" relationship which exists between biographer and subject. André Landman's thesis on Vera Bürhmann aside from being a rigorous example of non-hagiographical scholarship, addresses some of the awkward encounters and sensitivities involved in the biographical process. He writes, "'issues of privacy and the extent of revelations about personal lives which impact on professional achievement' are a potential source of discomfort to the subject (if still living), to those close to the subject and biographer."[83]

Sanders has been willing to participate in the process of writing her history for academic purposes.[84] However, her participation presents several challenges. There is the danger of her immediate influence in the construction of the biography, as well as of the potential for bias

[80] *Ibid.*

[81] J. Tosh (ed.) *Historians on History 2nd Edition* (London: Routledge, 2000), 19.

[82] Interview with Hanna-Reeve Sanders conducted by Leila Bloch, 3 July 2020.

[83] Landman, "From Volksmoeder to Igqira", 144. Landman is quoting here the work of N. J. Jacobs and A. Bank, see their: "Biography in Post-Apartheid South Africa: A Call for Awkwardness", *African Studies*, 78 no. 2 (2019), 175.

[84] Interview with Hannah-Reeve Sanders' conducted by Leila Bloch, 25 March, 2020.

and overidentification or sympathy on the part of the biographer.[85] Lastly, there is the pressure of having to write in a way knowing that the subject will be reading the work. There is thus an acknowledged tension in the evidence given by the subject and for which the biographer must take responsibility for its interpretation and use. While the biographer (or interviewer now in this case) is never entirely neutral, a richer history can nevertheless be created by combining both oral evidence and more conventional sources.

While the factors mentioned above present early warning signs in the writing process, they can be worked with dynamically. In her article "Writing Biography as Relationship", psychologist and scholar Amia Lieblich addresses some of these concerns and offers an alternative way in which to understand the relationship between biographer and subject.[86] She states that many biographers have tried to be as distanced as possible from their subject to avoid being "unprofessional" or partial. However, in Lieblich's experience of biography writing, it was exactly the 'relational' understanding with her subject that allowed her writing to develop after reaching a deadlock.[87] This present body of work is considered to be a study that retains awareness of the relational aspects involved in the biography writing process as well as being predominantly reliant on primary and secondary sources. This allows room for more interdisciplinary approaches (such as works of feminist and psychological theory) to inform the biography writing process without taking away from the historical approach.[88]

Biography in general is "more awkward than autobiography or history," Jacobs and Banks comment, because of the 'politics' between author and subject and the exposition of the subject's internal life and "audiences who may be very interested in a certain depiction of a well-known subject."[89] They continue by saying that the "inevitable intimacy in a one-on-one

[85] D. Novarr, "The Lines of Life: Theories of Biography, 1880-1970" (Indiana: Purdue University Press, 2020), 106.

[86] A. Lieblich, "Writing Biography as Relationship", *Nashim: A Journal of Jewish Women's Studies & Gender Issues,* 7 (Spring, 2004), 207.

[87] *Ibid.*

[88] A similar thesis that has used first-person interviews has been completed by Hannah Keal at UKZN. There she reflected on the fact that, "the biographer's relationship with his or her subject is one that is inevitably characterised by its complexity and, at times, ambivalence. This is perhaps even more so when researching someone who is alive and invested in the project." See H. Keal, "'A Life's Work': Harriet Bolton and Durban's trade unions, 1944-1974" (Master thesis: University of KwaZulu-Natal, 2009), iii.

[89] N. J. Jacobs and A. Bank, "Biography in Post-Apartheid South Africa: A Call for Awkwardness", *African Studies*, 78 no. 2 (2019), 166, 167.

author-subject relationship and the public broadcast of the distilled essence of one person's life has the potential to turn biography into betrayal."[90] This issue extends into the way the biographer conducts the interviews and integrates himself/herself into the subject's life to glean information or an angle of the story. Therefore, both require a focus on ethical considerations and corroboration of evidence when documenting a life history. The approach that Jacobs suggests asks the biographer to not shy away from the awkwardness of trying to resolve the issue.[91]

For example, in 1986, Dr Sanders received the Cape Town Women's Bureau: Women of Achievement award, with several newspaper articles documenting her achievement.[92] Based on documents such as these, the material at hand would – if not handled appropriately – be inclined towards idealisation, slipping into the hagiographic. However, this study is interested in looking at the achievements and successes of a female doctor over time. In doing so, the following biography is intended as a critical, nuanced, and unbiased investigation into Dr Sanders' life based on archival findings, interviews, and resources — a so-called "warts and all" approach.[93] Through an examination of the institutions in which Dr Sanders worked, as well as the broader social and political atmosphere, connections are made between historical circumstances and personal choice. Significant choices in various moments become a means through which a broader social history of a period (encompassing multiple perspectives that illuminate her complex individuality and identity) may be understood.

Brief overview of chapters

The introduction to this thesis provides a literature review around the subject and overview of the sources utilised. The chapter serving as a theoretical framework in which to orientate the reader and the biographical study of Sanders. The body of the thesis consists of four main chapters. *Chapter Two: "Something We Get from Our Mother's Milk": Moulding the Early Hannah-Reeve Sanders from 1928–1946* looks at Sanders' early life in Piketberg. It traces her possible intergenerational, circumstantial influences, looking at what may have led to the early

[90] *Ibid.*

[91] *Ibid.*

[92] [UCTSC], Groote Schuur Hospital Collection [BC1525] Doctors series, Dr H-R Sanders Box 22-24.

[93] V. Bickford-Smith and B. Nasson, *Illuminating Lives: Biographies of Fascinating People from South African History* (South Africa: Penguin Random House South Africa, 2018).

decision of choosing to become a doctor. In *Chapter Three: My Daughter the Doctor: Early Signs of Leadership in the Medical Field from 1946–1967,* follows the perspective of an emerging young doctor and female leader, and takes critical look at the nature of "leadership" and "success" of a white Jewish woman studying medicine in mid-twentieth century South Africa. It explores factors such as bilingualism as well as gender and class that would have influenced her and, by extension, questions what constitutes or qualifies 'female' leadership. In *Chapter Four: The Pursuit of Achievement in Compromised Institutions: The Path to Chief Medical Superintendency until 1986,* the role Sanders played during her chief medical superintendency seeks to add depth to what has already been noted in *At the Heart of Healing*. Finally, by tracing her relationships with other female contemporaries, in *Chapter Five: Networks of Care and Duty: Some of the Female Networks of Dr Hannah-Reeve Sanders from 1986–1998*, the impact of her influence as an advocate of women's rights is examined. At the core of this story is the focus on the persistence of female achievement in the medical field, with consideration given to changing political contexts and an exploration of her role between action and collusion at work. In order to chart "a compelling portrait of the subject's personality," an attempt has been made to find the "ruling intellectual universal, the key question, the object of [the] subject's intellectual quest, and then [a biographer should] show the subject's thought and life in their integrity, in their oneness and harmony."[94] In this particular case, this applies predominantly to the subject's professional quest and to view the trajectory of her life along various themes. By tracing her experiences, through the lens of Dr Sanders, one is able to examine the institutional contexts in which she operated and in turn, assess how this had an impact on her and may have determined her responses and decisions. It ultimately considers to what extent she broke barriers in her historical context or simply 'toed the line' in terms of the structures already in place.

[94] S. Weiland. "Biography, Rhetoric, and Intellectual Careers: Writing the Life of Hannah Arendt", *Biography*, 22 no.3 (1999), 373.

Chapter Two: "Something We Get from Our Mother's Milk":[1] Moulding the Early Hannah-Reeve Sanders from 1928–1946

Hannah-Reeve Katzeff's childhood days can be described as driven but relatively carefree. Within the context of unbending domesticity in a small town no one would have necessarily predicted that a female would come to occupy such a strong leadership position at Groote Schuur Hospital, holding her own within a male-dominated medical profession. On a summer day in Piketberg in 1937, sunlight streamed onto blades of grass and species of ant crawled where two children played. Other names and faces may have faded from memory, except those of nine-year old Hannah-Reeve and Louis Stofberg, the school principal's son, and later a prominent player in the National Party.[2] *The rules of the game the children were playing were unclear except for the fact that they were each wielding two golf clubs given to them by their parents. Louis reached for the ball with the club and accidently hit Hannah-Reeve just below the eye. She was immediately rushed to the town doctor, Dr Isadore Kaplan.*[3]

The event mentioned above marked a turning point in Dr Hannah-Reeve Katzeff (Reeve's) early life.[4] This interaction also highlights some of the uncomfortable encounters that would inform her childhood. Two key themes run through Hannah's early life, namely, her will to become a doctor and the intergenerational awareness of anti-Semitism. Hannah was not directly affected by anti-Semitism during her childhood in Piketberg. Her most likely awareness of anti-Semitism probably came from the experiences of her parents who had first-hand exposure to the pogroms of Tsarist Russia. Her ambition to study medicine may have been fuelled by an immigrant mentality that generally speaking embraces a new way of life in a country other than their own. Through a nuanced exploration of Hannah's parents' arrival and her experiences in Piketberg from 1928 to 1946, one can see that there is more to being a good doctor than merely

[1] [SAJMA], Interview with Hannah-Reeve Sanders' conducted by Adrienne Folb, 31 August 2014.

[2] F.A. Mouton, "'Dr No': A.P. Treurnicht and the Ultra-Conservative Quest to Maintain Afrikaner Supremacy, 1982–1993", *South African Historical Journal* 65 no.4 (2013), 577–595. Mouton writes, "Stofberg was part of the right wing of the NP and formed part of the first break away from the NP in 1969 when Albert Hertzog formed the Herstigte Nasionale Party. He remained a staunch supporter of the HNP for the rest of his life." Piketberg Museum Collection [PMC], Display Case, Piketberg High School Annual Report, 1936, 2.

[3] Interview with Hannah-Reeve Sanders' conducted by Leila Bloch, 22 July 2020.

[4] [PMC], Display Case, Piketberg High School Annual Report, 1936, "Standard 1", 51.

being defined solely based on merit and achievement, emphasizing the notion that background and context can be understood in relation to one's professional status. [5] Through understanding of the world which Reeve inhabited in her formative years, this chapter explores possible early influences on Reeve and her decision to become a medical professional. Through an understanding of the general status of doctors in Piketberg at the time a light is shed upon Afrikaner-Jewish dynamics. This chapter also explores Reeve's intergenerational history, the influence of women and the changing opportunities in a small country community in South Africa in the 20th century.

An introductory overview of the history of Piketberg

The town Reeve's family chose, originally spelled 'Piquetberg' derived from the old Dutch word 'Piket' or 'Piquet' (from French) referring to the military guard posts set up during the governorship of Isbrand Goske (1682-1676) against marauding Khokhoi led by Gonnema.[6] Piketberg lies in the foothills of the Piketberg Mountains on the Western Cape's West Coast. Fifty kilometres east of Saldanha Bay and 140km north of Cape Town, it overlooks a fertile valley stretching to the Oliphant Mountain, well suited to wheat farming.[7] The cooler mountain top area is conducive to the farming of fruit and Rooibos tea, however, it is reliant on the production of grain.[8] Originally, the Piketberg mountain range served as a stronghold for the San (Bushman) people, and well-preserved examples of their rock art can still be seen there.[9] In November 1705 colonial frontier farmers chose the locale of Piketberg 'north of the river' to pasture their livestock.[10] The San rock painting in the area is an artistic representation of the area's early history.[11] The original inhabitants of the area were the KhoiSan, more specifically

[5] M. Pentecost and T. Cousins, "'The Good Doctor': The Making and Unmaking of the Physician Self in Contemporary South Africa", *Journal of Medical Humanities* (2019), 1.

[6] A. Kollenberg, *Jewish Life in the South African Country Communities, Volume 2* (Johannesburg: South African Friends of Beth Hatefutsoth, 2007), 425.

[7] Standard Bank, Archive, Johannesburg The Standard Bank of S.A Limited Inspection Report [SBA, INSP] 1/1/357, N-P 1937, 13.

[8] S. Ives, *Steeped in Heritage: The Racial Politics of South African Rooibos Tea* (Durham: Duke University Press, 2017), xvi; [SBA] INSP 1/1/294, L-M 1929, Inspection Report at Piquetberg Branch, 12.9.1929, 9.

[9] H.P. Linder, "A preliminary study of the vegetation of Piketberg Mountain, Cape Province" (Hons. Thesis: University of Cape Town, 1976), 5.

[10] N. Penn, "The wife, the farmer and the farmer's slaves: Adultery and murder on a frontier farm in the early eighteenth century Cape", *Kronos* 28 no. 7 (2002), 1–20; N. Penn, *The Forgotten Frontier: Colonist and Khoisan on the Cape's Northern Frontier in the Eighteenth Century* (Athens: Ohio University Press, 2005), 41.

[11] S. Hall and A. Mazel, "The Private Performance of Events: Colonial Period Rock Art from the Swartruggens", *Kronos* 31 (2005), 130.

the Gonjemans.[12] Also present in the area was the often-forgotten history of the Griquas which can be traced over time.[13] As writer Don Pinnock commented, in around 1710 "a son was born to a female slave and an unidentified Dutchman named Adam Kok" who married the Goringhaiqua daughter of a Khoi chief (from whence the name Griqua would later be derived) and began farming beyond the colonial frontier just north of Piketberg.[14] The Griquas did not stay in Piketberg but, "wandered off through the Cape Colony and gradually crossed the Orange River" with Adam Kok as their chief.[15] The liturgical life was at the centre of the town as evidenced by the establishment of the Dutch Reformed Church parish in 1833 followed by "the planning of the town on the farm Grootfontein in 1835."[16] Race relations and their divisions in Piketberg during this time can largely be seen as a continuation of ecclesiastical policies of the Dutch Reformed Church. These policies would go on to prohibit racial mixing at Holy Communion from the 'same' table.[17] Following military pressure arising from the Anglo-Boer War especially in the years 1901–1902 the town's railway was constructed. The development of the railway was crucial for this remote area as it allowed merchandise to reach a larger market.[18] The building Hannah attended school in had previously been used as a hospital in the Anglo-Boer War (1899-1902).[19]

In later interviews Sanders undoubtedly saw the importance of the role that the status of doctors held in society.[20] During her childhood Hannah was influenced by her contact with Jewish doctors and was not the only one to emerge from a small country community. Thus, a broad picture of their presence and reception in South Africa serves as a framework in which to situate

[12] A. Booyse, "The Relationship Between the Congregations of the African Methodist Episcopal Church and the Dutch Reformed Mission Church in Piketberg, 1903-1972" (Masters' Thesis: University of the Western Cape, 2004), 38.

[13] D. Pinnock, "The Kok Family and the Longest Trek in South Africa", *Daily Maverick*, 21 April, 2021.

[14] *Ibid*.

[15] T. Knoll, "The Griquas of Griqualand East Until About 1878", (MA Thesis: University of Cape Town, 1935), 1–2; M. Legassick, "The Prehistory of Gordonia." in *Hidden Histories of Gordonia: Land Dispossession and Resistance in the Northern Cape, 1800–1990* (Johannesburg: Wits University Press, 2016), 7. "Kok, the likely son of escaped slave Claas Kok by a Griqua mother, left his Piketberg farm in 1771".

[16] Kollenberg, *Jewish Life in the South African Country Communities,* 425.

[17] J. de Gruchy, "'Real Presence' and Sacramental Praxis: Reformed Reflection on the Eucharist", *NGTT* 54 no. 3–4 (2013), 1.

[18] W.A. Burger, *Piket Teen 'n Berg: Die Geskiedenis van Piketberg 1660-1970* (Cape Town: Privaat Uitgegee, 1975), 115.

[19] Riana Smit (Secretary Höerskool Piketberg), email to author, 25 March, 2021.

[20] [SAJMA], Interview with Hannah-Reeve Sanders' conducted by Adrienne Folb, 31 August 2014.

some of her likely early influences. There was no medical school in South Africa before 1920. During the 19th century the social and professional status of doctors improved and by the early 20th century the medical profession already gained significant social status.[21] When discussing several factors influencing Jews' fight against disease during the time of high immigration to the Cape, medical historian Howard Phillips makes mention of East European doctors and their particular affinity for, and trust established with their Jewish patients. Phillips notes the influence of "Dr Solomon Kark (who had come to Cape Town from Lithuania as a 15-year-old lad in 1894) who was, in the words of one of his Jewish patients, 'a Yiddishe god' who spoke Yiddish fluently and in later years had his rooms on the edge of District Six".[22] An additional influence in combating disease was that Jews had a particular receptivity to scientific medical practices if backed by a reliable doctor's instruction. "Traditionally, Jews did not distrust the physician. The licensed doctor thus entered the Cape Medical (*sic*) market armed with a European cultural medical background and the legal sanction of the colonial government."[23] The first Jewish medical practitioner at the Cape was German-born, Dr Siegfried Frankel. It was not unusual for German doctors to enter the Cape during the mid-19th Century. This included small country towns, for example Abraham Lilienfeld who came to Graaf Reinet in 1852. He was joined by Dr Moritz Hoffa who opened his practice in Richmond in the Karoo, as well as J.H. Steinau (later joined by Hermann Kahn) in Aliwal North. Between 1875-1880 two Hannaus, August and Jacob, came to Victoria West and Carnarvon. Patients who could not reach a doctor directly would still be likely to be treating themselves with German medicine.[24] Until the 1800s in Piketberg, patients were treated at home with one of the earliest doctors being Dr Francis Reitz.[25] The fact that a list exists documenting the earliest doctors in Piketberg is indicative of the importance of their general standing in the area.[26] One of the earliest female Jewish medical professionals in Piketberg can be traced to Esther Shaer (nèe Gillman) – a Jewish nurse who had served on Robben Island when it was still a lunatic asylum.[27] She had

[21] Pentecost and Cousins, "The Good Doctor", 29.

[22] H. Phillips. "'A Move for the Better': Changing Health Status among Jewish Immigrants in Cape Town, 1881–1931", *Journal of Ethnic and Migration Studies* 32, no. 4 (2006), 599.

[23] *Ibid.*

[24] C. H. Price, "'Die Slim Joodse Dokter'", *Jewish Affairs* 24 no. 12 (1969), 18–19.

[25] Burger, *Piket Teen 'n Berg*, 194.

[26] *Ibid*.

[27] University of Cape Town Special Collections Collection [UCTSC], Kaplan Centre interviews, item A237, Interview with Esther Shaer conducted by Noreen Sher, "Esther Shaer (née Gillman)", Cape Town, 5 August 1981.

arrived in Piketberg with her parents in 1902 and was orphaned two years later.[28] She was the first child to move to the Jewish Orphanage, Oranjia, in Upper Mill Street, Cape Town. Esther wanted to apply to be a nurse at age 16, however, she was denied because of her age. According to her own testimony, she approached Jewish members of the town synagogue in Piketberg such as Max Myers asking to prove that she was older than she was so she could apply again. According to her testimony, these members of the Jewish community refused to sign and she left (the area).[29] Based on the testimony of Dora Shapiro, another Lithuanian immigrant who lived in Piketberg, Mark Shapiro (who later became a gynaecologist), was born at the same time she was in Piketberg from 1915-1927, though his exact date of birth is not clear.[30] According to Sanders, Piketberg had six Jewish doctors including Dr Kramer and Dr Isidore Kaplan in the early 20th century.[31] Moorreesburg, a town in the same district (which had a smaller Jewish population) had a Jewish chemist and one Jewish doctor, namely Dr (Simcha) Simmy Bank who as from 1976 headed the gastro-enterology department at Groote Schuur Hospital (GSH), the same year that Sanders would become head of the hospital.[32]

Hannah's parents

Hannah (also referred to in her childhood as Reeve) makes recurring mention of the influence of her mother, Sheina/Sonia Katzeff (nèe Pelts).[33] The narrative of Hannah's early years is interlinked with her mother's journey of emigration from Eastern Europe to Piketberg. Sonia's testimony is therefore a starting point of biographical detail in Hannah's life and can be viewed in relation to a broader understanding of Jewish women's experience of migration and assimilation in the early 20th century. As noted by historian Veronica Belling in her thesis entitled, *South African Jewish Women During the Migration Years,* the experience of South African Jewish women from Eastern Europe is documented less frequently in comparison to

[28] D. Holliday, "Island Asylum was hell, says ex-nurse, 89", *Weekend Argus Reporter*, May 27, 1989.

[29] [UCTSC], Interview with Esther Shaer conducted by Noreen Sher, Cape Town, 5 August 1981.

[30] [UCTSC], Kaplan Centre interviews, item A225, Interview with Dora Shapiro conducted by Eva Horwitz, "Mrs Dora Shapiro", Cape Town, 5 August 1981.

[31] Piketberg Museum Collection [PMC], migration and genealogy researcher Steven Albert, email correspondence to Roche Du Toit (Piketberg Museum Curator) entitled "Piketberg Data", 10 May 2004.

[32] Kollenberg, *Jewish Life in the South African Country Communities,* 422.

[33] [PMC], display cabinet, Piketberg High School, Annual School Magazine, 1936, 56; Hannah-Reeve Sanders Personal Collection [HRSPC], Hannah-Reeve Sanders, speech given at Rustenburg Girls' High School Prize-giving, 15 October 1977; [SAJMA], Interview with Hannah-Reeve Sanders' conducted by Adrienne Folb, 31 August 2014.

that of men.[34] Therefore, oral history interviews conducted by Sanders' nephew, Jeremy Levin, with his grandmother Sonia, provide valuable insights into the Eastern European emigration narrative, from a woman's perspective.[35] Her testimony also reflects the unbending traditional approach to domesticity which would inform Hannah's childhood. While the interviews are fragmented and contradictory by nature due to their taxing emotional subject matter, familial content can be corroborated with various primary sources.

Sonia Pelts was born in Nevarenai, Lithuania and, based on these records, it becomes evident that the Pelts family were likely to have been grouped there.[36] Jews had been settling in Mažeikiai since the 1870s.[37] Situated in northwestern Lithuania, Mažeikiai was an important junction that was linked to the Latvian capital Riga, by railway.[38] However, under the Russian Empire, "temporary regulations" had been put in place by the Tsarist government to prevent more Jews from settling in the area.[39] Prohibitions also prevented Jews from buying property, until the end of the Tsarist rule in 1917.[40] After the Russian occupation of Lithuania in the 18th century, many Jews came under Russian rule from 1795-1915.[41] Starting with a description of the first farm her family owned in Pašerkšnė close to Mažeikiai before the outbreak of the First World War, Sonia describes Elzuna, a Lithuanian domestic worker who lived on the farm, German tenants as well as her grandfather Shmuel Leiberowitch (a soldier who had studied to be a doctor in the army), and an uncle, who – to her family's chagrin – married out of the

[34] V-S. Belling, "Recovering the Lives of South African Jewish Women During the Migration Years, c1880-1939" (PhD diss., University of Cape Town, 2013), 2, 23.

[35] B. Newell, "BIO Elects Dr Jeremy Levin as New Board Chair", Biotechnology Innovation Organisation, 4 June 2019. Accessed at: https://www.bio.org/press-release/bio-elects-dr-jeremy-levin-new-board-chair.

[36] State Historical Archives (LCVA) stored on LitvakSIG's All Lithuania Database. Accessed at: https://www.litvaksig.org/search-ald/ LitvakSig, Pelts, Sheina.

[37] J. Rosin, *Preserving Our Litvak Heritage: A History of 21 Jewish Communities in Lithuania – Volume II* (League City, Texas: JewishGen, 2007), 87.

[38] *Ibid*.

[39] *Ibid*.

[40] *Ibid.*

[41] See T. Snyder, *The Reconstruction of Nations: Poland, Ukraine, Lithuania, Belarus, 1569–1999* (New Haven: Yale University Press, 2003), particularly chapters 1 and 2, and p. 25; S. Kadish, *Bolsheviks and British Jews: The Anglo Jewish Community, Britain and the Russian Revolution* (London: Frank Cass, 1992), 22; Rosin, *Preserving Our Litvak Heritage*, 86.

faith.[42] Like Hannah, Sonia and her family were familiar with sharing their living space – as they did in Piketberg, where one, Mannetjies, lived with them.[43]

The arrival of Russian warriors (the Cossacks) forced Sonia's family to leave their farm around 1914, soon after the outbreak of the First World War. Historian Eric Lohr argues that at the outbreak of the First World War Jews were seen by the Russian Army as a risk to military advancement. Informed by a historical tradition of restriction on all aspects of Jewish life, Jews were perceived as being detrimental to the "concept of the fighting nation" and categorized as unreliable.[44] Lohr further suggests, the violence towards Jews was also based on the strong socio-economic position Jews were said to hold in pre-war society such as in banking and trade.[45] The precise number of Jews who were forced from their homes between 1914 and 1917 is not known but has been estimated to be between half a million to a million people.[46] The implementation of these early militant policies expanded over the war years into violence toward Jews throughout most of Russia, notably at the hand of the Cossacks whose actions are recounted in Sonia's testimony.[47] According to her, when the Cossacks arrived on horseback, they told the Pelts family they had just two hours to leave.[48] Sonia's father, Srul Pelts was in the dairy separating milk when, armed with guns and swords, the Cossacks demanded that he go with them.[49] He and his family took one cart and two horses, and Sonia's mother brought food and some clothing. The family went to a little village in Tirksliai in Lithuania where they got a train to Dvinsk, the name of which is "derived from the River Dvina on which the town is situated."[50] Until 1920, Dvinsk was still a part of the Russian Empire. From 1920 to 1940 it

[42] [HRSPC], Interview with Sonia Pelts conducted by Jeremy Levin, "Ouma – Childhood Recollections", 1985; Interview with D. Meyrowitz (Hannah-Reeve Sanders' great nephew) conducted by Leila Bloch, 20 October 2021; [HRSPC], Interview with Sonia Pelts conducted by Jeremy Levin, 1985.

[43] D. Meyrowitz (Hannah-Reeve Sanders' great nephew), interview conducted by Leila Bloch, 20 October 2021; [HRSPC], Interview with Sonia Pelts conducted by Jeremy Levin, 1985

[44] T. Snyder, *The Reconstruction of Nations: Poland, Ukraine, Lithuania, Belarus, 1569–1999* (New Haven: Yale University Press, 2003), 112. Snyder writes, "Armed men generally of peasant rather than noble origin."; [HRSPC], Interview with Sonia Pelts conducted by Jeremy Levin, 1985; E. Lohr, "The Russian Army and the Jews: Mass Deportation, Hostages, and Violence during World War I", *The Russian Review* 60, no. 3 (2001), 403.

[45] *Ibid.,* 407.

[46] *Ibid*., 403.

[47] *Ibid.*, 405.

[48] [HRSPC], Interview with Sonia Pelts conducted by Jeremy Levin, "Copy for YVA, Mazeikiai", 1985.

[49] Ancestry website, accessed at: https://www.ancestry.com/search/collections.

[50] Y. Flior, Bernard Sachs (trans.) *Dvinsk: The Rise and Decline of a Town*, (Johannesburg: Dial Press, 1965), 11.

was a part of the independent Republic of Latvia, functioning as a "trading centre that attracted the Jews of Lithuania," and a place where people were willing to take in refugees.[51] Sonia's family lived in Dvinsk for four years, where Sonia went to school. Sonia returned to Mažeikiai from Dvinsk with her family. Her father, who at that stage (after 1914) still had some money, was able to support his family. After returning to Mažeikiai, they were able to build a bigger house and regain and maintain many Jewish traditions.[52] Many years later, in conversation with Jeremy, Sonia created an idyllic picture when describing her second family farm. The farm in Mažeikiai was remembered for having an abundance of produce. This idyllic representation, albeit contrary to the master narrative of pogroms in the Russian Empire.[53] There is no reason why this idyllic representation should not run concurrently with other events in this time and place. The Lithuanian countryside was very fertile, and it's possible that the family rebuilt the farm as there could have been an abundance of produce and by this point Mažeikiai was in the independent state of Lithuania.[54]

Sonia met her husband, Jankel Kacavas in Mažeikiai. Sonia was the first of her sisters to get married.[55] A record of their marriage that took place on the 25th of August 1925 in Mažeikiai is kept in the Yad Vashem archives.[56] Robin Saphra (Hannah's son) claims that Sonia was already pregnant when she got married.[57] In 1926 the Union Castle Steamship from Europe docked in Table Bay. On board were many Jews from Lithuania. One of the passengers was Jankel, who had left his pregnant wife behind.[58] Kacev was the Lithuanian spelling of the name, plus the "-as" suffix for men. It is likely Jankel changed it to Katzeff (rather than using Kacev

[51] For more on Dvinsk and Daugavpils, see F. Skolnik and M. Berenbaum (eds.), *Encyclopaedia Judaica*, *2nd ed., Volume 5* (Jerusalem: The Jerusalem Publishing House, 2007), 441–442; Flior, *Dvinsk*, 25; [HRSPC], Interview with Sonia Pelts conducted by Jeremy Levin, 1985, "Copy for YVA Mazeikiai", 1985.

[52] [HRSPC], Interview with Sonia Pelts conducted by Jeremy Levin, "Ouma – Fortune Teller", 1985, "My father used to go and fetch the *shochet* 7 miles from our farm".

[53] N. Levin, *The Jews in the Soviet Union Since 1917: Paradox of Survival, Volume 1* (New York: New York University Press, 1987), 27.

[54] A. Simutis*, The Economic Reconstruction of Lithuania After 1918* (New York: Columbia University Press, 1942), 19–64.

[55] [HRSPC], Interview with Sonia Pelts conducted by Jeremy Levin, "Ouma – Fortune Teller", 1985.

[56] Yad Vashem Digital Archive [YVDA] "The Vital Records of the Mazeikiai Rabbinate for the period 1922-1939", accessed at: https://www.yadvashem.org/about/yad-vashem.html.

[57] For Yankl's marriage record, see Lithuanian State Historical Archives [LCVA] stored on LitvakSIG's All Lithuania Database. Accessed at: https://www.litvaksig.org/search-ald/.

[58] Barry Katzeff personal Collection [BKPC] Jankel Kacavas' passenger ticket for The Union Castle Mail Steamship Co, Ltd., 2 October 1925; Sanders, "A Glimpse into Recollections of the Past", *Temple Israel.*

or Iser Kacas) when they got to South Africa because it's a pretty common surname and that became the standard spelling in English. Jankel's brother Meir became "Meir Katsev" when they moved to the US.[59] Sonia gave birth to Hannah's sister Leah Sara on the 2nd of April 1926 in Mažeikiai before departing for South Africa in 1927.[60] In the early stages of their relationship, Sonia had told Jankel that she would not marry him unless they left Lithuania.[61] According to Belling, "by all accounts, life for women in the small towns of Eastern Europe was bleak, coloured by poverty and lack of opportunity."[62] It is fair to assume that the conditions under which Sonia was prepared to marry Jankel would have been complex given the circumstances. Sonia was determined to leave Lithuania and start a new life. According to an article by Dr Sanders for a synagogue magazine written later in her life, like so many other Eastern European Jews, her parents created new lives for themselves in South Africa.[63] According to Sanders's son, Leah's birthdate was uncertain. He recalled that his grandmother gave birth to Leah in Lithuania without the father being in the country.[64] The military took control of Lithuania in 1926.[65] Sonia had Leah soon after her marriage to Jankel and in 1927 Sonia apparently boarded the *S.S. Baltara* (see photograph below) with Leah – her first child – ready to start her new life with her husband in South Africa.[66] As Belling has stated, there were many different factors influencing the timing of immigration to South Africa, but mainly it is the devastating violence of the First World War and Russian Revolutions and the effects this had on Lithuanian villages.[67] As expanded on by writer Dov Levin, these factors included deportations and conscription demands for Jews to enter the Russian army as well as expulsions

[59] [PMC], drawer two, notes found in Piketberg Museum, files on Jews of Piketberg by Roche Du Toit, no date [nd]; Interview with D. Meyrowitz (Hannah-Reeve Sanders' great nephew), conducted by Leila Bloch, 20 October 2021.

[60] [BKPC], Certificate of Naturalization for Jacob Katzeff 1926, April 1926; Rosin, *Preserving Our Litvak Heritage*, 86-87.

[61] [HRSPC], Sonia Pelts, interview conducted by Jeremy Levin, "Ouma – Fortune Teller", 1985.

[62] Belling, "Recovering the Lives of South African Jewish Women", 45.

[63] Sanders, "A Glimpse into Recollections of the Past", *Temple Israel.*

[64] Robin Saphra, interview conducted by Leila Bloch, 6 August 2021.

[65] V. Ivanauskas, *Lithuanian Nomenclature in the Bureaucratic System: Between Stagnation and Dynamics (1968-1988)* (Vilnius: Lithuanian Institute of History, 2011), 102.

[66] C. Hocking, *Dictionary of Disasters at Sea: including sailing ships and ships of war lost in action, 1824–1962, A to I, Volume I* (Lloyd's Register of Shipping, 1969), 68; South African Jewish Museum Archive [SAJMA], Hannah-Reeve Sanders, interview conducted by author, Piketberg, 18 October 2018.

[67] Belling, "Recovering the Lives of South African Jewish Women", 33.

of Jews from their homes. This resulted in severe economic losses as well as unemployment.[68] Those who remained were threatened with punishment in a climate of ongoing threats of violent attacks under Russian rule.[69] Some Jews already had family members who had emigrated, especially to America from whom they learnt that life could be better. All of this contributed to the decision of many Jews to leave Eastern Europe.[70] According to Shain and Mendelsohn, "the abundant opportunities in a tolerant environment all contributed to the attraction and viability of South Africa as a destination."[71] While there had been earlier flows of East European Jewish immigrants to South Africa, the Kazteffs were part of the large influx of Jewish immigrants who came to South Africa between 1924 and 1930 from Eastern Europe.[72] During this period, the Jewish population of South Africa rose from 62 103 to 71 816.[73] Sonia, when asked in 1985, was unclear about the reasons why they found South Africa an attractive option. She states she had wanted to go to South Africa and added that she knew a lot about Africa from books.[74] Based on what Hannah described as "limited conversations on the subject" with her parents, all she was able to ascertain was that her parents "left for a variety of reasons."[75] Certainly the political upheavals — such as the Russian Civil War (1920-1922) — must have played a role in their decision to leave Lithuania. Furthermore, the Katzeffs already had relatives living in Simon's Town.[76] Having cousins here already is important, according to Sanders.[77] This is defined as "*landsleit*" – family members that had already migrated from what was known as the Pale of Settlement.[78] According to the definition by historian John Simon, the Katzeffs could be defined as "Jewish Pioneers" – a group of immigrants who after escaping the former Tsarist Empire chose to establish themselves outside

[68] D. Levin, *The Litvaks: A Short History of the Jews in Lithuania* (Jerusalem: Yad Vashem, 2000), 32.

[69] *Ibid.*

[70] Belling, "Recovering the Lives of South African Jewish Women," 35.

[71] Shain and Mendelsohn, *The Jews in South Africa,* 33.

[72] *Ibid.*

[73] T. Adler, "Lithuania's Diaspora: The Johannesburg Jewish Workers' Club, 1928-1948", *Journal of Southern African Studies* 6, no. 1 (1979), 71.

[74] [HRSPC], Interview with Sonia Pelts conducted by Jeremy Levin, "Ouma – Fortune Teller", 1985.

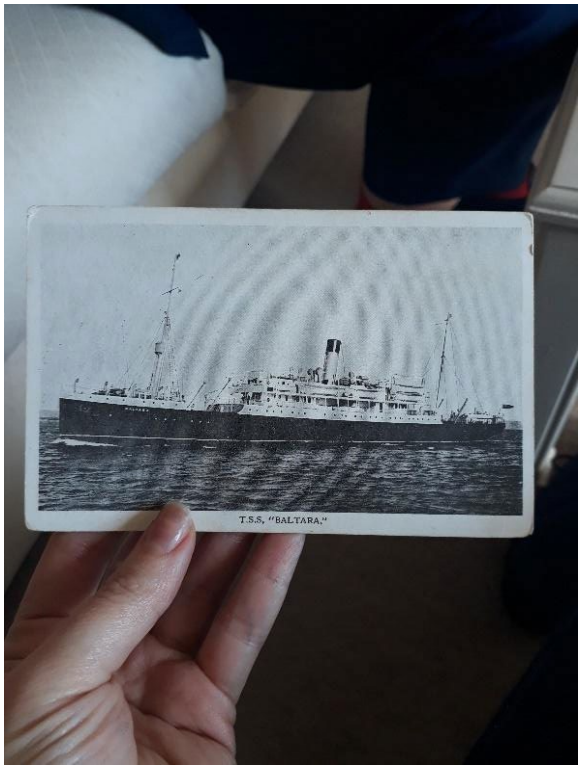
[75] Sanders, "A Glimpse into Recollections of the Past", *Temple Israel.*

[76] Levin, *The Litvaks,* 108; Anon, Jacob Gitlin Library, [JGL], "From Lithuania to South Africa - A New Beginning - A Tragic End", *Cape Jewish Chronicle*, June 1988.

[77] *Ibid*.

[78] R. W. Levinson, *The Risha Levinson Story: Growing up in the Greatest Generation* (Bloomington: iUniverse, 2013), 5*,* "Landsleit, Kinfold who had migrated from their little Shtetls (small towns in the Pale of Settlement, a term given to an area within Imperial Russia in which permanent settlement of Jews was allowed).

of main cities in "distant and largely unknown areas."[79] According to Simon, there were two main routes out of Cape Town. One moved east from Cape Town, passing Stellenbosch and George before turning northwest, ending in Oudtshoorn.[80] The one the Katzeffs chose, went north along the west coast of the Cape, traversing such towns as Malmesbury, Moorreesburg, Vredenburg, Piketberg and Garies, reaching the area at the extreme north of the province, Namaqualand.[81]



Photograph of "S.S. Baltara" that Sonia and her daughter Leah travelled on from Lithuania to South Africa in 1927 en route to South Africa.[82]

According to Sanders they came on the *S.S. Baltara.*[83] However, based on the fact that the *S.S. Baltara* had been wrecked in the harbour of Danzig in 1929, in the Baltic, Sonia might well have boarded the ship at one of the Baltic ports. The reasons for this choice of destination in

[79] J. Simon, "Jewish Identity in Two Remote Areas of the Cape Province: A Double Case Study", *Jewish Culture and History* 9, no. 2–3 (2007), 131.

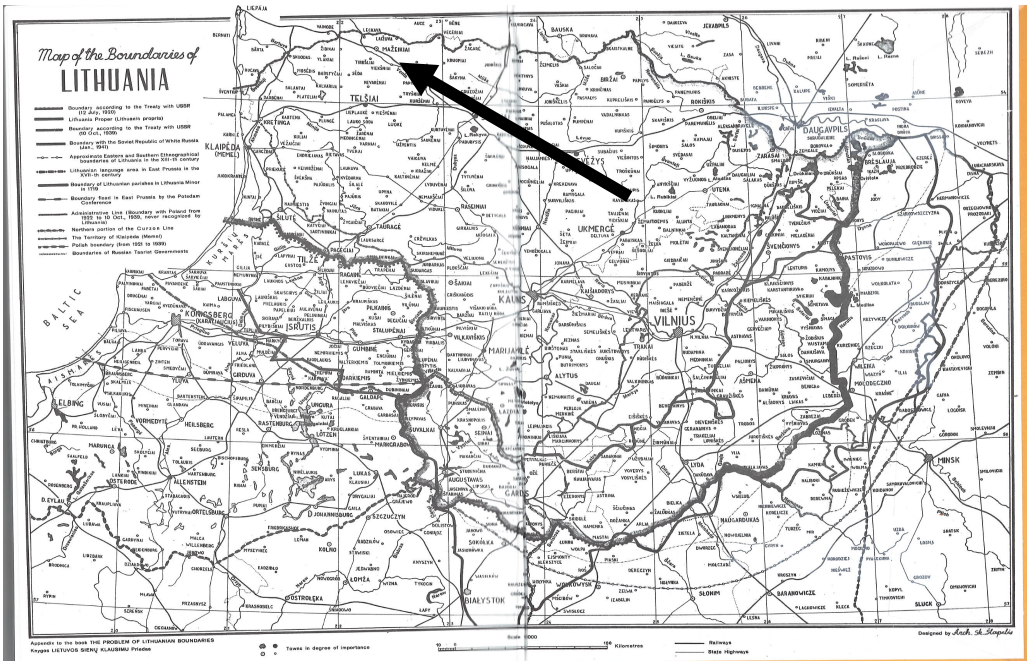
[80] *Ibid.*

[81] *Ibid.*

[82] [HRSPC], Photograph of the Baltara Ship, nd.

[83] Hocking, *Dictionary of Disasters at Sea,* 68.

country communities amongst Jewish immigrants varied — in many cases because it was due to the presence and knowledge of an existing family member as mentioned above. The exact reasons for the Katzeffs choosing Piketberg are not stated. What Sanders did recall was that her parents chose Piketberg specifically because her mother refused city life and encouraged Jankel to find work in a rural environment, which would be more familiar to her, given her rural background — which Sanders describes as "farming stock."[84] The arrival of these immigrants in small towns, however, and in Piketberg specifically, offered the possibility of "economic opportunity" or as in the case of Jankel Katzeff, a "commercial niche."[85]



Map of Lithuania, the arrow indicates the position of Mažeikiai[86]

Before the Katzeffs' arrival, in the first fifteen years after the establishment of a united South Africa in 1910, Afrikaner nationalism was making great strides and favoured amalgamating nationalism with farmers and intellectuals concerned with Afrikaner identity.[87] D.F. Malan, W.A. Hofmeyr, and the Cape Town lawyer, J.H.H. de Waal were all emblematic of this

[84] [SAJMA], Interview with Hannah-Reeve Sanders conducted by Leila Bloch, Piketberg, 18 October 2018; [SAJMA], Interview with Hannah-Reeve Sanders conducted by Adrienne Folb, 31 August 2014.

[85] A. Bach, *The Country Community Synagogues: From Cape Town to Calvinia, Wellington to Wynberg* (South Africa: Unknown Publisher, 2014), 28; Simon, "Jewish Identity in Two Remote Areas of the Cape Province", 131.

[86] M. Greenbaum, *The Jews of Lithuania: A History of a Remarkable Community, 1316-1945* (Gefen Books, 1994), back page.

[87] H. Giliomee, "Western Cape farmers and the Beginnings of Afrikaner Nationalism, 1870-1915", *Journal of Southern African Studies* 14, no. 1 (1987), 62.

alliance.[88] The NP (which split from the SAP and led to the formation of the National Party under J. B. M. Hertzog) was a political expression of sentiment that can trace its roots to the late 19th century, with Afrikaner nationalism becoming more pronounced because of the Anglo-Boer War along with several other factors.[89] J.H.H. De Waal won the first seat for the National Party in the Western Cape, "by capturing the Piketberg constituency."[90] This showed the prevailing political sentiment of the time and the strong emphasis of the NP on rural interests. While the Katzeffs had not yet arrived they were entering a context that would have been familiar to them given their own farming background in Lithuania.[91] In the 1915 elections, the NP won 7 of 51 seats in the Cape and countrywide it attracted 76,000 against 92,000 for the SAP.[92] "The results of the 1915 election paid dividends to the National Party, as the South African Party lost a number of seats and in order to stay in power was forced into an alliance with the Union Party. The strength of the National Party was indicative of the changing times," and an example of the consolidation of Nationalist support in the Cape with the right circumstances arising for power in the 1924 elections, due in no small measure to the 1922 Rand Rebellion.[93] In the 1924 election the NP won 63 seats against the 52 of the SAP and the 18 of the Labour Party which placed them in a position to take over power through an agreement with Labour to form the Pact Government.[94] Jankel arrived in Piketberg in 1926 after the election.

