

## Noeline<sup>1</sup>

“ ‘Mr. Mandela is here!’

“That was Matron Steele, my boss at Garden City Hospital in Johannesburg, who was shouting about him. She ran straight up to tell me. I remember her eyes all buggered out. And I said to her—blinking unexcitedly—‘So?’

“ ‘But he is looking for *you*, Noeline!’

“ ‘So? I looked after that man’s health for 11 years on Robben Island. *That* is why he is looking for me.’ But Casey, you know, he made everybody crazy when he was alive. So, I said to my colleagues, ‘Calm down. Mr. Mandela had a very difficult life, but he is also a human being. And the night he was taken off the Island, he promised me that one day, when he rules this country, he will look for me.’

“Steele and I went down the stairs into the emergency department. That’s where he saw me and opened his arms. I walked into them and hugged him. He hugged me back and kissed me. You should have seen it. Everyone was looking, and I knew they were thinking, ‘who in the hell is this white lady?’

“Mr. Mandela said to me, in front of all of them, ‘I’m happy that Noeline is working for you. Correctional Services lost their best nurse when she left Robben Island. Not only did she care for the health of the people there. She was like our mother in the prison. She was my mother, my psychologist, my nurse, my confident.’ ”

A tower of small, upside-down plastic cups shirked from their plastic bag, standing free on the table begins to disassemble in her hands. Towering at over six feet with auburn hair, freshly dyed, Noeline moves swiftly, taking one cup from the top to turn upright and drop in white, blue, and orange pills of different shapes. She knows who gets what and reorders them like chess pieces on the cart, saying the names of each recipient and new

changes to their regimens—classes 5 and 6 are habit forming and stay on the top shelf. She alone holds the pharmacy's key.

A white one falls on the floor. She picks it up and blows on it—a kiss—before putting it in someone's cup.

Mr. Louw's room is next door and he's already waiting for us at the threshold in his wheelchair. Demented in the clinical sense, he was a state prison warden at Pretoria Central. Some of the staff rumor that he was also hangman back in the day. Now he's on antibiotics. Last week he went to the dentist—extraction of three infected and a new bridge—inevitable from chewing on too many black licorice Allsorts and Maynards wine gum candies.

We're on the clock for now. I hazard her time.

"I mean, Noeline, working at the hospital, everyday you saw people come and go. They touch you in a way but leave quickly. They're more like strangers. It's not like here. Or the prison. You see the same folks every day, for a long, *long* time. They're not going anywhere. You get used to them." The comparison's frail but an easy one to draw, I suppose.

"Casey, *they* get used to *you*, neh. It's not just the other way around," she says.

Louw takes a flesh-colored contraption out of his mouth to swallow the pill with a phlegmy cough. Precious, the auxiliary nurse on shift today, comes up from behind and gives her 'husband' a gold ring-fingered shoulder rub—terms of endearment she lobs at some of the grabber old men. Black tam, black fleece athleisure pullover—she's still wearing these 'mourning gowns' for another two months even if work's bereavement leave was over three weeks ago.

Precious wheels him back to his room. He'll steal away a smoke at the white barred window, laughing at something that lies beyond the brick wall.

Angel passes by on the way to the nurses' station. She's got an armload of red folders—new in-takes. Bea, a blue-eyed woman I'd helped to spoon-feed breakfast porridge for a month, died on Sunday at the age of 94. Her bedroom's opened up for one or two new folks to move in. Word among the nurses is that Maureen, the municipality's Black social worker, got Angel to take in two Black grannies who've been on the admissions waiting list

for a year. Along with Jane Zulu and Baba Xitangu, that would bring up the number of Black residents to four out of a total 50 souls.

After the med pass, we've got to clean up the room for their Monday arrival.

Noeline's little battlefield of cups is finally ready, laid out on the cart's gauzy blue paper, a thin anchoring for the mostly-even wheeling journey through the home's block-like corridors.

We journey together.

"Had you done geriatric training with your nursing?"

"I did. And palliative care too. The first training at Sharley Cribb in Port Elizabeth where we would travel every three months by train. I was a farm girl, neh, grew up in the Karoo, and Oudtshoorn was my mother hospital. We went to Cribb for theory, and then we traveled to do our specialties—Tygerberg in Cape Town to do midwifery and then Karl Bremer to do geriatrics and palliative care. And I went like that for four years."<sup>2</sup>

"I guess it's helpful to see how people in different places do different things."

"It is. It forms you, gives you information, and a sense of how to handle different people and situations."

