On the Creation of Archives and Histories...

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In 2010, when UKZN's Nelson R Mandela School of Medicine<sup>1</sup> planned the celebration of its 60<sup>th</sup> anniversary, a committee met to discuss how best to commemorate the event. Commemorative events play an important role in the celebration and construction of collective memories – decisions are made around what should be remembered, what is best forgotten, and there is a focus on milestones, often regarded as 'defining moments'. Speeches, displays and productions are manufactured to represent this past and serve the purpose of offering, and fixing in people's minds, a view of 'how things were'. Of course, it seems unlikely that this view of 'how things were' can ever be true for everybody, yet the privileged view – the most commonly presented version of 'the way things were' – predominates, and after a time may be regarded, officially, as a representative 'history'.

However, archivist Jean Deken, in her article entitled 'Voices: milestones vs. history', draws an important distinction between milestone celebrations and history. She comments that "celebrating a milestone is always enjoyable, but a complete and accurate historical record is invaluable for the past to inform the future." She states further, that "a milestone celebration is just another party, however festive it may be, unless the history it celebrates is meaningful, and meaningful history depends upon accuracy in memory, accuracy and completeness in records and documentation, and thoughtful historical analysis". She upholds the ideal of such a 'rich' history, and contrasts with this a simplified, summarised 'folk' history that falls short of acknowledging the complexities of the past.

For me this perspective is a good departure point from which to retrospectively evaluate the work that I have been involved in at the Medical School for the past year and a bit. My work began with research into a predetermined aspect of the Medical School's past, and continued with the processing and organisation of historical resources located in the Medical Librarian's office, to determine the feasibility of creating an archive at the Medical School.

In June 2010, the Medical School's planning committee elected to celebrate its 60<sup>th</sup> anniversary with a focus on the role of their Institution in the [anti-apartheid] struggle. It decided to open a museum and arranged with the Steve Biko Foundation to host an exhibition on Biko, the late activist Biko having been

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<sup>&</sup>lt;sup>1</sup> In this paper I will refer to the Nelson R Mandela School of Medicine as 'the Medical School'.

<sup>&</sup>lt;sup>2</sup> Deken, J. Pp 8, 2006

a past student of the Medical School. I was appointed to source relevant supporting material for an accompanying poster<sup>3</sup>.

This involved consulting past records for evidence of 'defining moments' – in this instance those consonant with the struggle theme. Aware that I had little time (about 3 weeks) to complete this research, I decided to first look into the resources on hand in the Medical School library. A collection of material, dating from the early 1950s, was stored (in no immediately apparent order) in drawers two and three of a steel filing cabinet in the Medical Librarian's office. I was not sure of what I would find there, but was naively optimistic that I would find at least something to do with the Medical School and The Struggle. When institutional history is researched, the organisation's archives are a source of information for researchers, and I felt that this material had the making of an archive<sup>4</sup>.

The purpose of archives is two-fold. The term 'archive' refers to a body of historical material, as well as to the space in which this is stored. The first purpose of this space is to preserve the material against deterioration, and the second to make the information store available – to provide access to the resources for research purposes. The accumulation of material that is archived can either be the result of continuous, systematic collection over time, where conscious decisions are made around what to keep (and not to keep) according to predetermined criteria, or it can be erratic, according to the whims of the collector. Either way, the retention (or discarding) of material is never entirely coincidental. It is always because someone has decided that it has value (or not).

The most valuable archives for researchers are felt to be those that contain 'complete' records – that facilitate thorough searching around a particular era or subject. For historians, chronology is important as it provides context, and details the development of ideas and events. However, the editors of 'Refiguring the Archive' caution against the notion of the archive as a 'complete' record and the idea that where a 'gap' exists, remedial interventions can 'fill the gap'. They suggest regarding the archive not

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<sup>&</sup>lt;sup>3</sup> The poster (4m long x 1.2m high) was displayed in the museum from 28 July 2010 to end April 2011. It was viewed by around 400 visitors to the museum.

<sup>&</sup>lt;sup>4</sup>Two references were made in this collection of papers referring to the archiving of Medical School records. One is a letter which states that Professor McIntyre, of the Natal University History department, had expressed interest in taking responsibility for the safekeeping and archiving of early Medical School records. The second was a note marked 'For the Archives', attached to an envelope of papers addressed to the Medical Librarian by E.G. Malherbe, past principal of the University, suggesting that the library was the recognised repository for the safekeeping of historical papers relating to the Medical School.

<sup>&</sup>lt;sup>5</sup> This book takes its name from the project 'Refiguring the Archive', hosted in 1998 by the University of the Witwatersrand Graduate School for the Humanities and Social Sciences together with 4 archival institutions. It contains expanded versions of the papers developed from seminars presented at that conference.

as an 'incomplete whole', but rather a 'sliver' 5. This word 'sliver' suggests a fraction – a splinter – something which is fractured from the whole.

While I was researching, I had to constantly remind myself that my brief was not to research the history of the Medical School, but specifically the role of the Medical School in the Struggle. I began sifting through documents, reading each closely to begin with, and then skim reading and then, after several days — to hasten the process — simply glancing at pages to see whether or not they contained any information on, or references to, the struggle. Or apartheid structures. Or the Medical School's activist stance...

With a sense of growing urgency I realised the need to problematise the term 'the struggle'. Because I was fast learning that far from a cohesive, well-defined strategy of resistance embraced and given impetus by the Medical School, struggles against the racial discrimination legalised by apartheid seemed in fact to have been waged at three levels – intrapersonal, interpersonal, as well as institutional.