This was politically virgin territory for him considering that he had barely been in the country up until this point. Jews had been settling in Piketberg from the late 1800s onwards.[95] Early integration between the Afrikaner and Jewish community was noted in an article in the *South African Jewish Times* stating that Jewish "services were held in the De Wild Saal adjoining and

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[88] *Ibid.*

[89] D. J. Bosch, "Afrikaner Civil Religion and the Current South African Crisis", *Transformation* 3 no. 2 (1986), 23–30.

[90] Giliomee "Western Cape farmers and the Beginnings, 62.

[91] [HRSPC], Interview with Sonia Pelts conducted by Jeremy Levin, "Oupa", 1985.

[92] H. Giliomee, *The Afrikaners: Biography of A People* (Cape Town: Tafelberg, 2003), 383–384.

[93] A. Garcia and E. Kleynhans, "Counterinsurgency in South Africa: The Afrikaner Rebellion, 1914-1915", *Small wars & insurgencies* 32 no. 1 (2021), 53–79; J. Krikler, "Women, Violence and the Rand Revolt of 1922", *Journal of Southern African Studies*, 22 no. 3 (2007), 349–372.

[94] Giliomee, *The Afrikaners,* 337.

[95] D. Kaplan, "Invitation to the Piketberg Centenary", in *Telfed: A South African Zionist Federation (Israel) Publication* (January 2004), 25.

belonging to the Dutch Reformed Church."[96] The synagogue had been built in 1922 and a Trust Deed of the Hebrew Congregation was signed on the 17th of October 1923 by 27 members which started the synagogue.[97] When the Katzeffs arrived there were approximately 30 Jewish families living in the area.[98] Piketberg was represented as a thriving town with many activities such as "skiet en voetbal", and "wildflower shows".[99] In a memoir by John Versfeld – a farmer from Piketberg who also wrote a book titled *The Jews of Piketberg* – he notes Hannah's parents arriving in Piketberg with very little money.[100] The Katzeffs entered new political and social circumstances where the increasing presence of the NP can be traced.[101] As indicated in her testimony, Hannah's experience of her childhood would be related to the politics of church and town. The Katzeffs seem to have been relatively sheltered from political and religious pressures.

Jankel Katzeff's background differed from Sonia's in that her early childhood and family life had taken place on a farm. He reputedly came from a learned background and was known from a young age as being an excellent scholar.[102] However, access to his academic records has not been available. Despite this, circumstances in Piketberg led him in a different direction – to that of '*smous*' (travelling salesman). Historically, the 'smous' were known to sell a variety of products to farmers and at various locations, becoming a characteristic Jewish presence in the *platteland*.[103] The role of the smous often entailed distribution of supplies until he was able to

[96] A. Markowitz, "The Story of South African Jewry – Our Nation-Wide Survey of Jewish Communities: Piquetberg – the Constituency of Dr Malan", *South African Jewish Times,* 21 November 1947, 7.

[97] Kollenberg, *Jewish Life in the South African Country Communities*, 427; [PMC], File: Dokumentasie ontvang can Dr H.R Sanders - Januarie 2009, Photograph titled "Piketberg Synagogue, 1923."

[98] Kollenberg, *Jewish Life in the South African Country Communities*, 427.

[99] *Piquetberg Herald*, September 21, 1928, "Wildflower Shows", 2.

[100] J.F.P.E. Versfeld, *Some Memories Some People* (Cape Town: South African Jewish Museum, 1997), 10, 11. This memoir is a personal account of John Versfeld's experience of living in Piketberg, providing some insight into some of the experience of the context of which Hannah was born into.

[101] A. Dreyer, *Eeufees-Gedenkboek van die Ned-Ger. Kerk, Piketberg, 1833-1933: Geskiedkundige Oorsig van die Honderdjarige Bestaan van die Gemeente* (Stellenbosch: Pro Ecclesia-Drukkery, 1934), 9.

[102] [SAJMA], Interview with Hannah-Reeve Sanders conducted by Adrienne Folb, Cape Town, 13 March 2003.

[103] M. Shain and R. Mendelsohn, *The Jews in South Africa: An Illustrated History* (Johannesburg: Jonathan Ball Publishers, 2014), 40. "It has been suggested that the word derives from the German word Mauschel, the epithet for the haggling Jewish Trader." For more on the historical and popular (anti-Semitic) perceptions of the Jewish 'smous' as they emerged in the 19th century in South Africa, see M. Shain, "'Vant to puy a vaatch': The smous and pioneer trader in South African Jewish historiography", *Jewish Affairs* 42, no. 9 (1987), 111–128.

establish his own business.[104] Jankel's first job as a smous was with the Jawitz family in Aurora — a town situated at the foot of the Piketberg mountains 43km from the town centre.[105] The Jawitzes owned general stores in Aurora and in Moravia Street in Piketberg and Jankel was among a group of young Jewish men who worked for them.[106] Jankel's uncle had encouraged him to become a smous. Knowing that they could rely on the farmer's hospitality, his uncle was sure that the farmers in the area would not leave a young man hungry. Jankel's certainty provides further proof of the relationship that existed between the Jews and the Afrikaners despite anti-Semitic sentiments clearly prevalent in the NP at the time.[107] Indeed, many Afrikaners, destitute after the depression of the early 1930s, fell into the trap set by the radical right by demonising the Jews and posing them as an "existential danger."[108] When Jankel first wanted to be independent he started doing business on his own, learning about the mules and horses that he wanted to trade. It seemed that Jankel's rise from smous to affluent man happened gradually with a great deal of support. His rising success may have also in part been due to the fact that he was a trusted and reliable member of the Piketberg community.[109]

The smous was generally accommodated and appreciated for his services to farmers. However, this was not always the case and occasionally he became a figure of derision.[110] In the case of Hannah-Reeve's father he was very well-received: in Hannah's own words the farming ladies at the time always said, "*Oom Jacob jy het geweet wat ons wil hê*".[111] Allegedly at one point he was asked to be an honorary elder of the church, based on his community work.[112] However, there is no official mention of Jankel holding such an office in the DRC church records.[113] Jews (including the Katzeff family) were regarded as "people of the book" and Jankel was known

[104] Simon, "Jewish Identity in Two Remote Areas of the Cape Province", 133.

[105] [SAJMA], Interview with Hannah-Reeve Sanders conducted by Leila Bloch, Piketberg, 18 October 2018.

[106] [SAJMA], Interview with Hannah-Reeve Sanders conducted by Adrienne Folb, Cape Town, 13 March 2003.

[107] T. Weil, "Die Inskakeling Van Die Jode by Die Afrikaanssprekende Gemeenskap op Die Platteland Van 1880 Tot 1950" (MA Thesis: Stellenbosch University, 2000), 83; M. Shain, *A Perfect Storm: Antisemitism in South Africa, 1930–1948* (Johannesburg and Cape Town: Jonathan Ball Publishers, 2015), Introduction.

[108] *Ibid*.

[109] [SAJMA], Interview with Hannah-Reeve Sanders conducted by Adrienne Folb, Cape Town, 13 March 2003.

[110] Shain and Mendelsohn, *The Jews in South Africa*, 40.

[111] [SAJMA], Interview with Hannah-Reeve Sanders conducted by Adrienne Folb, 13 March 2003.

[112] *Ibid.;* [UCTSC], [BC1525], Maurice Kibel, "Hannah-Reeve Sanders," November 1998.

[113] Dutch Reformed Church in South Africa Archives [DRCA], Dutch Reformed Church Meeting Minutes, "Notule Boek van die Ned Geref Kerkraad," Piketberg June, 1 June 1933.

to have a good knowledge of the Bible as well as Jewish laws.[114] Throughout Jankel's career he was able to retain his Jewish traditions while integrating into Afrikaner society. He continued to work for the Jawitzes, even after he and his family relocated to the Kotze farm, his second place of work.[115] It is generally reflected in Sanders' personal account that the Katzeffs adapted well to working and living on the Kotze farm. During the week, Jankel would set out to trade with farmers while returning for the Jewish Sabbath on Friday afternoons. This indicates that the Katzeff's traditions were acceptable and not deemed to be unusual in Piketberg at the time. Another indication of integration being that Hannah was allegedly a flower girl at numerous weddings in the Piketberg churches — for which alas there is no photographic evidence.[116] On a broader level, this 'acceptance' was possibly due to the large contribution Jews were making to the structure of the town.[117] It is generally reflected in Sanders' personal account. It is also well documented in publications such as the *Piquetberg Herald*, namely that relationships between Jews and Afrikaners in the early 1930s in small country towns were described as pleasant — as evidenced by the Katzeffs' adaptation to living and working on the Kotze farm. Similarly, newspapers such as the *Piquetberg Herald* in 1928 referred to the "The Jewish Ball which took place on the same night as a sports evening."[118] This serves as an indication of the tolerance towards Jewish practices in Piketberg. Another article in 1928 commented on the influx of Jewish attendees from neighbouring towns coming to celebrate Jewish holidays.[119] Hannah herself did not go to school on Jewish Holidays and Jankel Katzeff told the *Cape Jewish Chronicle* many years later that the synagogue was always full on these days, "drawing Jews from the neighbouring areas".[120] More generally then, as Milton Shain notes, "Jewish inhabitants had for decades enjoyed harmonious relations with their neighbours," and according to the *South African Jewish Report,* "Jews mixed freely with

[114] [UCTSC], [BC1525], Maurice Kibel, "Hannah-Reeve Sanders," November 1998; Dr Hannah-Reeve Katzeff Sanders search results on the Piketberg Museum website. Accessed at: http:// piketbergmuseum.co.za.

[115] [SAJMA], Interview with Hannah-Reeve Sanders conducted by Leila Bloch, Piketberg, 18 October 2018.

[116] [SAJMA], Interview with Hannah-Reeve Sanders conducted by Adrienne Folb, 31 August 2014.

[117] Marie Ehlers (Director of the Piketberg Museum), in conversation with author, Piketberg, March 2020.

[118] *Piquetberg Herald*, August 21, 1928, "Jewish Ball on Friday 10th August", 2.

[119] *Piquetberg Herald*, 21 September 1921, "Local and General", 2.

[120] [SAJMA], Interview with Hannah-Reeve Sanders conducted by Adrienne Folb, 31 August 2014; *The Cape Jewish Chronicle*, June 1988, "From Lithuania to South Africa – A New Beginning – A Tragic End".

the Afrikaners and all spoke "the taal".[121] Belling elaborates on some of the factors contributing to this assimilation, namely, that in country towns Jews were more integrated as they were "removed from the prejudices of the city," and moreover, Afrikaans people respected Jews because they were regarded "as the people of the Old Testament."[122] Language also became a point of contact, but was a more complex affair. Simon notes that early immigrants almost entirely spoke Yiddish and he notes the similarities between "Yiddish and High Dutch (the precursor of modern-day Afrikaans)."[123] Yiddish was still nonetheless sometimes a source of shame for Jewish children – frustrating attempts at assimilation in light of their parents' still heavy Yiddish accents.[124] The delicacy around the adaptation to a new language emerges later in Hannah's narrative: "They [Hannah's parents] couldn't read me English stories or nursery rhymes. My father never wanted to learn English anyway, so he just bumbled along in Afrikaans."[125] Not being exposed to the same children's stories written in English is reflected upon by Hannah in interviews years later: "they did not read to us because we were learning the language better than them."[126] Hannah's mother learnt Afrikaans with the help of locals who were being taught German at school.[127]

Professionally and socially, Jewish men in Piketberg continued to serve their community as pedlars, smous and attorneys, playing a prominent role in the general life of the town.[128] Hannah herself recounted some of the Jewish names. For example, Hannah recalled where the Braudes lived and the location of the Commercial Hotel, "Die Huis vir Reisigers", in Commercial Street, which was owned by the Wynbergs, and the Railway Hotel, "vir goeie

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[121] M. Shain, "Paradoxical Ambiguity – D.F. Malan and the "Jewish Question", *Transactions of the Royal Society of South Africa* 72, no. 1 (2016), 66; L. Sher, "Community Buzz", *South African Jewish Report,* 7–14 March 2003, 9.

[122] Belling, "Recovering the Lives of South African Jewish Women", 26, 49.

[123] Simon, "Jewish Identity in Two Remote Areas of the Cape Province", 133.

[124] *Ibid.*

[125] Interview with Hannah-Reeve Sanders conducted by Leila Bloch, Cape Town, 22 November 2019.

[126] [SAJMA], Interview with Hannah-Reeve Sanders conducted by Adrienne Folb, 31 August 2014; Interview with Hannah-Reeve Sanders conducted by Leila Bloch, Cape Town, 22 November 2019.

[127] Sanders, "A Glimpse into Recollections of the Past", *Temple Israel.*

[128] [PMC], Shani Coetzee, "A History of the Jewish Community in Piketberg and Surrounds" (Piketberg: Piketberg Hoërskool, mimeographed in 1995). A biography written on Hannah-Reeve Sanders for a school project in 1993.

behandling", owned by the Braudes.[129] The small Jewish community she grew up in included the Lipshitzes, the Seffs, Kleins, Myers, Stollars, Henrys, Drs Isadore Kaplan and Henson, Ginsbergs, Schaers, Weinreichs, Braudes and the Cohens.[130]

A photograph found at the Piketberg Museum. Back row left to right: Bessie Katzeff, Hannah-Reeve Katzeff, Dr Isadore Kaplan, and Front row left to right Boetie Katzeff, Avron Weinrich, Phillip Lipsitz, and Harold Braude.[131]

[129] [PMC], Shani Coetzee, "A History of the Jewish Community in Piketberg and Surrounds", np. [SAJMA], Interview with Hannah-Reeve Sanders conducted by Leila Bloch, Piketberg, 18 October 2018.

[130] *Ibid.*

[131] [PMC], drawer 3. Photograph of Bessie Katzeff, Dr Isadore Kaplan, Hannah-Reeve Katzeff, Avron Weinrich, Phillip Lipsitz, and Harold Braude, nd.

In the photograph above, according to text written at the back, Hannah-Reeve, Avron Weinrich and Phillip Lipsitz all became doctors.[132] In general, by the 1920s large numbers of Jews were contributing professionally to South Africa. Nearly 40 % of graduates at the University of the Witwatersrand (Wits) were Jewish and at the University of Cape Town for example Jews took up 20 % of graduating classes in arts, law, medicine and commerce. Such was the presence of Jews that competitors, Stellenbosch University, would label all students from UCT the "disparaging moniker with a Jewish ring" — 'ikeys'.[133] However, women still remained "under-represented except in arts, music and education."[134] These newly trained professionals joined an expanding Jewish élite and appeared in nearly 900 entries on the *Who's Who* section of the South African Jewish Yearbook of 1929. Only 20 of those listed were women, most of whom were under 40 — seven being doctors including Esther Franks, the first woman doctor to qualify at Wits.[135] Three were lawyers, one of which was Irene Geffen, "the first [Jewish] lady advocate to be admitted in South Africa".[136] Middle class Jewish women in the mid-20th century predominantly lived a private home-life rather than pursue careers much like non-Jewish women.[137]

Other examples of Jewish men who had an impact on Piketberg life were Herman Isaac Myers, who was responsible for the construction of a water supply scheme, and Ben Klein, a successful businessman who owned large tracts of land in the environs of Piketberg.[138] Due to the nature of her father's profession, Hannah's family associated most closely with horse traders, such as the Ginsbergs, Seffs and Mr Shapiro and his wife Anna (nèe) Lambrecht, who taught music to Hannah and many other Jewish children in the area.[139]

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[132] Interview with Hannah-Reeve Sanders conducted by Leila Bloch, October 2021. "Avron Weinrich became an anaesthetist and Phillip Lipsitz became a paediatrician".

[133] Shain and Mendelsohn, *The Jews in South Africa: An Illustrated History*, 91.

[134] *Ibid.*

[135] M. Franks, "In Memoriam: Esther Franks", *SA Mediese Tydskrif*, 26 August 1972, 1228.

[136] Shain and Mendelsohn, *The Jews in South Africa: An Illustrated History*, 92, 95.

[137] *Ibid*., 140.

[138] Kollenberg, *Jewish Life in the South African Country Communities*, 430.

[139] [PMC], Shani Coetzee, "A History of the Jewish Community in Piketberg and Surrounds", np.

As mentioned earlier, the earliest presence of doctors in Piketberg dates as far back as the late 19th century.[140] Reverence associated with the idea of the doctor within the small town became widely accepted, as demonstrated below. Documents gathered in the *Jewish Digital Archive* also corroborate the early presence of Jewish doctors in the early 20th century, for example, records kept by a Dr H. Kramer cite him as working in Piketberg in 1907.[141] These kept references describe Kramer's approach of honesty and faithfulness with his patients which afforded him "the confidence of the public of which a person of his capacity is entitled to."[142] The impact of his legacy can also be seen in John Versfeld's memoir: *Some Memories – Some People*, housed at the Piketberg Museum. Here it is described that Kramer often treated patients free of charge, sometimes even travelling by horse and cart to see them.[143] The financial successes of Kramer's profession were evidenced by the fact that he and Max Myers owned the first cars in Piketberg.[144]

Early memories of home

On the 25th of August in 1928, Sonia was brought to Cape Town for the birth of her second daughter, Hannah-Reeve, at the Booth Memorial Hospital, a Christian hospital which belonged to the Salvation Army.[145] As Hannah stated, Sonia had come to Cape Town based on the recommendation of a nurse in Piketberg who was worried about Hannah's mother during the birth.[146] Hannah was born without complications on a Sunday with church bells ringing, as the article claimed, and with Sonia crying for her own mother in Lithuania.[147] This moment is a poignant foreshadowing of Hannah's later encounters with the Christian faith as we shall witness below. In an interview many years later, Hannah would explain that her mother was not happy in South Africa and still longed for her parents in Lithuania. She was born Hannah-

[140] Burger, *Piket Teen 'n Berg*, 97. Burger suggests the earliest doctor was probably Dr Klaverwyden from Holland.

[141] [SAJMA], Collection 183, reports and notes of Dr H. Kramer, 30 August 1907-1912. See a reference letter from African Mutual Trust and Assurance Company regarding Dr H.Kramer,signature unclear, 30th August 1907.

[142] *Ibid.*

[143] Versfeld, *Some Memories Some People*, 7.

[144] Kollenberg, *Jewish Life in the South African Country Communities*, 430.

[145] Hospitals division of the Salvation Army: Southern African Territory, accessed at: https://www. salvationarmy.org.za /hospitals/.

[146] [SAJMA], Interview with Hannah-Reeve Sanders conducted by Adrienne Folb, 31 August 2014.

[147] *Ibid.*

Reeve Katzeff, the second child of four siblings – Leah-Sara, Bessie and 'Boetie' Katzeff.[148] After Hannah's birth, Sonia returned directly to Piketberg, to the Kotzé farm.[149] This was Jankel's second place of work, and where he resided with his family. The farm was owned by a generation of the Kotzé family starting with Johannes Christiaan Kotzé.[150] The family had been living on the farm since the early 19th century.[151] During this time Hannah's mother adapted to domestic life in this new environment. "In the 1929 general election the NP won five of the seven rural Western Cape constituencies (Ceres, Malmesbury, Paarl, Piketberg and Stellenbosch), narrowly lost the two others (Cape Flats and Hottentots-Holland) but failed to win a single Cape Town seat,"[152] writes Hermann Giliomee. As historian and lawyer Ivan Kapelus notes, Jewish immigration "coincided with what was defined as a national 'poor white' problem that affected Afrikaners and brought the question of Jewish immigration into [the] political forefront, as they were perceived to be a potential threat to jobs."[153] Furthermore, this was the same year in which a severe drought affected the area of Piketberg regarded as the northern limit of the Swartland wheat growing area.[154] According to a Jewish genealogy newsletter published in 2011, back in 1929 Jews had lent the Piketberg Afrikaners "money with no interest."[155] On the 8th of December 1929 Sonia's third child, Bessie, was born on the Kotze farm.[156] The farm is situated in Platkloof on the Platkloof River a prominent tributary of the Berg River.[157] Sonia raised three children on the Kotze farm during her husband's prolonged absences.[158] The Kotzes did their best to include and accommodate the Katzeffs, to

[148] [UCTSC], [BC152], Interview with Hannah-Reeve Sanders conducted by Anne Digby, Cape Town, 12 April 2006. Here with reference to Digby's interview notes.

[149] [PMC], Sanders, "A Glimpse into Recollections of the Past", *Temple Israel.*

[150] Anon., "A Brief History", accessed at: http://www.platkloof.co.za/. See also the link to "Kotzé family tree" on the same page.

[151] *Ibid.*

[152] Giliomee, "Western Cape farmers and the beginnings", 62.

[153] I. Kapelus, "How true a reflection of the Afrikaner-Jewish relationship was the pre-1948 antisemitism of the Afrikaner Press and Politicians? (Part 1)", *Jewish Affairs*, June 2021.

[154] C. Plen, *Southern African Jewish Genealogy Special Interest Group (SA-SIG) Newsletter*, 11 no. 2 (April 2011), 9; [SBA], INSP 1/1/357, N-P 1937, 13.

[155] Plen, *Southern African Jewish Genealogy Special Interest Group (SA-SIG) Newsletter*, 9.

[156] [SAJMA], Interview with Hannah-Reeve Sanders conducted by Adrienne Folb, Cape Town, 13 March 2003.

[157] Anon, "Berg River System", *State-of-Rivers Report,* 2004. Accessed at: https://www.dws.gov.za /iwqs/rhp/ state_of_ rivers/berg04/berg1.pdf; [SAJMA], Interview with Hannah-Reeve Sanders conducted by Adrienne Folb, Cape Town, 13 March 2003.

[158] Robin Saphra, interview conducted by Leila Bloch, 6 August 2021.

such an extent that the Katzeffs were an integral part of the farm culture. For example, they were afforded space to practise dietary laws (*kashrut*,) and in the evening, Sonia would be invited to 'prayers' where 'Oupa Kotze' would read from the (Christian) Old Testament.[159] The relationship between the two families grew and proved to be long-lasting, enduring into Hannah's later years. Bessie recalled how close the Kotzes and Katzeffs were, especially Hannah's sisters; Leah-Sara and she, Bessie, who were roughly the same age as the Kotze children. Hannah's mother did her best to maintain traditions from her past. When the Kotzes would gather to eat after a pig had been slaughtered, Sonia is said to have exclaimed frantically: "*Leike kum a here*" (Yiddish for 'Leah, come here!').[160] She called Leah away from the non-kosher meat. This falls in line with what would have been general practices of identity retention in the midst of assimilation. Indeed, as noted in Belling's thesis:

> Despite the difficulties of obtaining kosher meat in the country towns, the eastern European immigrant families would do everything in their power to observe their religion. Living remote from the assimilationist tendencies of the city frequently allowed Judaism to flourish in close and intimate small communities. In general, arrangements were made to secure kosher meat from towns such as Stellenbosch, Worcester, and Somerset West.[161]

Despite the obvious reciprocity, the experience of Hannah's parents was more complex, at times seemingly different from each other. According to Sanders' interview and recounting her mother's story, Sonia was deeply unhappy for various reasons when she first arrived, whereas Jankel adapted to the environment with relative ease.[162] Many years later, in her own words, Hannah would offer her own complex understanding of the terms given to the identity of Jews who had assimilated into Afrikaans culture: "please don't call me a boerejood" she has emphasised repeatedly.[163] Despite even close friends defining her as such, in several interviews

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[159] J. Fischer, "Kosher Biotech", *Religion and Society* 9, no. 1 (2018), 52. "The Hebrew term 'kosher' means 'fit' or 'proper' and signifies foods conforming to Jewish dietary law." [SAJMA], Interview with Hannah-Reeve Sanders conducted by Adrienne Folb, Cape Town, 13 March 2003.

[160] *Ibid.*

[161] Belling, "Recovering the Lives of South African Jewish Women", 66.

[162] [SAJMA], Interview with Hannah-Reeve Sanders conducted by Adrienne Folb, 13 March 2003.

[163] [SAJMA], Interview with Hannah-Reeve Sanders conducted by Leila Bloch, Piketberg, 18 October 2018.

Sanders herself resisted the affectionate term (plural: 'boerejode') which directly translates to "Jewish farmer."[164] Shain describes that in terms of running business affairs as well as culturally and linguistically, 'boerejode' generally felt comfortable in these environments.[165] More specifically, according to historian David Saks, the term was not actually used during the years of the Anglo-Boer War, but over time Jews adopted the term with a degree of honour.[166] As with Jankel, historically, the 'boerejode' integrated well. Their impact was felt in these country-town communities with small villages developing around local stores, for example in the Northern Cape town of De Aar.[167] In terms of Hannah's own experience, she recalled being called a 'boerejood' when on holiday with her family in Muizenberg.[168] While this term evidently had positive connotations, Sanders herself remained deeply opposed to it. For example, stressing this sentiment again on a trip to Piketberg:

> There is something about – I can't even explain it to you. I don't like the term, I've never been comfortable with it, but I can't tell you why. The people that use it think it's complimentary. I have never felt comfortable with the term "*boerejode"* I think it is horrible, there is something that says it is a Jew in a funny sort of way. I do not feel like a South African, not a *boerejood*, I am a Jewish woman of Africa.[169]

While Sanders does not explain exactly why she is uncomfortable with the term, her strong statements do raise questions about its complexity. The term could be understood in contradictory ways, in varying contexts. Perhaps, after growing up in Piketberg with Afrikaans as her home language, she was cautious of the prejudice surrounding country communities, when coming to the University of Cape Town (UCT) and having to adapt to a predominantly

[164] Interview with Graham Sonnenberg conducted by Leila Bloch, 23 June 2021; D. Saks, *Boerejode: Jews in the Boer Armed Forces, 1899-1902* (Johannesburg: Charlie Fine Printers, 2010), 12. "Meaning simply Jewish Boer".

[165] M. Shain, interview conducted by Gawie Myburgh, for the *Boerejode Documentary*, filming in progress. *Palama Productions*, 29 April 2021.

[166] D. Saks, interview conducted by Gawie Myburgh, for the *Boerejode Documentary*, filming in progress. *Palama Productions*, 29 April 2021.

[167] S. Issroff and Mike Getz, "De Aar", *SA-SIG: South African Jewish Communities,* February 27, 2003.

[168] Interview with Hannah-Reeve Sanders conducted by Leila Bloch, Cape Town, 25 March 2020.

[169] [SAJMA], Interview with Hannah-Reeve Sanders conducted by Leila Bloch, Piketberg, 18 October 2018.; Interview with Hannah-Reeve Sanders conducted by Leila Bloch, 22 November 2019.

English-speaking environment.[170] This sentiment recurred briefly in later interviews when she admitted to feeling embarrassed when her parents would come to visit her with supplies such as cake and baskets from Piketberg.[171] In 1930, Piketberg was a stronghold of the NP.[172] It has been noted by Milton Shain that disassociations with the term were possibly due to some of their policies which paralleled anti-Semitism in Europe and within the party.[173] During Hannah's early childhood, rising anti-Semitism could be found within the NP, solidified in later years through the Aliens Act, referred to later in this chapter.[174]

Without any photographic evidence, but based on Hannah's own recollections, she said her earliest memory dates back to 1931 the year her brother, 'Boetie' Joe Katzeff, was born in October in Piketberg.[175] When Boetie was born, Hannah's mother sent a message to Jankel (who was presumably travelling for work), informing him. Jankel said that if the baby were a girl he would not come home.[176] Outrageous as Jankel's attitude would seem to modern readers, it is significant that the *Piquetberg Herald* took a stance at what one would nowadays call 'gender roles.' For example, one article described the outrage of the community towards a woman pretending to be a man and another was surprised by the fact that women were allowed to drive.[177] While many of the doctors Hannah referred to as having practised during her childhood were men, a provocative and perhaps humorous article appeared in the *Piquetberg Herald*, entitled "Dr Eve", which debated whether women preferred going to doctors of the same sex, or not.[178] The letter raised questions about the prejudice surrounding the sexes and the merits or demerits of women doctors, as well as the then progressive claims that equality of sexes would possibly be beneficial to society – "we believe that the more women doctors

[170] M. van Biljon, "He who saves a single life", *Sunday Times Magazine,* November 21, 1976, 1.

[171] [SAJMA], Interview with Hannah-Reeve Sanders conducted by Adrienne Folb, Cape Town, 13 March 2003.

[172] Dreyer, *Eeufees-Gedenkboek*, 9.

[173] M. Shain, interview conducted by Gawie Myburgh, for the *Boerejode Documentary*, 29 April 2021.

[174] F. H. Sichel*, From Refugee to Citizen: a sociological study of the immigrants from Hitler-Europe who settled in Southern Africa* (Cape Town: Balkema, 1966), 17.

[175] Interview with D. Meyrowitz (Hannah-Reeve Sanders' great nephew), conducted by Leila Bloch, 20 October 2021. "In essence Boetie had two birthdays …Oupa didn't come back in a hurry when he thought it was another girl…his actual birthday was the 29th of October, but it was registered by Oupa on the 30th October…Boetie actually had two birthdays."

[176] [SAJMA], Interview with Hannah-Reeve Sanders conducted by Adrienne Folb, Cape Town, 13 March 2003.

[177] *Piquetberg Herald*, 18 January 1929, "Woman at the Wheel", 6.

[178] Sanders, "A Glimpse into Recollections of the Past", *Temple Israel.*

there are, the better for the [*sic*] reduction of malingering and of the nation. We believe there would be that morbidity which makes so many women enjoy ill-health."[179] The letter, though tongue-in-cheek, does highlight some of the ways in which the topic of gender was being explored in the early 20th century. The article, albeit comedic in its exaggerations, does raise the question about perceived notions attributed to male doctors. However, advertisements around the time of Boetie's birth show that women were still cast in traditional roles specifically around cooking and housekeeping. This was apparent in advertising for baking ingredients found in headlines such as "Men Like This Cake" and tags such as "That's Why Women Prefer This Baking Powder."[180] In Hannah's home, Sonia inhabited many traditional domestic roles. While we do not know the tone or the way in which the statement from Hannah's father was received, it is indicative of the gender-roles of the time.

Based on Hannah's memory there seems to be a second family home. After the Katzeffs left the Kotze farm they stayed in a house in town before they eventually moved to the house opposite the Dutch Reformed Church. Hannah, recalling what happened in 1931 speaks of crawling on the floor of a small room in Piketberg – in a house that was adjacent to the larger house her parents would subsequently come to own. This comfortable image of home stands in contrast to a Standard Bank report from 1931, where a rather bleak picture of trade was reported for Piketberg at the time. In the 1920s and 1930s there was not much room for economic development, as the district tackled the hardships of the Depression.[181] The Great Depression affected the Union between 1929 and 1934 and affected most South Africans but in particular — Afrikaans farmers and presumably their workers.[182] Mention in Standard Bank reports was made of a "mediocre harvest" during 1931.[183] Moreover, it was noted that the building trade was inactive and there was little demand for town property. Hannah's father's popularity amongst the farming community was in part because he had helped the community

[179] *Piquetberg Herald*, 12 October 1928, "Dr Eve", 2.

[180] *Piquetberg Herald*, 31 August 1928, "Men Like This Cake", 4; *Piquetberg Herald*, 31 August 1928, "That's Why Women Prefer This Baking Powder", 4.

[181] Burger, *Piket Teen 'n Berg*, 399.

[182] A. F. Rommelspacher, "The Everyday Lives of the White South African Housewives: 1918-1945" (MA Thesis: Stellenbosch University, 2017), 40. See also, J.P. Brits, "Political developments and the depression of 1929-1934", in B.J. Liebenberg and S.B. Spies (eds.) *South Africa in the 20th Century* (Pretoria: J.L. van Schaik, 1993), 241.

[183] [SBA] INSP 1/1/294, L-M 1931, Inspection Report at Piquetberg Branch, 14.2.1931, 4.

financially during the Depression years.[184] Despite the Depression, innovation in Piketberg continued: one Junkel Baraitzer, a talented engineer, embarked on many innovative enterprises which benefited all of Piketberg. In 1932 he opened a mineral water works.[185] During these years, at the tail end of the Depression, he erected the well-known Baraitser Bioscope – the new cinema hall.[186] The features of the bioscope were advertised at the time.[187] The cinema which Hannah frequented throughout her childhood under supervision from her father, is referred to in more detail in this chapter.[188] It appeared that families such as Hannah's enjoyed many privileges in comparison to other white people in the area. For example, the white tenants in Velddrift, close by, lived in poor health and economic conditions.[189] Without referring exactly to whom, Sanders said she remembered a time when she became aware of the separation of the various communities: "There were those that were poorer than we were; questions were asked; no easy acceptable answers were given."[190]

According to Versfeld, the years following the Depression were the most comfortable economically for those in his own social strata within Piketberg.[191] Hannah's family was clearly situated in a position of relative affluence, with Piketberg being regarded as one of "several places in the Cape where many well-to-do Jews had settled."[192] There seemed to be an abundance of opportunity in the area for those already in privileged positions. For example, in 1933 Sam Krupp (a Jew) and Hendrik van Niekerk (an Afrikaner) established a wheat business "Van Niekerk and Krupp" in Eendekuil – just outside of Piketberg. The Van Niekerks would sell and process the wheat that the Krupps had bought from farms in the area. Their

[184] [PMC], drawer two, folder entitled: Dokumentasie, Ontvang van dr H.R Sanders- Januarie 2009, "Uit Die Knapsak van die Sandveld – Hoofstuk 8", 106, nd.

[185] Kollenberg, *Jewish Life in the South African Country Communities*, 429.

[186] Burger, *Piket Teen 'n Berg*, 186. "In 1929 Baraitser built the cinema with the Bio-Café and the mineral water factory in 1932". [SBA] INSP 1/1/294, L-M 1931, Inspection Report at Piquetberg Branch, 14.2.1931, 4.

[187] During Hannah's childhood, the cinema was widely advertised in Piketberg's local newspaper in the 1930s, see, "Piketberg Bioscope", *Piquetberg Herald,* 6 April 1928, 4.

[188] [SAJMA], Interview with Hannah-Reeve Sanders conducted by Adrienne Folb, Cape Town, 13 March 2003.

[189] L. van Sittert, "'Velddrift': The Making of a South African Company Town", *Urban History* 28, no. 2 (2001), 201. To help people in the area, "the Department of Health pressurised the Piketberg divisional council to proclaim Velddrift a Local Area in 1932, but the council refused because there was only one owner and thus no rate base."

[190] Interview with Hannah-Reeve Sanders conducted by Leila Bloch, Cape Town, 25 March, 2020; Sanders, "A Glimpse into Recollections of the Past", *Temple Israel.*

[191] Versfeld, *Some Memories, Some People*, 11, 12.

[192] Kollenberg, *Jewish Life in the South African Country Communities*, 426.

partnership led to a thriving enterprise which evolved over many years, officially moving to Piketberg in the 1940s.[193] The complexity of these relations is weighted by the relative well-being of these entrepreneurs, as well as by a more nuanced reading of Afrikaner-Jewish relationships. Given the way in which Sanders positions her own identity, it is clear the benefits of these relationships were multidimensional – despite for the most part being described as idyllic. This 'harmonious environment' cannot be understood through the one-dimensional accounts, but rather through an awareness of contextual complexities as mentioned above including anti-Semitisim.[194]

Growing anti-Semitism and its effects on Piketberg in the early 1930s

Within South Africa the impact of Hitler's rise to power in 1933 was evident in a new rise in emigration from Europe and anti-Semitic organizations such as The Greyshirts, established by Paarl-born Louis T. Weichardt, were attracting substantial support.[195] While not in extensive detail, Hannah did recall their presence.[196] Weichardt was well-known by locals and Piketberg was a place where Jews had attracted the attention of the NP which raised its objections to Jewish immigration.[197] The calls for unequal treatment of Jews came from D.F. Malan, Piketberg's parliamentary representative.[198] After breaking away from the United Party (UP) in 1934, Malan founded the 'Purified' NP after he refused to follow J.B.M. Hertzog into a merger with Jan Smuts' pro-imperial South African Party, as he saw it as a "sell-out of Afrikaner interests."[199] On the 7th of March 1934, a petition was signed by 14 Jews and presented to the Piketberg Town council objecting to a meeting to discuss the influence of Jews in Piketberg.[200] It was noted that locals felt they were competing for the same economic

[193] Burger, *Piket Teen 'n Berg*, 286.

[194] Shain, *A Perfect Storm,*189.

[195] Cuthbertson, "Jewish immigration as an issue in South African politics, 1937-1939", 119; M. Girlin, *The Vision Amazing: The Story of South African Zionism* (Johannesburg: Menorah Books Club South Africa, 1950), 12; D. M. Scher, "Louis T. Weichardt and the South African greyshirt movement", *Kleio* 18, no. 1 (1986), 57; R. Hodes, "Free Fight on the Grand Parade": Resistance to the Greyshirts in 1930s South Africa", *Journal of African Historical Studies* 47, no. 2 (2014), 185; M. Shain, interview by Gawie Myburgh, for the *Boerejode Documentary*, Palama Productions, 29 April 2021.

[196] [SAJMA], Interview with Hannah-Reeve Sanders conducted by Adrienne Folb, Cape Town, 13 March 2003.

[197] Shain, *A Perfect Storm*, 189.

[198] Mouton, "'Dr No'", 578.

[199] *Ibid*.

[200] Kollenberg, *Jewish Life in the South African Country Communities*, 426.

opportunities.[201] However, at this meeting the town council eventually stated that Jews were part of the fabric of the town and therefore could not be relocated.[202] As town council minutes from 1934 and church-meeting minutes do not mention this petition this may be an indication that it was not impactful enough to be reported.[203]

Shop of Myers & Klein General Dealers Circa 1934,
Voortrekker Road (Today the site of Dup Meubels Furniture Shop)

[204]

This anti-Semitic presence, while not directly affecting Hannah in her early childhood, a picture of her comfortable home life emerges in her later school years at the time when Malan's anti-

[201] Burger, *Piket Teen 'n Berg*, 186.

[202] *Ibid.*, 187.

[203] Cape Archives, Cape Town [CA], 4/PKT [Piketberg] Town Council Minutes (1928-41) volume 3, 1934. The absence of minutes detailing this particular meeting might indicate a reluctance on the part of the council to keep a record of such an ignominious move, even though Kollenberg and Burger make mention of it.

[204] [PMC], drawer 2, Photograph of Myers and Klein General Dealers, circa 1934.

Semitic rhetoric intensified in Piketberg during the late 1930s.[205] While the following incident did not occur in Piketberg, but rather in Ladysmith, in 1934 Weichardt was met with combative resistance from a doctor at a Greyshirts' meeting. A local practitioner Dr S.S. Hoffman pointed his finger at Weichardt stating that his claim that 95 % of exploiters in South Africa were Jews, was a lie. A solicitor, one H.B. Cawood, objected to the abuse subsequently endured by Dr Hoffman, declaring that he was a highly respected member of the community.[206]

'Good Doctors'

In a related matter in 1934, one Dr Petronella van Heerden submitted an article to the Women's Page of the *Cape Argus* in the same year.[207] Dr Van Heerden was the first qualified female doctor and gynaecologist in South Africa, and she pointed out that being a female doctor was not entirely out of reach. In fact, while warning of the hard work it entailed, Van Heerden encouraged women to pursue the study of medicine. Furthermore, she reinforced the nobility and honour that comes with the profession. Van Heerden was writing in a widely circulating newspaper and she was described as a "female nonconformist" with her life narrative showing "contestation within the apparently monolithic Afrikaner nationalism".[208] For example, despite holding a leadership position, Van Heerden was known to break her allegiance to the NP because of its anti-Semitic stance.[209] Despite not having a direct influence on Hannah at this stage the precedence set by a rebellious female doctor had been established. As we will see later this did not necessarily have an impact on the young Hannah, who in 1935 was a year away from standard one, the same year in which a separate primary school building was first designated apart from the Piketberg Höer Skool (the latter still situated today at 2 Simon van der Stel Street).[210] In the same year Piketberg was one of the first small towns to receive electricity when Jankel Baraitzer introduced the first electric power installation and began to

[205] M. Green, *Around and About: Memoirs of a South African Newspaper Man* (Johannesburg: David Phillip Publishers, 2004), 30.

[206] *Cape Argus*, 24 October 1934, "Grey Shirt Meeting Incident, Doctor Accuses speaker of lying", 13.

[207] P. van Heerden, "Shall I take a Doctor's Degree? Women in the Study of Medicine", *Cape Argus,* 30 October 1934, 10.

[208] C. van der Westhuizen, "I am berated as a Communist because I sometimes wear a red tie: Not Forgetting the Awkward Afrikaner, Dr Petronella 'Nell' van Heerden", *Auto/Biography Studies* 35, no. 3 (2020), 774.

[209] *Ibid*.

[210] In today's terms grade three. South African Schools Act 84 of 1996, accessed at: https://www.gov.za.

supply the town with power.[211] This was an event which Sanders would recall in later interviews. Dr Robert Osler, was the first recipient of electricity.[212] In 1936 Hannah was listed in The Piketberg High School Annual Report in Standard One along with two others, Wellie Wissema and Harold Braude.[213] Among Hannah's early female influences was Miss Hester Nefdt, her teacher, who played a huge part in her life, with their relationship lasting over many years through a pleasant correspondence.[214] Despite the strict Katzeff home, there was strong female encouragement from both her mother as well as her kindergarten teacher. In these letters, Miss Nefdt had reminded her that Hannah had helped some of the younger classmates to write in the correct way. Sanders also recalled that Nefdt looked upon her female students as "little mothers of the future."[215] During her childhood Hannah and the other children would wait for Miss Nefdt at the Commercial Hotel to walk with her to school.[216] Hannah described her as a fountain of knowledge and someone who taught her to read and think. Nefdt did not discriminate against her Jewish pupils.

Yet, back in Cape Town in 1936 there was opposition against admitting Jewish doctors to SA. An article in *Die Burger* entitled "Joodse Dokters na die Unie" showed that the UP politician and cabinet minister Mr. Hofmeyr was asked what he intended to do to stem the influx of Jewish doctors to the Union.[217] Hofmeyr was quoted in *Die Burger* as having replied that the number of Jewish doctors was very small and suggested that as the training for medical students was three years, possibly implying South Africa could benefit from already qualified doctors arriving in South Africa.[218]

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[211] [UCTSC], [BC1525], Interview with Hannah-Reeve Sanders conducted by Anne Digby, 12 April 2006; Burger, *Piket Teen 'n Berg*, 197.

[212] R. Melzer, "William Osler's Connection with South Africa", *SA Medical Journal Special Issue,* 29 June, 1983, 10; Burger, *Piket Teen 'n Berg*, 87.

[213] [PMC], display cabinet, Piketberg High School Annual Report, Standard 1, 1936, 51.

[214] *Ibid;* [HRSPC], Hannah-Reeve Sanders, speech given at Herschel School for Girls Prize Giving, 23 October 1986; [HRSPC], Juffrou Hester Nefdt, in a letter to Dr Hannah-Reeve Sanders, 9 December 1988.