Her gold wedding ring slides along the rim of a pill cup for tannie Flora—just one white disc inside for blood pressure. "You met your husband Rickus in those years, right?"

"In Oudtshoorn, yes. And was very young when I started nursing. Just 18 and just out of school. And he was working for the police. We Afrikaners of those days, on the farms, we were brought up very strict. Very strict. You don't go out with men before you're out of school, so my father told me. So, I was extremely naïve and I was afraid. But he also grew up on a farm there, so he was also very naïve."

I laugh at her recalling her Klein Karoo valley farm girl unworldliness—a scene of two dirty blond teenage- to twenty-something lovers, awkward with each other and the ropes of their first real world jobs—apartheid-era policing and nursing—both bloody ordeals.

"One night I was working in the hospital's casualty, where they brought in accidents, and Rickus brought in a man who was badly hurt. When the patient was stabilized and

prepped for the theater, he asked me, ‘what’s your name?’ And I told him, ‘it’s Noeline.’ He became my first and last boyfriend.

One and done.

“So we grew together. We went out for six years before we got married. My father”—a postmaster and Freemason— “just said, ‘you must first learn, and then you get married, because if you get married right away, you won’t have time to learn about each other.’”

“So, it was a test run?”

“Ja, and he was also studying, you know, criminology and the things like that. That’s why he also had a very good relationship with the prisoners because he had the training.”

Rickus quit the Oudtshoorn police and moved to Paarl, a deeply Afrikaans and wine-rich city north of Cape Town, to start a post with the state’s Correctional Services unit in 1970. It was back and forth for three years until she finished her own training and she moved to join him.

“Right, and I remember I was doing night duty at the hospital around there at the time, so I was sleeping during the day. And I heard a knock on the flat door, neh.”

Rapt suspicion of the sound is what I take away from the look she gives me.

“I put on my night gown and went to the door. This man had the same uniform as my husband, but his had all of this braiding and medals hanging from it here and here,” she says, brushing her chest to shoulders and her own epaulettes and pins that show off in enamel her superior ranking to the other sisters working here.

“And being very innocent—I didn’t know—I said, ‘Hello, uncle, can I help you? I’m sleeping now so sorry for my pajamas.’

‘Are you Zaayman’s wife?’

I said, ‘yes.’

‘How would you like to go to Robben Island?’”

A deadpan delivery of his demeanor—was that really a question? Or a threat? For her, the answer to it was certainly impractical.

“‘Are you crazy? How is my furniture going to get to Robben Island?’

‘I’ll organize a trip for you,’ he said. ‘Go, decide, and I’ll come back to you. The president must give you authorization.’

“You know? So, we did it. I remember walking around the quay in Cape Town. I went up to one of the wardens who was wearing the same uniform as my husband, and I said to him”—in the girlish voice she’d used to greet uncle officer—“ ‘please tell me, where’s the boat that goes to Robben Island?’ And he says, ‘there she is, the Suzan Kruger.’

Named after the wife of the Minister of Prison Services, Jimmy Kruger, the ‘Susie’ was built as a pleasure cruiser with a lounge, bar, and other “holiday features” in 1959 and bought for what would today be more than \$16 million USD from a German company.<sup>3</sup> Before “Susie,” she was called the “White Lady” and was the main mode to transport prisoners and staff to the island. In an interview for the Robben Island Museum and UNESCO World Heritage Centre, one former prisoner, Mr. Madlavu, recounted,

“As we entered the boat we were kept below the deck... The travelling on the boat itself to the Island was historical in the sense that I had never been on the sea before. It tended to make some of us want to vomit and we felt that we were now being cut off from society and we would never come back. Never see our families and our friends and I remember one of my co-accused mentioning that when we return we should not expect to see our parents alive... it was as if an umbilical cord was being cut.”<sup>4</sup>

Noeline’s furniture, the harbor wardens told her, would go below deck on another boat.<sup>5</sup>

The steely cart brings us into tannie Evie’s room in B wing to release to her, like Flora, a single blood pressure pill. Last month her daughter Mona hung a gold fleur-de-lis frame with picture of herself, Evie, and two small children at a beach, altogether kneeling in the sand, faces lined cheek to cheek and squinting at the photographer.

Noeline has a similar choreography for administering medicine. First, so as not to surprise by swooping in from the side, you make eye-level greetings, kneeling or squatting down to meet the sitting or laying resident. Establish a gaze, an endearment, for the purpose of this moment—take what you must, what is good for you—followed by a tender kiss to the cheek. It’s enough to make you swallow the pill.