I was pointed in the direction of the work of Dr Vanessa Noble, an historian who has intensively researched, and published on, the Medical School. Her thesis included the compilation of oral histories (through interviews) with people who during the apartheid years had had links with the Institution, either as student, staff or both. Her records of these personal recollections and accompanying analysis reveal a complex, dynamic interplay of interactions that elicited disparate, varying responses (from individuals, groups within the Institution and the Medical School itself) to the discriminatory practices of the apartheid government, as applied to the Medical School, and manifest within the Institution.

Having broadened my research to include Noble's thesis and various published papers, and publications such as Corporate Relations commemorative brochures, as well as some autobiographical work by past students and the Medical School's Truth and Reconciliation Commission submission, I frequently came across stock phrases describing the Medical School, this re-iteration appearing to have become the terms of discourse by which the Medical School is defined. Thus, the corporate memory of the Medical School – 'an anomaly – a white educational institution for the medical training of Black students, in a white area, by white academics', was reinforced from one commemorative event to the next, with very little to indicate the nuances, complexities and conflicts noted in Noble's research. Is this perhaps an example of the development over the years of a 'folk history' as described earlier by Deken – a

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<sup>&</sup>lt;sup>6</sup> Hamilton, C... [et al], 2002.

simplified, summarised history offering a view of 'how things were', that falls short of acknowledging the complexities of the past?

I went back to the steel cabinet, focusing mainly on primary sources in an attempt to identify fresh perspectives on the role of the Medical School in the struggle. So, how valuable was this resource to me? It is not an example of a collection that has been grown deliberately and systematically. The collection of material has been haphazard – it does not seem to have been governed by clearly defined principles or criteria determining what should be collected. It certainly does not trace a continuous or thematically arranged 'history' of the organisation's operation. There are some early records that speak candidly to the challenges the Institution faced at inception, but very little by way of detailed information and primary sources on later years. It is, what could aptly be named, a sliver...

This sliver provided me at best a snatched view, glimpses, into some of the activity of the Medical School in its early years. If the notion of the cohesive whole, a complete archive that tells the whole story, was not a myth, we might think it possible to fill the gaps. As a researcher's source, it is bitty – perhaps more frustrating than satisfying to work from, because you will not find in it 'a story'. The haphazard compilation of this material – this archive – challenged my need for order, my need to make sense of things by identifying themes, and applying frameworks within which to slot the pieces – to find the proof of purpose.

Despite its arbitrary nature, I did feel that as a resource this collection of records had value. Reading between the lines reveals that hope, ambition, conflict, disappointment, outrage, triumph, shame, perseverance, achievement, were all part of the experience of the Medical School and the individuals that peopled it.

In searching out evidence of the Medical School's struggle history, I found documents detailing individual and institutional responses to the practice of apartheid, which revealed compliance with apartheid state requirements and mores. Other documents revealed individual and collective efforts to challenge apartheid norms, on occasion calling public attention to the grave effect of apartheid on the provision of health services and training of health professionals; in other instances endeavouring to mobilise the student body and staff, urging greater participation in activism. There are few records quantifying the success of these attempts.

Although certain records struck me as significant, it is not improbable that others researching this same archive, steeped in their own prior knowledge, understanding, perceptions and experiences, would find

significance in alternative records. With that awareness, I revisit Deken's view of the importance of a rich history – one that does not diminish a confusing and troubling path in favour of a sanitised folk history that conveys a straightforward and uncontested progression through time. A rich history is a meaningful one because it is informed by broad and deep research; it accommodates tensions within it; and it reflects truthfully all the 'messiness' of life.

Earlier this year, Verne Harris, the archivist currently working intimately with ex-President Nelson Mandela on the Mandela memory project, presented a paper on the roles of memory in South Africa. He discussed how he envisaged memory work facilitating constructive movement into the future. An observation that he made – a pre-requisite that he identified as being necessary – is that South Africans need to 'befriend the mistakes of the past'. That profound, and not un-provocative comment, was the catalyst for an eruption at question time and has stayed with me for many months. His urging was that we "befriend them. Hold them. Give them sanctuary. Be hospitable to them"<sup>7</sup>.

To me 'befriending the [mistakes of the] past' is much the same as creating space for, as much as creating rich histories which acknowledge and accommodate all the complexities, the messiness, of life. It concedes that if we are to write meaningful histories, we need to give the triumphant and the devastating the space to stand side by side, without which, according to my understanding of Harris (and others who believe that the past has a role to play in informing the future) there can be no moving forward.

Does the Medical School archive, the 'sliver', provide the opportunity for the reading and creation of a meaningful history? Are the qualities that inform and support a meaningful history, as defined by Deken, present in this archive - does it reflect accurate memory; are accuracy and completeness characteristics of its records and documentation? On its own I think perhaps it is not broad enough or deep enough, but in conjunction with other archives it enhances the potential for our understanding of the complex, messy story – sometimes triumphant, sometimes devastating – that is the rich history of the Durban Medical School.

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<sup>&</sup>lt;sup>7</sup> Verne Harris, Nelson Mandela Foundation, "Madiba, Memory and the Work of Justice" (paper presented at The Alan Paton Centre and Struggle Archives, University of KwaZulu-Natal, Pietermaritzburg, 2011).

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