[215] [HRSPC], Juffrou Hester Nefdt, in a letter to Dr Hannah-Reeve Sanders, 16 May 1986.

[216] [PMC], Display Case, Piketberg High School Annual Report. Miss Nefdt is mentioned in the Piketberg Annual School Magazine in 1936, 6; [PMC], Shani Coetzee, "A History of the Jewish Community in Piketberg and Surrounds", np.

[217] F. S. Herbert. "Jan Hendrik Hofmeyr." *African Affairs* 48, no. 191 (1949), 117–19.

[218] [UCTSC], Kaplan Centre, SA Jewish Board of Deputies Archive at the Beyachad, Press Report, Number 7, 1936, 3.

In a speech at Herzlia High School in 1982, Sanders compared the Herzlia school magazine to the Piketberg High school magazine from 1936.[219] Sanders noted that there were certain subjects in common. For example, descriptions of the processes of nature and the change of the seasons as seen in Avron Weinrich's creative piece entitled, "Spring" written during standard one, or travel pieces (previously, mainly by train, now by air) written in Frikkie Visser's piece entitled, "Our Jo'burg trip".[220] Other stories were about feelings and questions on age-old problems, adolescence, death, and love. Hannah remarked on a contribution by Andries Treurnicht which also appeared in the same magazine. Treurnicht was later to become leader of the Conservative Party in 1982, and was born and matriculated in Piketberg and "raised as a fervent Afrikaner nationalist and Christian [...] who was inspired by DF Malan".[221] This passing reference to the early Treurnicht who also later became a Dutch Reformed minister and "personified the fusion of neo-Calvinist and Afrikaner nationalist doctrines"[222] helps to define Sanders in relation to her contemporaries; Treunricht's arch conservatism, was at variance with Sanders' more moderate views.

As with other women, the milieu that Hannah was born into cannot be understood without taking cognisance of female identity in the socio-political context of the time, in terms of gender, class, and racial divisions. Discrimination based on race occurred long before apartheid came into effect in 1948 which in turn was grafted onto preceding policies of racial separation instituted by the British colonial administration and the South African Party (SAP).[223] Hannah would not have directly benefitted from legislated racial divisions and the advantages that being

[219] [HRSPC], Hannah-Reeve Sanders, a speech given at Herzlia High School Prize Giving, 26 October 1982.

[220] [PMC], display Case, Piketberg High School Annual Report, Creative Work by Alta Brinks (Standard X) titled "Spring", 1936, 35; [HRSPC], Hannah-Reeve Sanders, a speech given at Herzlia High School Prize Giving, 26 October 1982; [PMC], display case, Piketberg High School Annual Report, titled "Our Jo'burg Trip", 1936, 38.

[221] J. Manenzhe, "The Politicisation of Funerals in South Africa During the 20th Century (1900-1994)" (MA Thesis, University of Pretoria: 2007), 73; H. Giliomee, "Obituary: Andries Treurnicht", *Independent*, 26 April 1993; Mouton, "'Dr No'", 578.

[222] Giliomee, *The Afrikaners*, 633.

[223] D. Posel, "Races to Consume: Revisiting South Africa's History of Race, Consumption and the Struggle for Freedom", *Ethical and Racial Studies* 33, no. 2 (2010), 161. I am here relying on Posel's definition of race as: "the social construction of bodily difference, practices that have been inseparable from other fault-lines of difference and repertoires of power" and that the "content of racial difference, and the number of races distinguished, have thus varied across space and time, depending on particular histories of exclusion and domination". See also M. Green, *Around and About: Memoirs of a South African Newspaper Man* (Johannesburg: David Phillip Publishers, 2004), 30.

white implied.[224] However, the documentation of her experiences of the time does serve as a stark reminder of the benefits derived from an inherently unjust system. It was within this context that she cultivated from a young age her ambitions to become a doctor.

Later in life, Hannah would receive letters in English from Sidney Jawitz, son of the Jawitz family, who Hannah's father first worked for.[225] Though specific dates (and thus Hannah's age) are not noted, Sidney recalled with fondness rebellious or just playful moments from their childhood, such as provoking the Rabbi. There was also mention of hard work such as moving chairs back and forth to the Piketberg town hall.[226] From these letters it is not clear how this affected Hannah herself, and if she was an active participant in this behaviour. In his correspondence with Hannah, he recalls what can be described as a childhood of 'innocent fun'. The "Katzeff Clan", as Jawitz described it, included Hannah and her siblings Bessie, Boetie and Leah.[227] There is little evidence that as a young child Hannah rebelled against the 'problematic' environment of Piketberg of which she was a part. Almost all the Jewish children in the area attended the high school in Piketberg.[228] However, the schooling system was segregated with some coloured children attending The Piketberg N.G. Sending Skool.[229] Further indication of this was found in the *Piquetberg Herald* with an article referring to a "coloured teacher conference where teacher Abrahamse, principal of the local D.R. Mission School spoke about matters that concerned the school at the time."[230]

Sanders later reflected in an interview on the reality of racial discrimination that extended into parts of her early childhood, though she did not go into extensive detail. For example, she makes mention of the "Baraitster Bioscope", one of the key meeting places, especially for leisure and social interactions in the community.[231] The Katzeffs would regularly attend the

[224] Posel, "Races to Consume", 161.

[225] [PMC], Sidney J. Jawitz, in a letter to Hannah-Reeve Sanders, 3 May 2004.

[226] *Ibid.*

[227] *Ibid*.

[228] [PMC], Shani Coetzee, "A History of the Jewish Community in Piketberg and Surround", np.

[229] [PMC], in folder entitled DOKUMENTASIE, Ontvang van Dr H.R. Sanders- Januarie 2009, S. Human, "Piketberg N.G Sending Skool, 1910-1960", *Kleurlingonderwys,* nd, 20.

[230] *Piquetberg Herald,* 24 May 1929, "Coloured Teacher Conference".

[231] [SAJMA], Interview with Hannah-Reeve Sanders conducted by Leila Bloch, Piketberg, 18 October 2018; A. Markowitz, "The Story of South African Jewry: Our Nationwide Survey of Jewish Communities: Piquetberg – the Constituency of Dr Malan", *South African Jewish Times,* November 21, 1947, 7.

bioscope. Each week, Hannah's father, Jankel, would decide whether she could watch the movies or not. The bioscope hall had been built with upstairs rows built for 'Coloureds' and downstairs for 'Whites'.[232] According to Sanders' testimony, the children in Hannah's tight-knit Jewish community would be asked to leave whenever members of coloured communities from the De Hoek's Cape Portland cement factory arrived in Mr Shapiro's dress shop. The cement factory gave rise to a thriving industry-driven village.[233] In 1937 it was noted in the Piketberg Standard Bank inspection report that the Piketberg community was defined as generally "unprogressive", although the term is likely used in reference to the general economic position of the town.[234] In the report it was questioned whether Piketberg received any benefit from Cape Portland Cement Company Limited. However, as mentioned above its impact on the town was clear as evidenced by the fact that in 1937 it employed "90 Europeans and 680 natives".[235] In a later interview, Sanders is critical of this problematic split in her social environment.[236]

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[232] [SAJMA], Interview with Hannah-Reeve Sanders conducted by Adrienne Folb, Cape Town, 13 March 2003.

[233] Interview with Hannah-Reeve Sanders conducted by Leila Bloch, 22 Jul 2020 ; P. Beukes, "The Swartland will Bloom Again …With Cement and Arms", *Financial Gazette*, 1976; [SAJMA], Interview with Hannah-Reeve Sanders conducted by Leila Bloch, Piketberg, 18 October 2018; [SAJMA], Interview with Hannah-Reeve Sanders conducted by Leila Bloch, Piketberg, 18 October 2018; Anon, "Piketberg 1910-1960", *Unifees Gedenkuitgawe*, 21. Industrial Activities in Piketberg, Cape Portland Cement Company: De Hoek. The company had begun building houses for employees in 1921, beginning operating in 1922 and doubling in size in 1931 leading to a thriving industry-driven village."

[234] [SBA], INSP 1/1/357, N-P1937, 13.

[235] *Ibid.*

[236] Interview with Hannah-Reeve Sanders conducted by Leila Bloch, 22 July 2020.

[237] [PMC], photograph of the Katzeff house sent from Marie Ehlers, nd.

According to Belling, Jewish immigrants from country communities such as Stellenbosch, Malmesbury, and Piketberg often lived in large houses surrounded by fruit trees.[238] Hannah's family home was no exception to this. In 1937, the Katzeffs moved to their second family home which Jankel Katzeff bought from David Lipsitz and which was originally known as the Pink Hotel with transactions on the property dating back to 1843.[239] It was one of the earliest houses to be built in the vicinity of the Dutch Reformed Church. Main Street number, 16-18 belonged to the Katzeff family until 1995.[240] Leah Katzeff had the biggest room and Hannah shared a room with her siblings Boetie and Bessie. Boetie slept in a far corner with the children's wardrobe and bathroom at the other side. In their bedroom was a dressing table with papers and photographs. In the living room stood traditional items such as a samovar, equipment for tea-making and coffee pots on a little table in the corner. There was a breakfast room and a pantry. The house had space outside, a big sitting room and a front room where their father would rest. Education and household decorum were very important in the Katzeff home. To get to school, Hannah had to walk a short distance, in the direction of the mountain. The Katzeff children would come down the hill from school for lunch, which was the biggest meal of the day, and return to school in the afternoon.[241] Jankel instilled traditional values and boundaries in his family home. For example, the children were never allowed into their father's office.[242] Hannah remembers being late for school occasionally and rushing through the office for breakfast: "if you are coming through this room, you must stop and '*die mense groet*'", he would say.[243] Hannah remembers her father sitting with friends having coffee and being reprimanded on her return from school for not greeting the guests — a courtesy and formality that she would retain throughout her life — as evidenced in the many letters she would send to colleagues and friends.[244] As a young girl, Hannah would sit on the *stoep* of her family home,

[238] Belling, "Recovering the Lives of South African Jewish Women", 50.

[239] Deeds Registration Office, Cape Town, Property report of Erf 397 Piketberg, *Historic Document*, 1937-1995, 1; [PMC], Pat Riley, "Katzeff House: Architectural Notes", 1993.

[240] Kollenberg, *Jewish Life in the South African Country Communities*, 431.

[241] [SAJMA], Interview with Hannah-Reeve Sanders conducted by Adrienne Folb, Cape Town, 13 March 2003.

[242] [SAJMA], Interview with Hannah-Reeve Sanders conducted by Leila Bloch, Piketberg, 18 October 2018.

[243] [SAJMA], Interview with Hannah-Reeve Sanders conducted by Adrienne Folb, Cape Town, 13 March 2003.

[244] Kay De Villiers Personal Collection [KDVPC] from Charl De Villiers, Letter Correspondence between Hannah-Reeve Sanders and Kay De Villiers from 1972-1989.

listening to church services from across the road.[245] Hannah remembers the Sunday church services and the preaching of Ds Jac Muller who ministered in Piketberg from 1933 to 1937.[246] His presence has been noted in several books of the time and he was remembered for his clear voice and earned the nickname "golden mouth" because he was a "particularly eloquent preacher" whose homilies were noted to be particularly sensitive as having an emotive effect on the congregation.[247] Perhaps it was the eloquence of the speeches that drew Hannah to listen to them, a significant occurrence considering she was Jewish.

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Similarly, to their time at the Kotze farm, Hannah's mother remained occupied with domestic matters. Much effort was put into the preparations for Friday nights.[249] The family was observant of Jewish customs, and as noted above, it was Sonia's concern to facilitate this. Sonia would scrub the kitchen and bake traditional Jewish bread called *challah* but not without help. Ella, whom Hannah would later encounter at Groote Schuur Hospital, helped her mother in the

[245] Sanders, "A Glimpse into Recollections of the Past", *Temple Israel.*

[246] F.B. van Niekerk, *150 Genadejare Anderhalfeeufees van die Ned Geref Kerk, Piketberg* (Cape Town: NG Kerk, 1982), 26.

[247] *Ibid.;* A. Dreyer, *Eeufees-Gedenkboek van die Ned. Ger. Kerk, Piketberg, 1833-1933: Geskiedkundige Oorsig van die Honderdjarige Bestaan van die Gemeente* (Stellenbosch: Pro Ecclesia-Drukkery, 1934), 84.

[248] [HRSPC], Photograph entitled "inelegant rider" of "Hannetjie with Pa Jakob Katzeff", nd.

[249] [SAJMA], Interview with Hannah-Reeve Sanders conducted by Adrienne Folb, Cape Town, 13 March 2003.

house.[250] Of significance to the family during the Friday Shabbat family gatherings was the customary lighting of the candles, and the legacy of Hannah's grandparents. Friday night was also an opportunity to share the happenings of the week and retell the stories of the parents' youth. Sonia Katzeff was also an avid singer; she even purchased for herself a piano from Darter and Sons in Cape Town, paying it off at three pounds a month.[251] While the object served an entertaining and decorative addition it could also be seen as an expression of status and cultural meaning within the Katzeff house.[252] In the Victorian era families would be known to gather around the piano, a symbol of homemaking and achievements (especially for women).[253] Sonia filled her house with what Hannah recalls was a beautiful voice, her musicality being a symbol of her freedom. According to Sonia's grandson, Sonia always wanted to be an opera singer.[254]

As Amy Rommelspacher emphasises in her thesis, *The everyday lives of white SA housewives, 1918-1945*, "the undertaking of being a housewife was something taken very seriously by white South African women, both English and Afrikaans."[255] Rommelspacher, quotes an article on the influence of fathers on their daughters' career choices from a magazine that specifically targeted housewives: *Mrs. Slade's South African Good Housekeeping*.[256] Notably, without creating too much contention, the quote from the article highlights certain "economic factors forcing women into the workplace for longer periods of time," and challenges conventions that the "the male must be a wage earner for the greater part of his life" and "the female may find an early escape in marriage."[257] However, it also re-emphasises outdated considerations of women entering the workforce by claiming that "an uncongenial occupation for some years

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[250] G. Hersch, "Challah and Its Performance of American Jewish Identity from the Mid-19th to Early 21st Century" (MA Thesis: Brandeis University, 2018), 1; Interview with Hannah-Reeve Sanders conducted by Leila Bloch, Cape Town, November 2019.

[251] *The Musical Times,* 86 no. 1225 (March 1945), "Miscellaneous", 95; Interview with Hannah-Reeve Sanders conducted by Leila Bloch, Cape Town, 22 July 2019.

[252] F. Carnevali and L. Newton, "Pianos for the People: From Producer to Consumer in Britain, 1851-1914", *Enterprise & Society* 14, no. 1 (2013), 39.

[253] *Ibid.*

[254] [SAJMA], Interview with Hannah-Reeve Sanders conducted by Leila Bloch, Piketberg, 18 October 2018; Interview with Robin Saphra conducted by Leila Bloch, 6 Aug 2021.

[255] A. F. Rommelspacher, "The Everyday Lives of the White South African Housewives: 1918-1945" (MA Thesis: Stellenbosch University, 2017), 40.

[256] *Ibid.*, 12.

[257] *Ibid.,* 68.

may warp a woman's nature and wreck her chances of happiness in married life".[258] These trends and tensions are reflected in Jankel's ambivalence toward his daughter becoming a doctor, but also in Hannah's mother's opposition to his viewpoints. Many years later at Rustenburg Girls' High School, Hannah claimed that this resistance and advocacy might be connected to her mother not having had the opportunity to pursue a career of her own.[259]

In 1937 Hannah marked a significant turning point in her life with Louis Stofberg, the son of the school principal. As the opening vignette of this chapter describes, Stofberg's golf club blow to Hannah's eye led to one of the key influences in her life, namely Dr Isador Kaplan whose father was a good friend of Hannah's parents.[260] For Hannah, he was "the epitome of what a doctor should be."[261] She admired the fact that he was very skilled and the way in which he dealt with people as well as his status and the fact that he had, "standing in the community."[262] During the Second World War Kaplan had worked at a general hospital in Cairo and his standing is reflected in the fact that he was also later the Randlord Sir Ernest Oppenheimer's personal physician.[263] After saving her eye, not only was Hannah filled with gratitude, but felt that something had been shifted within her. Dr Kaplan not only preserved "her sight, but also her vision".[264] Sanders would continue to recount this event as a turning point in her life, "I'm sure that it was the GP in my village who motivated me to study medicine: and yet I'm not a GP – that most selfless of doctors – but a health care planner – and concerned for all the community."[265] Sanders' recalled trying to impress him when he would come to her parents' house by drinking milk to show she was healthy.[266] Like many of her other personal and professional exchanges over the years, it was clear that Sanders retained good relations with Dr Kaplan, as the correspondence attests, that extended into the time just before she left

[258] *Ibid.*

[259] [HRSPC], Hannah-Reeve Sanders, speech given at Rustenburg High School for Girls: Prize giving, 26 October 1981.

[260] Interview with Hannah-Reeve Sanders conducted by Leila Bloch, Cape Town, 25 March 2020; [SAJMA], Interview with Hannah-Reeve Sanders conducted by Adrienne Folb, 31 August 2014.

[261] [UCTSC], [BC1525], Anne Digby interview with Hannah-Reeve Sanders , 12 April 2006.

[262] *Ibid.*

[263] Kollenberg, *Jewish Life in the South African Country Communities*, 426.

[264] [SAJMA], Interview with Hannah-Reeve Sanders conducted by Adrienne Folb, 31 August 2014.

[265] Hannah-Reeve Sanders, speech given at Herschel School for Girls Prize Giving, 23 October 1986.

[266] [SAJMA], Interview with Hannah-Reeve Sanders conducted by Adrienne Folb, 31 August 2014.

Groote Schuur. A letter from Dr Kaplan to Sanders shows mutual admiration and respect.[267] In this letter Dr Kaplan affirms his relationship with the Katzeffs and does not shy away from attributing a generous degree of recognition for her achievements as Chief Medical Superintendent, as seen below:

> "I was charmed by your very affectionate letter," Kaplan writes, "They [her parents] must both be very proud of your amazing achievement, and I share in the limelight of your amazing position in the history of this country."[268]

As explored in the following chapters and challenged within this thesis in its entirety; idealised notions of doctors' achievements cannot merely be understood on face value. Rather, they must be understood within and in relation to the institutional context and historical circumstances which shape the biographical subject. Even though anti-Semitism seems to have been peripheral to Hannah's experience, anti-Semitism on the rise in South Africa as evidenced in the *Zeitgeist* of the late 1930s by the passage of the Aliens Act of 1937 further limiting Jewish migration.[269] While in no way comparable to what had been "experienced in the Russian Empire or what Jews were experiencing in Europe, it was nonetheless on the rise in South Africa," remarks biographer Egonne Roth. These sentiments were already clear in Malan's Piketberg speeches.[270]

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[267] [PMC], Dr Isodor Kaplan, letter to Hannah-Reeve Sanders, 17 April 1985.

[268] *Ibid.*

[269] Sichel, *From Refugee to Citizen*, 17; Cuthbertson, "Jewish immigration as an issue in South African politics, 1937-1939", 119; Paul Bartrop, *The Evian Conference of 1938 and the Jewish Refugee Crisis* (Palgrave Macmillan, 2018), 27, "Significantly, South Africa in the wake of the Aliens Act, unlike the other Dominions, did not send a delegation to the 1938 Evian Conference which ostensibly sought to find a solution to the Jewish refugee crisis."

[270] E. Roth, "Lessons in Writing the Biography of the Crossover Poet, Olga Kirsch", *Journal of Literature* 54, no. 1 (2017), 64; Shain, "Paradoxical Ambiguity", 67. "Any lingering doubts about Malan's intentions were dispelled when he spelt out his party's legislative vision vis a vis the Jews in another speech in Piquetberg. 'We have proposed that the Jews who come here and have not yet received citizenship shall not receive it. The Jews must be regarded as unassimilable. (*Die Transvaler*, 26 January 1938)".

Photograph found at the Piketberg Museum titled "Dr Malan neem deel aan n' optog op Piketberg. U sien die doktor te perd tweede van voor 1938."[271]

Indeed, leading into and after the 1938 election Piketberg became something of a NP stronghold. As Lindie Koorts has suggested, while the parliamentary numbers were overwhelmingly in favour of the UP, a closer analysis of the figures shows the Nationalists were not far behind.[272] Particularly in the Cape Province as a whole it was only 1,343 votes which separated the UP majority from the NP. In this context, one in which the Nationalists were only narrowly defeated in Stellenbosch and Paarl, one can learn something from the political sentiments reflected in Piketberg in which Sanders was raised, for, as Koorts writes; "[i]n the Cape Province…Malan himself moved from Calvinia to the constituency of Piketberg – always considered a safe seat" – where he was elected by a landslide.[273]

In this same year in a speech given in the area, Malan accused the Jews of being a "tightly knit group manipulating things behind the scenes at a national and international level."[274] In another speech in Piketberg in the same year, he elaborated on his party's vision, stressing that Jews who had not yet received citizenship should be denied the same.[275] Based on the acceptance of

[271] [PMC], drawer 2, photograph titled: "Dr Malan neem deel aan n' optog op Piketberg. U sien die doktor te perd tweede van voor", 1938.

[272] Koorts, *D.F. Malan and the Rise of Afrikaner Nationalism*, 322.

[273] *Ibid.*

[274] Shain, "Paradoxical Ambiguity", 66. Quoting *Die Burger,* 25 January 1938

[275] *Ibid*., 67.

Jews in Piketberg and reports of good relations, one would assume that locals in Piketberg would have rejected these sentiments, but this does not seem to have been the case with some. While there is little evidence of overt scepticism or "fear" as Shain defines it, this period can be understood more accurately through the notion of "ambivalence".[276] A writer for the *Jewish Report*, a few years after Malan's speeches "gained the impression that war-time Jew baiting in the district…was a political expedient rather than a deep-felt conviction among those who practised it."[277] In a later interview, Sanders herself recalled that when Malan was coming to a meeting in the village, her father cautioned her to "stay at home, don't get involved, leave it alone," opting to shelter his family from politics.[278] According to Hannah, growing up, her Jewish peers were not often exposed to overt anti-Semitism, but knew they were different.[279] Dora Shapiro (another Lithuanian immigrant who grew up in Piketberg) expressed similar experiences of being well-integrated.[280] Sanders referred to isolated incidents and general feelings of prejudice. She recalled a boy called Piri, the son of a friend of her father. She remembers him, Piri, saying to another boy "*Daar loop die Joodtjie*."[281]

33The need to adapt was so strong within the Katzeff household that they eventually adopted Afrikaans as their home language, despite it not being their language of origin.[282] Perhaps because Afrikaans and Yiddish were both Germanic languages it made it easier for Jankel to speak both. At this point Jankel's career and his family were rooted in Piketberg society. In a *Commercial Directory of South and Central Africa* Jankel is listed as, "Katzeff, J., Farmer, Livestock Dealer and Speculator; Church Street."[283] He was known to have supplied horses to the British during the Second World War.[284] During the Second World War, the South African government purchased mules to 'serve' as draft animals. The animals had to be cleared by

[276] Interview with Milton Shain conducted by Leila Bloch, March 2021.

[277] A. Markowitz, "The Story of South African Jewry – Our Nation Wide Survey of Jewish Communities: Piquetberg – the Constituency of Dr Malan", *South African Jewish Times,* 21 November 1947, 7.

[278] [SAJMA], Interview with Hannah-Reeve Sanders conducted by Adrienne Folb, Cape Town, 13 March 2003.

[279] Hannah-Reeve Sanders, interview conducted by Leila Bloch, Cape Town, 9 August 2019.

[280][UCTSC], [KC], interviews, item A225, Dora Shapiro, interviewed by Eva Horwitz in an interview titled "Mrs Dora Shapiro", Cape Town, 5 August 1998.

[281] Interview with Hannah-Reeve Sanders conducted by Leila Bloch, Cape Town, 25 March 2020.

[282] M. van Biljon, "He who saves a single life", *Sunday Times Magazine,* 21 November 1976.

[283] [PMC], A.C. Braby, *Braby's Commercial Directory of South And Central Africa* (Durban: A.C. Braby, 1943), 1696.

[284] Interview with Barry Katzeff conducted by Leila Bloch, 20 October 2021

officers.[285] As Jankel was one of the biggest horse dealers in Piketberg it makes sense that he would be supplying horses to the army.[286] During this time, however, Hannah continued to pursue her own ambitions despite her father's prior reservations. There was a strong awareness in the Katzeff family of what their relatives were going through in Europe. Hannah would have been 11 years old when the Second World War broke out in 1939 – a year before she was to enter Piketberg High School in 1940.

The early writing of Bessie Kotze (whom Hannah would have known from her family's days on the Kotze farm) written in Standard One, describes how her family was affected by the war. Even though it is written from a child's perspective it does lend insight into the time where the children were so affected that they allegedly wore Voortrekkers caps and took to the streets of Piketberg, shouting "South Africa for the South Africans" — to protest against the war in Europe, underscoring the NP neutrality stance *vis à vis* the world conflict. Bessie wrote that her family did not feel the impact of the war for the first couple of years, then things got expensive and there was paucity of resources.[287]

Hannah was not the only female doctor to come from Piketberg: Janetha Deborah Lion-Cachet began studying medicine at UCT in 1940 a year after matriculating at Piketberg High School.[288] With the intention of doing good for people and society, according to an article housed at the Piketberg Museum, at 13, Hannah decided to become a doctor.[289] In an interview many years later Hannah would claim that so many youngsters from Piketberg went on to do medicine because, aside from the influence of local practitioners, "[at]once you felt you got esteem from the community and it seemed like a professional thing to do."[290] Her mention of local practitioners, apart from Isador Kaplan, included an Afrikaner doctor, Dr Ackerman.[291]

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[285] G. Richter, *Geskiedenis van die koringbedryf vanaf Tafelvallei tot die Rooi-Karoo (1652-2009)* (Stellenbosch: African SUN MeDIA, 2010), 38.

[286] Interview with Barry Katzeff conducted by Leila Bloch, 20 October 2021.

[287] [HRSPC], hand-written note, "Ouma se tyd by Bessie Kotze", nd.

[288] W.S. van Niekerk, "In Memoriam: Janetha Lion-Cachet", *South African Medical Journal,* 93 no.1 (January, 2003), 1–3.

[289] Anon, [PMC], drawer 2, untitled article on Dr Hannah-Reeve Katzeff Sanders, "that's what I wanted to do, up until that time all I ever wanted to do was to be a teacher. It changed between standard three and standard 6"

[290] [SAJMA], Interview with Hannah-Reeve Sanders conducted by Adrienne Folb, 31 August 2014.

[291] *Ibid.*

Repeated mention was made of Dr Ackerman in town council meetings' minutes.[292] The importance the town council placed on medicine and doctors was clear. For example, it was noted that the town council would cover transportation costs for patients needing to be sent to hospital, presumably in Cape Town. In particular, the *raad* (town council) paid for one of Dr Ackerman's patients to be sent to hospital suffering from a broken bone.[293] Trained at the University of Cape Town (UCT) and Stellenbosch (SU), Dr Ackerman was one of three students to complete his qualifications in Scotland during the First World War. He was known to mix his own medicines and practised in Piketberg for 50 years.[294]

According to school reports from the time Hannah faced little difficulty academically at the Afrikaans medium school she attended. For example, a certificate of merit from 1941 stated that Hannah achieved best in her class.[295] Reports also highlight her musical skill, an abiding interest for the rest of her life.[296] In 1941 a report described Hannah-Reeve as understanding "the delicacy of the production", "ready and fluent" in music.[297] While she continued to progress academically, she still retained a close connection to the family's past in Lithuania, often walking with her mother to post and receive letters to and from Mažeikiai. Hannah would "talk with the letters" before posting them. Part of this letter exchange has been kept within the archives at Yad Vashem in Israel.

"How often I would fondle the letters to Lithuania," Sanders remembers:

> before putting them in the Piketberg Post Office post box, while I explained to them the route they would travel to my grandparents. You are going a long way to Cape Town by train ... then to the harbour, and on a Union Castle ship to the United Kingdom. After that you will cross

[292] [CA] 4/PKT Piketberg, *Piketberg Afdelingsraad Algemene Notule Boek* 5, April 1928 Desember 1941, Vrydag 13de, Maart 1936, 3.

[293] *Ibid.*

[294] Anon, "Herinneringe van Dr JJ Ackerman – Piketberg Algemene Praktisyn vanaf 1917 tot 1976", 3 May 2017, accessed at: http://piketbergmuseum.co.za.

[295] [PMC], certificate of merit for Hannah-Reeve Katzeff, 1941.

[296] [PMC], Hannah-Reeve Katzeff, School Reports: 1940-1943; [HRSPC], The many programmes she kept from musically performance in her life.

[297] [PMC], Hannah-Reeve Katzeff, School Reports: 1940-1943.

> the North Sea and go to Lithuania ... and eventually to the farm of my maternal grandparents in Neverai or my paternal grandparents in the village of Mažeikiai.[298]

Hannah used to wonder what it would have been like to know her grandparents. The contents of some of these letters were mentioned in the *Cape Jewish Chronicle* in an interview with Jankel Katzeff.[299] He mentioned that the last letter they received from their relatives in 1941 was when Lithuania was under Soviet control.[300] The suffering of her grandparents and curiosity about her parent's home in Lithuania persisted. Perhaps this led to a more nuanced understanding of the way in which her parents had adapted to life in South Africa.

There were many factors that may have influenced immigrants and their children's choice to pursue medicine. In some respects, it may have been a route out of poverty and a route to social mobility.[301] As Talana Weil notes, a factor in the depopulation of the *platteland* was due to Jewish parents' following their children who had gone to study in the cities.[302] Quite exceptional in the case of Hannah, was her mother's investment in her daughter's career. It was Hannah's mother, not her father, who encouraged her to study medicine.[303] It was "mother [who] thought it was ok [to study medicine]; my father thought it was a waste of time" thinking that Hannah should do something less time-consuming and more domestic.[304] "I think he had been talking to his friends," Sanders recalls. "He said, 'you'll have half of it; you'll find somebody and get married and that will be that."[305] Perhaps it was Sonia's own unmet potential that inspired her daughters to relentlessly pursue their own aspirations. "My mother," Sanders said to an all-girls school many years later, "was adamant that her daughters would be given

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[298] Anon, Jacob Gitlin Library, [JGL],"From Lithuania to South Africa - A New Beginning - A Tragic End", *Cape Jewish Chronicle*, June 1988; [SAJMA], Interview with Hannah-Reeve Sanders conducted by Adrienne Folb, 31 August 2014. Sanders' grandparents were subsequently murdered in Lithuania by the Nazis.

[299] *Ibid.*

[300] *Ibid.*

[301] [SAJMA], notes taken by Margaret at the South African Jewish Museum, Topic: Exhibition planning for Jewish Doctor, 2014.

[302] T. Weil, "Die Inskakeling Van Die Jode by Die Afrikaanssprekende Gemeenskap op Die Platteland Van 1880 Tot 1950" (MA Tesis: Stellenbosch Universiteit, 2000), 3.

[303] [HRSPC], Hannah-Reeve Sanders, speech at Rustenburg High School for Girls: Prize Giving, 26 October 1981.

[304] [UCTSPC], Madeleine van Biljon, "He who saves a single life", *Sunday Times Magazine,* 21 November 1976.

[305] *Ibid.*

that opportunity."[306] Sonia's influence on Hannah encouraged her to move forward and 'progress' while the family were still adapting to life in Piketberg.

The Katzeffs were still aware of the Holocaust and the fate of their family in Europe. Hannah recalls a conversation in 1942 between her parents at the time of the Fall of Tobruk during the North African campaign. Sanders remembers her mother telling her father that if things changed and the Germans came to Piketberg, Sonia would poison her family's food.[307] The contrast to their family's fate and the legacy of their Judaism were unlikely to have been lost to them. However, it would appear that, although the Katzeff family were observant, it was not exclusive. While the family clearly affected Sanders deeply, there is no reference to the expanding Zionisim of the post-war era. Such relatively secular Judaism may have explained why the Piketberg Jews were so well integrated in the Afrikaner community and into broader South African medical and professional life.

During this time, Hannah continued to pursue her own ambitions at school.[308] The only records available of Hannah at Piketberg High School today are a record of her subjects from 1943.[309]

[306] [HRSPC], Hannah-Reeve Sanders, speech at Rustenburg High School for Girls: Prize Giving, 26 October 1981.

[307] [SAJMA], Interview with Hannah-Reeve Sanders conducted by Adrienne Folb, 13 March 2003.

[308] [PMC], display case, A.C. Braby, *Braby's Commercial Directory of South And Central Africa* (Durban: A.C. Braby, 1943), 1696. "Katzeff, J., Farmer, Livestock Dealer and Speculator; Church Street."

[309] Riana Smit (Secretary Höerskool Piketberg), email to author, 25 March 2021.

Photograph titled "Piketberg Synagogue Service" with Jacob Katzeff's at the front row right, unknown date.[310]

In an interview many years later Sanders recalled the letter that she wrote to apply to the University of Cape Town (UCT).[311] The original letter was found in her school diary, written in 1944 where she asked several practical questions around tuition fees, accommodation, leave and extracurricular activities. Deeply affective motivations to study medicine are seen in more creative diary entries. In an essay titled: *The Lily in the Meadows* written in 1945, Hannah expresses a dream she had about Groote Schuur Hospital in an almost uncanny moment of foreshadowing, with respect to her later role as Chief Medical Superintendent. "Groote Schuur Hospital, I hear as the matron announces unwillingly, that there was an accident in one of the cul-de-sacs."[312] In the piece Hannah is required to attend to the accident. In a similar text dated 20th of June, in 1945, Hannah envisions the achievement of a female doctor: "Dr Stella Meyer MB. ChB! Is that even possible? Can it be true? Stella is staring outside the window of her consultation room."[313] In later interviews Sanders reflected on how young doctors often start

[310] [SAJMA], Piketberg collection, photograph titled "Piketberg Synagogue Service," nd.

[311] Interview with Hannah-Reeve Sanders conducted by Leila Bloch, Cape Town, 25 March 2020.

[312] [HRPS], Hannah-Reeve Sanders School Writing Book, 20 June 1945, 24.

[313] *Ibid.*

off with the image of saving people on a grand scale.[314] While these diary entries are written from a child's perspective, they show early practical pursuits of medicine, encouragement from the school and the obligation Hannah felt to pursue the profession before even graduating from Piketberg High School in 1945.[315]

Many high school records and reports were lost in a fire that damaged the school in the 1960s and a subsequent fire in 1992 which affected the library and municipal building.[316] However, remaining records found in the Piketberg Museum show that Hannah participated in the Piketberg High School *konsert*: *Jan Van Windmeulland. `n Hollandse Operetta vir Seuns en Dogters* by Clementine Ward. Hannah was cast as the main character, as widow Vrou Martendyk.[317] In 1945, Hannah graduated from Piketberg High School top of her class, an advantageous achievement when it came to acceptance into medical school.[318] Based on the long lineage of importance placed on education within the homes of Jewish immigrants, it was not exceptional for Jews to enter University in the 1930s.[319] Education remained an important element in Sanders' career. Her family were regarded after all as "people of the book" and according to a well-known Jewish doctor, Naomi Rapeport, this could be based on the aspiration to transcend their immigrant pasts. Those who could afford to send their children to university from country communities did so.

Hannah's younger sister Bessie Katzeff was also engaged by the idea of medicine and hospitals from a young age. In her creative piece in the school magazine of 1945, Bessie wrote: "All is quiet behind the battle lines. Only in the distance you can hear guns being fired and in the hospital the moaning of the patients. Why must some people have so much pain while others go through life untouched."[320] In later interviews, Sanders felt that her older sister, Leah, was cleverer than she was and desperate to move out but at this point there was no career guidance.

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[314] [SAJMA], Interview with Hannah-Reeve Sanders conducted by Adrienne Folb, 31 August 2014.

[315] [PMC], Hannah-Reeve Katzeff Senior Certificate and Höer Taal Bond, 1945.

[316] Piketberg Tourism, South Africa. Accessed at: https://www.triphobo.com/places/piketberg-western-cape-south-africa.

[317] [PMC], programme for a concert held at Piketberg High School in which Hannah-Reeve Sanders participated, see P.H.S Konsert, *Jan Van Windmeulland. `n Hollandse Operetta vir Seuns en Dogters* deur Clementine Ward.

[318] [UCTSC], [BC1525], Christa Meyer, speech given as introduction of Hannah-Reeve Sanders at the 10th Vona Du Toit Memorial lecture, 9 July 1985.

[319] I. Kapelus, "How true a reflection of the Afrikaner-Jewish relationship was the pre-1948 antisemitism of the Afrikaner Press and Politicians? (Part 1)", *Jewish Affairs*, unknown date, 4.

[320] [PMC], drawer two, Bessie Katzeff, "1945".

Eventually Leah studied economics, becoming a highly successful human rights specialist who has worked as a consultant with Human Rights Committee of the United Nations as well as director of Justice, the British Section of the International Commission Jurists.[321]Sanders felt that Leah regretted not having studied medicine or law. However, as illustrated further on in these chapters at this point, it was unusual for women to enter the medical field.[322]

Robin recalled a story of Sanders from her childhood in which Jankel said: *"Hoekom moet 'n meisie universiteit toe gaan.?"* However, Robin speculates that even though Jankel had been generous and placed a value on education, Sonia had secretly saved money to send Hannah to university.[323] According to Sanders, the battle for education was driven by her mother who even offered to pay for her daughter's education with *melkgeld* when Hannah's father resisted.[324] Within the domestic sphere in which Sonia was for the most part confined, it seemed she was also given the opportunity to pursue her own industriousness. As well as trading horses, Jankel bought two cows for Sonia. She sold milk, cheese and buttermilk, thereby acquiring the 'melkgeld' to buy material for dresses and contribute towards Hannah's university education. From Sanders' speech at Rustenburg Girls Highschool, it was very clear that Hannah's mother was the driving force behind her daughter's success. Sonia not only encouraged but practically supported her daughter's education.[325]

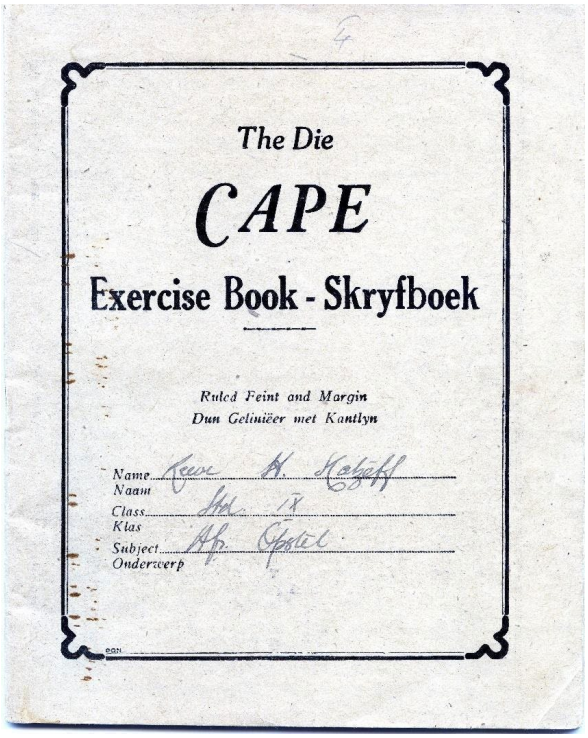
[321] Leah Levin (ed.), *Human Rights: Questions and Answers* (Paris: UNESCO Publishing, 2009), 10.

[322] [SAJMA], Interview with Hannah-Reeve Sanders conducted by Adrienne Folb, 13 March 2003.

[323] Interview with Robin Saphra conducted by Leila Bloch, 6 August 2021.

[324] Sanders, "A Glimpse into Recollections of the Past", *Temple Israel*, "The milk money from the white cheese, butter cream and milk which she prepared and sold".

[325] [SAJMA], Interview with Hannah-Reeve Sanders conducted by Adrienne Folb, Cape Town, 13 March 2003.



A photograph of Hannah-Reeve Sanders' school writing book, which included some diary entries for creative projects, obtained from Hannah-Reeve Sanders' personal collection of documents. [326]

> Responsibility and contribution. Hannah-Reeve Sanders is light years away from the small Lithuanian village that bred her parents, but she is firmly rooted in the family tradition that regards assimilation without loss of identity as essential and places the worth of a human being on what he or she gives back to the community.[327]

Through the experiences of Hannah and her family one can consider the complexities of assimilation and changing gender relations in interwar South Africa. The affluence and comforts of her tight-knit home environment sheltered Hannah from any overt economic or social struggles. As a young girl Hannah was at most only peripherally aware of oppressive and unjust structures in South African society and would therefore have been unlikely to react to, or resist them. In the case of the Katzeffs they adapted economically and while staying within their close-knit Jewish community, relationships between Jews and Afrikaners in Piketberg were generally unproblematic. Through Jankel's foresight in escaping Lithuania,

[326] [HRSPC], Hannah-Reeve Katzeff, school writing book, cover page.

[327] M. van Biljon, "He who saves a single life," *Sunday Times Magazine,* 21 November 1976.

obviously, with hindsight, anything was better than the course their lives would have taken had they stayed in Europe. Thus, their adaptation to Piketberg was relatively uncomplicated. What was apparent was the strong effect of her grandparents' situation – informed by the curiosity of Hannah's correspondence with them during her childhood and reference to them later on in life. This commitment to her family's past perhaps cultivated a sense of responsibility in her. However, as seen in the following chapters, the circumstances in which she found herself often dictated to what extent she could influence her inevitably compromised environments, both politically and socially.[328]

[328] [SAJMA], photograph titled "Hannah-Reeve Sanders on a visit to Lithuania", nd.

Chapter Three: My Daughter the Doctor: Early Signs of Leadership in the Medical Field from 1946–1967

Hannah-Reeve Katzeff (still known as Hannetjie from Piketberg)[1] *maintained an air of formality even from a young age in a leadership position during her student years. In 1952, at the University of Cape Town, Hannah-Reeve Katzeff dressed up for the Fuller Hall annual dance.*[2] *A photograph from Sanders' personal collection shows her seated in an elegant silk dress, staring into the distance with a photograph of her mother behind her.*[3] *She does not look directly at the camera, behind her is a photograph of her mother. One cannot make out the exact expression on her face. She seems amused though slightly concerned, or perhaps she is deep in thought, surrounded by books. It is unclear whether the photograph was taken before or after the dance. In the interviews Sanders spoke of the many dances and social activities in which she participated. This is the first photograph sourced from her collection of her time in Residence, a modest pictorial depiction of the subject. There is a formality in her stance, and, in a way, she could be described as ageless. One wonders what degree of studious reflection went into the time that she spent at Fuller Hall advancing in her career. She is dressed for an evening of entertainment but is decidedly focused and stern.* [4]

In oral history interviews conducted with Dr Hannah-Reeve Sanders (Sanders) (nèe) Hannah-Reeve Katzeff , she reflects on her time at the University of Cape Town (UCT) and recalls that her family respected the medical profession.[5] There was little doubt in Sanders' mind about becoming a doctor and when it came to entering medical school, "I just presumed!" she exclaimed in an interview with Anne Digby.[6] This self-assurance emerged in various ways in Katzeff's early professional career. The present chapter seeks to follow Katzeff's early career leading to her superintendency of Groote Schuur Hospital (GSH) in 1976. Several of these

[1][UCTSC], [BC1525], Christa Meyer, Introduction at the 10th Vona du Toit Memorial lecture 9 July 1985.