“I was only married six months when we went to Robben Island in 1973.”

“It was fresh, fresh then.”

“Fresh, fresh! And so we started *our* journey.”

Looking at a map, Robben Island appears much farther out in the Atlantic Ocean than 7 km northwest of Cape Town’s presently glittering touristic Victoria & Alfred Waterfront. The island is surrounded by jagged reefs and long-sunken ships and has been inhabited by shifting populations of seabirds, seals, penguins, social pariahs, and prisoners since the earliest days of colonial settlement.

It is the site of the first prison to hold indigenous peoples who whites did not see as sovereign—the Khoi leader Autshumo and his niece, whose name remains unknown aside from Krotoa, or !Orolōas, meaning ‘ward-girl,’ reflecting role of interpreting between the European settlers and her people. The island has also housed ‘lepers,’ the ‘insane,’ and other medically institutionalized peoples, and most famously, the maximum-security prison detaining oppositionists to the National Party’s apartheid rule.

It also takes a village to maintain these institutions, ordinary men and women whose daily labors of dockwork, deliveries, gardening, and childcare sustain the families of the people who sustain the carceral complex, the people who tears others’ families apart.

Mandela and seven other men of the African National Congress and South African Communist Party were sent to the island in 1964 to live out a life sentence following the state raid on their headquarters in Rivonia and subsequent trial. Their arrival also marked the prison’s expansion. Blocks D, C, B, and A were newly built—D for political prisoners.<sup>6</sup> Mandela biographer Anthony Sampson wrote of those early years, “simply, white prison staff were usually of Afrikaner stock, ill-educated and powerful. These were mainly young men and women”—women, however, who have never been previously named or discussed in this carceral tale—“the likes of whom had prompted James Baldwin’s observation that ‘ignorance, allied with power, is the most ferocious enemy justice can have.’”<sup>7</sup>

Conditions were brutal. Prisoners were tortured—beaten, starved, some sometimes nearly buried alive, their heads pissed on by guards. Many died. Throughout the 1960s, prisoners organized hunger strikes and other protest actions against their conditions and

with new detainees from antiapartheid and colonial struggles across Southern Africa. The prisoners' smuggled-out letters and the very few visitors' accounts drew global attention. The International Committee of the Red Cross sent inspector Godfrey Senn to meet Mandela and others in April 1967.<sup>8</sup> They discussed the prisoners' living conditions and health related to prison labor—constipation and skin problems from crap diets, baton beatings, stress hernias, hypertension, permanently damaged tear glands from smashing limestone in the quarry. Prisoners successfully petitioned the administration to relieve men over the age of 60 from this specific duty.<sup>9</sup>

“Prison ages you, Noeline,” I say—a few places in America do “compassionate release” for prisoners nearing the end of a life accelerated and shortened by ordered savagery.

“Of course it does. You miss your family, you don't know anything about your finances, you don't know anything about your family. Unless it was very high tragical thing like death or birth in their family, we didn't want to tell them news that would upset them unnecessarily. They've got enough to work through.”

Senn's reports helped to build international pressure for improved medical treatment of the prisoners.<sup>10</sup> He returned to Robben Island in August, September, and October that year, accompanied by medical delegate Simon Burkhard, and activist and Progressive Party Member of Parliament Helen Suzman became the first woman to visit the prisoners. Following further public outrage, Colonel Willie Willemse replaced the callous Piet Badenhorst as Head of Prison in 1971 to improve Robben Island's overall conditions, encouraged by Commissioner of Prisons General Steyn. And after that, the state granted international organizations regularly scheduled inspections.

Noeline and Rickus rode the waves of these changing political-carceral conditions to their new life on the island, both working for Correctional Services. They were given a little house next to the sick bay among small community of 500 married and single individuals working and living there.

Rickus worked the political prisoners' finances—“there were lots of donations coming in. The political prisoners were not poor people. They had personal tastes. Say for

instance, oh, one little example, was that they didn't want to use the toothpaste we gave them, so they ordered their own. So, he handled all that, seeing that the demands were met.<sup>11</sup>

“And me, Casey, I was the first woman to walk in and work there since they opened it. They looked at me like, are you real or are you a ghost?”

Noeline's duties are glimpsed by Fran Lisa Buntman in an interview with Willemse who described changes in wardens' practices as paralleling that of medical staff working on the island: They “still segregated prisoners on racial lines...but had a very strong emphasis that prisoners have to be dealt with in... the spirit of the international standard—the Red Cross—which asks of staff to be professional, to regard his clients the same way as the nursing sister would be regarding patient, and not to ask what your politics are, what your religion is, what your ethnicity is, but to deal with them as human beings and apply policy.”<sup>12</sup>

Better treatment was both a policy application and a political calculation. Mandela's former guard Christo Brand wrote, “it was better to take care of Mandela's health than have him die a martyr” in prison, as other detainees had due to extreme environmental conditions.

“Was it just Correctional that employed you?”

“And the Department of Health and the Red Cross,” she says, brushing away a fly that's come in through Evie's window, “those two were my direct supervisors. The most interesting thing for me was to work with the Red Cross. They were just so many steps above us”—her ringed hand passes above her red hair—“and they wanted their clients up there too. TB tests, dentist and physician exams. I had an X-ray machine, so we took them every three months, and sputum tests. They wanted to see that the men were well looked after—if they got healthy food, fresh water and the like because the water was very salty. You know salt water is not good for the body. It causes hypertension. We made sure the kitchen was hygienic, the food clean, the bedding nice. It was all kept on file. So, when they came, we had it ready for them to see. We were trying to be preventive. And if this work wasn't done—trouble!

“In the mornings, early, 7 o'clock, I'd go to give them their medicine, check to see if anybody's sick from the night before—more people get sick at night, neh—if everybody's alright, nobody's lying in the bed with flu. I did their fissure therapy and dressings for



injuries from playing football, rugby, tennis, cricket, and the like. Then, onto the medium-security prison which had the short-term prisoners. Remember, I always had a warden with me because I never carried a key.

“After them, I went back to the sick bay for the members”—the residents of the prison’s little staff village—“to do my rounds, weigh babies, inject babies, and all that. The worst I saw there was a ruptured uterus, 7 months pregnant.”

The television playing a rerun of the Afrikaans soap opera *7 de Laan* segues to a commercial for a bargain on chocolate bars at a green cross-branded pharmacy chain. We leave Evie behind. Onto the oxygenated Mrs. Raath. The mask comes down for three pills to go in. After that, Mrs. Schoeman gets two. Eugene gets three and ointment for his missing ring-finger nail. Trish, a lozenge.

“You did this all by yourself?” In Grace, she’s at the top of the chain of command, or Sisters Marina or Janice depending who’s on duty. Then the auxiliary nurses, then the nurses’ aides. Angel has the final say as to who’ll be brought in.

“There was a medical team, male medics, and me. I trained some of the political prisoners to also be medics. To work in the chemist for me, packing the tablets, doing the filing. I had four or five of them. We had an ambulance. We were enough to, to meet the needs. The physicians and urologists and the highly specialized people like that couldn’t come to the island. The District Surgeon did once a week from Cape Town in the morning to consult with us and the inmates and go back in the afternoon.<sup>13</sup> They were well looked after, but they had no freedom.”

I remember taking a tour of Robben Island in 2004, ten years after the country’s first free elections and Mandela’s ascent to the presidency. The tour guides at that time were former prisoners. One of the guides told me and the group, a group of bewildered white and black American college students, that he’d been electrocuted by a guard until he defecated. It was punishment for receiving a suspicious letter from his family, assessed by a staff member to be communicating something of political importance.

“But it was awful for them, Noeline.”

“It’s true too. It’s not a lie. I’ve been there, and I saw it. It was difficult because you’ve got the discipline side of things and the medical side of things. And discipline does not always agree with what medicine does. So, you were in a consistent fight for standing up and saying, ‘listen, this is what I’m trained for. These are my qualifications. I will respect and abide by you when it comes to discipline, but you, do not interfere with my work. Ever.’”

“It was as if the wardens are just making work for you. Because the conditions were bad, their health suffered, and then you end up treating them. It’s a back and forth.”

“But I was cheeky. They couldn’t circle up with me. I used to say to the commanding officer, ‘here’s my certificate—four years of training and a degree—where’s yours?’ They sewed up fast!”

Toe-to-toe. Boots. Barking. At first bite, nursing is mostly women’s work—Bethal’s the only male on the nursing staff at Grace—prison is mostly men’s work. Correctional nursing confounds this divide that’s built into the institution. Keep sexes separate there—“there were no women wardens,” she says, and there were no women prisoners—and here—unless you’re a married couple (just one these days in C wing, Mrs and Mr Burger). No sex there, and here.