[2] [HRSPC], photograph, "Women's Residence 1952", Annual Dance".

[3] Interview with Hannah-Reeve Sanders conducted by Leila Bloch, 13 November 2020.

[4] Interview with Graham Sonnenberg conducted by Leila Bloch, 23 June 2021, "because she was a very serious person. You know, career woman and everything else."

[5] Interview with Hannah-Reeve Sanders conducted by Leila Bloch, Cape Town, 22 July 2020.

[6] [HRSPC], Hannah-Reeve Sanders, speech given at Herschel School for Girls: Prize giving, 23 October 1986; [UCTSC], [BC1525], Interview with Hannah-Reeve Sanders conducted by Anne Digby, 12 April 2006.

transitions took place between 1946–1967 and trace her years of study and early career, from Piketberg to the women's residence at UCT, Fuller Hall, to brief periods spent in London and finally back to South Africa, where, after bearing witness to the effects of the polio epidemic at Cape Town's Red Cross War Memorial Children's Hospital, a clear path toward administrative medicine comes to the fore.[7] In this new role as a medical administrator, Sanders would become a participant in key medical events, engaging professionally with high-profile doctors in predominantly male-dominated working environments. Here she was forced to confront circumstances amid ground-breaking medical procedures, *inter alia*, fielding the media frenzy during the world's first heart transplant. In her move from clinical to administrative medicine, Sanders began to inhabit an increasingly public persona, one marked by nuanced and decisive leadership, while at the same time starting a family. Here one needs to examine the decisions taken within these early stages of life that serve as an important backdrop for analysing her role as the chief medical superintendent of Groote Schuur Hospital, and in particular within the socio-political context of the time.

Playing it safe in medical school

When Katzeff arrived in Cape Town to study among a handful of women that were studying medicine, she was known as "Hannetjie van Piketberg."[8] Nicknames were not an uncommon occurrence in the medical faculty, even among the 'big three' of the first clinical heads.[9] For example, Arthur Wellesley Falconer was known by his students as 'Oubaas.'[10] Hannah's endearing nickname stands in contrast to the many professional and public titles she would acquire over the years, as one may observe in several English, as well as Afrikaans, newspapers.[11] Sanders recalls these early years of medicine at the University of Cape Town –

[7] H. Swingler, "Fuller Gears Up for 90th Celebrations", *UCT News*, 8 August 2018.

[8] H-R. Sanders, "Reunion Roundup from the 50-year reunion of the Class of 1952 held in 2002", Faculty of Health Sciences at the University of Cape Town. Accessed at: http://www.health.uct.ac.za/fhs/alumni/.reunions/roundup/2002/1952class. Hannah notes that there were nine females in the class of 123 students in 1952. [UCTSC], [BC1525], Christa Meyer, introductory speech given at the 10th Vona du Toit Memorial Lecture 9 July 1985.

[9] D. M. Dent and G. Perez, "The place and the person: Named buildings, rooms and places on the campus of the Faculty of Health Sciences, University of Cape Town", *South African Medical Journal* 102, no. 6 (2012), 897. "The Big Three were Arthur Wellesley Falconer, Charles Saint (surgery) and Cuthbert Creighton (obstetrics and gynaecology)".

[10] *Ibid.*

[11] *The Argus*, 15 May 1986, "Sanders appointed to top hospital post."; *Rand Daily Mail,* 23 March 1977, "On the box tonight P.G. Du Plessis guest at 8:55; Dr Hannah-Reeve Sanders Superintendent of Groote Schuur Hospital". *Die Burger* 69, 18 December 1983, "Aanval "Nie Teen Hospitaal", 2.

which began in 1946, a year after the end of World War Two. She was a student alongside "1500 ex-servicemen and servicewomen who flooded into the University," with many of these predominantly "male war veterans choosing to study medicine."[12] The crowded environment in which the medical students studied has been well-documented in South African medical history, and is also reiterated in Sanders' own recollections.[13] Classes ranging from botany, anatomy, physiology and clinical training over the four-year program were very large in numbers, with students being divided into two classes for morning lectures and practicals in the afternoon.[14]

The influence of the ex-servicemen's presence on student life manifested itself in varying ways. Brookes Heywood, a medical student at the time, described the way in which the ex-servicemen would "take over the back rows of the class, disrupting sub-standard lectures by throwing darts."[15] They were represented as contributing to a masculine and goal-directed atmosphere, both in and out of the classroom – seeking to make up for "time lost to the war."[16] A female contemporary of Hannah, Esther Sapire (a specialist in sexology in the erstwhile Southern Rhodesia and South Africa), confirms this experience of masculinity, by describing the pressure she felt to perform in the midst of her male colleagues.[17] In a later interview, Sapire reflected on how the nine female students among the 123 males would often sit together in the same row and that she found the culture between the women to be, by contrast, supportive rather than competitive.[18]

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[12] H. Phillips and H. Menteith Robertson, *The University of Cape Town 1818-1948: The Formative Years* (Cape Town: University of Cape Town Press, 1993), 225; H. Phillips, *University of Cape Town Under Apartheid: Part 1 – From Onset to Sit-in, 1948–1968* (Cape Town: University of Cape Town Press, 2020), 287, 227.

[13] B. Heywood, "From Green Ties to Green Ribbons" in R. E. Kirsch and C. Knox (eds.) *UCT Medical School at 75* (Cape Town, Department of Medicine, University of Cape Town, 1987), 119. Interview with Hannah-Reeve Sanders conducted by Leila Bloch, 22 July 2020.

[14] Gwynne Robins, email to author, 13 November 2020; Interview with Jocelyne Kane-Berman conducted by Leila Bloch with, 7 August 2020.

[15] Heywood, "From Green Ties to Green Ribbons", 119.

[16] Phillips and Robertson, *The University of Cape Town 1818-1948*, 279.

[17] Interview with Dr Esther Sapire conducted by Leila Bloch, 3 August 2020; Esther Sapire, "Izindaba", *South African Medical Journal* 95, no. 10 (2005), 716–730.

[18] Sanders, "Reunion Roundup from the 50-year reunion of the Class of 1952 held in 2002".

Based on a speech that Sanders gave to fellow colleagues towards the end of her career, her experience of the time is framed somewhat differently.[19] Sanders focused on the hope that the ex-servicemen brought with them for a new way of life, one with "no more war or inhumanity."[20] What these first years of study at UCT's medical school begin to indicate, is that, despite what might be considered a daunting learning environment (particularly with respect to classroom crowding and the distinct and dominant masculine atmosphere present), Katzeff appears to have taken such circumstances in her stride and adapted to her formal education with "relative ease."[21] While she would go on to criticize such idealism in her farewell speech, considering the damaging consequences of apartheid policies that followed so soon after the war, this portrayal of the time alludes to Sanders' continued self-realisation, but not without an awareness of gendered environments.[22] Both Sapire and Katzeff would have studied at a time when UCT, like its sister institution at the University of the Witwatersrand (WITS) in Johannesburg, was subject to apartheid legislation which excluded black enrolments.[23] Sapire's reflections confirm the reality that it was uncommon for women to be studying medicine, (let alone people of colour) at the time and she goes on to call her opportunity to study a "privilege."[24] While there was no "formal legislation before 1948 to restrict the admission of a black person to a South African university, there were policies in place which effectively barred blacks from study."[25] This discriminatory culture extended into further acts of racial exclusion from both sporting and social events.[26] Such exclusion continued not just during the period of Katzeff's time at UCT Medical School, but also well after.[27]

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[19] [HRSPC], Hannah-Reeve Sanders, speech given at the University Of Cape Town Faculty Of Health Sciences Graduation Ceremony, 8 December 1998.

[20] *Ibid.*

[21] L. Walker, "The Colour White: Racial and Gendered Closure in the South African Medical Profession", *Ethnic and Racial Studies* 28, no. 2 (2005), 353.

[22] [HRSPC], Hannah-Reeve Sanders, speech given at the University Of Cape Town Faculty Of Health Sciences Graduation Ceremony, 8 December 1998

[23] Phillips and Robertson, *The University of Cape Town 1818-1948*, 53. See also, A. M. Perez, N. A. and L. London, "Racial Discrimination: Experiences of Black Medical School Alumni at the University of Cape Town, 1945-1994", *South African Medical Journal* 102, no. 6 (1999), 574.

[24] Interview with Dr Esther Sapire conducted by Leila Bloch, 3 August 2020.

[25] Perez, *et al.*, "Racial Discrimination", 574.

[26] *Ibid.*

[27] Digby and Phillips, *et al*., *At the Heart of Healing*, 118.

World War Two presented white South African women with new opportunities in what were otherwise restricted professions, giving women the opportunity to enter newly created spaces within the medical world.[28] As a result, white South African women could study medicine and become doctors with little obstruction both during and after the war. As Liz Walker comments, this is opposed to:

> the experience of British and American women where (gendered) war-time gains were short-lived…even at the lowest levels of medical training…there were no institutional barriers that restricted women's entry into the field, nor did their movement into the profession receive any attention from the state.[29]

Katzeff took advantage of these opportunities during this period in South African history. It is significant to note that she ambitiously pursued a career as a doctor instead of a nurse — a more widely accepted profession for women in South Africa.[30] She and her fellow students embraced the long working hours and derived much satisfaction from the work they were doing.[31] Moreover, in identifying behaviour among medical women at the time, Walker further comments on the general "polite assertiveness" and non-feminist stance of the white, middle-class South African Society of Medical Women (founded in 1950), which was also evident in other organisations such as the Medical Association of South Africa and the South African Nursing Association neither "overtly challenging the status quo."[32]

One of the many factors which accounted for the roots of gross inequality in healthcare in South Africa originated from the urban-rural divide. This saw urban areas as generally better

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[28] L. Walker, "'Conservative Pioneers': The Formation of the South African Society of Medical Women", *Social History of Medicine* 14, no. 3 (2001), 489.

[29] *Ibid.*

[30] Digby, *Diversity and Division in Medicine*, 232. "Reflects on the essentialist stereotype of nursing as a female occupation linked to the empathic, caring qualities of womanliness, and in turn this has produced a female history which serves as a complement to the masculine history of doctors. South Africa's experience of mainstream female nursing was therefore very different from that found in many other parts of Africa where male nurses were at first the norm".

[31] [UCTSC], [BC1525], Interview with Hannah-Reeve Sanders conducted by Anne Digby, 12 April 2006.

[32] Walker, "'Conservative Pioneers'", 484, 495.

resourced.[33] Hannah's move from her rural upbringing to the city would mean she had more access to the type of occupations she could aspire towards and the type of education she would receive. Many of her speeches over the years would take place in private schools within the unequal education system.[34]

As reflected in a later speech to Herschel Girls' High School (an all-girls private school in Cape Town) she was relatively aware of racial discrimination.[35] However, in these early years, at least initially, the latter appears to be nothing more than a display of social awareness, as she suggests: "It was here on campus that I first became aware of the fact that there were other people who were not in a position to enjoy the facilities of tertiary education; that there was much discrimination in society on the basis of skin, colour, race, religion and of sex!"[36] However, these later comments regarding her societal concern, should be considered with scrutiny, since in a speech to Herschel Girls many years later, she claims the exact opposite: that she had never thought about sexual discrimination or much about race at that point.[37] As Phillips notes, regardless of racial or ethnic differences, medical students maintained an air of superiority and arrogance with regard to other students. This global superiority complex could be attributed to advances in the medical field after World War Two, "The swollen-headedness and unrestrained arrogance of medical students has now reached a point where a stethoscope and a white coat have become symbols of the unfounded presumptuousness of a crude bantam-cock mentality, railed an infuriated Varsity columnist."[38] Insofar as Katzeff is concerned, there is little evidence of any direct political involvement or activism during this time. Indeed, as the following chapters will show, it is by continuing to resist the temptation to fall within any overt political persuasion that Sanders was able to enact reforms, however subtle, from within the institution itself, indicating an inherently pioneering and progressive disposition, particularly in light of the political and social circumstances in which she operated.

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[33] H.C.J. van Rensburg and A. Fourie, "Inequalities in South African health care: Part I. The problem – manifestations and origins", *South African Medical Journal* 84, no. 2 (1994), 97.

[34] J. W. Fedderke, R. de Kadt, and J. M. Luiz. "Uneducating South Africa: The Failure to Address the 1910-1993 Legacy." *International review of education* 46 no. 3–4 (2000), 257–281.

[35] [HRSPC], Hannah-Reeve Sanders, speech given at Herschel School for Girls: Prize giving, 23 October 1986.

[36] [HRSPC], Hannah-Reeve Sanders, speech given at the University Of Cape Town Faculty Of Health Sciences Graduation Ceremony, 8 December 1998.

[37] [HRSPC], Hannah-Reeve Sanders, speech given at Herschel School for Girls: Prize giving, 23 October 1986.

[38] H. Phillips, *University of Cape Town Under Apartheid: Part 1 – From Onset to Sit-in, 1948–1968* (Cape Town: University of Cape Town Press, 2020), 140. Quoted from *Varsity* newspaper, 19 May 1949.

Speaking English and Afrikaans in residence

Living in an all-women's residence would also demand that Katzeff adapt to a foreign environment. In 1946, Katzeff lived among 215 other female students in what was then named "Women's Residence" – an institution that placed particular value on "proper female behaviour."[39] The latter (before becoming known as Fuller Hall in 1950) was, along with Baxter Hall, one of the principal women's residences at the University of Cape Town.[40] In her own reflections, Katzeff states that it was not an easy transition from growing up in Piketberg.[41] During a later speech at Rustenburg Girls' High School, Katzeff admitted to initially feeling quite overwhelmed when she first arrived: "coming to live in a big city, in a university women's residence at the age of seventeen was a very special experience as I had never been to boarding school. It needed quite a lot of adjusting," she said.[42] However, she further acknowledged that she never regretted this difficult period, where, at first, she had to adapt to city life, communal living in residence, and speaking English. Katzeff utilized her versatility of language, enabling her to adapt well during her university years, predominantly through her bilingualism. For example, she would often find herself translating what she heard into Afrikaans and then translating her response back into English.[43] The head of Fuller Hall, Mrs D.S. Emmett, in a reference letter written for Katzeff , described her as being "completely bilingual."[44] Sanders confirmed that this "benadering", or 'approach', allowed her to move between the Afrikaans and English-speaking worlds – a linguistic fluidity that would resonate and influence much of her professional career as we will begin to see.[45] As Sanders recalled, "English is the language of tuition at the University of Cape Town and I found myself listening, translating into Afrikaans and back into English. I have never regretted those difficult times: it is good to speak, read and write both our official languages."[46] Thus, while there were indeed English-speaking Jewish girls in her class with whom Katzeff maintained friendships, there

[39] [UCTSC], [BC1525], D. S. Emmett, Reference Letter written for Hannah-Reeve Sanders, November 1952; Phillips, *University of Cape Town Under Apartheid*, 140. Quoted from *Varsity* newspaper, 19 May 1949.

[40] *Ibid*, 281.

[41] Interview with Hannah-Reeve Sanders conducted by Leila Bloch, 22 July 2020.

[42] [HRSPC], Hannah-Reeve Sanders, speech at Rustenburg High School for Girls: Prize giving, 26 October 1981.

[43] *Ibid.*

[44] [UCTAA] University of Cape Town General Prospectus Calendar University Hostels, 1947-1948, 38; [UCTSC], [BC1525], D. S. Emmett, Reference Letter written for Hannah-Reeve Sanders, November 1952.

[45] Interview with Hannah-Reeve Sanders conducted by Leila Bloch, 22 July 2020.

[46] [HRSPC], Hannah-Reeve Sanders, speech at Rustenburg High School for Girls: Prize giving, 26 October 1981.

were also groups of Afrikaans girls with whom she felt just as, if not more, comfortable.[47] While it is difficult to assess the overall quality of these friendships with other women in the residence, we do get a sense of the formal living environment they shared. Although not very close, one particular Jewish classmate and co-resident already mentioned, Esther Sapire, described the rigid and formal code in the residence especially with respect to time; she recalled the strict curfew, the scheduled group meal times, and having to wait for everyone to have finished eating before being allowed to continue with one's activities.[48] Such formalities were a part of residential life where "the girls" were prohibited from walking alone in the woods unaccompanied, and were only allowed to go out on Saturdays until 12pm.[49] Despite these prohibitions, Katzeff seems to have thrived during her time at Fuller Hall. Aside from forming friendships with residents from different backgrounds, she also spoke about integrating socially through dance, specifically, through traditional Afrikaans dances called "Volk Speletjies" which would take place on a Friday evening (traditionally the Jewish Sabbath).[50] These were not the only dances she would attend: in a 1986 obituary of the late Dr A. W. Falconer, affectionately known as "Porky", Sanders writes of a memory where he picked her up to attend the 21st birthday party of H.R.H. Princess Elizabeth at Government House in 1947. The civic ball was attended by over 3000 guests and was described as so crowded that the Princess was only able to dance for a short time.[51] The event was described as a "fairy-tale come true for those privileged to be there."[52] Mr J.H. Hofmeyr was the Minister in Attendance as was General Smuts, as well as other cabinet ministers and diplomats.[53] The royal tour, the first post-World War Two visit to South Africa by the Royal Family, was considered contentious in Afrikaner nationalist circles, "in which the crown was associated with imperial domination and English

[47] Interview with Dr Esther Sapire conducted by Leila Bloch, 3 August 2020.

[48] *Ibid.*

[49] [HRSPC], Hannah-Reeve Sanders, speech given at Hannah-Reeve Sanders' Farewell when she left Groote Schuur Hospital, 26 June 1986; Interview with Jocelyne Kane-Berman conducted by Leila Bloch, 7 August 2020.

[50] [HRSPC], Hannah-Reeve Sanders, speech given at Hannah-Reeve Sanders' Farewell when she left Groote Schuur Hospital, 26 June 1986; L. D. Marks, T. G. Hatch, and D. C. Dollahite, "Sacred Practices and Family Processes in a Jewish Context: Shabbat as the Weekly Family Ritual Par Excellence", *Family Process*, 57 no. 2 (2018), 448–461.

[51] Her Majesty The Queen, a speech by the Queen on her 21st Birthday, April 21, 1947, broadcast on the radio from Cape Town while she was touring South Africa. Accessed at: https://www.royal.uk/ 21st-birthday-speech - 21-april-1947; *The Cape Argus,* 22 April 1947, "3000 at the Civic Ball Charmed by Princess", 4; *The Cape Argus,* 23 April 1947, "Princess Elizabeth Hemmed in by Dancers at Civic Ball", 4.

[52] *The Cape Argus, 22* April 1947, "Princess's Birthday Ball: Youth and Beauty at Government House", 4.

[53] *Ibid.*

cultural hegemony."[54] Falconer's father was A.W. Falconer, a well-known medical doctor that among others received the C.B.E and D.S.O. awards and became the second Rector and vice-Chancellor of UCT in 1938 – a position he held until 1947.[55] Porky therefore probably received an invitation on the strength of his father's position and fame. The event was also an indication of the upper middle class social circles he (and apparently Sanders) moved in. A "grand occasion" indeed, Sanders wrote, though 'Porky' was to dance with Princess Margaret, she ruefully recalled.[56]

Extracurricular Focus and (non)Politics

Hannah-Reeve Katzeff's youthful ability to socially adapt worked alongside her active participation in leadership positions. For example, serving on the hostel's house committee as a "successful leader and organiser."[57] According to her successor at Groote Schuur Hospital (GSH), Jocelyne Kane-Berman, who was three years behind her in residence, Katzeff would have been one of the hard workers in comparison to some of the other students. Speculating, she says, "I am sure, even in those years, she would have been strongly committed."[58] Jocelyne Kane-Berman admitted she was quite frightened when Katzeff was head of the house as she was known to reprimand fellow students if they stepped out of line.[59]

While there were earlier expressions of struggle in the adaption to residence at the beginning of university life, Katzeff reflected positively on her involvement in extracurricular engagements which included a wide range of activities. As we will continue to see, Katzeff's social networking is a common thread that runs throughout her student years and into later life. She would later recall to her colleagues at her GSH farewell:

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[54] H. Sapire and A. Grundlingh, "Rebuffing Royals? Afrikaners and the royal visit to South Africa in 1947", *Journal of Imperial and Commonwealth History* 46 no. 3 (2018), 9.

[55] W. J. de Kock (ed.) *The Dictionary of South African Biography Volume III* (Pretoria: Tafelberg, The Human Sciences Research Council, 1977), s.v. "AW Falconer", 293.

[56] H.-R Sanders, "In Memoriam: Arthur Wellesley Falconer", *South African Medical Journal*, 2 August 1986, 186.

[57] [UCTSC], [BC1525], D. S. Emmett, Reference Letter written for Hannah-Reeve Sanders, November 1952.

[58] Interview with Jocelyne Kane-Berman conducted by Leila Bloch, 7 August 2020.

[59] *Ibid.*

> My time at the university was so very happy: I participated fully in many extra mural activities: RAG with its commitment to the Student Health and Welfare Organisation (SHAWCO); Intervarsity Experimental Theatre (I will have you know I have performed on the stage of the Little Theatre). Of course, I played hockey, golf, soft ball and sailed.[60]

It is important to note in this connection with the RAG's commitment to SHAWCO – a student-led organisation providing healthcare and education to segregated communities in Cape Town, including Kensington, Retreat, and Elsies River – that the former had no direct involvement in the latter.[61] SHAWCO, conceived by Andrew Kinnear, had already been established with the help of Golda Selzer, herself a UCT medical school graduate who was known for expertise in clinical pathology and later became the first curator of the pathology museum.[62] Selzer worked in conjunction with the Union of Jewish Women (UJW) an organisation Sanders would be personally connected to in the years to follow.[63]

Phillips defines the years succeeding 1948 at UCT as being split between shielding the university's policies of non-segregation while permitting unofficial segregation to continue at extracurricular events.[64] While Katzeff was intensely involved in student activities during the later 40s and early 50s, there is no specific mention of her being involved in any form of student

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[60] D. M. Favara and S. C. Mendelsohn, "The Students' Health and Welfare Centres Organisation (SHAWCO) of the University of Cape Town: A Review of the Past 69 Years", *South African Medical Journal,* 102 no. 6 (2012), 400–402. The story of the SHAWCO begins during the early 1940s, when industry allied to the Second World War effort attracted large numbers of indigent job-seekers to the Cape Town area. [HRSPC], Hannah-Reeve Sanders, speech given at her farewell when she left Groote Schuur Hospital, 26 June 1986.See also [UCTAA], Stack 38 bay 6, Shelf 6, Box 01. Of which there is no photographic evidence in little theatre pamphlet books from the time. For example, Hannah-Reeve Sanders did not appear in the *Coming of Age* booklet, *History of the Little Theatre 1931-1952*.

[61] D. Katz, "The Students' Health and Welfare Centre (SHAWCO), University of Cape Town, South Africa", *British Journal of Medical Education* 1, no. 3 (1967), 1

[62] Favara and Mendelsohn, "The Students' Health and Welfare Centres Organisation", 400; Anon, "Golda Selzer Prize", *UCT Division of Medical Virology,* accessed at: http://www.Virology.uct.ac.za/ vir/awards/golda-selzer-prize. This source refers to a biography of Golda Selzer, written as part of the description of the prize in their name on UCT's Division of Virology website; Phillips and Robertson, *The University of Cape Town 1818-1948*, 106; J. Yeats and R. Bowen, *Poster: The Evolution of the UCT Pathology Learning Center* (Cape Town: UCT Pathology Learning Center, 2012). Accessed at: http://www.pathology learning centre.uct.ac.za/.

[63] [UCTSC], [BC1390], Toni Saphra Papers.

[64] Phillips, *University of Cape Town Under Apartheid,* 259.

politics.[65] This formal 'apolitical' posture would be maintained in later years as she continued to navigate the medical institutional hierarchy. However, as we will see in the following chapters, being apolitical for Katzeff did not necessarily mean being drawn into political quietism.

In 1948 Sanders was nominated to the Intervarsity Committee alongside neurosurgeon and historian, Dr J.C. de Villiers, then a fellow medical student.[66] This was during De Villiers' third and Katzeff's second year of study and the beginning of their long-standing friendship, as evidenced in a substantial letter correspondence in later years (depicted in the following chapter).[67]

An SRC (Student Representative Council) correspondence letter appointing a J. Wilkinson, Miss H. R. Katzeff was listed as serving on the Inter-Varsity Committee in 1949 with one other woman, Miss M Strauss.[68] A full list of members from the 1949 report confirmed this.[69] As noted by her warden, Lady Emmett, Katzeff served as secretary of the RAG Committee in 1949, as well as on the Intervarsity Committee in 1949 and 1950.[70] In 1950, Miss R. Katzeff was listed on the inter-varsity committee where it was noted that she and a Miss Van Ryneveld, very "capably and economically" took charge of costumes for the annual singing event.[71]

During those two years she was also head girl of the women's residence.[72] In Sanders' own reflections, she felt that in many ways it was Lady Warden D.S. Emmett who provided her with the encouragement to become head student.[73] Emmett was a widow of the well-received late

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[65] P. Jackson, "We Came by Accident, and Stayed on Purpose" in R. E. Kirsch and C. Knox (eds.) *UCT Medical School at 75*, 150.

[66] G. Fieggen, "Obituary: Emeritus Professor Jacquez Charl 'Kay' de Villiers", *South African Journal of Surgery* 57, no. 1 (2019), 61; J.R. Cowling, "The Life of JC (Kay) De Villiers 1928-2018 – A life in Medicine." (Unpublished PhD thesis: Stellenbosch University).

[67] Kay de Villiers Personal Correspondence [KDVPC]Letter Correspondence between Hannah-Reeve Sanders and Kay De Villiers from 1972- 198

[68] [UCTAA], file 1947, Letter Correspondence from Hon. Secretary of the Intervarsity File to J. Wilkinson, 18 March 1949.

[69] [UCTAA], SRC Box 57, P. J. De Beet, *Summary Report of the Inter-Varsity Committee,* 1949-1953, 2.

[70] *Ibid*; [UCTSC], [BC1525], D. S. Emmett, Reference Letter written for Hannah-Reeve Sanders, November 1952.

[71] [UCTAA], SRC Box 57, P. J. De Beet, *Summary Report of the Inter-Varsity Committee,* 1949-1953, 2.

[72] [UCTSC], [BC1525], D. S. Emmett, Reference Letter written for Hannah-Reeve Sanders, November 1952.

[73] [UCTSC], [BC1525], Anne Digby interview with Hannah-Reeve Sanders, 12 April 2006.

Professor of Law, Eric Emmett, who committed suicide in 1945 shocking the UCT community.[74] According to Sanders' interview with Anne Digby, Sanders had a close relationship with the warden, a key maternal figure for her, who in this period of her life represented the value of ambition and education as Emmett was degreed with "an incredible innate sense of what young people were about."[75]

One might speculate that perhaps it was this length of the stay, apart from her position as Head Girl, which would further contribute to Sanders' entrenched popularity at Fuller Hall. In 1950, Hannah's fifth year, the Women's Residence was renamed Fuller Hall, after the late Maria Emmeline Barnard Fuller, one of the first four women to enrol at UCT in 1887.[76] However, in the Faculty of Medicine by 1950, "women only represented about 5 % of the 181 staff duties" and only the anatomy lecturer, Joan van der Horst, then junior assistant in medicine, and Golda Selzer, the first assistant in pathology, were not part time.[77] Golda Selzer had a similar experience to Katzeff, where Selzer recalled first being denied a senior position based on her gender by Professor Marinus van den Ende, Dean of the Medical Faculty.[78] However, this was "overruled by UCT's Principal, T.B. Davie."[79] The later Sanders' valued the networks she developed in residence. In her later years she was involved in the reunion organisation committee in 1997. A 75th anniversary photo warmly featured Sanders alongside Pam Golding (icon in the South African property sector) – a connection dating back to residence days.

In 1951 the Joint Staff Agreement was signed, formalising a long-standing working relationship between the Cape Provincial Administration (CPA) and UCT's Medical Faculty (MF), the significance of which would be noted by Katzeff and her successor Jocelyne Kane-Berman . This agreement would impact all teaching and working relationships going forward,

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[74] Phillips and Robertson, *The University of Cape Town 1818-1948*, 229, 69.

[75] [UCTSC], [BC1525], Anne Digby interview with Hannah-Reeve Sanders, 12 April 2006.

[76] Interview with Hannah-Reeve Sanders conducted by Leila Bloch, 17 August 2020 ; Anon, "Fuller Bust Honours the Woman Behind the Name", *UCT News*, December 8,2010. Accessed at: https://www.news.uct.ac.za/article/-2010-12-08-fuller-bust-honours- the-woman-behind-the-name; H. Swingler, "Fuller Gears Up for 90th Celebrations", *UCT News*, August 8, 2018. Accessed at: https:// www.news.uct.ac.za/article/-2018-08-08-fuller-gears-up-for-90th-celebrations.

[77] Digby and Phillips, *et al*., *At the Heart of Healing*, 274; She was probably related to the well-known Van der Horst family. See: *The Dictionary of South African Biography Volume III*, "Van der Horst", 820–821.

[78] C. J. Beyers (ed.) *The Dictionary of South African Biography Volume IV* (Pretoria: Tafelberg, The Human Sciences Research Council, 1981), 718-719.

[79] *Ibid.*

placing these institutions into a combined collaborative force.[80] The year 1951 remains somewhat inconclusive for the biographer concerning Katzeff , with the only information regarding that year being gleaned from personal interviews, as access to study records, for example, is now no longer permitted in accordance with the Protection of Personal Information Act of 2013 (POPI Act).[81] Nevertheless, Sanders explained that she had taken a year off to re-do a course and had, at that point, changed accommodation to spend her final year at Medical Residence, a mixed gender residence on the UCT campus for senior students.[82] Despite overall scant historical details during this year, her growing reputation was confirmed by a profile featured in UCT's official student newspaper, *Varsity.* The column entitled, "Personality Parade," described her as someone with interests that included philosophy and music, and with much prescience, as a practical person who preferred action over "dreamy idealism".[83]

[80] H.-R Sanders and J. Kane-Berman, "History: The University of Cape Town's Medical Faculty and Groote Schuur Hospital", *South African Medical Journal* 102, no. 6 (2012), 394.

[81] Interview with Hannah-Reeve Sanders conducted by Leila Bloch, 23 November 2020; Protection of Personal Information Act, 2013, (Act no. 3 of 2013), *Government Gazette* 581 no. 37067, 26 November 2013.

[82] Interview with Hannah-Reeve Sanders conducted by Leila Bloch, 23 November 2020; A. Forder, "The Gunn Run Res" in *UCT Medical School at 75,* ed. Ralph E. Kirsch and Catherine Knox (Cape Town, Department of Medicine, University of Cape Town, 1987), 160.

[83] [UCTSPC], Varsity, June 1951, as quoted in J.R. Cowling. "The Life of JC (Kay) De Villiers 1928- 2018 – A life in Medicine" (Unpublished PhD thesis: Stellenbosch University).

Hannah-Reeve Katzeff (Head Student) at the Women's Residence Annual Dance in 1952, from Sanders' personal collection.[84]

As seen in her graduation certificate, Hannah-Reeve Katzeff graduated on 12th December 1952 with a degree of Bachelor of Medicine and Surgery.[85] Her name appeared among seven other women's names: Beryl Constance Archer, Isadore Katz, Maria Johanna Louw, Marie Elizabeth Roux, Vivienne Schein, Mavis Belle Stoch and Ada Truppin.[86]

[84] [HRSPC], The photograph is titled: "Women's Residence 1952", "Annual Dance".

[85] [HRSPC], Photograph of Hannah-Reeve Katzeff's degree of Bachelor of Medicine and Bachelor of Surgery, signed on 12 December 1952.

[86] [UCTAA], University of Cape Town Graduation Booklet, Graduation Programmes 1917-1965, List of graduates from the Faculty of Medicine 12 December 1952, 6-7.

Photograph from Hannah-Reeve Sanders' personal collection of (Hannah-Reeve Katzeff's) Graduation, 12 December 1952.[87]

This photograph is taken in front of the then Jameson Hall at the University of Cape Town's Upper Campus, where graduation ceremonies are held. Leah and Archie Levin (Leah's husband) are seen in the background.[88] This was also the graduation at which Katzeff's brother, Joseph Katzeff, also known as 'Boetie' (the affectionate Afrikaans name he would come to adopt and by which many family members would refer to him, since he was the only brother in the family), also received his Bachelor of Arts, Honours in Geology.[89]

[87] [HRSPC], Photograph of HRK's graduation, Hannah-Reeve Katzeff is in the centre, 1952.

[88] Interview with Robin Saphra conducted by Leila Bloch, 6 August 2021.

[89] For the role that language plays as an important ethnic identity marker, see Barbara Bosch, "Ethnicity Marker's in Afrikaans", *International Journal of the Sociology of Language* 144 (2000), 51–68; Interview with D.

Written in the same year as Katzeff graduated, an article appeared in the South African Medical Journal (SAMJ) claiming that the primary aims of any South African medical school were to produce *male* doctors fit enough for medical practice. It furthermore listed the attributes and systems needed for them to achieve this goal.[90] This social gendering in medicine was not unique and can be viewed within the global assumption which generally viewed women as nurses and men as doctors.[91]

By 1952 (the year of Katzeff's graduation), in the whole of South Africa, women comprised only six % of registered medical doctors.[92] Between 1952 and 1963, the proportion of registered women doctors in South Africa only went from six % to eleven %.[93] While the male-dominated presence in the medical field is statistically clear, Professor of Health and Social Work, Liz Walker, nonetheless makes the somewhat counterintuitive statement, namely, that despite the social realities, institutionally, "[i]n the pre- and post-war years, white women accessed medical training with relative ease." She goes on to say that "unlike their international counterparts, white South African women encountered no institutional barriers and restrictions that prevented them from obtaining entry into local medical schools."[94] While there were no institutional barriers to their access to medical school there may well have been social and personal reasons for the dismal increase in the numbers of women doctors between 1952 and 1963.

From the above sources, aside from the praise for Katzeff's hard work and adaptability, there does indeed seem to be a certain effortlessness with which she inhabited her leadership roles, as well as the initial entry into the medical field. She appears to have been committed to her vocation and well-received.

Meyrowitz (Hannah-Reeve Sanders great nephew) conducted by Leila Bloch, 20 October 2021; [UCTAA], UCT Graduation Programmes 1917-1965, University of Cape Town Graduation Booklet, 12 December 1952, 5.

[90] A.G. Oettle, "The aims and tasks of undergraduate medical education in South Africa", *South African Medical Journal* 26, no. 12 (1952), 240.

[91] C. Connolly and N. Rogers, "'Who Is the Nurse?' Rethinking the History of Gender and Medicine", *Magazine of History* 19, no. 5 (2005), 45.

[92] Walker, "Conservative Pioneers", 487.

[93] *Ibid.*

[94] *Ibid.*

Towards administrative medicine and motherhood

In 1953, Hannah-Reeve Katzeff began her first internship in the department of neuropsychiatry at UCT's GSH hospital.[95] It was compulsory for medical students to complete their internship at the end of their medical studies.[96] In Katzeff's case it comprised six months of surgery and six months of medicine. Based on her testimony, she was more drawn to psychiatry: "which is really the line I would have taken."[97] The implications of this brief introduction to psychiatry in 1953 were significant. While she did not take to surgery as strongly, she developed a strong relationship with psychiatry as a medical discipline which continued as an area of interest until very late into her career.[98] In her own words she stated that her "real aim was psychiatry, neuro-psychiatry, but psychiatry hadn't become the thing that it was."[99] Her successor, Jocelyne Kane-Berman defined the later Sanders' love of psychiatry and blend "of her own natural warmth" as an "excellent mix for a leader."[100] Indeed, the passion for the discipline is revealed in her own reflections in several interviews, press clippings and archival material which show her attendance at various psychiatry conferences throughout the 1960s, as well as her well-kept notes from a talk by good friend, the "founding head of psychiatry and mental health at UCT," Lynn Gillis.[101] She felt that the source of her enjoyment and devotion to the hospital system in general was found during this time at the neuro-psychiatry ward. As she recalled in a later interview:

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[95] [PMC], Hannah-Reeve Sanders documents, Hannah-Reeve Sanders' Curriculum Vitae, 1945-1986.

[96] A. Digby, "Black Doctors and Discrimination under South Africa's Apartheid Regime", *Medical History* 57, no. 2 (2013), 278.

[97] Interview with Hannah-Reeve Sanders conducted by Leila Bloch, 22 July 2020; [SAJMA], Interview with Hannah-Reeve Sanders conducted by Adrienne Folb, 31 August 2014.

[98] A. Kassiem, "No title", *Cape Times* May 12, 2006. "New high care facility opens it door at Valkenberg, opening of high care admission unit. Chairwoman of the friends of Valkenberg Trust Hannah-Reeve Sanders said it was 'a great relief" to see the project finished as it had been due to be completed 7 years ago."

[99] L. Gillis, "The historical development of psychiatry in South Africa since 1652: Overview", *The South African Journal of Psychiatry* 18, no. 3 (2012), 78–82.

[100] Interview with Jocelyne Kane-Berman conducted by Leila Bloch, 7 August 2020.

[101] [SAJMA], Interview with Hannah-Reeve Sanders conducted by Adrienne Folb, 31 August 2014; [GSHA], [HRS] files, folder entitled: Psychiatry file, Conference Itinerary, National Conference Psychiatry JHB, August 1974; [HRSPC], Hannah's well-kept notes in Hymie Moross, *TARA* written on Lynn Gillis's appointment to Head of Psychiatry, February 1962; Interview with Jocelyne Kane-Berman conducted by Leila Bloch, 7 August 2020; D. Stein, "Passing of Lynn Gillis", *Department of Psychiatry and Mental Health News*, 28 May 2020. Accessed at: http://www.psychiatry.uct.ac.za/news/passing-lynn-gillis.

> I know that the foundation for my real enjoyment and my love of the hospital and the environment and the people, was laid in that neuro-psychiatry ward, which was adult, and mature, and grown up, and outward looking. It really was. I mean, I think … you see … of the other interns were doing surgery. I was going to do surgery afterwards, and obstetric and gynae – but they never had the nuances of Frances Ames, and Sam Berman.[102]

The latter figures, but particularly Frances Ames, the senior registrar, possibly left a mark on the young Katzeff who was at this point only twenty-five years of age.[103] The later Sanders' described Ames as extraordinary with many layers to her personality but not without her cutting side. Ames would question her pupils when they gave their answers. Sanders went on to describe Ames as an unusual person, but who was always for the underdog.[104] Indeed, Ames not only graduated as the first woman with a medical degree from UCT, followed subsequently with a professorship in neurology, but would also go on to receive the "Star of Africa" award for the role she played in her anti-apartheid activism – exposing the doctors involved in the death of Steve Biko.[105] Working in the same ward and following a number of encounters, Sanders noted the enormous admiration she had for Ames and her clinical acumen. Here, one should not underestimate the indirect influence that encounters with such figures as these would have on the young Katzeff . In later interviews Sanders refers to the significance of Frances Ames. Sanders claimed they got on well and did not only encounter Ames but referred to Ames as a close friend. Based on these interviews, it seemed that Ames became a role model for Sanders, who admired and sometimes aligned herself with Ames' political stance, particularly regarding her actions around the Biko case. In Sanders' later years she attempted to see Ames as much as she could but felt she had some unfinished business with her and that she never

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[102] [UCTSC], [BC1525], Interview with Hannah-Reeve Sanders conducted by Anne Digby, 12 April 2006.

[103] G. Shaw, "Frances Ames: Doctor who exposed the medical scandal behind Steve Biko's death", *The Guardian,* 22 November 2002. Accessed at: https://www.theguardian.com/news/2002/nov/22/ guardianobituaries. Frances Ames is also the well-known of the memoir, *Mothering in Apartheid Society* (2002).

[104] P. Sidley, "Obituary of Frances Ames: Neurologist Who Fought the South African Medical Establishment Over the Death in Custody of Black Activist Steve Biko", *British Medical Journal* 325, no. 7376 (2002), 1265; Interview with Hannah-Reeve Sanders conducted by Leila Bloch, 22 July 2020.

[105] C. Richmond, "Obituary of Frances Ames", *The Lancet* 361, no. 9351 (2003), 91; Anon, "POST Welcomes Frances Ames Scholar", *Asia Australia Mental Health (AAMH),* 1 July 2015.

actually got to see the authentic side to Ames personality.[106] Interestingly, despite the accumulation of these experiences with other women in medicine with talent and respectable career trajectories, Hannah-Reeve Katzeff would still opt for the more moderate track of administration. But the way into this line of medicine would still be marked by many turns.

During the early 1950s Katzeff had still not decided on a definite medical track, but many years later at a formal lunch at the Glen Country Club in Cape Town she told the audience that just before proceeding to London in 1954, it was Morberly Bell's book, *Storming the Citadel: The Rise of the Woman Doctor* (1953), which would be the eye-opener. The book recorded the struggle for women in the medical profession, particularly in Britain.[107] Sanders portrayed her first brief time in London as a positive experience; an opportunity to travel as a post-graduate – when South Africa was still part of the Commonwealth – where she was warmly welcomed and exposed to "another world and society".[108]

Her time in London from 1954 was spent on several short jobs. She worked as a locum for general practitioners, then as a casualty officer at the Royal Northern Hospital of London.[109] Her recollections of the time emphasize strong professional connections, most of which were also with women in medicine.[110] She then worked for around five or six weeks as a senior house officer at the London Hospital for Women and Children, where she was involved predominantly in paediatrics and was encouraged by a female colleague, Marcia Wilkinson, to continue in this field.[111] While she did consider moving into paediatrics, part of her ambivalence was the emotional distress that she experienced working in clinical medicine. Many years later she would still reflect on the wisdom of pursuing a different direction.[112]

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[106] Interview with Hannah-Reeve Sanders conducted by Leila Bloch, 23 November 2020.

[107] [HRSPC], Hannah-Reeve Sanders, speech given at 'The Women of Today in Medicine' Luncheon, Glen Country Club, 14 March 1983.

[108] [HRSPC], Hannah-Reeve Sanders, speech given at Herschel School for Girls: Prize giving, 12 October 1986.

[109] [UCTSC], Anon, "Sanders appointed to top hospital post", *The Argus*, 15 May 1986.

[110] [UCTSC], [BC1525], Anne Digby interview with Hannah-Reeve Sanders, 12 April 2006.

[111] However, upon consultation with The National Archives, London, South London Hospital for Women and Children, 1939-1984, there is no record of Hannah-Reeve Sanders. Accessed at: https:// discovery. nationalarchives.gov.uk/. For more information on Marcia Wilkinson see: A. MacGregor, "Obituary for Marcia Wilkinson: Headache Specialist Who Led the World's First Centre for Patients with Acute Migraine", *British Medical Journal*, 346 (2013).

[112] [UCTSC], [BC1525], Interview with Hannah-Reeve Sanders conducted by Anne Digby, 12 April 2006.