“In those days, we worked a special boat in the middle of the night. Say, someone had terrible pneumonia or bronchitis, something I wasn’t capable of handling. I’d tried all the antibiotics I had and other things but now they’d need a drip. So, I’d find the crew of that boat and say, ‘Mr. So and So is very sick. I want two guards, and I’m going with.’ If the waves were too much, they sent a helicopter. And if the wind was too much, they sent an old Cessna. I was there to stabilize oxygen, band them in. I felt it was my responsibility. The guards didn’t see it that way, but I knew it was what I had to do.”

“Eleven years with some of these men. How could you not?”

“I said to myself, ‘why must this man be alone when he is sick? I don’t want to be alone when I am sick.’ No one wants that. So, I was there, holding their hand when they got to the hospital on the mainland. It was Somerset Hospital”— where they also sent woman of the island village to have their babies—“When we got there and they saw the men holding

on to me, saying ‘don’t leave me, don’t leave me,’ those white nurses would look at me like... I’d just think to myself, ‘bugger off!’”

Do no harm. And yet. The meeting of her colleagues’ eyes, I imagine, set her on fire. “It’s incredible. Like Matron Steele at Garden City Hospital. They couldn’t believe what they saw. Do you think they were... resentful is not the right word, but asking themselves, ‘how could she help Mandela and these other men?’”

“They said to me that I’m a... well, I’m not allowed to say that word. They told me I was a...”

Turning the corner, the cart veers to meet an end table with a vase of fake gladioli—the floor’s still a bit wet from the morning mop, we guess. The metal tray holding paper towels on the cart’s lower shelf spins into the low air like a flying saucer and lands on the tiling.

The sharp percussion censors what I think she’ll say and makes my skin crawl. I always say “sorry” when things fall apart.

“I said to them, ‘This is what I’m trained for. This is what I’m getting paid for. Do you see the inside of their hands? The soles of their feet? They are white. They didn’t paint themselves black.’”

Maybe an appeal in colorism was a good counterpunch among white people back then. It still is for a lot of white people today, not caring if someone is, say, “purple, yellow” or “polka-dotted”—it’s just the “person” that matters in the post-racial fantasy. I turn over the little tower of Babel pill cups that toppled in the crash. She recollects and recounts the pills.

“You know, when the prisoners were sitting and eating their meals, I used to talk to them about medicine and things, because the political prisoners were highly intelligent people. And I’d say to them in these sessions, ‘Listen. I didn’t put you here. I don’t know why you’re here. And I don’t want to know.’ Nelson Mandela once said to me, ‘Please read the Rivonia Trial.’ And I said, ‘no, I don’t want to.’”

“You didn’t want to?”

“No. I am here to look after you—your physical well-being. I am here to care for you. I’m not interested in the political situation. I don’t carry a gun. I don’t carry a key. I only carry injections and medications. So, I don’t want to know.”

“The respect I got from those people, Casey, you will never understand. It was because I gave them my time. I wasn’t judgmental. To me, and my husband, they were human beings. I felt that when we would sit together and watch movies, having coffee and rusks together and those things. They would try to tell me their stories, about what was happening politically, and I said to them, ‘don’t talk to me about politics, please, because I don’t know what you’re talking about. It is not my field, and I am not interested.’ I told them, ‘I was 19 when I worked with my first African man’ and they said, ‘Oh!’ because they knew I meant I worked with their private parts. ‘Of course,’ I said, ‘when you nurse, you learn to catheter.’ People are in need.”

“Indeed.”

“This is about the human being. I used to say to them, ‘Apartheid, yes, I know it. I was born in that era. I didn’t ask for it. But I want to prove to you that I am not a racist.’”

You hear me say, “yes, I know” to her—It’s not a disconfirmation of what she’s saying, and yet it is. I want to know where she is going now in the tale, and where she’s stood before today.

Angel walks past us in the other direction, folder-less. Behind her are Precious and another auxiliary nurse, Mhambi, arms sappily entwined, talking in siSwati—something about someone’s husband doggedly coming home from a long trip. Noeline’s stopped recollecting spilled pills.

“You know, the day that I left Robben Island, it was in the middle of the night. They wanted no one to know there were three political prisoners on that boat, you see. They were being transferred to Pollsmoor Prison, and we went along with them. I sent my children ahead first, and then the furniture. And one of the wardens from security phoned me and said, ‘please, don’t get on the boat yet. Come to the prison. Walter wants to see you’—Walter Sisulu.”

“My God.”

“Walter was there. Oliver Tambo was there. A lot of them. I want to cry when I think about it.”

In seconds, the soft flesh around her eyes visibly, gently swells. She’s suddenly in what I believe to be true tears—a watered antique rose. Of course, I’ve now forgotten the takeaways of that oral history methods book I read, written by a theologian, with a chapter titled “what to do when an interviewee cries.”

“Casey. He took my legs. I mean, he went down on his knees and touched my legs. He said, ‘We all know—God knows—what you’ve done for us. We’ll never forget you.’ They were crying. I was crying. I said to him, ‘please, get up man, don’t be standing on your knees like that, you should only be on your knees to pray.’ ‘Well,’ he said, ‘I’m praying now to say thank you to you.’ It was traumatic. It was. If I think about it, I see that old face and white hair, the ripples in his face.”

She recomposes her own with one of remaining paper towels I hand her from the cart that did not enter low orbit.

“Sorry. It’s hard to talk about. The boat couldn’t leave because of us holding them up. And when I got to the boat, there was a huge arrangement of flowers for me.”

Writing about victims of state violence testifying at the post-apartheid Truth and Reconciliation Commission, South African psychologist Pumla Godobo-Madikizela understood past events become inextricably tied to the present in peoples’ storytelling. They cannot be construed as a basic reconstruction of facts—and here too as Oliver Tambo was never imprisoned on Robben Island despite her claiming his being there in that final moment.

After hearing hundreds of testimonies, Gobodo-Madikizela explained that *traumatic memories* are based on a range of impactful past experiences that become “touchstones for reality” insofar as they become part of one’s present-day storytelling—others Noeline tells me, of treating shipwrecked, hypothermic Chinese fisherman with blankets and old brown brandy, of limbs of prisoners crushed in the construction-related collapse of the old foghorn, of a dozen-plus prisoners dead one afternoon from drinking from a drum of paraffin that had washed ashore.

These touchstones all too brightly whiten one's visions of reality—visions that include the most extraordinary others. The dead, as ghosts or ancestors, forever linked to the survivors, the living, and people who were supposedly not even there.

“Goodness!”

Med pass ends. Shes hand off the cart to the nurse's aide. Rinse the cups, toss the gauze.

Back to Bea's room, next to Evie's. It's already mostly bare. The closet has a few hangers and two robes. A box with two bibles, a hot water pad. Here's the end-table drawer. Here's a receipt from Spar for salted macadamias.

Here's a note from one Barbara Jean, a friend of Bea's daughter—it says, ‘happy Easter, Luvie,’ and a phone number.

“It's hard, Noeline. There's mom and dad, and then there's me. I just think, ‘what will I be able to do for them when the time comes, you know?’”

“You don't have to do something when the time comes, Casey.”

I know what she meant—“you do it now.”

“There's nothing nicer than a phone call. Pick up the phone and say, ‘mommy, I love you.’ Tell them they're important. Tell them you love them.”

“They're doing some practical things. They've downsized to a smaller place, kind of the like the cottages here for the folks who don't need the frail care yet. Someone else can take care of the garden, or the snow for them. But I know what you mean, it's giving love in the meantime.”

“They must know and acknowledge it. They must know in their heart that while they're here, you are thinking of them. Talk to them. And if you've got the time, go to them.”

“Thanksgiving maybe. It's like a braai for us. I mean, if you did it with a huge turkey.”

“We'd eat that at Christmas!”

The room's barer now. The closet robes folded and slipped into a paper bag. We'll keep the two bibles for the new grannies. The second bed will need a mattress pad and sheets. Both beds will get scrubbed down.

I fold the note from Barbara Jean. The end-table drawer's empty now.

“Did doing geriatrics, palliative prepare you for it? This place?” I ask.

“Well... my father, he died of liver cancer. I saw him getting yellow, thinner, getting helpless, frustrated, depressed. As if he didn't feel like living anymore. I got a caregiver for him because my mother had her grandchildren to look after. She walked him, dressed him, fed him. But I saw what a caregiver actually meant to him. He was never alone.”

An agency nurse, someone like Lindiwe who left last month. Flexibility, better pay maybe. Just one soul to look after on this contract.

“He was only 76 when he died. My mom was 82. Same story where her organs backed up and she needed care. I realized it was essential for them not to be alone. And that tomorrow is another end. So I sat with my father on his bed, and I said to him, ‘are you ready? Is there anything you want me to do for you?’ And then he said to me, ‘my circle is completed.’ I was lying with him on the bed. He closed his eyes, turned his head, and he was gone.”