As a young woman doctor, Katzeff had to confront the reality that in certain areas of medicine men were preferred over women. Men were perceived as "more reliable" and women "tended to marry."[113] During this period, it was common for medical graduates to expand their skills overseas, which would still be considered unusual for women at the time.[114] But it was not unusual for women to be perceived as better suited for marriage rather than the medical profession. Again, following up on Walker's comments, the existence of the marriage bar during the mid-twentieth century, did not necessarily restrict women from entering the medical field.[115] Nevertheless, according to Sanders' testimony, these gender prejudices can be illustrated in her early application for a junior registrar post at Queen's Square Hospital, which was met with scepticism by the dean. According to Sanders' testimony, he claimed that she was underqualified for the job and would be disadvantaged as a woman, yet he still encouraged her to apply.[116] This period in London was also the time when she met her husband, Bernard Saphra. But despite her intention of wanting to focus on her career, the sojourn in London was short-lived, as Bernard wanted to return to South Africa.[117] They returned after only one year – a "missed opportunity" as she called it.[118]

Bold applications at Groote Schuur Hospital

In an undated speech found in UCT Special Collections, referring to events in the 1950s, entitled "The Challenge of Change", Sanders reflected on the political climate.[119] She noted the battle it was for a woman to find a post in the provincial services. Moreover, that a woman could still be ordered to vacate the post within 24 hours if a male doctor could be found as a replacement. She stated that maternity leave was an unheard-of concept and that she as a married woman (and pregnant) had little chance of appointment.[120] In several ways Hannah-Reeve Katzeff's story contradicts the argument made by Walker that women could enter the

[113] [HRSPC], Hannah-Reeve Sanders, speech at Rustenburg High School for Girls: Prize giving, 26 October 1981.

[114] [UCTSC], [BC1525], Interview with Hannah-Reeve Sanders conducted by Anne Digby, 12 April 2006.

[115] Digby, *Diversity and Division in Medicine*, 201.

[116] [UCTSC], [BC1525], Interview with Hannah-Reeve Sanders conducted by Anne Digby, 12 April 2006.

[117] E. Brits, "Hannah-Reeve Sanders: 'n Lewe van téén die wind in vorentoe beur", *Vrye Weekblad,* 7 May 2021; Interview with Robin Saphra conducted by Leila Bloch, 6 August 2021.

[118] [UCTSC], [BC1525], Interview with Hannah-Reeve Sanders conducted by Anne Digby, 12 April 2006.

[119] [UCTSC], [BC1525], Hannah-Reeve Sanders, "Challenge of Change", nd.

[120] *Ibid*.

medical profession with relative ease.[121] In 1955, at 27 years old, Katzeff began her career in medical administration without any formal training.[122] In another article written in the *Weekend Post* entitled "Top Doctor Once Barred by Sex", she referred to the first time that she encountered direct discrimination in her application for the position of Assistant Medical Superintendent at GSH.[123] At a GSH joint medical staff advisory and executive committee meeting in February that year not one woman was present.[124] Preference was noted toward the employment of a man. On the 10th of September 1956 at a meeting of the general purposes committee, the subcommittee did not consider Dr W.H.J. Greef the most suitable applicant for the Medical Superintendent post and it was "not apparent why Greef (later principal superintendent of Red Cross Children's Hospital) was preferred before other candidates."[125]

In her Rustenburg Girls speech she told the audience that when she had applied for the position of the most junior medical administrator the powers that be decided to re-advertise for "men only."[126] It is unclear how she eventually reached the point of being interviewed, but when she did, she was questioned by Professor Brock.[127] John Brock was a professor in the practice of medicine from 1938 to 1970, who believed in the "traditional unity of medicine", and argued that specialists should "remain general physicians" as patients would benefit from a more integrated approach.[128] As Sanders would later branch into administrative medicine, a general medical background was part of her training. When interviewing Sanders he asked what would

[121] Walker, "Conservative Pioneers", 487.

[122] T. Brümmer, "En Waalstraat sal nooit weer dieselfde wees nie", *South African Medical Journal* 70, no. 2 (1986), xi. [UCTSC], [BC1525], Anne Digby interview with Hannah-Reeve Sanders, 12 April 2006. Digby: "So in 1955, Hannah, you've really got a new phase of your career, a central phase of your career beginning in Medical Administration. How did you find it at first? Because you'd had no training at that point."

[123] [UCTSC], [BC1525], Anon, "Top Doctor Once Barred by Sex", *Weekend Post,* 15 October 1977; Interview with Hannah-Reeve Sanders conducted by Leila Bloch, 22 July 2020.

[124] [UCTAA], Minute book Groote Schuur Hospital of the Joint Medical Staff Advisory and Executive committee held on Monday 28 February 1955.

[125] J. H. Louw, "The first two decades of the Red Cross War Memorial Children's Hospital", *South African Journal of Medicine* 50 no. 27 (June, 1976), 1037–1047; [UCTAA], Minutes of the meeting of the general purposes committee held at 2:30PM on Monday 10 September 1956 at the University office Rosebank.

[126] [HRSPC], Hannah-Reeve Sanders, speech given at Rustenburg High School for Girls: Prize giving, 26 October 1981.

[127] Interview with Hannah-Reeve Sanders conducted by Leila Bloch, 22 July 2020. "When I applied for the job the physician, Professor Brock, very British. I don't know if he liked the Jews really. Brock When I applied for this senior job what will you do if your husband is transferred somewhere else… Everyone was quite amused".

[128] Digby and Phillips, *et al.*, *At the Heart of Healing*, 303.

happen if her husband were transferred somewhere else.[129] He said to her: "you are suited to the job but what if your husband is transferred to another city – what happens when your children get ill."[130] To this she replied: "He's not applying for the job, I am".[131] She was originally only offered the job for six weeks, but stayed in the position for two years.[132] During this time, she was the only woman in the Cape to hold the position of Junior Medical Superintendent in a provincial hospital. She was also the medical officer for the hospital nurses and those at the recently opened Carinus Nursing College in Cape Town, which, many years later, would be impacted by her studies on nursing.[133] At the time, Sanders was assistant to Dr Norman Cloete, of whom she did not speak highly.[134] Cloete, who had been involved in the drafting of the 1951 Joint Agreement was described as having a meticulous eye for detail and had, according to one of his deputies, been appointed due to his familiarity with "the hospital needs of a medical school."[135] While Sanders struggled with the lack of job definition in her position, it did not appear that she would push against this discomfort. She does remember an incident, however, whereby Cloete reprimanded her for breaking a syringe, something she herself would never do, she claimed, if ever appointed to the chief superintendency.[136]

In 1957 she married her husband, Bernard Saphra. Saphra was slightly younger than Hannah and born into a poor family, the son of a non-Jewish woman, Kitty (Katherine) Grobbelaar. Kitty's husband, Percy Saphra, did however come from a family of some pedigree, being the son of Toni Saphra who started the Union of Jewish Women and with whom Sanders would later be closely associated.[137] Bernard's father, Percy, was considered somewhat of a rebel for

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[129] [HRSPC], Hannah-Reeve Sanders, speech at Rustenburg High School for Girls: Prize giving, 26 October 1981.

[130] [HRSPC], Hannah-Reeve Sanders, speech given at Herzlia High School, 26 October 1982.

[131] [UCTSC], [BC1525], Interview with Hannah-Reeve Sanders conducted by Anne Digby, 12 April 2006.

[132] [UCTSC], [BC1525], Anon, Responsible Post, no publication, 1957.

[133] B. Goodchild-Brown, "Carinus Nursing College: An historical study of nursing education and management using the general systems approach, 1947-1987", (MSc Thesis: University of Cape Town, Faculty of Health Sciences, Division of Nursing and Midwifery: 1992), 187.

[134] [UCTSC], [BC1525], Interview with Hannah-Reeve Sanders conducted by Anne Digby, 12 April 2006. "Not a great guy, and they often said he was an anti-Semite as well, English, very British, you know, he was professor of medicine. And of course, I think he was also jealous of Professor Forman because, I mean, Forman was just like I can put together every quality that you wanted from a chap was going to teach you how really to do it with your eyes. Smell the smell the smell. You know, the. It really it was very it was very interesting".

[135] Digby and Phillips, *et al.*, *At the Heart of Healing*, 303, 61.

[136] [UCTSC], [BC1525], Interview with Hannah-Reeve Sanders conducted by Anne Digby, 12 April 2006.

[137] [UCTSC], [BC1390], Interview and correspondence, 1913-1953.

having married a non-Jewish woman with an illegitimate child.[138] According to a close family friend, Graham Sonnenberg, it was difficult to find information on Bernard, who was described as somewhat of a mystery man, who claimed to be an inventor.[139] Sanders by contrast was regarded as a very serious person. Robin Sanders noted his father's absence over the years. Based on Sanders' wishes the personal details of their marriage remain confidential however according to Sonnenberg it did eventually come out that they got divorced around 1975.[140]Hannah, however, adopted the name Sanders throughout her life. It has been speculated by close family friends that this would work to her advantage in the apartheid-era Groote Schuur hospital.[141] Regarding the shift from Saphra to Sanders: according to Robin, his father's birth certificate stated Sanders and had been changed from Saphra during his time in the British Army to avoid being identified as Jewish during World War Two, given the recognizable Jewish surname. In *Letters of Stone* (2016), anthropologist Steven Robins, suggests evidently that the practice of changing one's surname was not uncommon within the broader socio-political climate of South Africa in the early decades of the 20th century. Robins describes the Robinski granddaughters (Deidre and Colette), who grew up in the small Northern Cape town of Calvinia, and how their mother worked at concealing her Jewish identity by taking the common Afrikaner name, 'Loubscher', as her maiden name. It was her husband magistrate, David Robinski, who then also become the first in his family to change his Jewish surname to Robins.[142]

Lovel, Kitty's other son and Bernard grew up as brothers, and considered themselves adventurous. Bernard was sent to a boarding school called De La Salle in Port Elizabeth where he matriculated. He did not go to university. Robin described him as an "interesting and intelligent guy" who called himself "an engineer" and whom Robin defined as an "inventor". Robin described him as a "wanderer, untraditional."[143] In Sanders' recollections, her husband

[138] Interview with Robin Saphra conducted by Leila Bloch, 6 August 2021.

[139] Interview with Graham Sonnenberg conducted by Leila Bloch, 23 June 2021.

[140] *Ibid.*

[141] *Ibid*.

[142] S. Robins, *Letters of Stone: From Nazi Germany to South Africa* (South Africa: Penguin Random House, 2016), 81.

[143] Interview with Robin Saphra conducted by Leila Bloch, 6 August 2021.

Bernard does not feature prominently, and is something of a minor character in her story; she remains resolutely focused on her career and navigating the complexes of the institution.[144]

From Red Cross to Tara Hospital

During her spell as the Assistant Superintendent at GSH in 1957, Sanders was asked to take up a position at the newly opened Red Cross War Memorial Children's Hospital, for a three-month period, from March until April 1957 – an offer she could not refuse.[145] She was then approached by the director of hospital services, Dr Jan Hendricks to take temporary care of the entire hospital's administration because Dr J.F.W. Mostert (then chief medical superintendent) was going overseas and needed an interim supervisor in the midst of the poliomyelitis epidemic.[146] In a newspaper article entitled, "Responsible Post," Sanders was described as "wildly excited" to take up this administrative position in the wake of her experience in paediatrics in London.[147] The Red Cross Hospital began with its first polio patients, fifteen of them, who had been transferred and needed a place for convalescence.[148] The patients had been moved during their recovery from the infectious disease into wards for adults.[149] Sanders' administrative and managerial tasks, among others, included the organisation of beds for these patients. This was a key moment for Sanders; here she would see the value of administrative medicine in practice, as opposed to clinical work where the choice for less intimacy in patient care would also mean the choice of creating structural alterations from within the hospital system. When revisiting the details from the time Sanders recalled that:

> [T]he hospital was completely built for recovering polio patients. These were fit people. These were the people who no longer had polio; they needed recovery and physio. And they had to be somewhere. They

[144] Interview with Hannah-Reeve Sanders conducted by Leila Bloch, 23 November 2020."

[145] [GSHA], [HRS] files, folder entitled Red Cross 40th anniversary, Hannah-Reeve Sanders, speech given at the Red Cross Children's Hospital 40th Anniversary Address, 28 October 1996.

[146] J. F. W. Mostert, "Message from Dr J.F.W. Mostert, Medical Superintendent, Red Cross War Memorial Children's Hospital", *South African Medical Journal* 41 (1967), 1025; [GSHA], [HRS] files, folder entitled Red Cross 40th anniversary, Hannah-Reeve Sanders, speech given at the Red Cross Children's Hospital 40th Anniversary Address, 28 October 1996. See, Mostert, "Message from Dr J.F.W. Mostert, 1025; D. M. Blair, "Poliomyelitis: Southern Rhodesia, 1957", *The Central African Journal of Medicine* 4, no. 2 (1958), 52.

[147] [UCTSC], [B5125], Anon, "Responsible post", nd.

[148] J. L. Louw, "The First Two Decades of The Red Cross War Memorial Children's Hospital", *South African Medical Journal* 50, no. 27 (1976), 1043.

[149] Interview with Hannah-Reeve Sanders conducted by Leila Bloch, 22 July 2020.

> immediately got some simple medical staff and occupational therapists and nurses – a normal hospital. I didn't leave them in the middle.[150]

According to Sanders, despite the short-term post, she did not leave until the epidemic was over. Amidst patients recovering from the epidemic, archival material indicates this was a joyful time in Sander's life, particularly the hospital birthday. Its first anniversary took place on Tuesday the 18th of June 1957. An article from 1957 describes the day:

> Laughter came from the physio-therapy room at Red Cross War Memorial Children's Hospital. About 60 of the 170 small patients were being shown film cartoons. The ward was in quarantine as one of the members had contracted measles. Meanwhile another party was being held downstairs by a guest invited by Dr Sanders, the acting medical superintendent at the time.[151]

Among the predominantly male guests at the party included Dr N.H.G. Cloete, referred to above, and Dr J.G. Burger, Director and Assistant Director of the Cape Provincial Hospital. Aside from the celebratory functions that were documented in the press around her time as Medical Director, she often refers to her work there from a decidedly female perspective. Sanders recalls a particular incident with her boss, Johan Mostert who was working with her at the time. She remembered going into his office in heels and him commenting on her high-heel shoes ruining the floor, to which she responded: "the only evidence that I worked like hell!"[152] Overall, Sanders took this serious situation in her stride. As a young woman doctor during a volatile medical environment, the deep value of administrative medicine became evident for her.[153]

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[150] *Ibid.*

[151] [UCTSC], [BC1525], Anon, "Laughter Greets Hospital Birthday", *Cape Times,* 18 June 1957.

[152] [UCTSC], [BC1525], Anne Digby interview with Hannah-Reeve Sanders, 12 April 2006. "He said you've ruined my floor! I said get them to come and scrape it off! I said to him it's the only evidence that I worked like hell! Yes, I was the Medical Director of the hospital." [UCTSC], [BC1525], Interview with Hannah-Reeve Sanders conducted by Anne Digby, 12 April 2006.

[153] Interview with Hannah-Reeve Sanders conducted by Leila Bloch, 23 November 2020.

After her stint at the Red Cross Hospital, Hannah-Reeve Sanders moved to Johannesburg from 1957-1960 with her husband Bernard Saphra.[154] There she entered the medical scene of Johannesburg at the height of apartheid, and at the beginning of motherhood. Sanders first worked at Edenvale Hospital in the Transvaal (a province in the pre-1994 SA), before completing a short locum at Johannesburg General Hospital and then at Tara Hospital. Until Tara's development as an independent psychiatric hospital, all forms of psychiatry fell under the state's Department of Health, under the control of the provincial health authority. Starting with a group of military patients and a handful of inexperienced doctors, Tara was known for its forward-thinking approach developed from the closing of 134 Military Psychiatric Hospital – the main psychiatric hospital for the former Union Defence Force (UDF) – which closed in 1946.[155] Based in Hurlingham Johannesburg, Tara dealt with recoverable cases that weren't as severe in contrast to say Sterkfontein which admitted psychotically affected patients.[156] Initially Tara developed under the direction and experience of Dr H. Moross, its first medical superintendent, who obtained his experience during World War Two in the promoted rank of Lt.- Colonel, and later the commanding officer overseeing 500 beds of 134 Military Hospital in Potchefstroom. This was where psychiatric patients of the UDF from the Union of South Africa had been admitted. Up until the 1950s psychiatric facilities were staffed by medical officers who had gained experience in the field.[157] Dr Sanders succeeded Dr L. Jacobs as a casualty officer at Tara, where she was employed between 1957-1960.[158] She described it as a particularly happy time, marked by the beginning of her family as well as her engagement with the psychiatric dimension of health care. She described the prevailing atmosphere as being akin to that of a family, due to psychiatry's multiple therapeutic methodology adopted there.[159] This idea was emphasised in a film on the hospital a few years later entitled *The Tara Film - This is Tara.*[160] The film depicted the hospital as a therapeutic community in which there was an

[154] Interview with Robin Saphra conducted by Leila Bloch, 6 August 2021.

[155] H. Moross, *TARA* (Johannesburg: Smith Mitchell Organisation, unknown year), 2; L. Gillis, "The historical development of psychiatry in South Africa since 1652: Overview", *The South African Journal of Psychiatry* 18, no. 3 (2012), 80.

[156] R. du Plessis, "The Tara photograph album: visualising a therapeutic community", *Adler Museum Bulletin,* 13; Gwynne Robins, email to Leila Bloch, 13 November 2020.

[157] L. Gillis, "The historical development of psychiatry in South Africa", 80.

[158] Moross, *TARA*, 10. [PMC], Hannah-Reeve Sanders documents, Hannah-Reeve Sanders' Curriculum Vitae, 1945-1986.

[159] Interview with Hannah-Reeve Sanders conducted by Leila Bloch, 23 November 2020.

[160] Moross, *TARA*, 62.

integrated team approach to the treatment of psychiatric conditions. It identified the principle of contact and communication, as well as consultation among medical practitioners, nurses, psychologists, occupational therapists and social workers, as being the cohesive force for teamwork.[161] Rory Du Plessis has explored both the institution's public representation through photography and Tara's ethos under the leadership of Moross.[162] During her time there Hannah-Reeve Sanders would have been exposed to this communal-focused, therapeutic approach and its benefits in the recovery of patients.

Mother or Mama?

1960 was of particular significance as Robin, Sanders' only son, was born at Queen Victoria Hospital in Johannesburg.[163] Hannah-Reeve Sanders was lucky enough to bring Robin with her to work. This was made possible by Tara's apparently progressive policy of providing a crèche for staff children.[164] In an article entitled "He who saves a single life," Sanders drew a parallel between working women and the way in which they evoke a "mother image" response in men.[165] Drawing on the qualities of domestic and work life, Sanders compared the merits of good motherhood – such as the tact and the finesse needed when dealing with people, as well as the sense of prioritizing tasks – to those in executive positions such as her own. Throughout her life, the idea of Sanders-as-mother merged between both her personal and professional life. In Sanders' own words, "Role conception in society is old as evolution itself and women are seen rather as mothers than as professionals (even at GSH you are the mother of the place). If a woman should choose to become a scientist in this sort of society, she must be prepared to forfeit her family life."[166] These sentiments were also reiterated by her patients who referred to her as "Mama" saying she was "the mother of this place."[167] Robin would often

[161] *Ibid.*

[162] Du Plessis, "The Tara photograph album", 13.

[163] Interview with Robin Saphra conducted by Leila Bloch, 6 August 2021.

[164] Interview with Hannah-Reeve Sanders conducted by Leila Bloch, November 2020. In the Rustenburg speech, she recounts: "I was able to take my small baby to work." See HRSC, Hannah-Reeve Sanders, speech given at Rustenburg High School for Girls: Prize giving, 26 October 1981.

[165] [UCTSC], Madeleine Van Biljon, "He Who Saves a Single Life*", Sunday Times Magazine*, 21 November, 1976.

[166] [HRSPC], Hannah-Reeve Sanders, speech given at 'The Women of Today in Medicine' Luncheon, Glen Country Club, 14 March 1983.

[167] [HRSPC], Hannah-Reeve Sanders, speech given at the National Council of Women of South Africa Annual General Meeting, Cape Town Branch, 22 November 1978.

remark that he wished his mother had more children, but for Sanders this was a necessary sacrifice for keeping up with her career.[168] Indeed, Robin would even have to accompany her at times to her Saturday meetings later on.[169] A close childhood friend of Robin's, Cape Town based lawyer, Graham Sonnenberg, confirms that Sanders "did not adopt a typical motherly style and treated him and Robin like adults before their time. For example, bringing up issues around abortion at a young age."[170] In comparison to Sonnenberg's parents, he found her to be quite strict and remembered in particular an incident a few years later, where he and Robin stole a car to practise driving when they were underage and without licences. Sonnenberg recalled being terrified when Sanders found out, witnessing a, "a look of thunder on her face'. Whereas Sonnenberg's father was ready to pin the event down to youthful behaviour, Sanders was ready to call the police. Sanders' attentiveness was also rooted in the fact that in an attempt to combine education and fun, she took it upon herself on Saturday afternoons to take Graham and Robin on various educational adventures in Cape Town, for example to the Royal Observatory to see the stars and planets. Sanders would come to hold a prominent role within the hospital which was generally a masculine sphere. As a working professional wife and mother, she maintained an air of strict authority both at work and at home. Sanders remained highly involved in her son's upbringing despite the long hours at the hospital. The same presence in which she commanded meetings at work extended into her role as a parent. She was also known to be formidable at parents' PTA meetings, often pushing in front of people and wanting to talk about her son.[171]

Sanders' short time in Johannesburg saw several changes; the start of her family, new job applications, career progression (evidenced in her application for a Bachelor of Surgery at the University of Witwatersrand), as well as affirmation for her work at Tara Hospital.[172] Dr Moross indicated in a letter that once he reached retirement age, he thought she would be able to take over.[173] This was not to be as she embarked on further travels with Bernard and Robin.

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[168] Interview with Hannah-Reeve Sanders conducted by Leila Bloch, 22 July 2020.

[169] [HRSPC], Hannah-Reeve Sanders, speech given at Hannah-Reeve Sanders' Farewell when she left Groote Schuur Hospital, 26 June 1986.

[170] Interview with Graham Sonnenberg conducted by Leila Bloch, 23 June 2021.

[171] *Ibid.*

[172] [GSHA], [HRS] files, personal file, letter to the registrar of Wits from Hannah-Reeve Sanders, 1957; [UCTSC], [BC1525], Interview with Hannah-Reeve Sanders conducted by Anne Digby, 12 April 2006.

[173] *Ibid.*

According to Robin there were no political reasons for Hannah going to London in the early sixties, even though this was at a time when many young professional people were leaving the country.[174]

In 1962, uncharacteristically, Sanders would follow the direction of her husband to London, but first preceded in 1961 by a visit to her sister Leah in Salisbury, Southern Rhodesia, now Harare, Zimbabwe.[175] The details during 1961 are few, but it is clear that before going to London, Sanders briefly served as a medical officer at Harare General Hospital in Salisbury.[176] Following that she also served as a medical officer at what was then an alcoholic treatment centre under the control of the Cape Provincial Administration (CPA) William Slater Psychiatric Hospital in Cape Town.[177] In 1962, Sanders went to London again with Bernard. This time for what seemed to be for work. They lived in Harley Street, historically the centre of the medical profession in London, which included rooms and accommodation for doctors.[178] Their apartment was located at the park end of Regent's Park, where they allegedly never unpacked any of their boxes.[179] Sanders' arrival for the second time in London was described by Robin as sudden: "I think he just swept her off her feet, and, you know, [he] took this young doctor, and said 'let's go to London'. And they packed up and went." His parents, he recalls, had no political reasons for coming to London and it was not clear what work Bernard was doing at the time (apparently, he was sent on business trips by his firm). According to Robin, his father left Sanders in a flat in Harley Street, from where she wandered the country with her son, as well as sought employment. South Africa was then no longer part of the Commonwealth.[180] This was one moment in Sanders' life that appeared to be marked by

[174] Interview with Robin Saphra conducted by Leila Bloch, 6 August 2021.

[175] Interview with Hannah-Reeve Sanders conducted by Leila Bloch, 13 November 2020.

[176] [PMC], HRS documents, Hannah-Reeve Sanders' Curriculum Vitae, 1945-1986; H.S. Gear, "Some problems of the medical services of the Federation of Rhodesia and Nyasaland", *British Medical Journal* 2, no. 5197 (1960), 525–526; [PMC], HRS documents, Hannah-Reeve Sanders' Curriculum Vitae, 1945-1986. Gear, "Some problems of the medical services", 526.

[177] N. Ahmed, *An evaluation of the psychotherapeutic milieu therapy programme of the William Slater Centre for Adolescents and Young Adults* (MA Thesis: University of Cape Town, Faculty of Humanities, Department of Psychology, 1997), 46.

[178] G. Wolstenholme and R. Hurt, "A Harley Street Address", *Journal of the Royal Society of Medicine* 92, no. 8 (August 1999), 425–28; Interview with Robin Saphra conducted by Leila Bloch, 6 August 2021.

[179] [SAJMA], Interview with Hannah-Reeve Sanders conducted by Adrienne Folb, 31 August 2014.

[180] S. Dubow, "The Commonwealth and South Africa: From Smuts to Mandela", *The Journal of Imperial and Commonwealth History* 45, no. 2 (2017), 291

indecision. The phase of Hannah's life in which she travelled to London to broaden her work experience seemed to hold a degree of uncertainty. The multitude of positions she held before settling at Groote Schuur may have been due to the fact that at that stage, she did not yet know what type of doctor she wanted to be. At this stage in her life, she did not have any child care arrangements and Bernard was not always present.

The time Robin recalls was not a happy one, with memories of her telling him of how they walked around Regent's Park with Robin in a pram, and her feeling miserable about it. Sanders also remembered going around the corner to a psychiatric clinic to apply for a position. With Robin in the pram, she claimed she was denied access to apply after enquiring whether they had crèche facilities. Robin speculated ultimately that she missed home and was very happy to get back to South Africa and the life of family comfort there. According to Sanders she returned home to please her parents as they did not want her to stay long, even though many of her colleagues and her sister continued to pursue their careers overseas.[181] International sanctions against apartheid were increasing with the South Africa Act of 1962.[182] Opposition to apartheid government was possibly a deciding factor for many of those graduates who chose to remain abroad.[183] Sanders, however, returned with Bernard in the same year.[184]

Return to Groote Schuur Hospital

Sanders returned to GSH in 1963 as Assistant Medical Superintendent to Dr J.G. Burger, Deputy Director of Hospital Services with experience running three hospitals in the Transvaal.[185] While UCT had initially opposed his selection, part of the reason for his appointment was due to the fact that the Cape Provincial Administration felt he was an "unquestioning supporter of government policies" and would toe Pretoria's line at GSH.[186] In

[181][UCTSC], [BC1525], Interview with Hannah-Reeve Sanders conducted by Anne Digby, 12 April 2006.

[182] Dubow, "The Commonwealth and South Africa", 299.

[183] Gwynne Robins, email to Leila Bloch, 13 November 2020.

[184][UCTSC], [BC1525], Interview with Hannah-Reeve Sanders conducted by Anne Digby, 12 April 2006. Hannah-Reeve Sanders: "Bernard said, 'yes, only if you can't afford it. If you … if you haven't got any money'. So I said, 'well, I haven't got any money. I just want to work'. Anyway, that was it. And then Bernard decided, 'no, not good enough, we must come back to Cape Town'".

[185] [UCTSC], [BC1525], Anon, "Top Post for Woman Doctor," Cape Times, 5 November 1976. Burger is not listed as a member of the *Broederbond* according to J.P.H. Serfontein's, *Brotherhood of Power: An Exposé of the Secret Afrikaner Broederbond* (London: Collings, 1979).

[186] Digby and Phillips, *et al.*, *At the Heart of Healing*, 61.

Sander's reflection in interviews, she admitted that many of her own appointments by the National Party-dominated government were because of her knowledge of Afrikaans.[187] It was unlikely she would have acquired the job without her bilingualism which was a necessary skill not only for doctors but also hospital administrators.[188] The value of bilingualism dates back to early meetings regarding employment at UCT.[189] Furthermore, courses in general medical practise were to be given in both English and Afrikaans, with some, like Prof Frankie Forman, teaching medicine in Afrikaans.[190] While there may have been countless appointments of bilingual staff, it was for this reason, coupled along with Sanders interpersonal skills, which would allow her to enter the medical world so easily. Under the leadership of Burger (whom Sanders respected), Sanders worked full-time when most medical women who were married with young children did not, as she emphasised in a survey amongst medical women during 1963.[191] Many of Sanders' public speeches over her career refer also to the nursing profession at GSH, where in 1964 she began to integrate more nursing staff, a theme pursued further below.[192]

However, what appeared to be for a vacation, in 1965, Sanders was able to leave South Africa again to travel. The opportunity to travel afforded by her career is well-documented in many of her letters and itineraries. For example, in letters to family and friends, she often described her travels as well as many conferences and meetings attended, from Kenya, Austria, England,

[187] [UCTSC], [BC1525], Interview with Hannah-Reeve Sanders conducted by Anne Digby, 12 April 2006.

[188] H.O. Hofmeyer, "A review of the 1961 Medical Congress", *South African Medical Journal* 35, no. 45 (1961), 927.

[189] [UCTAA], University of Cape Town, A meeting of the General purpose committee, Tuesday 18 April 1933. "The Senate recommended the following temporary appointments (for two years in the first instance) to carry out the proposals in its report in connection with bilingual instruction."

[190] [UCTAA], University of Cape Town, Minutes of meetings of the Executive Committee held at 3pm on Tuesday, 23rd January, 2nd February and Wednesday 14th February, 1934. "The committee recommend the institution of parallel course in Medicine through the medium of Afrikaans for 1934 and the appointment of Dr F. Forman with the status of assistant Professor to give this course."

[191] [UCTSC], [BC1525], Interview with Hannah-Reeve Sanders conducted by Anne Digby, 12 April 2006; [GSHA], [HRS] files, folder entitled: Medical Superintendents Conference, Hannah-Reeve Sanders, speech given at the Medical Superintendents' Conference 1973, File: Medical Superintendent's Conference, Hannah-Reeve Sanders, speech given at the Medical Superintendents' Conference, November 1973.

[192] [UCTSC], [BC1525], File 74: History, Photograph of Some of the First Coloured Nurses, 1964 and Short Report note written by P Chaffey, 30 August 2000

Brazil, Holland, Canada and Japan.[193] These travels also included family trips with Robin and his friend Graham, with more examples of these in the following chapters.[194]

A photograph from Hannah-Reeve Sanders' personal photograph collection of Hannah-Reeve Sanders at the Acropolis in Athens, Greece in 1965.

In 1966, back in South Africa, Sanders again focused on the subject of nursing. Gaining prominence as a public role-model for students, in the first of several school speeches, this time at the all-girls high school in Sea Point, Ellerslie Girls High of December of that year, she made the observation that nursing was the hardest and most underpaid occupation but ultimately the

[193] [GSHA], [HRS] files Folder entitled overseas visits, "Australia, Taiwan, Japan". [DUA], [MWIA], Dr Hannah-Reeve Sanders travel plans, 1993.

[194] Interview with Graham Sonnenberg conducted by Leila Bloch, 23 June 2021. "So we had the overseas trip together. Once again, I think Dad was trying to haul us to cultural things and we wanted to go to the Battersea funfair".

most satisfying of professions.[195] Her respect for nursing, engagement and influence with the profession, emerged in varying ways as we will see below. At the same time, however, there was growing, albeit limited, support within the medical fraternity for a clear stance towards apartheid from its health professionals. After the banning of the South African chapter of International Defence and Aid Fund (IDAF) in March 1966, Dr Raymond (Bill) Hoffenberg, its chair, took the government to court and was then himself banned on 28 July 1967.[196] A small contingent led by Prof J. F. Brock attempted to protest the ban, but ultimately failed as there was not sufficient support from UCT as a corporate whole or the medical faculty. [197] He was subsequently forced to leave the country due to the Suppression of Communism Act (1950).[198] Sanders' own position with respect to the faculty's lack of support for Hoffenberg remains unclear, however. While Sanders was engaging with issues affecting the hospital, she was soon required to take executive decisions relating to the first heart transplant in 1967.

Sanders and the first heart transplant

The year 1967 would be remembered as the "golden year" of the Cape's hospital services due to the first heart transplant being performed at GSH.[199] On the night of the event, the transplant took place in a five hour long procedure with Dr Chris Barnard and his seventeen-person team, which has been well-documented.[200] According to Sanders, there were very strict rules in terms of who was able to be in operating theatres. Sanders herself was not present on the actual night of the transplant.[201] However, she was there the next morning on the 5th of December, already having been informed about what had taken place. Amidst the excitement of the event and its reportage, behind the scenes she played a pivotal role and entered a newly defined position. Until this point, there had been no public relations unit and Sanders had to manage a flood of

[195] [HRPC], Hannah-Reeve Sanders, speech given at Ellerslie Girls' High School, Cape Town, December 1966.

[196] R. Kirsch, "In Memoriam: Raymond (Bill) Hoffenberg (16 March 1923 – 22 April 2007)", *South African Medical Journal* 97, no. 6 (2007), 432.

[197] *Ibid.*, 432.

[198] *Ibid.*

[199] Digby and Phillips, *et al.*, *At the Heart of Healing*, 37. J. G. Brink and J. Hassoulas, "The first human heart transplant and further advances in cardiac transplantation at Groote Schuur Hospital and the University of Cape Town", *Cardiovascular Journal of Africa* 20, no. 1 (2009), 31–35.

[200] See for example the recent biography by J.-B Styan, *Heartbreaker: Christiaan Barnard and the First Heart Transplant* (Cape Town: Jonathan Ball Publishers, 2017).

[201] Interview with Hannah-Reeve Sanders conducted by Leila Bloch, 22 July 2020.

requests from journalists around the world.[202] She was called on to make important decisions regarding press-relations as the assistant superintendent.[203]

> By the time I walked in the next morning, I knew it all because the hospital had phoned Dr Burger from the surgery and Chris told him he had just done a heart transplant, he said 'Oh, thank you Professor Barnard, thank you for letting me know', put the phone down and went back to sleep.[204]

By the next morning he had called upon Sanders to step into unfamiliar territory:

> It just so happened that I was one of the Medical Superintendents and Dr Burger had said: 'handle it,' if I wished to handle it otherwise, he would pass it back to the person who was in charge. I wasn't in charge of the hospital at the time: I wasn't the senior.[205]

Sanders was, thus, proverbially thrown into the deep end, taking full responsibility for the mass press interest surrounding this historic event.[206] The problems arose the next morning. After the first photo shoot published on the front page of the *Cape Times* on the 4th of December 1967, "there was no stopping media interest, foreign correspondents, local journalists and photographers" who "descended on Groote Schuur Hospital."[207] She recalled that "the world was phoning up and it was then that I landed up doing a lot of the PR."[208]

In an interview, years later, she remembered some of the first questions: "what did Mr Washkansky have for breakfast?" Replying:

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[202] [UCTSC], [BC1525], Maurice Kibel, "Hannah-Reeve Sanders," November 1998.

[203] Interview with Jocelyne Kane-Berman conducted by Leila Bloch, 7 August 2020.

[204] Interview with Hannah-Reeve Sanders conducted by Leila Bloch, 22 July 2020.

[205] *Ibid.*

[206] Interview with Jocelyne Kane-Berman conducted by Leila Bloch, 7 August 2020.

[207] J. Scott, 'World's First Heart Transplant' Groote Schuur Doctors Make History," *Cape Times*, Monday 4 December 1957, 1. See also M. Joubert, "Reflections on the First Heart Transplant and its Impact on Medicine, Media and Society", *Public Understanding of Science* 27, no. 1 (2018), 111.

[208] Interview with Hannah-Reeve Sanders conducted by Leila Bloch, 22 July 2020.

> I said I have absolutely no idea. He certainly, as far as I was concerned, had no breakfast at all at that time. That was the question that came from the first one – a question from America...[209] We had nobody... It was very difficult: The press asked questions and they would ring Dr Burger and if he was not there, then it would be delegated to one of us to say something, or we would, on Dr Burger's behalf say something. He (Chris Barnard) was never keen to talk to the press. I mean, not that he wasn't keen, but it wasn't something that he was very adept in. I'm not decrying what he was.[210]

The questions about the actual patient (Washkansky), in particular, threw her into an ethical dilemma.

> People were interested in technical questions, and I wasn't answering technical questions: that was Chris' business. General hospital questions were the ones that I would answer. I don't give diagnoses about people's health at all, when it comes to the press: that's amoral. These days, everybody knows when somebody's had something. Often, when I read the newspapers and they say so-and-so died of liver disease, and so on, I thought whose bloody business is it except the family? If it becomes someone who is important in the world for whatever reasons, but we never gave diagnoses, ever.[211]

When talking about the actual event and the impact on GSH at a prize giving at an all-boys school, Christian Brothers College (the school her son attended), Sanders described how the episode certainly caught the imagination, and in her opinion was surely the single most exciting and most reported event to appear on the front pages of the news media at the time.[212] The

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[209] *Ibid.*

[210] *Ibid.*

[211] *Ibid*.

[212] [HRSPC], Hannah-Reeve Sanders, speech given at Christian Brothers College prize giving, 22 March 1978; Interview with Graham Sonnenberg conducted by Leila Bloch, 23 June 2021, "We went to Christian Brothers

speech, written almost ten years later, reflected on the events that had occurred on that day and its aftermath, and the way in which the hospital had handled them.

In a later report written and presented at the Medical Women's Association in 1978, Sanders described the ensuing media chaos:

> What happened at Groote Schuur Hospital was the single event which remained front page news for the longest time in newspaper history. The problem: We were overwhelmed with newspaper men, radio programmers, television cameramen and their teammates. The search for guidance in a crisis situation, the search for reassurance and fulfilment, the demands for compensation – relating to patients, their relatives and staff: all these facts were present during the time of the transplant. A lot of weary people – badgered by the media. The problems about suitability for transplantation, the problems of relatives donating organs – all were aired in the press. One wonders what was in fact achieved.[213]

The event brought Barnard, his achievements and GSH into the international public spotlight, resulting "in his appearance on the covers of *Life*, *Newsweek*, and *Time* magazines within three weeks of the first transplant."[214] This occurred within the height of apartheid-era censorship.[215]

In the same report, Sanders argued for a hard-line approach to the way in which media was to be handled in the future. Clear guidelines, she said, should be laid down to acquaint the medical profession with what they can and cannot do in relation to the news media, and the news media itself should know and be well-acquainted with these guidelines.

College, can you believe it? She sent Robin there because my father sent me there because his mother sent him there."

[213] [HRSPC], Hannah-Reve Sanders and Pieter J. van Biljon, "Medicine and the Mass Media", report presented at the Medical Women's Association XVIth Congress, August 1978.

[214] J. Brink and D. K. Cooper, "Heart Transplantation: The Contributions of Christiaan Barnard and the University of Cape Town/Groote Schuur Hospital", *World Journal of Surgery* 29 no. 957 (2005).

[215] C. Merrett, "A Tale of Two Paradoxes: Media Censorship in South Africa, Pre-Liberation and Post-Apartheid", *Critical Arts* 15, no. 1-2 (2001), 52.

> [M]oreover the intrusive and intimate reporting of the first human heart transplant challenged existing professional codes of how medical specialists were identified in public, medical procedures were reported in the media and the extent of patients' details that were disclosed in an increasingly competitive media environment.[216]

Sanders admitted that the hospital was not prepared for the publicity generated by the event, and the article was written to prepare doctors for any similar occurrences in the future. For instance, she said, "you may be faced with the solution of the aetiology of carcinoma tomorrow. This could cause the same amount of publicity as the heart transplant."[217] She stressed the importance of ethics in reporting of health care and set the ground rules for the way in which doctors were to handle media going forward. When drawing the distinction between disclosing personal and private details to the press she likened it to making noise in church. Just as that is unacceptable, so is interference in a "hospital-doctor-family set up sacrilegious."[218]

The article went on to liken the mass media to a type of extended family. She reflected on the "curious phenomenon that the average patient will often have more faith in an anonymous advisor than his own doctor" and the way in which intimate details are broadcast in such public sphere.[219] She stressed that in the same way she as an administrator was subject to discipline by the Medical Council so too should the press be subject to discipline by a Press Council, "Not all medics are over-conservative and not all pressmen irresponsible. There has to be mutual trust."[220]

During her time at Groote Schuur, Sanders paid careful attention to Barnard's appearance. As recorded in Cooper's book *The Surgeon who Dared*, his transformation from, as one of his staff put it, "someone who slept in his clothes'" to "the meticulously and fashionably dressed jet-

[216] [HRSPC], H.-R Sanders and P. J. van Biljon, "Medicine and the Mass Media", report presented at the Medical Women's Association XVIth Congress, August 1978.

[217] *Ibid.*

[218] *Ibid.*

[219] *Ibid.*

[220] *Ibid.*

setter, took place quite suddenly when he visited Italy after the heart transplant, we all revelled in his new image".[221] As Sanders recalled:

> When I bumped into him in the hospital one day, and admired his appearance, he twirled around and unbuttoned his jacket to show off its red silk lining. On another occasion, we shared our love of Italian shoes. Complaining about the very casual clothing and uncared-for-shoes of the students, he said "Of course not everyone can wear Guccis" and he showed off by displaying well-groomed feet, to which I responded by displaying my feet, equally well-groomed in Ferragamo shoes. I believe we both enjoyed a good laugh.[222]

Sanders' relationship with Barnard, as is evident above, played out on a somewhat superficial but cordial level. But fame also brings its own challenges, ones that Sanders would have to carefully navigate in the years to come until his retirement in the 80's, as explored below. Nevertheless, Sanders regarded him with a type of tolerant understanding:

> The point about Chris was, suddenly he's big stuff and important. He never tried to put it on and that's really the pity of it. Some people walk into something, and they quickly learn which fork to use, what knife to use, how you behave. He didn't misbehave, he's a simple guy but he wasn't simple by the time he died: he'd learnt a helluva lot. I always thought that Chris was just a basic human being.[223]

Conclusion

The effects of the decisions Sanders made towards medical administration would affect her career path in later years. However, at this point she was still gathering experience. As her leadership capacities increased so did the complexity and impact of her actions. When reflecting on her student days Sanders would often speak highly of the influence of the well-

[221] D. Cooper, *Christiaan Barnard: The Surgeon Who Dared* (Fonthill Media, 2018), 273.

[222] *Ibid.*

[223] Interview with Hannah-Reeve Sanders conducted by Leila Bloch, 22 July 2020.

known lecturer Frankie Forman who had had a positive influence on many of his students.[224] The following definition of the type of thought that doctors require, according to Forman, is found in student lecture notes taken in one of his classes in the 1950s:

> Medicine constantly requires the mind to go backwards and forwards. For example, one sees what looks like pellagra and one goes back and thinks 'what is the cause of it and what its characteristic features are'? Then one goes forward to find if the other features of pellagra are present.[225]

In a similar approach, Sanders' life also moved backwards and forwards between different institutions before heading to GSH in her capacity as a female leader. It was in these mostly male-dominated environments that the start of her own career began to emerge. This was possibly already due to the value placed on bilingualism in the medical field as evidenced in the examples mentioned above. There must have been countless doctors who were able to enter the medical field based on their ability to converse freely in both official languages. This coupled with Sanders' popularity and networking skills, even from an early age, allowed her to access positions of power that other peers possibly would not have been able to do. As we will see later, this may have accounted for her high position within the medical field.