“My God.”

“Peaceful, happy, realizing what was happening with him, and telling me so. Up to this day, when I sit here with these people who are about to die, I say to them, ‘do you feel like you've achieved everything in your life that you wanted? Is your circle completed?’ Some say yes, and some say no, or ‘I want you to do this for me,’ this and that. That is life.

“Life is a circle.”

“And precious. It is precious, a blink and it's over. After 50 years of nursing I can still remember my first day when I walked into the ward in Oudtshoorn. I can still remember how those brown shoes squeezed my feet, and the starch uniform with this belt and things—jangling epaulettes—it feels like yesterday.”

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“Hello?”—I’m calling her on Facebook Messenger, her daughter Crisma’s account.

“Casey, I quit. It was time.”

Goodness and another nurse’s aide stayed late at the week’s end to help her do the scrub-down. Monday came. Two grannies moved in, not Black. Angel’s executive decision.

She knew when she saw the white adult daughters came early to do a final walk through of their moms’ new room-home.

“I said to her, ‘you see these hands? These hands washed this room, and now you come and put two white ones in here? You are a racist! You’re going to jail, mama. I’ll open up this whole thing and show the town and who’s donated to you what’s really going on here.’”

It was heated. Her son, Rickus Jr., encouraged her leave. He works in HR.

“What a mess, Noeline. People have problems with these things. We only just had our first Black president a few years ago. It’s hard for some to ever change. They’re hard-noses.”

“Darling, they must get over it.”



<sup>1</sup> This chapter is based on direct participant-observation with this individual between March-May 2015, and one- to two-hour long interviews on 9 October 2019, and 2 September 2022

<sup>2</sup> Originally built as a hotel, in 1949 the building “was bought out by the Cape Provincial Administration and became a nurse’s home, library and administrative office for the training college. It was named after Sharley Mary Cribb (born Steere), the first Organising Secretary of the South African Nurses’ Association, who had died 1946. She is remembered for her tremendous service in the cause of nursing reform which led to the Nursing Act of 1944, and the establishment of the South African Nursing Council which enabled the profession to govern its own affairs.”

<http://thecasualobserver.co.za/port-elizabeth-of-yore-from-sundridge-to-the-sharley-cribb/>, accessed 8/10/2021. On the history of Tygerberg, see: <https://www.sahistory.org.za/place/tygerberg-hospital>, accessed 8/10/2021, and on Karl Bremer, a hospital named for a National Party politician that allowed for ‘non-European’ nurse training in 1957, see: [https://en.wikipedia.org/wiki/Karl\\_Bremer\\_Hospital](https://en.wikipedia.org/wiki/Karl_Bremer_Hospital), and [https://en.wikipedia.org/wiki/Karl\\_Bremer](https://en.wikipedia.org/wiki/Karl_Bremer), accessed 8/10/2021

<sup>3</sup> Christo Brand with Barbara Jones. (2014) *Mandela: My Prisoner, My Friend*, 31.

<sup>4</sup> See the history of the Suzan/Susan Kruger boat:

<https://sahris.sahra.org.za/sites/default/files/additionaldocs/Susan%20Kruger%20background%20for%20SAHRA%20%20application%20doc.pdf>, accessed 4/17/21

<sup>5</sup> The Blouberg, see: [https://www.robben-island.org.za/files/publications/Integrated%20conservation%20management%20plan/icmp\\_chapt1.pdf](https://www.robben-island.org.za/files/publications/Integrated%20conservation%20management%20plan/icmp_chapt1.pdf), 8/6/21

<sup>6</sup> See layout of the blocks and hospital, [https://www.robben-island.org.za/files/publications/Integrated%20conservation%20management%20plan/icmp\\_chapt1.pdf](https://www.robben-island.org.za/files/publications/Integrated%20conservation%20management%20plan/icmp_chapt1.pdf), and Mandela’s artistic rendering of the hospital ward. <https://belgraviagallery.com/artist/nelson-mandela/the-ward/>.

<sup>7</sup> Sampson continued, “The black warders, also victims of the violence driving the apartheid policy, which had turned them into instruments of their own oppression, were a mostly more benighted version of their paler brethren.” In Steve Biko’s (1977) Black Consciousness perspective, black warders and police were considered ‘nonwhite’ people, rather than Black, in resigning themselves from their communities’ quest for freedom and working within the white carceral system of which they would never fully be a part.