The professional and personal merge in an even stronger manner later in Sanders' biographical account, to the point where the personal is almost entirely indistinguishable, and the institutional documents begin to work as a form of biography in themselves.[226] In contrast, it was during the period covered in this chapter that her personal voice clearly came to the fore. As she claims in later interviews: "The history of the hospital is a period of my life but it is not my total life but it does begin with growing up in medical school and in Britain."[227]

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[224] *Ibid.*; R. E. Kirsch, *The Forman Years*, vii.

[225] S. Truswell, "Some of Frankie's Aphorisms" in Kirsch and Knox, *UCT Medical School at* 75, 195.

[226] Interview with Marijke du Toit conducted by Leila Bloch, 6 May 2019. Leila Bloch and Marijke discussed the term "Institution as Biography".

[227] Interview with Hannah-Reeve Sanders conducted by Leila Bloch, 22 July 2020.

This period of Sanders' early career as a white female doctor is marked by one of change and uncertainty, yet confidence and decisiveness in a context of relative ease in terms of accessing resources.[228] Sanders left and returned to GSH several times over these years. She first left GSH in 1953 after her internship only to return in 1955; to leave again in 1957 after "a spell as a temporary junior medical superintendent, to get married and move to Johannesburg only to return again in 1962."[229] Ultimately, she settled onto a path within the South African medical profession.

Speeches gathered through biographical research, as displayed in this chapter, must be understood in context and with a certain critical lens; for example, one might turn to a theoretical framework such as that of Erving Goffman's dramaturgical theory of self-presentation.[230] Goffman's theory develops the metaphoric notion of life as a drama and the presentation of ourselves as "performed" on a stage in front of, but also alongside, various actors and audiences. Our identity is thus made ("self-performed") and re-made in our interactions with persons and institutions through both verbal and non-verbal forms of communication. While such theoretical analysis is not our aim here, speeches can, in particular, offer insight into Sanders' performance of her identity, by offering a window into the way in which she continued to present herself with confidence and assurance despite circumstances and limitations within the institutions she navigated. The latter is seen in the case regarding her decision to move from clinical to administrative medicine for both personal and professional reasons. Seeing immense value in this decision, she claims this was partly to do with the fact that she had "difficulty coping with the suffering of patients," and the responsibility required for "each individual that in turn had joint responsibility with the authorities for their health".[231] Sanders understood that while it was to her benefit to be separated from the direct confrontation with people's suffering she nonetheless saw how integral administration was to the successful treatment of patients. However, as we see later, it was in her administrative positions that she

[228] *Ibid.* "Leaving Groote Schuur: - or going along with life which is perhaps another way of saying it."

[229] [HRSPC], Hannah-Reeve Sanders, speech given at the University Of Cape Town Faculty Of Health Sciences Graduation Ceremony, 8 December 1998.

[230] For an introduction see, E. Goffman, "The Presentation of Self in Everyday Life: Selections" in D. M. Newman and J. O'Brien (eds.) *Sociology: Exploring the Architecture of Everyday Life Readings*, (Pine Forge Press, 2008), 120–129. E. Goffman, *The Presentation of Self in Everyday Life* (New York: Doubleday, 1959), 1–16.

[231] [HRSPC], Hannah-Reeve Sanders, speech given at the University Of Cape Town Faculty Of Health Sciences Graduation Ceremony, 8 December 1998. [HRSPC], Hannah-Reeve Sanders, speech given at Herschel School for Girls: Prize giving, 23 October 1986.

was gradually able to work within, and against, the hierarchical nature of the hospital system as she began to exert more power – the impact and influence of which will be assessed in the following chapter.

Chapter Four: The Pursuit of Achievement in Compromised Institutions: The Path to Chief Medical Superintendency until 1986

 [1]

[2]

The golden age of Dr Hannah-Reeve Sanders was when she was appointed as Chief Medical Superintendent (CMS) from 1976.[3] This chapter proceeds by assessing some of the ways in which she occupied her position as the first female to hold this position. Beginning with the years from 1968 (in her role as Deputy Medical Superintendent), this chapter situates her within the historical narrative reflecting the severity of the controls exerted by provincial government.[4] This chapter also carefully weighs up the turbulent political circumstances of the time, the structures, and systems within GSH and interrogates the descriptions that emerge

[1] [HRSPC], Photograph of Hannah-Reeve Sanders at her desk, nd.

[2] Interview with Graham Sonnenberg conducted by Leila Bloch, 23 June 2021.

[3] [UCTSC], [BC1525], 22-24, Anon, Portrait Sculpture of Dr Hannah-Reeve Sanders, Hospera, April 1989.

[4] Interview with Margaret Hoffman conducted by Leila Bloch, 24 May 2019.

around her professional contribution such as a "pioneer" and "female leader."[5] Given her new position, Sanders was central to several important decisions in the midst of extreme pressure both from within the hospital and political constraints imposed by the province. Sanders was faced with making difficult choices regarding finances, desegregation in the hospital context and staff shortages. As will be shown, while Sanders' actions may have claimed honour and "broken barriers" they were not without the limitations imposed by the historical and political context.[6]

The world of Groote Schuur Hospital from the 1950s

While the history of GSH, and some of the impact of Sanders has been documented in Anne Digby, Howard Phillips, Harriet Deacon, and Kirsten Thomson's book – *At the Heart of Healing* (2008) – the analysis contained in *this* chapter seeks to understand the institution, specifically from Sanders professional perspective and deepens our understanding regarding her role and contribution. In many respects GSH may be understood as a microcosm of Cape Town society at the time, reflective as it was of a pre-colonial, colonial, and particularly multi-ethnic heritage: "reproducing and reflecting the prevailing values and structures – of race, class and gender [which] helped mould the institution."[7] An account of Sanders' life within this context offers an additional lens through which to interpret the limitations and possibilities of Groote Schuur from the position of her female leadership.

In the 1950s Groote Schuur Hospital did not stand in isolation. Based on the long-standing and strengthening effects of the "Joint Agreement," GSH formed a tripartite meeting point between three key institutions: the hospital itself, the provincial government's department of health, and the medical school at UCT.[8] "Although the Joint Agreement specified that GSH would be responsible for patient care and UCT for teaching and research, this was liberally interpreted and generously subsidized by the Cape Provincial Administration (CPA)."[9] GSH was not just one hospital, it was a hospital serving a region which included other hospitals such as the

[5] Interview with Beryldene Swart conducted by Leila Bloch, 9 November 2020.

[6] K. Gottschalk, "Hero against hospital apartheid omitted," *Cape Argus*, 1 February 2018.

[7] Digby and Phillips, *et al*., *At the Heart of Healing*, xxiv.

[8] A. Lennox-Short and D. Welsh, *UCT at 150. Reflections.* (Cape Town: David Philip Publishers, 1979), 80; Interview with Margaret Hoffman conducted by Leila Bloch, 8 Jan 2021.

[9] Lennox and Welsh, *UCT at 150*, 80.

mental health facility of Valkenberg, as well as the Mowbray and Peninsula maternity hospitals.[10] The scale of the job that Sanders had to manage was huge. The six-storeyed building stretched across a vast area with a network of six and a half thousand staff which saw a steady annual increase. The number of patients seen over the first five decades of the hospital's operation reached staggering peaks in 1977 (1 164 236 OPD visits/attendances) and in 1989/90 (95 303 in-patient admissions).[11] Until the late 1970s GSH was the largest hospital in the province. While it drew the majority of its patients from the Peninsula and surrounds, a significant minority also came from further afield, mainly the Southern and Eastern Cape and later the Transkei.[12] As a public hospital GSH was a provincial institution whereby, depending on what work they were doing, most staff were appointed and funded by the province.[13] "The hospital had to navigate between the intricate and not always harmonious administrations of province and university, and (latterly also) of the national state."[14] Leading up to and during her appointment as CMS, Sanders was an employee of the Provincial Council controlled by the National Party-led government which, of course, came with its own implications, such as being accountable to them for the implementations of their policies.[15] One respondent in a series of 30 taped interviews from past and current senior staff members from the Faculty of Health Sciences at the time, commented as follows: "The Medical School always tried to work within government rules."[16] As Sanders herself said in a recent interview: "I sometimes sit and think about apartheid and I think how we settled into it because we really had no options."[17] Negotiations within the province included issues relating to desegregation, but also, as highlighted in this chapter, the building of the new GSH.[18]

[10] Interview with Jocelyne Kane-Berman conducted by Leila Bloch, 7 August 2020.

[11] Digby and Phillips *et al*., *At the Heart of Healing*, 139.

[12] *Ibid.*

[13] Interview with Hannah-Reeve Sanders conducted by Leila Bloch, 22 July 2020.

[14] Digby and Phillips *et al*., *At the Heart of Healing*, xxiv.

[15] Interview with Margaret Hoffman conducted by Leila Bloch, 24 May 2019.

[16] S. Field and F. Swanson, "Teaching at UCT During Apartheid", in *Truth and Reconciliation, A Process of Transformation at UCT Health Sciences Faculty*, ed. Leslie London and Gonda Perez, pg. 146-183 (Cape Town: National Research Fund Project, 2003), 148.

[17] Interview with Hannah-Reeve Sanders conducted by Leila Bloch, 22 July 2020.

[18] Interview with Margaret Hoffman conducted by Leila Bloch, 8 Jan 2021.

After the first heart transplant in 1967, the reputation of GSH was further enhanced. "This medical breakthrough placed GSH at the forefront of global surgical process", however, "in other respects the hospital was very much of its time and place within apartheid South Africa."[19] As indicated in the previous chapter Sanders' "fluency" in Afrikaans and "dorp origins" favoured her within this context.[20] The importance of this fluency should not be underestimated as evidenced by the criticisms even Professor of surgery, J.H. Louw fielded regarding his admission to *Die Suid-Afrikaanse Akademie vir Wetenskap en Kuns*. The organisation which previously granted Professor Chris Barnard a special award for scientific advancement had critiqued Louw for being, "an English speaking Cape Town Professor."[21] GSH being situated within the Cape Province meant that wards were segregated within the hospital, but shared in common services, for example the X-ray department.[22] This differed from the rest of South Africa whereby there were generally separate hospitals for each "population group" – the term the apartheid government used as a euphemism to gloss its apartheid policies.[23] At GSH, under such legislation, white medical students had the freedom to work in any ward whereas other races were not allowed to work in white wards.[24] As Digby *et al.* write: "The original hospital plan was based on 'the separation of races and the sexes', and for a long time this arrangement was maintained. Patients entered GSH by separate entrances."[25] While the wards were separated, theatres were not.[26]Apartheid policy within the hospital and medical field was met with political resistance, intensified by organisations such as The Health Workers Society (HWS), The Detainees Parents Support Committee (DPSC) and The National Medical and Dental Association (NAMDA).[27] Many health professionals defied apartheid in varying ways by providing support for anti-apartheid activities and protests.

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[19] A. Digby, "The Art of Medicine: The Global and Local: Changes at Groote Schuur Hospital", *The Lancet* 374, no. 9692 (2009), 778.

[20] Digby and Phillips *et al*., *At the Heart of Healing*, 63.

[21] [UCTAA], 45.4.4, J.H. Louw's personnel folder, Letter to the registrar of The University of Cape Town from J. H. Louw, 29 June 1968.

[22] [SAJMA], Interview with Hannah-Reeve Sanders conducted by Adrienne Folb, 31 August 2014.

[23] S. J. Horwitz, *Baragwanath Hospital, Soweto: A History of Medical Care, 1941-1990* (Johannesburg: Wits University Press, 2013).

[24] Interview with Margaret Hoffman conducted by Leila Bloch, 8 Jan 2021.

[25] Digby and Phillips *et al*., *At the Heart of Healing*, 105.

[26] Interview with Jocelyne Kane-Berman conducted by Leila Bloch, 7 August 2020.

[27] L. Baldwin-Ragaven, L. London, and J. de Gruchy, *An Ambulance of the Wrong Colour: Health Professionals, Human Rights and Ethics in South Africa* (Juta and Company Ltd., 1999), 185.

According to the same interview series, for most health professionals at the time, "it really was a minority of UCT academics who opposed the government. The majority were just prepared to go alongside silently and accept what was happening."[28] The extent of Sanders' involvement in any of these organizations is not clear; in later interviews she did not offer further comment when questioned.[29] However, emerita Professor of Public Health, Margaret Hoffman did not seem to think she was involved.[30] A letter sent to Sanders years later showed some association to NAMDA.[31] The letter was from Professor of Public Health (and at the time NAMDA Branch Secretary), Leslie London. In the letter, London thanked her for taking the time to meet Dr Waterston.[32] Perhaps, as Hoffman suggests, if she had fully adopted the role as an activist in the organisation, there would have been severe consequences for her career.[33]

As expanded on below, Sanders disregarded apartheid policy within the hospital system before the hospital was officially desegregated.[34] Sanders reflected unequivocally: "It was a hospital of racism."[35] In interviews with Sanders as well as newspaper reports, claims have been made regarding her prominent role in the desegregation of the hospital wards.[36] Within the hospital, "the overcrowding of black wards and declining demands by white patients helped stimulate a fundamental rethink on the organisation of the hospital and for the need to use resources more efficiently. As a result, partial desegregation of the hospital began in 1968."[37] According to

[28] S. Field and F. Swanson, "Teaching at UCT During Apartheid", in L. London and G. Perez (eds.) *Truth and Reconciliation, A Process of Transformation at UCT Health Sciences Faculty* (Cape Town: National Research Fund Project, 2003), 155-159.

[29] Interview with Margaret Hoffman conducted by Leila Bloch, 8 Jan 2021; [GSHA], [HRS] files, Personal File, Letter from L. London (Public Health Specialist and NAMDA activist) from NAMDA to Dr Hannah-Reeve Sanders, thanking her for taking the time to meet a Dr Waterston 3 October 1991. Interview with Hannah-Reeve Sanders, August 2020.

[30] Interview with Margaret Hoffman conducted by Leila Bloch, 8 Jan 2021.

[31] [GSHA], [HRS] files, folder entitled: "Personal MASA 1993", Letter from Leslie London to Dr Reeve-Sanders, 3 October 1991.

[32] The reference here is possibly to that of Dr Tony Waterston: See T. Waterston and A. Zwi, "Health Professionals and South Africa: Supporting Change in the Health Sector", *BMJ Clinical Research,* 307 (1993): 110–112.

[33] Interview with Margaret Hoffman conducted by Leila Bloch, 8 Jan 2021.

[34] *Ibid.*

[35] Interview with Hannah-Reeve Sanders conducted by Leila Bloch, 22 July 2020.

[36] K. Gottschalk, "Hero against hospital apartheid omitted", *The Cape Argus,* 1 February 2018.

[37] Digby and Phillips, *et al*., *At the Heart of Healing*, xxv

Jocelyne Kane-Berman, "Much of what Dr Sanders did re integration was done quietly and to the best of my recollection was not discussed in open meetings."[38]

Included in Sanders' testimony which speaks to a progressive, even irreverent nature within the hospital system she says, "I can't say what I did wasn't against the law."[39] To what extent these claims are true will need to be examined. In exploring key institutional documentation, secondary sources, and corroboration of testimony, it will be shown that these claims can be justified through a series of "progressive" decisions and choices in terms of integration of the wards, services, and a concomitant leadership style. This combination might be behind the sentiments that she was, "ahead of her time".[40]

Early resistance and the emergence of Sanders' leadership: 1968-1975

A year after the first heart transplant in 1968 Sanders was promoted to Deputy Medical Superintendent at GSH, while was still under the leadership of J.G. Burger,[41] a position she held from 1968-1971.[42] Sanders would recall occasions when she would be asked to go and just "sort things out", making her question whether this was what she wanted to be doing in the hospital.[43] She characterised the experience of being ordered around as a feeling of passivity – the type of "female management style" that supposedly attempts to avoid confrontation or conflict.[44] When offered the role of Deputy Medical Superintendent, her contract included her not being allowed to oversee the hospital in Burger's absence.[45] Sanders claims to have refused the job until her letter of appointment addressed this issue. This resistance denotes an initial inflection in her leadership that would continue to depend on principles of equity but also pragmatism. The differences between Burger and Sanders' leadership styles were stark: Burger, on the one hand, adopted a more hands-off approach and allowed problems within the

[38] 31 August 2021, Email correspondence with Jocelyne Kane-Berman.

[39] [SAJMA], Interview with Hannah-Reeve Sanders conducted by Adrienne Folb, 31 August 2014.

[40] Interview with Jocelyne Kane-Berman conducted by Leila Bloch, 7 August 2020.

[41] H.-R Sanders and J. Kane-Berman, "History: The University of Cape Town's Medical Faculty and Groote Schuur Hospital", *South African Medical Journal* 102, no. 6 (2012), 61.

[42] [PMC], Hannah-Reeve Sanders' Curriculum Vitae.

[43] [UCTSC], [BC1525], Interview with Hannah-Reeve Sanders conducted by Anne Digby, 12 April 2006.

[44] *Ibid.*

[45] *Ibid.*

hospital to resolve themselves.[46] He was also known for delegating responsibilities to his "growing cadre of deputy assistant medical assistants."[47] Sanders, on the other hand, had a diametrically opposed approach: she would not leave the office if there were any tasks that had to be done that could impinge on someone's life.[48] "Sometimes I think I overreact too much. I am a great one for wanting to sort it out, and there are times, as you know, when things are left better for a while, because it does find an end of its own."[49]

"*Groote Schuur Hospital – Assistant Medical Superintendent Office (B-floor).*"[50]

On the 14th of August 1968, A. Fanaroff from the Medical Association at The University of Witwatersrand, sent a letter to Dean of the Faculty of Medicine at UCT expressing his problems with the divided salary scales among 'White' and 'Non-white' medical practitioners. Fanaroff forwarded a resolution from the council meeting which supported the principle of equal pay in

[46] Digby and Phillips *et al*., *At the Heart of Healing*, 62.

[47] *Ibid,* 63.

[48] [UCTSC], [BC1525], Interview with Hannah-Reeve Sanders conducted by Anne Digby, 12 April 2006.

[49] *Ibid.*

[50] [HRSPC], photograph with description: "*Groote Schuur Hospital – Assistant Medical Superintendent Office (B-floor) later Converted into Heart Transplantation Ward.*"

the medical profession.[51] Around the same period, early activism was taking place among student organisations in defiance of apartheid policy. For example, "the creation of a South African Students Organisation (SASO) informed by the Black Consciousness Movement (BCM) ideology in 1969."[52] While Sanders was learning to shape her role in senior hospital administration, "for many, but not all black medical students, a culture of opposition became inseparable from medicine."[53] A political awareness and confrontation with oppressive systems, especially within health care, became clear.

Sanders' more pragmatic approach was temperate when contrasted with the increasing activist political climate as we will see below. In the meantime, her rising public persona within the medical fraternity also dovetailed with concern for gender related issues. On the 28th of March 1970, in her capacity as President of the South African Society of Medical Women, Dr Sanders published a letter to the editor of the *South African Medical Journal* responding to one of their editorials entitled "Women Doctors," where she was critical of the fact that a selection of first year medical students would be based on gender due to an apparent shortage of doctors.[54] In her response, Sanders emphasised that the shortage was the failure of "those men who have planned inadequately" not the fault of women medical practitioners, who usually were not afforded full-time employment.[55] The consideration of selecting first year medical students on the basis of their sex, was such a regressive step in her opinion as to put the *South African Medical Journal* "squarely back in the mid-19th century."[56] She defended the fact that at that point only 50 % of qualified women medical doctors were working full time and that they

[51] [UCTAA], [V-506/68], August 1968. Letter from A. Fanaroff (Medical Graduates Association, University of the Witwatersrand) to Dean of Faculty of Medicine, Cape Town (14 August 1968): "Dear Sir, My Council is extremely disturbed by the problems arising from the differential salary scales for White & Non-white medical practitioners. In this connection I have been requested to forward to you the resolution passed at its last meeting which reads: - 'This Council supports the principle of equal pay for equal work in the medical profession and deplores the present situation regarding salaries in the Transvaal and Natal Administrations. It is further resolved that this Council's view be transmitted to the Provincial authorities, the Medical Association of South Africa (southern Transvaal Branch), the Principal of the University of the Witwatersrand and the Faculties of Medicine of the medical schools in Johannesburg, Pretoria, Cape Town, Stellenbosch and Durban.'"

[52] A. Digby, "Black Doctors and Discrimination under South Africa's Apartheid Regime", *Medical History* 57, no. 2 (2013), 285.

[53] *Ibid.*

[54] H.-R Sanders, "Women Doctors" in *South African Medical Journal,* 28 March, 1970, 397. The original editorial was published on 21 February 1970.

[55] *Ibid.*

[56] *Ibid.*

played an essential part in preventative health measures, while also fulfilling "their function not only as doctors, but as wives, mothers and citizens."[57]

Sanders was also appointed president of the Western Cape's branch of the Medical Association of South Africa (MASA) and honorary life member of the GSH Sports and Social Club.[58] The list of these involvements does not serve merely as a demonstration of her achievements, but also as a way of following her public persona. In February 1971 Sanders published a paper entitled "The relationship between the Medical Superintendent Matron and Secretary of a Hospital" in which she emphasised the working dynamic of these relations.[59] Addressing the hierarchical nature among the roles within the hospital context, she qualified what she wrote by saying it had come from her experience as a doctor in teaching hospitals.[60]

> The hierarchical character of a hospital medical and nursing organisation is notorious – even when matrons are no longer remote dragons and consultants cease to be 'God in a white coat.' The smallest gradations of rank and station are in both professions as sharp as ever. And this is the paradox of the hospital as an organisation – it is – and must be both authoritarian and permissive – highly formalized – and yet loosely knit.[61]

The above speech showed an awareness of her accountability in the hospital system. It was clear that Sanders' management style was aware of the dangers but also necessity of hierarchy, while at the same time placing value on horizontal interactions with all colleagues and staff.

On 21 April 1971, at 49, Sanders was nominated "Woman of The Year" along with five other white women: Joyce Bradley, Joy Collier, Molly Warr and Eulalie Stott who all worked in

[57] *Ibid.*

[58] [PMC], Hannah-Reeve Sanders' Curriculum Vitae.

[59] [UCTSC], [BC5125], H-R Sanders, The relationship between the Medical Superintendent Matron and Secretary of a Hospital, 1971.

[60] *Ibid.*

[61] [HRSPC], The relationship between the Medical Superintendent Matron and Secretary of a Hospital, 1971.

separate fields.[62] The celebratory lunch was held at the 'Senator Klub' in Bellville. While the focus was on women of the year, the theme that Sanders was asked to speak on was "Communication with the opposite sex." "We do hope you approve!!!!" National Party member Esmè Chait wrote to Sanders.[63] Each speaker was introduced by Chait and had been encouraged in their invitation to be as flippant or controversial as they liked. On the actual day, Sanders delivered a measured, well-balanced speech, reflecting on the nature of what makes good communication.[64] Real dialogue, she said, is "continuously hidden in all kinds of odd corners."[65] The speech also sheds light on some of her philosophical ideas concerning dialogue, which may have come to inform her approach to managing GSH. In the speech she quoted the philosopher, Martin Buber (1878–1965), famous for his theorisation of the so-called, "I–Thou" relationship. "The basic movement of the life of dialogue is the turn towards the other...Dialogue means to love what blood means to the body. When the flow of blood stops the body dies."[66] Here she brings physical analogies in her explanation of human dialogue, opening the discussion in a creative but not uncommon direction for someone in the medical profession, even in reference to Buber.[67] At the core of the speech was Sanders' message regarding the power of dialogue and how its ability to inform relationships and healing of a marriage, or any other relationship, cannot occur when partners see themselves as separate individuals with a right to demand services of each other.[68] The speech illustrates a great deal of the thought governing the way in which Sanders presented her professional career. The nature of dialogue she is referring to, however, albeit to a whites-only audience was of course presented during the height of apartheid, and her gestures towards the value of "the dialogical" were limited by their social context within a whites-only audience, calling into question the extent to which 'open dialogue' was even possible within this context.

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[62] [HRSPC], Anon 'women of the year, April 1971.' [HRSPC], Anon, "Five are woman of the year", 1971. The Newspaper is not listed.

[63] G. Shimoni, *Community and Conscience: The Jews in Apartheid South Africa* (Cape Town: David Philip Publishers, 2003), 129; [HRSCP], Letter to Dr Sanders from Esmè Chait, 23 March 1971.

[64] [HRSPC], Hannah-Reeve Sanders, untitled speech on communication, 21 April 1971

[65] *Ibid.*

[66] *Ibid.*

[67] For example, see H. Abramovitch and E. Schwartz, "Three stages of medical dialogue", *Theoretical Medicine* 17 (1996):175–187.

[68] [HRSPC], Hannah-Reeve Sanders, untitled speech on communication, 21 April 1971.

While the philosophical underpinning of her thought can be traced through the many speeches she gave over the years, the value she placed on maintaining relationships among friends and colleagues can also be tracked through correspondence she kept over her working years. On the 20th of January 1972, Dr J.C. de Villiers wrote to Sanders reflecting on the nature of their relationship spanning a decade of correspondence. He thanked her for the opportunity of working alongside her and being able to walk freely into her office, "either with complaints or simply without them." From his (male) perspective, he went on, "If I can say one nice thing here, without wanting to flatter you, it is this: despite all of these virtues, you managed to stay feminine in a world of men and this is something I always admired."[69]

Sanders maintained long correspondences throughout her life including that with her friends, colleagues, relatives, and even teachers dating back to her school years as mentioned throughout this thesis. Very rarely did the letters depart into the deeply personal. In many it is only the pleasantries and formalities that can be found: thank-you notes, letters of congratulations, confirmation of conference attendance, good wishes sent to those that were ill, as well as extensive travel itineraries marking the many countries she visited.[70] However, one such letter exchange with Dr J.C. de Villiers demonstrates a merging of both professional and personal friendship.

Sanders maintained good relationships with everyone within the hospital, and as we have already seen, she advocated for equity among the genders, but she was not explicitly feminist.[71] Her empathy towards women was reflected in the help she bestowed on them when the occasion demanded.[72] As her career progressed, she continued to advocate for the presence of female professionals in the healthcare system, particularly nursing. In February of 1972 — in her role as Professional Advisor at the Cape Provincial Administration's Hospital Department and Professional Liaison Officer to the Director of Hospital Services in the Cape Province —

[69] [KDVPC], Letter to Dr Sanders from Kay De Villiers letter Collection to Sanders, 1978

[70] [GSHA], [HRS] files, folder entitled: "Overseas Report: Hannah Reeve Sanders – Department of Health Services", Itinerary: "12-14 August Seychelles, 15-17 September Hong Kong, 18 September Japan, 4-12 September Australia", 10 August 1976.

[71] Interview with Jocelyne Kane-Berman conducted by Leila Bloch, 7 August 2020.

[72] Interview with Margaret Hoffman conducted by Leila Bloch, 8 Jan 2021.

Sanders commenced a study on nursing in the Cape Province.[73] Here she emphasised the rights of nurses within the medical profession, and in 1973, Sanders spoke about nursing at a medical superintendents' conference where she described it as predominantly a woman's occupation.[74] Further connection of Sanders' personal interest into nursing is evidenced in 1973, where another study into the work of trained nursing staff in Gynaecology and obstetrics in Neonatal units, was a result of her recommendation to the Director of Hospital services. It argued that "trained nurses should receive work study training and be utilised to investigate staffing needs in Cape Provincial Hospitals."[75] Sanders explained that from her position as Superintendent, "the ward is the area where the hospital planner can do most to facilitate the work of the nurse. It is also the area where the planner can do most to make the patient's stay in the hospital comfortable."[76] Lastly, perhaps sensing the gender imbalance still present in nursing in the 1970s, she also appealed for more men to enter the profession.[77]

Sanders extended the theme of gender into various institutional contexts: On the 5th of November 1974, she addressed the question of women at the first South African International Conference on Alcoholism and Drug Dependence.[78] Similarly, in *The Cape Times* in 1974 Sanders reflected upon an increasing number of women alcoholics in Cape Town. In the article she stressed the fact that there was not enough time and thought given specifically to helping women.[79] In 1975 returning to the subject of nursing in her address to the Border Branch of the S.A. Medical Association, she commented on the inequalities evident in the 4717 nurses

[73] [HRSPC], Hannah-Reeve Sanders, speech given at Hannah-Reeve Sanders' Farewell when she left Groote Schuur Hospital, 26 June 1986; *The Cape Argus*, 27 June 1986, "Groote Schuur Matron Quits for the Fourth Time", 1. 'She left it in 1953, in 1957 to marry and in 1972 to take up a post at Hospital Services'; [GSHA], [HRS] files, folder entitled: Medical Superintendents Conference, Hannah-Reeve Sanders, speech given at the Medical Superintendents' Conference 1973, Focus on nursing; Hannah-Reeve Sanders, "Demographic Survey of the Cape Province", Report to the Director of Hospital Services, Cape, 1974.

[74] [GSHA], [HRS] files, folder entitled: Medical Superintendents Conference, Hannah-Reeve Sanders, speech given at the Medical Superintendents' Conference 1973, Focus on nursing.

[75] J. Kane-Berman, "Hospital Administration" (MA thesis, University of Cape Town, 1978).

[76] [GSHA], [HRS] files, folder entitled: Medical Superintendents Conference, Hannah-Reeve Sanders, speech given at the Medical Superintendents' Conference 1973, Hannah-Reeve Sanders, "Demographic Survey of the Cape Province", Report to the Director of Hospital Services, Cape, 1974.

[77] [GSHA], [HRS] files, folder entitled: Medical Superintendents Conference, Hannah-Reeve Sanders, speech given at the Medical Superintendents' Conference 1973, Focus on nursing

[78] [GSHA], [HRS] files, folder entitled: "Eerste Suid-Afrikaanse Internasionale Konferensie oor Alkoholimse en Dwelmiddelafhanklikheid, 4-8 November 1974", First S.A. international conference on Alcoholism and Drug dependence. Summary of group discussions Tuesday 5 November 1974.

[79] [GSHA], [HRS] files, folder entitled: "Eerste Suid-Afrikaanse Internasionale Konferensie oor Alkoholimse en Dwelmiddelafhanklikheid, 4-8 November 1974", Anon, "Women and alcoholism", *The Times*, 6 November 1974.

employed at GSH, of which 2765 were white and 1952 were "non-white".[80] The speech was delivered in the same year her public persona continued to grow, having been elected as Professional Woman of the Year and attended another celebratory women's luncheon in Bellville.[81]

Action and collusion with rising pressures as Chief Medical Superintendent

In 1976, at the age of 48, Sanders stepped into her position as the first female Chief Superintendent and Chief Director of GSH. This was a year of political crisis, marked by events such as the student uprisings in Soweto, which led to riots in the townships of other cities, including Cape Town. Under Sanders' leadership, information on patients or death at GSH was not released to the press.[82]According to Sanders, the way in which she came into the position was not ideal. In the same year that Sanders was asked to lead GSH, Robbie Nurock, a colleague who had already received the appointment, had fallen ill with cancer.[83] Nurock's health began to fail soon after he assumed office in January 1976 and he died in August that year.[84] Sanders felt that he would have been the preferred leader of the hospital.[85] Nevertheless, she told the press that it was a great privilege to take over the post, but a great sadness that he was not able to take over the position himself.[86] She told a reporter that she wished to bring a "humanising and personal influence into the vast corridors of GSH," which was under-resourced and facing great financial and logistical strain.[87] As alluded above, while she entered a powerful institution, the environment was nonetheless challenging. The former Dean of the Medical Faculty, J.P. Van Niekerk stated that GSH comprised many driven and competitive individuals with high qualifications, "brandishing their domains and areas of expertise."[88]

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[80] [GSHA], [HRS] files, Hannah-Reeve Sanders, speech given to the Border Branch of the South African Medical Association, 13 May 1975.

[81] [UCTSC], Anon, "The Argus Line-Up of Leading Ladies," *The Argus,* nd, 1976; [GSHA], [HRS] files, Hannah-Reeve Sanders, speech given to the Border Branch of the South African Medical Association, 13 May 1975.

[82] Digby and Phillips *et al*., *At the Heart of Healing*, 113; [GSHA], [AR], Dr H.-R. Sanders, *1977*, 2

[83] Interview with Hannah-Reeve Sanders conducted by Leila Bloch, 22 November 2019.

[84] Digby and Phillips *et al*., *At the Heart of Healing*, 63.

[85] Interview with Hannah-Reeve Sanders conducted by Leila Bloch, 22 November 2019.

[86] [UCTSC], Anon, "Challenge for woman in top hospital post", T*he Argus*, Friday 5 November 1976.

[87] Digby and Phillips *et al*., *At the Heart of Healing*, 63. Interview with Margaret Hoffman conducted by Leila Bloch, 8 Jan 2021.

[88] Interview with JP van Niekerk conducted by Leila Bloch, 30 August 2019.

In her annual report in 1977, Sanders stated that her appointment as the first female chief executive of Groote Schuur Hospital was of "minor consequence" considering the other issues that were taking place within the hospital.[89] In 1977, in particular, GSH was under severe financial pressure.[90] According to Sanders, the main challenge for the hospital that year was "maintaining their standards of care while controlling expenditure and making use of their existing resources."[91] During this year South Africa was shaken by the chilling events that transpired between Steve Biko's imprisonment in August and his death in September 1977.[92] Sanders carefully navigated the day-to-day workings of the hospital, maintaining a cautious stance with respect to political events. On the 25th of November 1977, she received a concerned letter from Margaret Elsworth, the co-founder of SHAWCO, a member of Cafda, and founder of the African Scholars' Fund.[93] Elsworth alerted her to the fact that Cape Town school pupils had been detained by security police. Elsworth's letter detailed the fact that they were arrested in the middle of the night at their homes in Gugulethu, and that more than 40 of these pupils, she claimed, were being kept in solitary confinement. Elsworth asked Sanders for some form of regular medical supervision to ensure the well-being of the scholars and to reassure the parents. She wrote, that "members of the medical profession should consider the possibilities of action with a view to improving the medical supervision of those detained."[94] Mr W.H. Bernard from the S.A. Medical and Dental Council, as well as Mr Roberts the chief magistrate of Gugulethu, were among others who were also contacted by Elsworth.[95] Elsworth continues, perhaps revealingly, that she had tried to meet with Sanders in person, but that she (Sanders) "was away on holiday that week."[96] Sanders did not recall the event in later interviews, but a

[89] [GSHA], [AR], Dr H.-R. Sanders, *1977*, 2.

[90]Groote Schuur Hospital 80th Anniversary Commemorative Book, The Angels on Devil's Peak: The history and stories of their experience 1938 to 2018, 84.

[91] [GSHA], [AR], Dr H.-R. Sanders, *1977*, 2

[92] L. Rubenstein and L. London. "The UDHR and the Limits of Medical Ethics: The Case of South Africa." *Health and Human Rights* 3, no. 2 (1998): 160–75.

[93] S. Ishmail, "Cafda celebrates 75 years of helping Cape Flats communities", *IOL*, December 18, 2019; Stuart Saunders, *Vice-chancellor on a tightrope: A personal account of climactic years in South Africa* (Cape Town: David Philip Publishers, 2000), 20.

[94] [GSHA], [HRS] files, folder entitled, "SA Medical Association Branch Council 1955- 1977", letter to Hannah-Reeve Sanders from Margaret Elsworth, 13 December 1977.

[95] *Ibid.*

[96] *Ibid*.

handwritten note made by her on the letter suggested that the issue would be raised early the following year.[97] No documentation has been found detailing a further response, however.[98]

As invited speaker at a postgraduate course in obstetrics and gynaecology in 1977 she re-emphasised the responsibility of being in management, "something which no woman had previously dared to do."[99] In the speech she also made a slight at the unfair way women were perceived; "[b]y communication" she said: "I don't mean the nattering my sex is usually associated with."[100] In fact, in terms of communication, as a leitmotif we have seen in Sanders' life – from her oratory skill to written communication – it seems only fitting that she would go on to establish the hospital's first press liaison officer, as well as a public relations unit in 1977.[101] Desiring to commence with the development of major extensions at the hospital, Sanders also began to challenge some of the structural differentials in the hospital; for example, as Digby and Phillips comment, the role of the hospital matrons' secretary, was to be elevated to a position of more than just a senior clerk.[102] Such changes are not just linguistic tricks, but are borne out of the sense that with language comes power, and thus, as the authors of *At the Heart of Healing* go on to say, the real change in management style and structure was the way in which Sanders brought about "humanising elements".[103]

Jocelyne Kane-Berman — who first began at GSH as an assistant medical superintendent in 1970, and then later a senior medical superintendent under Sanders from 1978, and also her eventual successor in 1986 — recalls the Medical Superintendents' meeting, attended by the Hospital Secretary and the Hospital Matron, as well as all the Medical Superintendents every morning.[104] Here the team would meet to discuss issues of the day: ranging from laundry,

[97] *Ibid*, interview with Hannah-Reeve Sanders conducted by Leila Bloch, August 2021.

[98] *Ibid.*

[99] [HRSPC], Hannah-Reeve Sanders, speech given during a post-graduate course in Obstetrics and Gynaecology, 7-11 February 1977.

[100] *Ibid.*

[101] Digby and Phillips *et al.*, *At the Heart of Healing*, 66.

[102] *Ibid.*

[103] *Ibid.*, 63.

[104] [GSHA], Press Clippings file, Medical Reporter, "New hospital appointments," *Argus*, 3 July 1986; [GSHA], Press Clippings file, Staff Reporter, "Top doc takes over at Groote Schuur," *Argus*, 2 July 1986.

trouble with boilers, to more serious issues, like the demand for Coloured and African beds.[105] Kane-Berman recalled that the Medical Superintendent would chair these meetings with heads of department as well as the meeting of the THCAC (Teaching Hospital Central Advisory Committee) where the Dean and the heads of divisions attended, and where her and Sanders would chair once a month. When describing the medical superintendents meeting, Kane-Berman said that while their jobs entailed many meetings, these particular ones "were very brief, you know, it was usually just a decision."[106] Yet, it was also the case, according to Kane-Berman , that Sanders was more willing to discuss issues in comparison to her predecessor who was quite autocratic.[107] Dr Margaret Hoffman, the registrar in community health between 1977 and 1978, was taken by how assertive Sanders had become in her leadership position.[108] Each division within the hospital had a registrar and by the end of 1978, "the teaching staff consisted of 32 professors, 22 associate professors, 226 full-time and 212 part-time lecturers. In addition, there were 275 registrars/medical officers, 33 senior house officers and 57 interns at the teaching hospitals – a total professional staff of 857."[109] Hoffman was specifically impressed with the way in which Sanders would chair meetings among all the heads of divisions which were mostly run by men.[110] As previously documented, "The men responsible for her appointment may have underestimated her independence of mind" and that the new position gave Sanders "both the confidence and opportunity to put into practice some of the ideas she had quietly developed in 15 years of administering hospitals from within and without."[111] According to Hoffman there was minimal indecisiveness in Sander's approach, and she came to decisions with a certain finality.[112]

[105] Interview with Jocelyne Kane-Berman conducted by Leila Bloch, 22 August 2020.

[106] *Ibid.*

[107] *Ibid.*

[108] M. Hoffman, D. Coetzee, R. Hodes, and L. London, "From comprehensive medicine to public health at the University of Cape Town: A 40-year journey", *South African Medical Journal*, 102 no. 6 (2012): 442–445, here pg. 442; Interview with Margaret Hoffman conducted by Leila Bloch, 24 May 2019.

[109] J.H. Louw, "A Brief History of the Medical Faculty, University of Cape Town", *South African Medical Journal* 56, (1979), 864–870.

[110] Interview with Margaret Hoffman conducted by Leila Bloch, 8 Jan 2021.

[111] Digby and Phillips, *et al*., *At the Heart of Healing*, 63.

[112] Interview with Margaret Hoffman conducted by Leila Bloch, 8 Jan 2021.

In 1978, Sanders was portrayed in *Fair Lady* magazine as an ideal image of femininity.[113] With embellished language, the article noted how her one-time "masculine" office had been transformed and was now decorated with flowers.[114] Dr J.C. de Villier's use of the word 'feminine' in his letter to Hannah is echoed here in this depiction of what it meant to be a woman in the workplace. Despite its complementary language, the article does state that Sanders was known for giving her staff a hard time through the issuing of directives.[115] Sanders attended administrative matters with surgical precision, for example, with regards to GSH's 40th anniversary celebration. In her acknowledgement of each individual and in celebrating the institution, Sanders meticulously collated pages of documents that list the involvement of all those who contributed to the event.

Problems needing to be solved

The almost blithe nature of the details surrounding the hospital's birthday stand in sharp contrast to the prevailing political challenges.[116] It's unclear, but perhaps suggestive, that for this event Sanders maybe have been tasked with portraying the hospital in a positive light, through the expectations of the CPA.[117] At most, we can say that her meticulous notetaking and eye for detail evince a firm commitment to the portrayal of a positive public image for the hospital.

On a day-to-day level during the late 1970s, the heavy patient load at GSH continued to grow, as did the immense pressure for the planning and re-development of the hospital referred to above, where Sanders was the committee chairperson.[118] The year 1978 seemed to be a fine balancing act as the hospital celebrated its 40th anniversary, but also was planning for the

[113] A leading female magazine portraying female ideals which only became politicised in the 1980s. A. Carelse and M. Evans, "'The Woman You Want to Be': The Changing Face of *Fairlady* Magazine, 1985–2005", *African Journalism Studies* 38, no. 2 (2017), 120–121; N. Ferreira, "'Grace' and The Townships Housewife: Excavating Black South African Women's Magazines from the 1960s", *Agenda (Durban)* 25.4 no. 90 (2011), 66.

[114] B. Astury, "Women in Office", *Fair Lady*, June 7, 1978.

[115] *Ibid.*

[116] [UCTSC], [BC1525], File, 1978 Anniversary, Hannah-Reeve Sanders, speech given at the celebration of the 40th Anniversary of Groote Schuur Hospital, 1978.

[117] *Ibid.*

[118] [GSHA], [AR], Beth Adams, XVII Building and Planning Committee, *1977*, 141

future.[119] In that year a tender for the building of the new main GSH hospital was put out.[120] With it came the architect's promise of "flexibility, generosity of space and capacity for alterations to be made in a non-disruptive manner."[121] These hopeful plans took place during a major exodus whereby 26 unnamed members of highly qualified consultant staff resigned to take up appointments abroad, the details of which were not documented in the annual report.[122]

In the GSH Annual Report, Sanders wrote that 1979 was a particularly difficult year for the hospital with regards to pressure from who she referred to as "the powers that be" (possibly the CPA), concerning the planning and redevelopment of the new GSH.[123] It was agreed in principle that the planning of the hospital could proceed and "the promise of 1722 beds brought hope to an ever-increasing problem of beds and other accommodation."[124] During this process there was tension between needing to proceed with plans as well as constant reminders of the inadequacies of existing facilities to cope with heavy patient and teaching loads, as well as intensive attempts to find administrative, nursing, technical and paramedical personnel to fill the many vacant posts.[125] The financial situation also remained a cause for concern with the hospital facing not only a shortage of applicants for nursing, radiographers, and other professions allied to medicine (PAMS), but also the draining of many staff to the more attractive private sector.[126] To make matters worse, during this year the hospital was faced with the challenge of worldwide resistance to antibiotic resistant organisms.[127]

The year 1979 reveals Sanders' vulnerability in the face of these external challenges. In a talk to the anaesthetics department, she gives subtle expression to these feelings, and again in gendered terms:

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[119] [GSHA], [AR], Dr H.-R. Sanders, *1979*, 2.

[120] Groote Schuur Hospital 80th Anniversary Commemorative Book, The Angels on Devil's Peak: The history and stories of their experience 1938 to 2018, 84.

[121] Digby and Phillips *et al*., *At the Heart of Healing*, 53.

[122] [UCTSC], [BC1525], Hannah-Reeve Sanders, speech given at the celebration of the 40th Anniversary of Groote Schuur Hospital, 1978.

[123] [GSHA], [AR], Dr H.-R. Sanders, *1979*, 2.

[124] Medical Reporter, 'Year of Problem Solving for Groote Schuur,' *The Argus*, 8th September 1980; [HRSPC], Hannah-Reeve Sanders, speech given at the Anaesthetic Department Meeting, 10 February 1979.

[125] [GSHA], [AR], Dr H.-R. Sanders, *1979*, 2.

[126] K. Swift, "'Year of problem solving' for Groote Schuur", *The Cape Argus*, 8 September 1980.

[127] *The Cape Times,* 18 July 1980, "Hospital acts to combat infection".

> There are days when I wonder about survival: of course, I feel particularly vulnerable: having been entrusted with the management of this institution you can hardly wonder that I feel this way when I have stepped out of the traditional role of women.[128]

To deal with the onset of these difficulties that had begun in 1979, in 1980 Sanders declared it a "Year of Problem Solving for GSH."[129] During this year Sanders publicly acknowledged the strain she was beginning to take at work: "The physical and mental burden is immense in this job. I am supposed to be a thinker, planner, looker, and seer [sic] in the future and at the same time deal with daily problems."[130] These concerns were reiterated in a later interview and Sanders confirmed that this period had taken a toll on her physical health.[131] Nevertheless, despite the strain, it was reported that during this year she was always available to offer a sympathetic ear to hospital interns disturbed by their working conditions.[132] Among several critical issues, two of the most challenging included the low pay of nurses and the shortage of nurses applying for training.[133] To address the disquiet, Sanders embarked on a sustained recruitment strategy aimed at prospective nurses; a duty she claimed to carry out for ten years, interviewing new nurses every Monday.[134] Her suggestion was to create more part-time work for the women who wished to apply, perhaps an implicit concession for women who were focusing more on marriage than their professional life.[135]

In 1981, despite Sanders' efforts up until this point, nursing still remained a problem yet to be solved. The annual report released that year noted the shortage consisting of a total of 2828 posts.[136] Again panicked headlines filled the newspapers such as *Die Burger*, *The Argus* and

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[128] [HRSPC], Hannah-Reeve Sanders, speech given at the Anaesthetic Department Meeting, 10 February 1979.

[129] K. Swift, "'Year of problem solving' for Groote Schuur", *The Argus*, 8 September 1980.

[130] *Ibid.*

[131] [UCTSC], [BC1525], Interview with Hannah-Reeve Sanders conducted by Anne Digby, 12 April 2006.

[132] *Cape Times,* 29 November 1981, "Few apply to train as nurses".

[133] *Ibid.*

[134] Interview with Hannah-Reeve Sanders conducted by Leila Bloch, 22 July 2020.

[135] *Ibid.*

[136] [GSHA], [AR], Professor P Harrison, UCT Department of nursing, *1981,* 104.

The Citizen, with articles such as "Nursing in Crisis", "Staff crisis is hitting GSH hard", and "Inquiry call as infants die due to nursing shortages."[137] Experienced professors bemoaned of this precarious state of affairs — the Head of the Department of Medicine, Dr Solly Benatar, for example, said that the nursing shortage had reached "critical proportions."[138]

Desegregation of wards and racial attitudes?

In another vein, *The Cape Times* argued that "the persistence of obsolete racial attitudes" affected the nursing shortage and "best use of available talent."[139] Racial prejudice worsened an already critical nursing situation; under the partial apartheid legislation a white nurse could instruct a "coloured sister", but a "coloured sister" would not be able to tell a "white sister" nurse what to do.[140] In one notable incident, a measure that had been introduced at GSH to treat infectious staphylococcus (staph-infection) was thwarted by two white patients who complained about receiving treatment from coloured nurses.[141] Sanders memorably tells of an occasion whereby she sat down by the bed of a white Afrikaans patient who had been complaining that he had received treatment from a coloured nurse in a white ward.[142] Sanders asked him to close his eyes. She then placed the hands of two nurses in front of him, between which he, of course, could not tell the difference.[143] Sanders also recalled Ella, who used to work for her in Piketberg, but who had been admitted to GSH and had asked to be removed from the white ward when the coloured wards were full.[144]

An ongoing point of contention with the province was the official desegregation at the hospital. As early as "1980 the Director of Hospital Services had launched an investigation"[145] into the unacceptable situation, upon finding many areas in the hospital *not* fully segregated. As a response, Sanders quoted the report's own "'let-out' clauses to justify practices of non-

[137] *Argus*, 1981, "*Nursing in Crisis*"; *The Star*, 7 July 1981, "Staff crisis is hitting GSH hard"; M. Mcnally, "Inquiry call as infants die due to nursing shortage", *The Citizen*, 8 July 1981, 1.

[138] *The Star*, 7 July 1981, "Staff crisis is hitting GSH hard".

[139] *The Cape Times*, 19 September 1982, "Demand for Nurses".

[140] *Ibid.*

[141] *The Argus,* 23 September 1980, "Whites object to coloured nurses".

[142] Interview with Hannah-Reeve Sanders conducted by Leila Bloch, November 2020.

[143] [SAJMA], Interview with Hannah-Reeve Sanders conducted by Adrienne Folb, 31 August 2014.

[144] Interview with Hannah-Reeve Sanders conducted by Leila Bloch, 22 July 2020.

[145] Digby and Phillips, *et al*., *At the Heart of Healing*, 90.

segregation and followed these up with emollient sentiments on the hospital's full recognition of the need to safeguard patient's dignity and sensitivities as well as to preserve privacy."[146] From the above it is apparent that Sanders did not condone racial prejudice, but her decision to address this fraught and unhappy situation was also informed by a common-sense approach. To quote Digby and Phillips: "Pragmatically she recognised that these departures from apartheid were necessary if GSH was to continue functioning in the face of a sharp decline in the number of white nurses."[147] Sanders commented: "in time black sisters became in charge of what was white wards; at GSH we didn't really wait for permission."[148]

Beryldene Swart, a coloured student and later a professional nurse, whose working life intersected with Sanders spoke about the painful experience of working at GSH during apartheid – the cruel division entrenched within the way the hospital was structured.[149] Even though they were mirror images of one another, the hospital units were deeply divided. The accident unit, which catered to all races, for example, would be overrun with people in trauma, whereas the 'white side' would have only one or two patients. The pay between employees of different races would be different, and she and her fellow nurses were treated poorly, forced to use different lifts and other facilities.[150] In many respects, Swart felt that the hierarchical structure in nursing fed into the discriminatory nature of the institution. She recalled having to stand up straight to address seniors very professionally and, according to some of her elder colleagues, nurses had to roll down their sleeves if they were addressing a senior staff member. While Swart was quite removed from Sanders in this top-down structure, she did have strong memories of her as a very elegantly dressed woman who had made her mark. Swart recalled rumblings among staff members about Sanders in the passageways of the hospital, especially when she had been spoken about in the press. In a more generous account of Sanders' leadership role, Swart noted that Sanders' name came with a degree of power and was associated with change. For Swart, Sanders recognised that she had a broader role to play in the hospital system.[151]

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[146] *Ibid.*

[147] *Ibid,* 64.

[148] Interview with Hannah-Reeve Sanders conducted by Leila Bloch, 22 July 2020.

[149] Interview with Beryldene Swart conducted by Leila Bloch, 9 November 2020.

[150] *The Argus*, 24 September 1982, "Nurse pay rises for all races – but gap stays".

[151] Interview with Beryldene Swart conducted by Leila Bloch, 9 November 2020.

Though Sanders makes strong claims to have departed almost entirely from applying race criteria within the hospital system, she was still forced to navigate and participate in the practices prescribed by apartheid legislation. However, there are other examples of her continued resistance, as in the case of her appointment of Sedick Isaacs a statistician in 1981 and a former Robben Island political prisoner.[152] After his return from imprisonment he began seeking employment and was rejected from the UCT's science department and UCT's RAG offices. Sanders defended him, resisting "police threats and warnings" and suggested he perform statistics for the hospital and called him for an interview.[153] In response to the police, Sanders insisted that he would work on his own, without interacting with other staff members. He came to thrive in his position at GSH. As Isaacs' wife Maraldea attested, everyone knew that Sanders "couldn't be bothered" with apartheid legislation.[154]

In May of 1981 Sanders enlisted the services of the Hospital Information Planning Study (HIPS) seeing the benefit of computer-based technology for help with management within the hospital environment.[155] There were, moreover, continued breakthroughs throughout the year in terms of addressing racial discrimination within the hospital structure. "By 1981, a single Xhosa interpreter had been appointed to the Department of Medicine in order to meet the needs of the 100 000 Xhosa-speaking people in- and outpatients who were treated annually in GSH."[156] Before Sister Luluma Qenqwa was appointed in this official position in 1981, Xhosa speaking orderlies or domestic workers were acting as interpreters.[157] Sanders later declared that "if there are insufficient interpreters, we will get some more," and acknowledged that "patients need to be spoken to in their own language."[158] Because of this, free Xhosa classes were also made available to staff.[159] Sanders further emphasised this during a speech that she

[152] Interview with Beryldene Swart conducted by Leila Bloch, 9 November 2020; S. Isaacs, *Surviving in the Apartheid Prison: Robben Island: Flash Backs of an Earlier Life* (Xlibris Corporation, 2010), 241.

[153] *Ibid*.

[154] Interview (telephonic) with Maraldea Isaacs conducted by Leila Bloch, 11 December 2020.

[155] [UCTAA], C. K. Davis., J. Kane-Berman, K. G. van der Poel, "The Hospital Information Planning Study at Groote Schuur Hospital, Cape Town" *South African Medical Journal* 63 no. 2 (Jan, 1983): 43–45.

[156] Digby and Phillips *et al*., *At the Heart of Healing*, 113.

[157] *Ibid.* 112.

[158] Quoted in *Ibid.*

[159] [UCTSC], [BC1525], Anon, Article in pulse, *The Cape Argus,* 5 August 1981.

made to a full school hall at Rustenburg High School in the same year: "At the hospital, we believe that patients should be addressed in their home language: even though the language of instruction is English."[160]

Humanistic principles

In the same speech, Sanders questioned whether the students believed that women should be prepared for careers and asked rhetorically what their contribution should be. She stressed the ties between the time-honoured pillars of Rustenburg House and the principles of the hospital, which both drew their strengths poetically "from the mountain" (a reference to Table Mountain).[161] In the speech she encouraged the girls of the school to pursue their own interests and potential. Additionally, her handwritten notes accompanying the speech, listed the following qualities in capital letters: "CONCERN, CARE, SELF DISCIPLINE, BELONGING, EXCELLENCE, ADJUST, SHARE, SERVICE, TRADITION."[162]

On the table next to Sanders' bed in 1982, we get a sense of the variety of sources behind such principles — a half-read book by Jeanne Kirkpatrick's *Political Woman*, David Bonaire's, *The Chinese*; Golda Meir's *My life*, a few paperbacks including those by Fay Weldon and Joan Didion, a cookbook compiled by the Union of Jewish Women; some favourite quatrains of I. D. du Plessis; several unopened copies of *The Economist*, medical journals from around the world, and Anton Rupert's *Priorities for Co-existence*.[163] This collection speaks to a worldly and diverse range of interests, with topics leaning towards the lives of women in leadership. While the exact reasoning for her unhappiness at that particular moment is unclear, in a wry and confessional letter, Sanders wrote to Muriel Skeet (Chief Nursing Officer of the British Red Cross Society): "It has not been a happy year for me but then again what is happy."[164] The maintenance of human relationships was an essential element in Sanders' approach at GSH. Even between the formal systems in the hospital she found ways to address patients, students, and colleagues, in a humane and personable manner that worked in contrast to the hierarchical

[160] [HRSPC], Hannah-Reeve Sanders, speech at Rustenburg High School for Girls: Prize giving, 26 October 1981.

[161] *Ibid.*

[162] *Ibid.*

[163] [HRSPC], Hannah-Reeve Sanders, speech given at Herzlia High School, 26 October 1982.

[164] J. Salvage and C. Richmond, "Muriel Skeet," *The Guardian,* 1st of February 2007; [GSHA], [HRS] files, Letter to Miss Muriel Skeet from Hannah-Reeve Sanders, 2 June 1982.

structures in place. This sentiment was addressed in a speech at Herzlia High School in 1982 regarding her approach to her students:

> Please do not (they said) think of us as a class, or a tutorial group – we all have personal needs, we are all different…A very heavy responsibility that rests on me – as it does on many others in authority – is to decide whether a person – say a nurse – is suited to continue training if she has shown signs of 'bucking the system' or just not 'fitting in'! How wise one has to be. And how difficult it is to always be fair to the person and to the organisation.[165]

In many cases, Sanders seemed to have made exceptions to the general hospital's rules. As Digby noted in her interview with Sanders, the system of management she worked under was a close and carefully co-ordinated group of seven divisional heads and individual medical superintendents. Sanders and her team met every morning for two hours, including Saturday mornings.[166] According to her successor, Jocelyne Kane-Berman, Sanders was a very good chairperson, controlling meetings well and giving everyone a chance when they needed to speak.[167] Una Kyriakos, a senior lecturer in nursing who attended Groote Schuur during Sanders' superintendency, recalled the strength of the team which worked under her, the formality she maintained, as well as moments of humanity within these formal structures. Kyriakos had strong impressions of Sanders; apart from her physical appearance, engaging smile, and being completely bilingual in English and Afrikaans, she could also switch modes comfortably when dealing either with patients or staff. Kyriakos also had a particular memory of when Sanders' parents were admitted to hospital in the early '80s (between 1982 and 1985). Kyriakos arranged for them to be admitted in one ward together, which at the time was against hospital protocol. Kyriakos felt that in moments like this, select rules could be overturned by Sanders if a good reason could be provided.[168] In another example of this sensitivity to patients' requests, Sanders argued that "taped music was needed for the hours of waiting before treatment, as well as television which might help to lighten the burden of pain or even thoughts

[165] [HRSPC], Hannah-Reeve Sanders, speech given at Herzlia High School, 26 October 1982.

[166][UCTSC], [BC1525], Interview with Hannah-Reeve Sanders conducted by Anne Digby, 12 April 2006.

[167] Interview with Jocelyne Kane-Berman conducted by Leila Bloch, 7 August 2020.

[168] Interview with Una Kyriakos conducted by author, 6 November 2020.

of death."[169] By noting these attitudes and sentiments, the intention here is not to provide hagiographic confirmation toward a perceived "goodness" of character, but rather to reflect on the ways in which her leadership style worked itself out. These displays of 'humanity' within the strict hospital system denote a nuanced approach to institutional systems that was not overtly political in its nature, but nonetheless deeply humane.

Intensified resistance and continued change from 1983

The National Medical and Dental Association (NAMDA) was formed by doctors and dentists and was founded in 1982 because of dissatisfaction with the Medical Association of South Africa's (MASA) "response to the death of Steve Biko" after they refused to take action against the doctors responsible for his death.[170] In the hospital context, Sanders took a more passive approach between clinicians who opposed segregation and those who spoke out against the new hospital and the province, that is, those who "remained adamant that racial segregation would continue." She would say, "the less I asked them the better", in reference to Provincial government.[171]

In 1982 Sanders was heavily involved in the building of GSH but also supported by a big team.[172] The new hospital developments based on Sanders' annual report in 1983 saw the acceptance of the joint venture tender for the building of the new main GSH Hospital.[173] The contract was believed to be the largest single building contract ever awarded in the province.[174] By the 5th of September, the foundation-stone of the new hospital was laid by the state president, Mr Marais.[175] "The first sod on the Clee estate" was symbolically turned in January that year by Sanders herself, who was wearing an "Elisabetha Rosenworth dress" and

[169] Digby and Phillips *et al*., *At the Heart of Healing*, 65 and 117.

[170] W. Pick, J. W. B. Claasen, C. A. le Grange, and G. D. Hussey. "History: Health activism in Cape Town: A case study of the Health Workers Society", *South African Medical Journal*, 102 no. 6 (2012), 403; Anon., "A brief history of the National Medical and Dental Association (NAMDA)", *Critical Health* 25 (1988), 57.

[171] Digby and Phillips *et al*., *At the Heart of Healing*, 125.

[172] [GSHA], [HRS] files, Letter to Miss Muriel Skeet from Hannah-Reeve Sanders , 2 June, 1982; Letter to Miss Muriel from Hannah-Reeve Sanders , 22 December 1982.

[173] [GSHA], [AR], 1982, 2.

[174] *Ibid.*

[175] *Ibid.*

"Ferragamo shoes."[176] The building of the new hospital officially started in 1983 and would take six years to complete. A supplement to the *Weekend Argus* reported that builders had constructed the most difficult part of the structure of the building.[177] Sanders' involvementin this time-consuming process had begun to solidify in the midst of continued administrative and political pressure.[178]

"*Dr H Reeve Sanders, Superintendent of Groote Schuur Hospital, lifts the first sod – with bulldozer and shovel – on site.*" [179]

In 1983 Sanders would navigate the retirement of Dr Christiaan Barnard. On the 2nd of August of that year, the cardiac surgeon famous for performing the first human-to-human heart transplant, announced his retirement as head of the department of cardiothoracic surgery in

[176] B. Stuart, "Groote Schuur's historic mallet to be used again", *The Argus*, 1st September 1983; [UCTSC], [BC1525], Maurice Kibel, "Hannah-Reeve Sanders," November 1998.

[177] *Weekend Argus Supplement*, 24 September 1983, Kaus Dietrich (Picture), "Out of the Mire".

[178] Digby and Phillips *et al*., *At the Heart of Healing*, 125.

[179] [GSHA], Press Clippings File, photograph titled "*Dr H Reeve Sanders, Superintendent of Groote Schuur Hospital, lifts the first sod – with bulldozer and shovel – on site*", *The Cape Argus*, 10 March 1983.

Cape Town.[180] This came after he developed rheumatoid arthritis in his hands which effectively ended his surgical career.[181] Sanders had first received his resignation letter a few years earlier in which the press quoted him as saying, "I want to go gracefully."[182] When she first received the letter, Sanders said she would not discuss his reasoning for leaving, feeling it was something he should discuss personally.[183] In Professor Maurice Kibel's (a pioneer in paediatrics) speech addressed to Sanders' at her GSH farewell, he noted that Sanders often handled difficult situations well, "soothing ruffled feathers," for example in the case of following up with Barnard's leave forms.[184] Aside from the press surrounding the first heart transplant, Sanders dealt with various other administrative issues concerning Barnard while she was at GSH's head office. For example, the hospital would often receive calls asking for "Professor Barnard" while he was away on holiday (something he did quite frequently).[185] According to Sanders, she eventually set up a system where they (the administrators) would either just let him go on leave without filling in the necessary forms or would simply write the form on his behalf. "He caused a lot of problems," Sanders remembers, "but in the end, those of us just took it as it came."[186]

As progress on the new hospital continued, these administrative decisions regarding leave seemed minor in comparison to the financial and political stresses of 1984.[187] The year was marked by rising costs and other financial restrictions. According to Sanders' recounting of the time: "all the hospital resources were stressed and 1984 was a year of continuous rationalization of the services department."[188] The difficulty of the situation was made evident through Sanders' public attempts to raise money via media outlets. For example, in an article written in *The Argus* on the 6th of November entitled, "Groote Schuur needs Help", Sanders implored citizens of Cape Town to each give one South African rand toward the hospital.[189] Despite

[180] *The Cape Argus*, 4 March 1983, "Barnard: now to find a new wife".

[181] *The Star*, 8 February 1983, "Professor Barnard to retire".

[182] L. Belle, "Barnard resigns: 'I want to go gracefully'", *Weekend Argus*, 15 March 1980.

[183] *Ibid.*

[184] [UCTSC], [BC1525], Maurice Kibel, "Hannah-Reeve Sanders," November 1998.

[185] Interview with Hannah-Reeve Sanders conducted by Leila Bloch, 13 November 2020.

[186] *Ibid.*

[187] B. Patel (ed.), *Groote Schuur Hospital 80th Anniversary Commemorative Book: The Angels on Devil's Peak: The history and stories of their experience 1938 to 2018* (Cape Town: Groote Schuur Hospital, 2018), 93.

[188][GSHA], [AR], Dr H.-R. Sanders, 1984, 2

[189] *Cape Argus*, 6 October 1984, "Groote Schuur needs Help".

these pressures, she did also prioritise other activities, from business travel to other obligations, like attended the biennial Medical Women's International Association XIX Congress in Vancouver, Canada, that same year.[190] However, the commodity of time was in short supply, as indicated by a letter sent to SHAWCO clinics, in which she stated that she was no longer able to attend their Monday meetings, as she was simply too busy with other hospital priorities.[191]

Despite financial and practical challenges, 1984 was also a year of progress for the hospital. The first coloured medical manager, Gilbert Lawrence, was appointed to work under Sanders. This had, however, taken "six months before a reluctant CPA appointed him, and he then spent six years from 1984-1990 as a medical superintendent."[192] In fact, Sanders herself had challenged provincial administrations concerning his appointment, stating that she would personally provide working facilities for him.[193]

1985 was a traumatic year for South Africa as a state of emergency was declared because of social unrest linked to pressures on the apartheid government.[194] In the speech to Herschel girls, Sanders' spoke about the impact of this on her profession. In contrast to some of her more progressive moves within the hospital, Sanders' opinion in the following quote seems to show her frustration with the political situation insofar as it inhibited the effective functioning of the hospital:

> "How different it is for us today", she said, "[w]e are almost apologetic, the noose of sanctions grows tighter and one cannot always count on being accepted as an individual of any consequence – even abroad. A huge shift has occurred in our society. A great loss to our country."[195]

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[190][GSHA], [HRS] files, folder entitled: "Travel file on Medical Women's international Association XIX Congress in Vancouver Canada 26 July – 4 August 1984".

[191][GSHA], [HRS] files, letter correspondence from Dr H.R. Sanders to Edmund Bricow, 23 May 1984.

[192] Digby and Phillips, *et al.*, *At the Heart of Healing*, 130.

[193] Interview with Hannah-Reeve Sanders conducted by Leila Bloch, 22 July 2020.

[194] J.-A. Stemmet, "'In Case of Emergency'. South African States of Emergency, CA. 1985-1988: Synopsis and Chronology", *Journal for Contemporary History* 40 no.1 (2015): 59–76.

[195] [HRSPC], Hannah-Reeve Sanders, speech given at Herschel School for Girls Prize Giving, 23 October 1986.

During this tumultuous period, many staff members emigrated abroad or left GSH to work in the private sector.[196] In the midst of this brain drain, Sanders made several distinct advances toward combatting discrimination and inequality in the hospital system. In 1985 she "publicly opposed police attempt to gain access to the folders of a GSH patient," whom they suspected of involvement in anti-apartheid activity.[197] Moreover, in July of that year, she recommended that the "black nursing staff salaries should be equalised in regard to other race groups."[198] As Digby records, in 1985 "African nurses were recruited for the first time and pay scales that discriminated against nurses on the grounds of race officially came to an end."[199]

1985 was also significant for Sanders, because it signalled the tenth anniversary of working at GSH. At this point, the new hospital extensions had been built and were ready for commissioning. In 1986 Sanders was promoted to Senior Deputy Director of Hospital Services in the Hospital Department of the Cape Provincial Administration.[200] She was appointed by Niklas Louw, an obstetrician-gynaecologist who had been asked to become the head of the Western Cape Medical Services.[201] For Sanders, the time had come to leave GSH. According to Jocelyne Kane-Berman this was an attractive offer of promotion and according to Sanders, Louw had said there was no one else but her suited for the job. When reflecting on leaving GSH Sanders stated that, "It took too long," she said, "but it was as long as it took to do that job."[202]

At a meeting of the Joint Staff of the Groote Schuur Hospital Group and the University of Cape Town held on 3 March 1986 a "resolution was unanimously adopted… with the view that healthcare is a universal human need, and as such should be administered as a single entity without reference to race or colour."[203] The staff called upon the government to "recognize

[196] Patel (ed.), *Groote Schuur Hospital 80th Anniversary Commemorative Book*, 93.

[197] Digby and Phillips *et al*., *At the Heart of Healing*, 65.

[198] [GSHA], [HRS] files, Report by Hannah-Reeve Sanders to director of hospital services, 1988.

[199] Digby, "The Art of Medicine", 778-779.

[200] [PMC], Hannah-Reeve Sanders' Curriculum Vitae.

[201] Interview with Margaret Hoffman conducted by Leila Bloch, 8 Jan 2021.

[202] Interview with Hannah-Reeve Sanders conducted by Leila Bloch, 22 July 2020.

[203] H.-R. Sanders, "Letter to the Editor: A plea for the unification of health services", *South African Medical Journal* 69, no. 3 (1986), 407.

these factors in the planning of a health care delivery in South Africa."[204] Furthermore, they asked "that this resolution be viewed as a statement of professional opinion rather than of political viewpoint."[205]

By the time of Sanders left GSH in 1986, there were "7619 posts in the total establishment of GSH".[206] This marked a big difference from years earlier, in 1976, when there had only been 5292 posts. "The biggest difference from its composition ten years earlier…was in the administrative and nursing sectors of the workforce."[207] During Sanders' superintendency at GSH, there were only 18 women doctors in full time employment. By the time Sanders left there were 94.[208] Though it is not clear if these changes were as a result of deliberate actions taken by Sanders, she was certainly impressed by the change of figures.[209] An article in the *Cape Times* entitled "Hannah leaves a Hollow" detailed the years of her service to GSH.[210] However, from the above it is apparent that GSH, like Sanders, had a complex "record concerning racial issues despite taking credit for her having opposed apartheid's formalized racial impositions."[211] While Sanders certainly made several exceptions to the rule within the "University (and Faculty)", it cannot be denied that students and staff "not classified as white were still being subjected to humiliating experiences."[212] In December 1986, however, all "medical wards and emergency units were effectively integrated."[213] Whether part of the general reform process or in part influenced by some of Sanders' personal actions, this was a landmark pronouncement, especially considering that it was only in the following year that

[204] *Ibid.*

[205] *Ibid.*

[206] Digby and Phillips, *et al*., *At the Heart of Healing*, 66

[207] *Ibid.*

[208] [UCTSC], [BC1525], Hannah-Reeve Sanders, Challenge of Change, nd.

[209] *Ibid*.

[210] [GSHA], [HRS] files, press clippings file, "Hannah leaves a hollow," *Supplement to the Argus*, Tuesday, 24 June 1986.

[211] J.-P. de V van Niekerk, "uct@100.great!", *South African Medical Journal,* 102 no. 6 (2012), 389.

[212] *Ibid.*

[213] Anon, "Segregation and Integration at Groote Schuur Hospital", *Critical Health* 23 (1988), 66.

such racial integration at GSH became standardised.[214] At this point it is worth quoting at length the late Stuart J. Saunders, the Vice-Chancellor of UCT:[215]

> GSH became the first, and for a long time the only public hospital in South Africa that was not segregated on the basis of race and this applied to professionals, staff, patients, students and everyone else. There were quite frequent complaints by constituents and friends and relatives of members of parliament, including Cabinet members, which the medical superintendent had to field. To the credit of Dr Burger and Dr Reeve Sanders they did so, but it required a lot of fancy footwork.[216]

Dr Sanders saw herself "firstly as a medical professional and only secondly as a civil servant (although some others saw her predominantly as the latter)."[217] While GSH was clearly ahead of its time in comparison to other hospitals, this chapter has hoped to demonstrate a more nuanced overview to the honour bestowed upon Sanders' within the general reform of the country.

Conclusion

In her farewell speech to GSH Sanders reflected:

> I have often wondered how it all happened – and really can't be quite as prosaic as Margaret Thatcher when she became leader of the Conservative Party and said, "I never came to this through driving

[214] Digby, "The Art of Medicine", 778.

[215] W. Gevers, "Stuart J. Saunders (1931-2021): Mover and shaker, mostly behind the scenes, and key South African vice-chancellor of his time," *South African Journal of Science*, 117 no.3-4 (2021), Art. #9739. https://doi.org/10.17159/ sajs.2021/9739.

[216] S. Saunders, *Vice-chancellor on a tightrope: A personal account of climactic years in South Africa* (Cape Town: David Philip Publishers, 2000), 68.

[217] Digby and Phillips, *et al*., *At the Heart of Healing*, 90.

> ambition. A combined opportunity and duty presented itself and I took it."[218]

Despite drawing this parallel with British politics – and the subtlety of her own position that this chapter has sought to highlight – Sanders has consistently maintained that she would prefer not to focus on the political aspects of her career. In one of the first interviews conducted with her she stressed that: "This is not political; I don't want that to come into it."[219] By this statement she was resistant to the portrayal of her life and career through a political lens. Bearing in mind the impossibility of the distinction between personal and political described in the introduction to this thesis, the positions and situations in which Sanders often found herself, could never have extricated her entirely from politics. After all, she was in the centre of having to implement stature policy in a state institution – despite not necessarily agreeing with it.

With more reflection, in the next sentence, she qualified by saying, "I suppose, though it [politics] always does [come into one's life story]."[220] These statements do allow questions to surface around what would have been at stake if Sanders had been more actively involved in politics at the time, or if she had not been there at all. Her focus during these years seemed fully dedicated to her career. Possibly, because she was so career-driven, she did not take to the streets to protest apartheid policy, nor did she have a clearly oppositional voice, and indeed, like all white South Africans under the apartheid system, she had a social and financial advantage benefiting from the compromised institution that she ran. To some extent, she could be perceived as having avoided overt political happenings at the time. Only after Sanders' departure did "racially integrated wards become standard within Groote Schuur's new hospital building; a move that anticipated by a few years desegregation in hospitals nationally."[221] However, it is clear, as this chapter has shown, that long before these strategic moves, Sanders had issued her own reforms from *within* GSH. This was what one might call, 'quiet activism', embedded within the institution, found not in grand displays of public rhetoric for example,

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[218] [HRSPC], Hannah-Reeve Sanders, speech given at Hannah-Reeve Sanders' Farewell when she left Groote Schuur Hospital, 26 June 1986.

[219] [SAJMA], Interview with Hannah-Reeve Sanders conducted by Leila Bloch, Piketberg, 18 October 2018.

[220] *Ibid.*

[221] Digby, "The Art of Medicine", 778.

but rather in the decisions and choices she made in the prevailing situation of overt and covert oppression. To evaluate whether she had ‘done enough’ would be to err on the side of judgmentalism.

Chapter Five: Networks of Care and Duty: Some of the Female Networks of Dr Hannah-Reeve Sanders from 1986–1998

"On arrival in her new office she touched the 'Public Works Department' inside lock of the office door, wondering what the lock meant and expressed her dislike in locks. Then she inspected the fresh flowers on her desk, looked up with a smile and started with our interview against the backdrop of a sunny window.

People who know her, say Mrs Hannah-Reeve Sanders starts each day with the same smile - the new senior deputy director of hospital services in the Cape Province, the first woman who broke down the proverbial "walls of Jericho" to take her place among the indunas *(headmen) of Hospital Services in Wale Street. They say Wale Street will never be the same again. They call her the "Iron Lady".*

"People probably see me as a tough person, but that is probably only because I created some order here and there. I rather think life made me gentle. To achieve goals, you do not need an iron fist. I came to work with other people, not to break[them] down. People do not make laws good or bad, and laws do not change people. I only come to assist. I always work best in a team."[1]

[1] Translated by Dr Anton Ehlers. See, T. Brümmer, "En Waalstraat sal nooit weer dieselfde wees nie," *Samj*, vol 70, 2 August 1986, xi. "*Sommer met die intrapslag in haar nuwe kantoor het sy so aan die 'Public Works Department' se binnedeurslotjie gevoel-voel en gevra wat dit nou eintlik beteken, want van slotte hou sy net mooi niks nie. Toe eers gou die vars blomme op haar lessenaar betrag voor sy met 'n glimlag opgekyk het om met ons onderhoud voor 'n sonnige venster te begin.*

Mense wat haar ken, sê met so 'n glimlag begin elke dag van Dr Hannah-Reeve Sanders, nuwe senior adjunk-direkteur van Hospitaaldienste in Kaapland, die eerste vrou wat die spreekwoordelike 'mure van Jerigo' afgebreek het om tussen die indoenas van Hospitaaldienste in Waalstraat te kom sit. Hulle sê nou Waalstraat sal nooit weer dieselfde wees nie. Hulle noem haar die 'Ystervrou'.

'Mense sien my seker in die rol van 'n harde mens, maar dis ook seker net omdat ek plek-plek 'n bietjie orde geskep het. Ek dink die lewe het my eerder sagmoedig gemaak. Om doelwitte te bereik het 'n mens geen ysterhand nodig nie. Ek het gekom om met ander saam te werk, nie om af te kraak nie. Mense maak nie wette goed of sleg nie en wette verander nie mense nie. Ek kom slegs hand bysit. Ek werk altyd op my beste in 'n span."

The following chapter examines the networks in Sanders' life in the medical field during the transition to democracy in South Africa starting in the late 1980s.[2] Extending into the early 2000s the medical profession was still predominantly male.[3] Over the years Sanders and her female contemporaries addressed the impact of the male-dominated profession. Sanders was no political activist, but she clearly positioned herself as an advocate for women's rights.[4] This chapter follows Sanders as a friend, female mentor, and community member, and allows us to address, what leading historian, Susan Ware, calls "the hallmark of feminist biography", namely, paying "close attention to the connection between subjects' personal and professional lives", and which asks "what support structures and other networks did women have?" Understanding these arrangements of Sanders' interpersonal relations sheds crucial light onto the way her public career was managed in a realm reserved for men.

Stronger ties to provincial government

In 1986, amidst the national state of emergency in South Africa Sanders received a job offer that she could not refuse. She accepted the position of Senior Deputy Director of Hospital Services in the Cape which caused her to leave GSH for the fourth time.[5] The impact of her departure was reported by the media.[6] A newspaper report in *The Citizen* claimed that in her farewell address, Professor G. Dali, then Dean of the Faculty of Medicine at UCT, remarked that Dr Sanders' love for people explained her career choice and excellent abilities.[7] After announcing Sanders' post, Provincial Administrator Gene Louw told *The Argus* that she was eminently suitable for the job.[8] "My new responsibilities now extend to the larger Department of Hospital Services - and to Dr Niklaas Louw," Sanders explained, with Louw in charge of

[2] S. Ware, "Writing Women's Lives: One Historian's Perspective", *The Journal of Interdisciplinary History* 40, no. 3 (2010), 417.

[3] M. Breier and A. Wildschut, *Doctors in a Divided Society: The Profession and Education of Medical Practitioners in South Africa* (HSRC Press, 2006), 30.

[4] Interview with Margaret Hoffman conducted by Leila Bloch, 24 May 2019.

[5] Stemmet, "'In Case of Emergency'", 59–76; *The Cape Argus*, 27 June 1986, "Groote Schuur Matron Quits for the Fourth Time", 1.

[6] *The Cape Argus,* 15 May 1986, "Sanders Appointed to Top Hospital Post", 1.

[7] *The Citizen*, 22 June 1986, "Hospital Services Gets New Director".

[8] *The Cape Argus,* 15 May 1986, "Sanders Appointed to Top Hospital Post", 1.

the department on a provincial level.[9] Coming to terms with her departure after serving at GHS for ten years, *The Argus* quoted Sanders, referring to the journalist Malcolm Muggeridge, who said "that few men of action (and I am sure he meant women) can make an exit at the right time gracefully, but I am trying."[10] Reflecting on the meaning of her tenure at GSH, Sanders' farewell speech was characterised by positive recollections and informed by strong female influences.[11] Her philosophical musings were underscored in a comparison she made to Karen Blixen's, *Out of Africa* (1937), on the day Blixen left her coffee farm in Kenya.[12] Blixen's autobiographical writing focused on Africa's landscape and the people amid the background of her turbulent marriage.[13] Sanders noted that she had drawn this comparison to Blixen not out of her romantic desire to escape life, but to prevent life from passing her by. This pragmatic disposition was evident in the farewell speech. As she reminisced in detail on her activities at GSH over the years: "Close to the place I have spent 365 x 10 years x 24 at — answering phones, reading letters, drinking tea, enjoying beautifully arranged flowers — resolving problems of patients, staff, public — trying to remain caring and concerned and being cared for by those around and ALWAYS feeling to help another person! Past and present."[14] Jocelyne Kane-Berman was appointed almost immediately after Sanders' departure.[15] She had worked under Sanders during the latter's superintendency at GSH, but at this stage the two were not particularly close.[16] Jocelyne Kane-Berman took over as Sanders' successor in 1986, the second female to fill this role.[17]

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[9] [HRSPC], Hannah-Reeve Sanders, speech given at Hannah-Reeve Sanders' Farewell when she left Groote Schuur Hospital, 26 June 1986; N. C. Lee, J. P. de V. van Niekerk, and R. E. Kirsch, "Eerbetuiging: Niklaas Louw (21 Oktober 1921 – 31 December 1987)", *SA Mediese Tydskrif,* 73 (1988), 71.

[10] I. Hunter, *Malcolm Muggeridge: A Life* (Regent College Publishing, 2003), 9; *The Cape Argus*, 27 June 1986, "Groote Schuur Chief Leaves".

[11] [HRSPC], Hannah-Reeve Sanders, speech given at Hannah-Reeve Sanders' Farewell when she left Groote Schuur Hospital, June 26, 1986

[12] J. L. Marais, "Karen Blixen in the African Book and Literary Tourism Market", *Tydskrif vir Letterkunde* 52, no. 1 (2015), 131.

[13] J. B. Stewart, *Kierkegaard's Influence on Literature, Criticism and Art: Denmark* (Ashgate Publishing, Ltd, 2013), 2.

[14] [HRSPC], Hannah-Reeve Sanders, speech given at Hannah-Reeve Sanders' Farewell when she left Groote Schuur Hospital, June 26, 1986

[15] *Ibid*; Interview with Jocelyne Kane-Berman conducted by Leila Bloch, 22 August 2020. "She left the hospital in 1986 and I was appointed almost immediately."

[16] Anon, "New Chiefs for Cape Hospitals", *South African Medical Journal* 70, (1986), xii. "Dr Kane-Berman is successor to Dr Hannah-Reeve Sanders, who becomes Deputy Director of Hospital Services in the Cape. Dr Kane-Berman is only the second woman to be appointed head of Groote Schuur Hospital."

[17] *The Cape Times*, 15 May 1986, "Province Cuts Spending".

Sanders' promotion to Senior Deputy Director of Hospital Services for the Western Cape Government was the highest position occupied by a woman in the administration of the province.[18] Her appointment came into effect on July 1st of that year, and she shifted focus now from considering the patient as an individual to a broader system of multiple functions. During this period the government's new National Health Plan meant a move toward more privatisation of healthcare under greater control of the provincial government.[19] The National Health Plan was implemented in August 1986 when Willie van Niekerk, himself a medical doctor, was the Minister of Health.[20] In Sanders' speech to the Physiotherapy Congress in 1987, she offered her thoughts on both the National Health Plan, the privileges of being a healthcare worker, and her adjustment to the new position in provincial government:

> So I am in the process of adjusting to a new environment. One in which the immediate objective is the patient, but not actually the individuals. Rather it is a whole system of multiple functions by which the hospital/health services are provided to a very complex society, subject to a host of regulations.[21]

Despite leaving her position at GSH and within her new role working for the provincial government, other professionals depended on her ethical and at times political judgements. In 1987 a delegation from the World Federation of Occupational Therapists (WFOT) identified signs of racial discrimination among occupational therapists. The accusation had also been levelled at WFOT for not being politically active and for not taking a firm enough stance against Apartheid health policies. In response, the WFOT set up "ethical principles and

[18] H. M. Lesch and B. Saulse, "Revising the Interpreting Service in the Healthcare Sector: A Descriptive Overview", *Perspectives: Studies in Translation Theory and Practice* 22, no. 3 (2014), 336; *The Argus*, 15 May 1986, "Sanders appointed to top hospital post".

[19] D. C. Naylor, "Private Medicine and the Privatisation of Health Care in South Africa", *Social Science & Medicine* 27, no. 11 (1988), 1161–1162; [HRSPC], Hannah-Reeve Sanders, speech given at the South African Society of Physiotherapy, Physiotherapy Congress, Arthur's Seat Hotel, 7-9 April 1987, 6.

[20] P.A.B., "In Memoriam: Willem Abraham van Niekerk, M.B. Ch.B. (Univ Pretoria), MRCOG (London), FCOG (CMSA), M.D. (Univ Pretoria), FRCOG (London), F.I.A.C.", *Acta Cytologica* 53, no. 6 (2009), 711.

[21] Sanders later served as the Physiotherapy Congress' Honorary Vice-President and as a Medical Council Representative on their professional board. See Hannah-Reeve Sanders, "Letter to Prof Beenhaker", South African Journal of Physiotherapy 53, no. 2 (1997), 15; [HRSPC], Hannah-Reeve Sanders, speech given at the South African Society of Physiotherapy, Physiotherapy Congress, Arthur's Seat Hotel, 7-9 April 1987, 2.

guidelines for a peer review committee and appointed Dr Hannah-Reeve Sanders…as the ombudsman."[22] On the 10th of August 1988, Sanders sent a letter to The Women's Bureau of South Africa. In it she alerted her colleagues to the role women practitioners had been playing in the South African medical profession and their occupational environment with its specific demands. She stressed that women had not received adequate attention and that the environment which was needed to enable them to "serve in the community and fulfil their professional potential" was lacking. She included a questionnaire designed to address professional issues and improve the working conditions for medically trained women.[23] Sanders' involvement on professional boards and memberships of various institutions demonstrate a life of service and palpable professional leadership, which included such organisations as the College of Medicine of South Africa, where she was a founding member, the Medical Administrators Group and the South African Society of Medical Women, of which she was also the president; as well as the Federal Council of the Medical Association of South Africa, on which she served as a council member.[24]

The female friends left behind at GSH

To illustrate some of the unique characteristics and changing environments in which Sanders had worked, one can consider several contrasts encountered by her successor, and later friend, Jocelyne Kane-Berman. The two female leaders differed in many respects: if Sanders was known to be more of a people's person, then Jocelyne Kane-Berman was more technically minded.[25] Moreover, the direct political consequences were experienced by each woman to differing degrees, as Sanders would later say: "I think Joc had a hard time politically when she followed me as head. I think it was much more political. Nothing to do with me or her, time had brought it on."[26]

However, it was Kane-Berman who found herself in the firing line of the provincial government. Kane-Berman's career was on the line owing to a controversial political statement

[22] Digby and Phillips, *et al.*, *At the Heart of Healing*, 232.

[23] [HRSPC], Hannah-Reeve Sanders, letter of correspondence to the Women's Bureau of South Africa, August 10, 1988.

[24] [PMC], Hannah-Reeve Sanders' Curriculum Vitae. [UCTSC], [BC1525], Christa Meyer, introductory speech given at the 10th Vona du Toit Memorial Lecture, 9 July 1985.

[25] Interview with Jocelyne Kane-Berman conducted by Leila Bloch, 7 August 2020.

[26] Interview with Hannah-Reeve Sanders conducted by Leila Bloch, 22 May 2019.

she had made. During 1988 she was quoted in the weekend newspapers as "having named Nelson Mandela as her choice of prime minister *(sic)* in a South African cabinet selected on merit."[27] Administrator of the Cape Province, Gene Louw, confirmed that Kane-Berman's temporary dismissal from her post as superintendent of GSH was to be considered as a disciplinary action.[28] Louw claimed that her statements were "closely linked to radical politics," and was regarded as an indication of her personal political involvement and threat to the provincial government.[29] This was, in effect, a dismissal, followed by controversy and mixed opinions. Sanders always maintained her support and friendship with Kane-Berman .[30]

The Vice Chancellor of UCT, Dr Stuart Saunders, was disheartened by the termination: "[e]ven the federal council of the conservative Medical Association of South Africa (MASA)" asked for her reinstatement.[31] These events were undoubtedly traumatic for Kane-Berman , and stand somewhat in contrast to the political restraint that Sanders upheld during her many years at GSH.[32] It also illuminates the swiftness of the provincial government to ruthlessly act at any sign of political dissent and individual opinions could have dire consequences. In an interview that year Kane-Berman remarked that Sanders had been a good friend to her during the ordeal.[33] She thanked Sanders for her "active support and encouragement during the past few months" and for "her role in [Kane-Berman] finally reaching a settlement."[34] Kane-Berman admitted to being in limbo during those months and affirmed the fact that she depended greatly on Sanders' emotional support.[35]

Their mutual encouragement for each other is captured in a letter correspondence from 1989: "What drives us?" Kane-Berman asked, "[w]hatever it is, I am grateful that you are driven. I

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[27] M. Cherry, "South African Doctor Sacked 'inexplicably'", *Nature* 336, (1988), 612.

[28] D. Redd "Groote Schuur: Commemorating 82 Years of Patient Care", *Africa Outlook Magazine*. Accessed at: https://www.africaoutlookmag.com/company-profiles/1279-groote-schuur-hospital; Cherry, "South African Doctor Sacked 'inexplicably'", 612.

[29] *Ibid.*

[30] Interview with Jocelyne Kane-Berman conducted by Leila Bloch, 7 August 2020

[31] Cherry, "South African Doctor Sacked 'inexplicably'", 612.

[32] Interview with Jocelyne Kane-Berman conducted by Leila Bloch, 7 August 2020

[33] *Ibid.* "Well certainly she was very supportive. 1988 the Battle took place."

[34] [UCTSC], [BC1525], Letter correspondence from Jocelyne Kane-Berman to Hannah-Reeve Sanders , 25 March 1989..

[35] *Ibid.*

am grateful you are as you are for all you have done for me since November. Together we can inject a note of sanity."[36] Despite the traumatic event the two women leaders remained resolute and focused, navigating the exigencies of a career in very trying circumstances.

At the nursing graduates' lamp-lighting ceremony only a year earlier Sanders had expanded on the notion of friendship and the importance of the ties it creates for the professional environment. "[T]his is a particular honour as the bond of friendship between you and your profession is not only historically significant, but cardinal to whatever the future holds for the health services of our country."[37] As we have just seen, for Sanders, these sentiments are not borne out of a simple performativity, but emerge from her own experiences both with her female friends and with the institution to which she devoted her life. With such conviction, it is unsurprising that Sanders is prepared to expand the ethical implication that friendships are not divorced from the (medical) institution but a part of the very possibility of its success. This highlights the continued value she would place on friendships over her life. In this speech the personal and professional blended as Sanders went on to challenge hierarchical systems among women in the hospital system:

> I am not speaking of the old boys network: that is elitist, but of an egalitarian network of people talking to each other, sharing ideas, information and resources. Networks exist…to foster self-help, to exchange information, to change society, to improve productivity and work life and to share resources.[38]

From Sanders' position within the administrative medical hierarchy, Kane-Berman supported her colleague and friend who still held a strong public persona. After the great controversy, she attended the unveiling of a bronze sculpture of Sanders at a ceremony led by the Dean of

[36] [UCTSC], [BC1525], Letter correspondence from Jocelyne Kane-Berman to Hannah-Reeve Sanders, 25 March 1989.

[37] [HRSPC], Hannah-Reeve Sanders, speech given at the Graduates' Lamp Lighting Ceremony Medical School University of Cape Town Thursday, 8 December 1988.

[38] [HRSPC], Hannah-Reeve Sanders, speech given at the Graduates' Lamp Lighting Ceremony Medical School University of Cape Town Thursday, 8 December 1988.

Medicine at UCT, Professor George Dali.[39] This honour had only previously been bestowed on the late Professor Velva Schrire, who recognised that surgical techniques during the time of the first heart transplant could not address all forms of heart failure – one of several events which encouraged Dr Chris Barnard to perform the first heart transplant on Louis Washkansky.[40] The other doctor to have had a bronze sculpture cast was Dr Ruby Sharp.[41] This tribute, a significant form of praise, raises the question of the legacy of Sanders and what is to be considered worthy of memorialisation in the hospital at this time.[42] Should an honour of this nature be attributed to those who have contributed exclusively to the furthering of medical research, or are there other values of equal priority, such as loyalty to the institution and its members?

Though differing in their approaches, the publicity surrounding the two figures continued after the political upheaval with which Kane-Berman had been confronted. As mentioned, Sanders herself exercised restraint vis-à-vis the provincial government with regard to overt political statements, but this did not stop her from expressing rational criticism when necessary. Towards the end of 1989 Sanders adopted a critical position toward the overall health care system operated by the government. She was quoted in *The Argus* in December of that year, stating that equality of health care could not be addressed until there was a replacement of the tricameral system, which she described as fragmented and as having duplicated health care services.[43] Indeed, these broader health care problems could easily have led to Sanders leaving the country herself to deploy her skills elsewhere.[44] As Padarath *et al*., note: "[i]n South Africa, an estimated 250,000 skilled health workers left the country between 1989 and 1997 for New Zealand, Canada, Australia, the UK and USA."[45] But while her qualifications to work overseas

[39] Interview with Jocelyne Kane-Berman conducted by Leila Bloch, 7 August 2020. "Well certainly she was very supportive. 1988 the Battle took place"; [UCTSC], [BC1525], Anon, (picture by Obed Zilwa), "Unveiling, A Bronze Bust of Sanders", *Cape Times*, 25 January 1989, 1.

[40] P. Commerford and L. Vogelpoel, "Profiles in Cardiology: Velva Schrire", *Clinical Cardiology* 26 (2003), 300; D. McRae, *Every Second Counts: The Extraordinary Race to Transplant the First Human Heart* (London: Simon & Schuster, 2007), 173–174.

[41] [UCTSC], [BC1525], Anon, "Portrait Sculpture of Dr Hannah-Reeve Sanders", 986.

[42] *Cape Times*, 25 January 1989, picture by O. Zilwa, "Unveiling, A Bronze Bust of Sanders", 1.

[43] J. Yeld, "Health Care Providers 'Demotivated, Confused'", *The Argus*, 13 December 1989. For the tricameral system see, S. R. Benatar, "Medicine and Health Care in South Africa – Five Years Later", *New England Journal of Medicine* 325, (1991), 30.

[44] Robin Saphra, interview conducted via Zoom by Leila Bloch, 6 August 2021.

[45] P. Delobelle, "The Health System in South Africa. Historical Perspectives and Current Challenges", in A. Padarath, *et al.* (eds.) *South Africa in Focus: Economic, Political, and Social Issues* (Nova Science Publishers,

could easily beget job offers, as it happened for a position in New York, for example, she chose time and again to remain in South Africa.[46]

In her position in the provincial government, Sanders noted in 1990, the scale of hospital services in the Cape Province: "over 111 hospitals under its direct control in addition to 45 provincial-aided hospitals, and with the latter, about 55 000 staff handling some five million outpatients per year and over half a million inpatients."[47] Even though this would be her final year in provincial government, Sanders' involvement and dedication to the working life of women continued, evident for example in her attendance at the conference of The Women's Bureau of South Africa in 1990, in which she contributed to a morning workshop that focused on "Women at Work".[48]

Interpretations and challenging decisions

On the 22nd of May 1990, Sanders attended a volunteers' association annual general meeting where she addressed the concept of volunteerism, a practice traditionally seen as fit only for women. She stressed the fact that she first became aware of the value of volunteers through the wives of professors at one of the teaching hospitals, many of whom were registered nurses. In this meeting she addressed the need for a personal touch when caring for the sick and highlighted the "therapeutic need of the community at large — a very real need of the hospital it's staff and patients."[49] Considering the political circumstances and divisions at the time, she stressed the need for cross-cultural communications in hospitals. At a later congress in 1999, Sanders said that interpreting in health services is as important as interpreters within the legal practice. However, as Bernice Saulse astutely comments, "medical interpreters can take on many forms: from the nurse who is bilingual and has knowledge of medical terminology to the

2013), 183. See also, C. Day and C. Hedberg, "Health Indicators", in P. Ijumba, C. Day, and A. Ntuli (eds.) *South African Health Review 2003/2004,* (Durban: Health Systems Trust, 2004), 299.

[46] Interview with Robin Saphra conducted via Zoom by Leila Bloch, 6 August 2021.

[47] [HRSPC], Hannah-Reeve Sanders, speech titled "The Role of the Volunteer in the Hospital" given at the Hospital Volunteers' Association Annual General Meeting, 22 May 1990.

[48] [GSHA], [HRS] files, File Women's Bureau of South Africa's Conference, Itinerary 'morning workshop on women at work,'12 January 1990.

[49] *Ibid.*

trained interpreter who has been skilled in theory of interpreting, as well as advocacy and cultural brokerage. But it is the untrained interpreter that one comes across most often."[50]

The year 1990 marked a time of great transition both in South Africa and in Sanders' life. In February 1990, President F.W. de Klerk initiated several political changes as part of the negotiations toward the new South African democratic dispensation. The impact of these changes would also be felt within the medical community as noted by Prof. Solomon R. Benatar.[51] In his article, "Medicine and Health Care in South Africa", he cited the consequent inequalities in health care resulting from the National Policy for Health Act of 1990, which centralized "all decision-making power in the hands of the minister of health of the (white) House of Assembly without abolishing other unnecessary and wasteful health ministries."[52] Disheartened, Professor Solly Benatar reflected on the failure of the government to create a unified health system. Sanders clearly respected Benatar and they maintained close correspondence over her life.[53]

Sanders kept up her public career profile, as evidenced by several events she attended in 1991. In particular, a banquet at the Medical Association of South Africa (MASA) where she gave the president's speech. Subsequently, a letter from a Doctor Rex Wilson, not only thanked her for the "splendid banquet", "honourable achievements" and "wonderful floor show", but also complimented her on her "undiminished companionship for her fellow man – a nature which "high offices often seduce into cynicism and wielding of power."[54] Several friends also congratulated and thanked her, especially for the entertainment of guests through song. Humorously, Professor Dr Andy Naudè praised her "soaring coloratura soprano voice."[55]

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[50] B. Saulse, *Interpreting Within the Western Cape Health Care Sector: A Descriptive Overview* (MA Thesis: Stellenbosch University, 2010), 6.

[51] Benatar, "Medicine and Health Care in South Africa", 30.

[52] *Ibid.*

[53] For example, letter from Hannah-Reeve Sanders to S. Benatar 27 November 1997.

[54] [GSHA], [HRS] files, President's Welcoming Speech given at the Medical Association of South Africa Western Cape Branch 1991 Banquet, 23 March 1991.

[55] [GSHA], [HRS] files, President's Welcoming Speech given at the Medical Association of South Africa Western Cape Branch 1991 Banquet, 23 March 1991; [GSHA], [HRS] files, Letter correspondence from Doctor W. du Y Naude to Hannah-Reeve Sanders, 25 March 1991

It was clear that Sanders had even taken to the stage in a cabaret performance.[56] Sanders' welcoming address made mention of the history of women doctors who were previously not allowed membership in the South African medical profession.[57] She described Dr Jane Waterson as the "doyenne of women doctors in Cape Town" and while later becoming president of the organization in 1905, was originally only allowed to attend meetings as a visitor.[58] In attendance at the event, among others, was the second woman president of MASA, Dr Pat Massey.[59]

The speech further called for a redefinition of values within the medical field as Sanders reflected on the instability and "fragility of our cultural and natural environments."[60] Considering her recent move to provincial government, these sentiments did seem pertinent. However, her impact on individuals within medical institutions was, again, not of an overt political nature, but focused on the creation of opportunities for women in medicine — still an inherently politically act. For example, Margaret Hoffman, whom Sanders encouraged to study at Harvard medical school (see below). A postal survey conducted in 1991 confirms the gendered prejudices still very much evident in the early 1990s. The survey investigated the challenges and factors of working life facing women within the SA Medical and Dental Council.[61] From the article's findings, it appeared that there was an increase of women entering medical school at this point, but discrimination in the profession remained rife — with over 80 % claiming some form of discrimination based on their sex.[62] This extended to domestic

[56] [GSHA], [HRS] files, President's Welcoming Speech given at the Medical Association of South Africa Western Cape Branch 1991 Banquet, 23 March 1991, Letter correspondence from The Honorable Justice W. E. Cooper to Hannah-Reeve Sanders, 1991

[57] [GSHA], [HRS] files, President's Welcoming Speech given at the Medical Association of South Africa Western Cape Branch 1991 Banquet, 23 March 1991. "Welcome. It would be remiss of me not to mention that women doctors were not allowed membership in 1888 (blame it on the British)"

[58] [GSHA], [HRS] files, President's Welcoming Speech given at the Medical Association of South Africa Western Cape Branch 1991 Banquet, 23 March 1991. "In 1891, Dr Jane Waterson, that doyen of women doctors in Cape Town was nevertheless invited to attend the meetings as a VISITOR! She did however become the 1st woman president of the association in 1905."

[59] C. J. T. Craig, "In Memoriam: Patricia Massey", *South African Medical Journal* 94 no. 7 (July 2004), 528.

[60] Hannah-Reeve Sanders, President's Welcoming Speech given at the Medical Association of South Africa Western Cape Branch 1991 Banquet, 23 March 1991.

[61] A. J. Brink, D. Bradshaw, M. M. Benade, and S. Heath, "Women Doctors in South Africa: A Survey of Their Experience and Opinions", *South African Medical Journal* 80, no. 11-12 (1991), 561.

[62] *Ibid*.

responsibilities and lack of marital support, as well as the general absence of female presence as a result of the struggle in balancing home and work life.[63]

The start of 1992 saw the attendance of Sanders at yet another illustrious event. In January she wrote to Mr William Lacy Swing, ambassador of the United States of America, thanking him for including her and her sister Leah Levin at a dinner party which honoured the visiting U.S. congressional delegation. She particularly enjoyed speaking to the guests: "how wonderful it is to be able to communicate so freely! Kind regards, HR Sanders."[64] Later that year, together Hannah-Reeve Sanders, Eleanor S. Nash and Margaret Hoffman wrote a paper entitled "The role of women in health care."[65] The paper agreed that every orthodoxy had been challenged regarding education, opportunities and fertility, but noted that the character of the health services had been shaped by the un-coordinated, haphazard, racist and inequitable manner in which human resources for health care had been developed in South Africa.[66] It further argued that among medical practitioners the ratio of women to men ranged from 3%-30% in developing countries, and from 8%-70% in developed countries. At this stage, globally the number of women graduating each year had increased from one quarter to one third of the total medical graduates over the past decade."[67]

In 1992 Sanders left the provincial health services.[68] Sanders' short stint at the Cape Provincial Administration was publicly attributed to her "frustrations over the then government's health policy."[69] The reasons for her retirement seem to point to strained interpersonal circumstances. Her son, Robin, recalled that she had a challenging time at head office in the Cape Provincial Administration building in Wale Street. In Robin's opinion, she was just a political pawn absorbed into the provincial administration because it was expedient for them. No longer

[63] [GSHA], [HRS] files, President's Welcoming Speech given at the Medical Association of South Africa Western Cape Branch 1991 Banquet, March 23, 1991.

[64] [GSHA], [HRS] files, Letter correspondence from Hannah-Reeve Sanders to William Lacy Swing, 8 January 1992.

[65] [HRSPC], 57th MASA Congress. 18-21 April 1993. Medical Excellence in Africa. Day Session: First World Medicine in Africa. The Role of Women in Health Care Hannah-R. Sanders, Eleanor S. Nash, Margaret N. Hoffman.

[66] *Ibid.*

[67] *Ibid.*

[68] E. Brits, "Hannah-Reeve Sanders: 'n Lewe van téén die wind in vorentoe beur'", Vrye Weekblad, 7 May 2021.

[69] [UCTSC], [BC1525], Maurice Kibel, "Hannah-Reeve Sanders," November 1998.

protected by the university at Groote Schuur, she was forced to be more compliant with their policies. "You know at Groote Schuur,[...] walk a line, but she couldn't walk a line at that place, it was just horrible for her."[70] It was clear Sanders could not work within the system or create change in the same way she had been able to at Groote Schuur. According to her son, she had a really tough time. According to Robin she also came into contact with a director called Stegman, who was at times verbally abusive. In Robin's opinion Stegman was another reason she took early retirement. Under these strained interpersonal circumstances Sanders left head office in provincial government at the age of 64.[71] Considering her long career this was sudden as it was just a year before official retirement age.

Further networks and transitions

The first regional meeting of the Medical Women's International Association (M.W.I.A). took place in Africa from the 19th of November to the 3rd of December in 1993 in Nairobi Kenya. Sanders attended as then Vice President of the Africa and Near East Medical Women's International Association. She emphasised the importance of talking to Dr Mary Shilalukey-Ngoma from Zambia in the networking and communication session by underlining her name in the program.[72] Also marked as "important" in Sanders' notes was her attendance at the paper presentation of "Safe Motherhood, a political or Medical challenge in developing countries" by Nzau Ombaka Katini from Kenya. In the formal thanks given by Sanders to the conference organisers she reflected on a broader definition of achievement. Here she questioned that in general it is hard to know what rewards one seeks as a person both on a personal, collective, conscious, and unconscious level.[73]

In May 1994, Sanders wrote to Dr J.C. de Villiers again about how she was missing him during her stay in England, "despite its rich landscape and tapestry."[74] She reflected whimsically on the nature of time, and spoke about the book she had been reading, by the author Daphne du

[70] Interview with Robin Saphra conducted via Zoom by Leila Bloch, 6 August 2021.

[71] *Ibid.* Interview with Jocelyne Kane-Berman conducted by Leila Bloch, 7 August 2020.

[72] [DUA], [MWIA], "The Health of Women and Safe Motherhood" programme of the Medical Women's International Association regional meeting (November 19 – December 3, 1993), Nairobi, Kenya, 2 December 1993, 18.

[73] [DUA], [MWIA], Letter correspondence from Hannah-Reeve Sanders to Dr F. Manguyu and Dr A. Kapila of the Kenyan Women's Association, 9 December 1993.

[74] [KDVPC], Letter correspondence from Hannah-Reeve Sanders to Kay de Villiers, 18 May 1994.

Maurier. She admitted to Dr J.C. de Villiers that she felt very "out of touch."[75] However, in 1994 it did seem that Sanders was attempting to promote her profession and was concerned with the role of women within it as well as health services in South Africa. On the 29th of August she wrote to Nkosazana Zuma congratulating her on her appointment as the Minister of Health in South Africa and appealed to her regarding issues around women in the profession. Sanders mentioned the Medical Women's International Association and its affiliation with the SA Society of Medical Women and The SA Medical and Dental Council, of which Sanders was an elected member, and The International Council on Women's Health. It is not clear if Sanders was ever able to meet with Dr Zuma in person, but she received a reply from the Special advisor to the minister, Miss Mahlungu, a month later, who said that due to her tight schedule the minister would be unable to meet with her.[76]

At Tygerberg Hospital in Bellville in September of 1994 Sanders presented a paper entitled, "Die rol van die vrou in Geneeskunde" which mentioned the first female physician in the United States, Elizabeth Blackwell (1821-1910), who Sanders claimed was the first woman doctor with formal medical training, in New York.[77] However, in South Africa the precedent was set many years back in the 19th century by Dr James Barry (whose real name was Margaret-Ann Bulkley). Bulkley's famous story in the history of medicine, where she was forced to present herself as a male in order to practise, serves in a way as a harsh foreshadowing as well as reminder of the challenges that would face women in medicine in the following century.[78] Barry would later became the Inspector General (equivalent to Brigadier) in charge of military hospitals.[79]

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[75] *Ibid.*

[76] [GSHA], [HRS] files, Letter correspondence from Hannah-Reeve Sanders to Nkosazana Zuma, 29 August 1994; Letter correspondence from Miss Mahlangu to Hannah-Reeve Sanders, September 1994.

[77] [HRSPC], Hannah-Reeve Sanders, speech titled "Die Rol van die Vrou in Geneeskunde" given at Tygerberg Hospital, September 14, 1994"; N. Roth, "The Personalities of Two Pioneer Medical Women: Elizabeth Blackwell and Elizabeth Garrett Anderson", *Bulletin of the New York Academy of Medicine* 47, no. 1 (1971), 67.

[78] A. Flood, "New novel about Dr James Barry Sparks Row over Victorian's Gender Identity", *The Guardian,* 18 February 2019.

[79] M. du Preez and J. Dronfield, "Dr James Barry: The Woman Who Fooled the RCS and Deceived the World", *Royal College of Surgeons Bulletin* (2016), 397–398.

In mid-1995, professionally, Sanders was concerned with installing new systems in her job as treasurer and past president of The Medical Women's International Association (MWIA).[80] The organisation had had misgivings about South Africa because of the apartheid situation, but nonetheless asked Sanders if she would be prepared to become the African President of the organisation, unleashing enormous amounts of interest in women doctors in South Africa.[81] In another letter to Dr J.C. de Villiers later that year we are given insight into the more personal preoccupations of Sanders. Much of her time consisted of international travel. In June, she spent time in London, and recorded taking her grandchildren to see mummies in the British Museum. In the same letter to De Villiers, similar themes of her experience with Jewish norms in early childhood are recalled following a trip to Germany, writing that she was "astounded" at the Jews she visited who "ate pig's head and ham" — a familiar reaction we saw in the first chapter of her mother's distress at the thought of the Kotzes eating unkosher meat. This particular letter also gives us a first indication from archival material of Sanders as a grandmother. She noted to De Villiers that she was performing her duties as an "ouma" so that her daughter-in-law who was seven and a half months pregnant at the time could go on a writing course — a noteworthy (and personal) statement of her consistency in the struggle for gender equality. She found this time to be wonderful and learned a lot from and about her grandchildren. Time with family, however, did not preclude professional concerns. The letter goes on to reflect on contemporary decisions around the Medical Council's constitution and the "way forward" in terms of decisions around medical leadership in South Africa, which according to Sanders would have been difficult.[82] 1995 was also the year in which Sanders joined the then newly established Mosaic Training Services and Healing Centre for Women organisation which addressed issues of domestic violence against women in South Africa.[83]

The details of Sanders' contribution to the organisation of Medical Education for South African Blacks (MESAB) are not clear. The annual report of 1996, in which Sanders was listed as a

[80] D. Ward, *They Cure in a Motherly Spirit: History of the Medical Women's International Association* (Glasgow: Fledgling Press, 2010), 265 & 302

[81] [SAJMA], Interview with Hannah-Reeve Sanders conducted by Adrienne Folb, 31 August 2014.

[82] [KDVPC], Letter correspondence from Hannah-Reeve Sanders to Dr J.C. de Villiers, 4 June 1995.

[83] Mosaic Training Services and Healing Centre for Women history webpage, accessed at: https://mosaic.Org.za/about-us/history/.

member, addressed the shortage of medical training for black students.[84] While it included testimonies of alumni who received support through scholarships from MESAB, it emphasised that there was a lot of work still to be done. Sanders' membership shows a broadening of her alliances without the constraints of Provincial Government towards an ideological movement which challenged the inequity of the impact of apartheid on healthcare in South Africa.[85]

In October 1996, Sanders, along with Eleanor Nash, Professor of Dermatology, Norma Saxe and Margaret Hoffman compiled a list of contributions of women working in the medical field.[86] Among the chosen names (which included herself) was Golda Selzer, whom she had personally corresponded with before, Esther Sapire (as mentioned in chapter 2), and author Geraldine Mitton.[87] Margaret Hoffman was one woman in particular who had benefited from the mentorship of Sanders. In an interview many years later she claimed that it was through Sanders that she was able to study at Harvard University, as already mentioned above. According to Robin, she had a lot of very strong bonds with female friends.[88] Included in her inner network of friends were Madelein van Biljon, Anita Johanna Saunders, the wife of Stuart Sanders, and the first female judge in South Africa, Judge Leonora van den Heever.[89] In October that same year, Sanders took the opportunity, in her presentation to the Seventh International Conference on Women's Health, to encourage colleagues to meet each other and to discuss relevant issues.[90] Keeping in line with her administrative focus, she raised several concerns, namely, the distribution of beds within hospitals as well as the recognition and training of traditional healers: "It seems likely that the balance between different kinds of illnesses treated by healers changed over historical time, although this must remain a matter of

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[84] United Nations Archives and Records Management Section, MESAB, *Annual Report of the Organisation of Medical Education for South African Blacks,* 1996.

[85] J. P. de V van Niekerk, "MESAB: 21 Years of Bursaries for Black Medics", *South African Medical Journal* 96, no. 7 (2006), 565.

[86] L. Gillis, "Eleanor Nash", *Izindaba: South African Medical Journal* 104, no. 2 (2014), 101.

[87] Stellenbosch Writers, "Geraldine Mitton: Author of a book on health and youthful aging and a biography, former Medical Director of the Hydro Wellness Centre in Stellenbosch", accessed at: http:// www.stellenboschwriters.com/mittong.html.

[88] Interview with Robin Saphra conducted via Zoom by Leila Bloch, 6 August 2021."

[89] A. Green, "Obituary: Stuart Saunders", *The Lancet* 397, no. 10281 (2021), 1258; N. Yeld, E. O'Meara, and M. Simons, "Obituary: Anita Saunders: 1945-2017", *UCT News*, April 22, 2017; Lilla Grouse, "A Bar for women,?"*General Council of the Bar Law Journals,* December 2002, 30.

[90] [GSHA], [HRS] files, folder entitled "Personal correspondence", Sanders' presentation at The Seventh International Conference on Women's Health Issues, presentation and summary October 1980.

conjecture. Before the destructive impact of colonialism on tribal life, the healer would have played a central role in all but the very trivial types of sickness dealt with by household remedies."[91]

In 1997 South Africa was also absorbing the damage caused by then President Thabo Mbeki's AIDS denialism, where he did not address the scientific causes or treatment for the disease, and where it is now estimated that over 300 000 died because of his policy of neglect.[92] 1997 was thus significant in this respect as it marked the "first confrontation between Mbeki and the scientific governance of medicine", specifically in support for "Virodene, which turned out to be a quack remedy."[93] Sanders was not involved in responding to the AIDS crisis, and instead continued to engage with feminism in healthcare. Herself and Jocelyne Kane-Berman addressed the effects of the medical profession on women in a paper entitled, "Against all odds: women in medicine".[94] The paper noted that women at this point were being accepted by all medical faculties, but they were still struggling to balance marriage and children. In accordance with this, Sanders and Berman emphasised the value of part-time work in balancing these obligations.[95] While we have seen this theme of a certain type of medical feminism, Sanders was still somewhat emphatic about not wanting to attach to it any ideological status. In an email correspondence with the sociologist Liz Walker, Sanders was asked whether the Medical Women's International group could be perceived as a feminist organisation, to which Sanders replied "no".[96] Kane-Berman further noted that both she and Sanders owed some of their success within their respective organisations due to a type of anti-feminist way of negotiating their relationships to the men, namely, by running these organizations in such a way without ever pushing a specific agenda.[97] Similarly, during this time, the South African Society of Medical Women (of which Sanders was president) rejected feminist "ideology" in their

[91] Digby, *Diversity and Division in Medicine*, 83.

[92] N. Geffen, "Justice After AIDS Denialism: Should There Be Prosecutions and Compensation?", *Journal of Acquired Immune Deficiency Syndromes*, 51 no. 4 (August 2009): 454–455.

[93] N. Nattrass, "AIDS and the scientific governance of medicine in post-apartheid South Africa", *African Affairs,* 107 no. 427 (2008), 160; A. Burler, "South Africa's HIV/AIDS policy, 1994-2004: How can it be explained?", *African Affairs* 104, no. 417 (2005), 594.

[94] J. Kane-Berman, "Against All Odds: Women in Medicine", *Indicator,* 14 no. 1 (1997), 62–63.

[95] *Ibid.*

[96] [GSHA], [HRS] files, folder entitled "personal correspondence", email correspondence from Liz Walker to Hannah-Reeve Sanders, 21 February 1997.

[97] Interview with Jocelyne Kane-Berman conducted by Leila Bloch, 7 August 2020.

organisation, seeing it as a non-essential requisite to being a "competent professional" and they did not want to "alienate their male colleagues."[98] Instead, they waged their campaigns in a modest fashion and in this way "exercised their power within the constraints of male authority."[99]

Sanders would write later that year to emeritus professor and founding director of the UCT Centre for Bioethics, Dr Solly R. Benatar, apologising for missing a seminar but noting that she found a report on surrogate motherhood interesting.

> I think I gave you the [article] cutting in regard to a recent UK/Belgian article where the host mother contemplated termination of pregnancy for a variety of reasons, mostly due to a breakdown in relationships. It's a field strewn with landmines. The use of Nazi data, and the article "Upon Finding a Nazi Anatomy Atlas" – were enormously informative, as was the correspondence. How did we live through the past 40 years? Don't stop writing and talking, Solly![100]

The Atlas in question was being scrutinized for using teaching examples that drew from Jewish bodies during the Nazi occupation.[101] Sanders had maintained professional correspondence with Dr Solly Benatar over the years and it was clear that she held him and the work he did in very high regard. Perhaps her reference to these anatomical drawings in this letter appealed to both Benetar's knowledge of medical ethics (something he was particularly associated with) as well as their shared Jewish roots. Her own ties to the Jewish community continued into her years of retirement, evident for example in her contributions to synagogue newsletters, and

[98] [DUA], [MWIA], HRS Collection, 2001. The catalogue description reads: "Dr Reeve-Sanders is a past president of the South African Society of Medical Women, which organization is a member of the Medical Women's International Association. Dr Reeve-Sanders was also Vice-President of the MWIA's Near East and Africa Region, and Chairman of MWIA's Finance Committee," October 2001. See also, L. Walker, "They heal in the spirit of the mother": Gender, Race and Professionalisation of South African Medical Women", *African Studies* 62, no. 1 (2003), 99–123.

[99] *Ibid.*, 111.

[100] [HRSPC], L. R. S. Panush, "Upon Finding a Nazi Anatomy Atlas: The Lessons of Nazi Medicine", *Pharos* 59, no. 4 (1996), 18–22; Letter correspondence from Hannah-Reeve Sanders to Solomon Benatar, November 27, 1997.

[101] Panush, "Upon Finding a Nazi Anatomy Atlas," 18-22; S. Hildebrandt, "How the Pernkopf Controversy facilitated a historical and ethical analysis of the anatomical sciences in Austria and Germany: A recommendation for the continued use of the Penkopf Atlas", *Clinical Anatomy*, 19 (2006), 91.

involvement in the Adult Education Division in the Union of Jewish Women, which, as mentioned, had been established by the late Tony Saphra, Bernard (Sanders' husband's) mother. [102] In her capacity as deputy chairman of the Union of Jewish Women, Sanders was featured in a photograph alongside a female Rabbi. Given Sanders' position as a female leader it was fitting that she was pictured alongside a female religious leader who "disabused the audience of the notion that rabbinic ordination for women does not exist. "[103]

A close family friend of Sanders' son Graham Sonnenberg, recalled that while growing up, an unusual characteristic of Sanders was her advocation of abortion rights among women.[104] It was a subject which Sanders regularly brought up.[105] Her particular care and interest in abortion rights is further evidenced in a letter from the Abortion Rights Action Group (which started in 1974 and challenged South Africa's restrictive abortion laws).[106] The organisation thanked her for her interests and contributions (the details of which were not listed), just a year after the Choice on Termination of Pregnancy Act had been passed in 1996.[107] An act which emphasised the rights of women's choice regarding termination of pregnancies.[108] This is again a clear indication of Sanders' life-long concern for the rights of women, especially as they pertain to the horizon of medicine, according to which she was most familiar and devoted.

In 1998, Sanders received her Honorary Doctorate from UCT. However, in the same year, in a letter addressed to Jocelyne Kane-Berman, in an acute and rare moment of vulnerability, she described the strain she was experiencing:

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[102] Sanders, "A Glimpse into Recollections of the Past", *Temple Israel; The Cape Jewish Chronicle,* 1 July 2019, "The Union of Jewish Women Reflects on a Wonderful AGM"; [UCTSC], [BC1390], Toni Saphra Papers, until 2013.

[103] L. Sher, "Community Buzz", *South African Jewish Report,* 7–14 March 2003.

[104] Interview with Graham Sonnenberg conducted by Leila Bloch, 23 June 2021.

[105] *Ibid.*

[106] [GSHA], [HRS], files, folder entitled "Personal correspondence", letter to Reeve from A.R.A.G. National, 22 January 1997; J. Wild and J. Kunst, "Abortion is a woman's right", *Agenda*, (1995), 45; J. Cope, *A Matter of Choice: Abortion Law Reform in Apartheid South Africa* (Natal University Press: Pietermaritzburg, 1994),109.

[107] [GSHA], [HRS] files, folder entitled "Personal correspondence", letter to Reeve from A.R.A.G. National, 22 January 1997; For context of South African abortion legislation leading up to and including the act see: R. E. Mhlanga, "Abortion: Developments and impact in South Africa", *British Medical Bulletin* 67, no. 1 (2003), 115-126.

[108] C. Pickles, "Lived Experiences of the Choice on Termination of Pregnancy Act 92 of 1996: Bridging the Gap for Women in Need", *South African Journal on Human Rights*, 29 no. 3 (2013), 515–535.

> Dear Joc, I'm trying not to fall off the edge of the world, and I imagine you may feel much the same...or are you thriving under pressure? Thanks for sending me the undergraduate and the graduate questionnaires; and the copies of your talk to the International Women's Club. Jolly good. I've also got the relevant S.A.M.J with the full literature survey…I'm just back from my last Medical Council Meeting. After nearly 8 years I leave that experience with mixed feelings. The road ahead is fairly unstructured. But I really hope it will evolve in the best interest of the Health Profession.[109] Change is certainly in the air.[110]

The above letter was written just before Sanders' departure for London and then to Egypt, one of her many travels.[111] She ended the letter on a more philosophical note, saying that the Chinese word for change (改变)[112] has two symbols, "one signifies danger and the other opportunity."[113] This letter gives further insight into the solidarity with which Sanders corresponded with Kane-Berman and the close friendship and collegial understanding they cultivated over many years of service.

Conclusion

Sanders left GSH only to go deeper into provincial government operations. However, she did not stay there for long. The impact of her career seemed to extend beyond the institutional frameworks in which she operated. While ensuring that her legacy was secured, she pursued

[109] K. Kautzky and S. M. Tollman, "A Perspective on Primary Health Care in South Africa: Primary Health Care in Context", *South African Health Review* 2008, no. 1 (2008), 28. In part a consequence of the apartheid legacy of 'separate development' of health services, coupled with the privatisation of health care, the unequal distribution of health workers and resources across public and private sectors endures as a seminal obstacle to health systems development and the adequate provision of services. In 1998, 53% of general practitioners, 57% of professional nurses and 76% of all specialists worked in the country's private sector, despite this sector catering to the needs of less than 20% of the population.27 Today, this trend has worsened with an estimated 63% of general practitioners now working in the private sector, nearly twice as many as in the public sector.e Similarly, the private sector now absorbs an estimated 62% of national health expenditure providing medical care to approximately seven million people, while the public sector absorbs only 38% and provides for an estimated 35 million.

[110] [KDVPC], Letter correspondence from Hannah-Reeve Sanders to Jocelyne Kane-Berman, 16 April 1998.

[111] [KDVP], Letter correspondence from Hannah-Reeve Sanders to Kay and Jean de Villiers, May 19, 1998.

[112] Gǎibiàn (改变)

[113] [UCTSC], [BC1525], Letter correspondence from Hannah-Reeve Sanders to Jocelyne Kane-Berman, 16 April 1998.

both her advancement and strong ties among broader networks, far beyond her retirement. For example, the Bioethics Centre at UCT instituted the Hannah-Reeve Sanders Lecture with contributors speaking until 2018. As an Afrikaans Jewish doctor working at one of the largest hospitals in South Africa, her professional career left a long-standing legacy. By the time Sanders had left GSH and provincial government, the changing nature of opportunities for women entering the medical field had been much improved. While perhaps beyond what Sanders may have herself initiated, she undoubtedly made a substantial contribution toward this altered environment. Sanders' impact was also felt in other ways. For example, Margaret Hoffman, whom she directly helped attend Harvard University, and through the MWIA where Sanders' own papers would be left, tracing her presence in the organisation's history over the years. During this period of her life there is also a clear association with her Jewish roots through the Union of Jewish Women. The full extent of Sanders' involvement with Jewish organisations has not yet been explored; however, it is evident that these roots were not forgotten, within the overarching focus on Sanders' career.

Conclusion

"*[...]individuals make their lives but they do not make those lives just as they please*."[1]

In starting with a broad investigation into the perception of doctors and opportunities for women in country communities in the early 20th century, several influences on Sanders have become evident in determining her impact on the environments in which she operated. This in turn, helped to evaluate her historical significance. An examination of these factors adds nuance and depth to the public acknowledgement of Sanders' achievement as the first female Chief Medical Superintendent of Groote Schuur Hospital.

As can be seen throughout this thesis Sanders upheld the perception of what it meant to be a doctor within her leadership position, including her administrative role. This is indicated by the professional conduct she maintained and the dedication to her career, at times amid trying political circumstances. Her role as doctor was therefore inevitably challenged in such a way that she was expected to incorporate political considerations which deflected from the core function of a hospital, namely treating the sick. Her countless references to the idea of the doctor and the improvement of healthcare in society are indicative of her engagement with the ideal of the profession and this is illustrated through her pragmatic approach to decision-making in the hospital environment.

The thesis has illustrated the advantages she had in gaining access to her position such as being white in apartheid South Africa and her proficiency in both Afrikaans and English. Sanders' choice of administrative medicine may have cushioned her from patients' suffering. However, she may have been simply following through with a type of pragmatic decision-making, in which she embraced her job fully.

Often biographical studies are concerned with narratives around personal or political trauma or overcoming overt personal challenges.[2] This thesis however has attempted to offer a biography

[1] J. Dlamini, "Life Choices and South African Biography", *Kronos,* 41, no. 1 (Nov 2015): 339–346.

[2] *Ibid.*

of an everyday working life, striving for professionalism, where quotidian detail works alongside obligation and duty. Within the constraints of the provincial government, Sanders' political views did not necessarily come to the forefront and her reforms, however subtle, evidently never endangered her employment position. However, what is clear is that she may have felt an innate sense of moral obligation and in her way worked against the government's segregationist policy as it manifested itself at GSH. She was outspoken and may have simply prioritised things differently. However, it remains true that one cannot be entirely divorced from the prevailing political milieu, especially within one of high powered leadership in an important institution during the apartheid years.

After all, simply doing one's job is arguably in itself a political statement. We see in Sanders' case how the professional and personal become almost entirely indistinguishable, with the biography becoming more of a documentation of her professional life. In many respects this a biography of her working life. In the interviews that do focus on her personal experiences her son indicated that during her life she was fuelled by a sense of duty, ambition, combined with what he defined as kindness.

What has been written offers a less grandiose biography that has hoped to illustrate that idealised notions of doctors' achievements cannot merely be understood on face value. Rather, they must be understood within, and in relation to the factors which shape the biographical subject. Between bureaucracy, personal and professional relationships and public display, a range of perspectives has been used to carry out this research. On the one hand, the biography is a critical look at the public celebration of her life such as the accolades she received in the press. However, certain stories, such as the testimony of nurses, allows room for an assessment of her actions in light of turbulent circumstances of the time such as her surreptitious segregation of wards. The precedents Sanders set for South African women in the medical field, illustrated the different approaches that can be taken, the roots of which hark back to her formative years and immigrant background. Despite early opposition from her father during her childhood, she seized opportunities to become a doctor, making the best of the circumstances. As she would say in a later interview, "life deals you the cards and you play them, and you play them as best as you can."[3]

[3] [SAJMA], Interview with Hannah-Reeve Sanders conducted by Adrienne Folb, 31 August 2014.

The interviews referred to in the introduction are rich with detail from Sanders' time in the medical field; Folb's interview is a lens into Jewish life within country communities. The author's interviews make for a nostalgic appraisal of events that occurred in Sanders' life. Wherever possible additional information has been used to supplement her story. However, an awareness of the subject's own relation to events also charts the inherently changing nature of memory. Emphasis on the importance of certain events changes over time. As one changes so do the events in one's life become reinterpreted, refashioned, and re-evaluated. Thus, corroborating evidence is an essential part of writing a biography, in this case of someone who is still alive. As Sanders states, "If you really think about it, you can't remember every episode, and it's not your fault. Can I really remember 90 years? I'm not talking about pressure. I'm talking about detail, and nobody knows why one remembers certain things and not others."[4]

The potential discomfort of having to write a biography of a woman with such status and who is still alive is hard to navigate. At 91 at the time of writing, she was still willing to be interviewed via telephone amid the coronavirus (COVID-19).[5] In effect, Sanders' life is a conduit into a particular time and place. Writing a biography helps one to appreciate the intricacies and contradictions of history, and to acknowledge that the past has been shaped by complex individuals and forces, which ultimately deepen our understanding of humanity.[6]

[4] [SAJMA], Interview with Hannah-Reeve Sanders conducted by Leila Bloch, Piketberg, 18 Octo ber 2018.

[5] R. Lu and X. Zhao, *et al*., "Genomic characterisation and epidemiology of 2019 novel coronavirus: Implications for virus origins and receptor binding", *The Lancet* 395, no. 10224 (2020): 565–574.

[6] D. van Zyl-Hermann, "History Made Human", 131

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