<sup>8</sup> Georg Hoffmann was the first ICRC inspector to see Robben Island and meet the prisoners in August 1964. Likely fearing the prevention of future visits there, Hoffmann’s report was ‘subdued’ and the apartheid state cherry-picked parts of the report to publish publicly in the South African press in 1966 that prison conditions were not terrible. These selective accounts were also presented to the UN. “In fact, the ICRC had very nearly been expelled from South Africa precisely at the moment when allegations of “defending and sheltering white supremacy” were surfacing with great fanfare in the UN’s General Assembly. Godfrey Senn’s inspection from 5-10 April, 1967 included photographs and recorded interviews with Mandela. While sympathetic toward their cause, Mandela saw that Senn was also “acclimatized to the very racism of which he was a critic.” Thompson, A. (2016). “Restoring hope where all hope was lost”: Nelson Mandela, the ICRC and the protection of political detainees in apartheid South Africa. *International Review of the Red Cross*, 98(903), 799-829. doi:10.1017/S1816383117000522.

<sup>9</sup> Brand (2014, 39)

<sup>10</sup> See some brief accounts here, <https://www.icrc.org/en/doc/resources/documents/interview/south-africa-interview-140510.htm> - and here, [https://www.icrc.org/sites/default/files/document/file\\_list/icrc-during-apartheid.pdf](https://www.icrc.org/sites/default/files/document/file_list/icrc-during-apartheid.pdf).

<sup>11</sup> Brand (2014, 125-126).

<sup>12</sup> Buntman, Fran Lisa. *Robben Island and Prisoner Resistance to Apartheid*, Cambridge University Press, 2003.

<https://ebookcentral.proquest.com/lib/unh/detail.action?docID=255162>, 197-202.

<sup>13</sup> Brand (2014, 57, 61) wrote that Mandela was seen by a (male) medical officer everyday who acted on a government doctor’s orders, the doctor coming once a week from the mainland, along with periodic visits by a dentist and a fortnight visit by a psychiatrist. Also, “like all prisoners his age, Mandela has annual medical checkups on the mainland” and met with an eye doctor for quarry-related injuries and an otolaryngologist. These mainland trips were clandestine as wardens feared it an opportunity for prisoners to escape. While Mandela met with these doctors, Brand stood outside the consult room with a 9mm handgun. His colleagues carried machine guns. “Luckily, Mandela never really seemed to get sick at this time. He would perhaps have cough medicine occasionally, but that was all.”

## **Book project overview (excerpted from full book proposal package)**

*Comfort Measures Only* is a narrative nonfiction book that centers the memoirs of a mixed group of people in a small-town old age home and asks whether they can overcome a haunted past. That past is apartheid, the nearly-50 year system of racial segregation and dispossession under white minority rule that forever wounded the lives of the nonwhite majority in South Africa, as well as the more local legal and spiritual troubles of the home being built on top of a Black community's graveyard. 2024 marks thirty years since the end of apartheid. The current passing of the aging generation of its primary promoters, resisters, and others in-between presents a possible turning point for the future of the country and others like the US that mirror its history of racial inequality.

The book frames this turning point as one of white dying, which bridges the book's main themes of aging and racism. As with the celebratory reactions to Queen Elizabeth II's death on Twitter by Black African and postcolonial countries' citizens around the world, we see how white dying embodies global histories of colonialism. Pop psychology writing asks whether older adults are more racist in general. At the population level in the United States, white dying hearkens to a demographic shift where Black, Brown, Indigenous, and other people of color will eventually come to outnumber white people as the majority white 'baby boomer' generation ages and passes on. Fears of white people and their power as a whole being diminished are again at the fore in conspiratorial talks of 'replacement theories' and 'white genocide' that inflame white nationalist movements to violence. The same conversations continue in places where whites have always been a racial minority but long held economic and political power, like South Africa.

*Comfort Measures Only* scales down these heated popular and political conversations about aging and racism to a deeply intimate and reflective level—end of life nursing care. Building on three years of immersive research, the book offers the life stories of several nurses and residents who live, work, and die alongside each other in a home I call 'Grace.' It is a unique place from which to tell their tales. Grace is run by an Afrikaner women's charity, and like most old age homes in South Africa, it was originally built to help and house old, poor whites. The apartheid government helped secure the land in the 1950s after forcibly removing a Black community and building the home on its graveyard.

Today, old age homes are an atypical late life housing option in South Africa. By comparison, in the US there are more than 80000 long term care facilities with 8 million residents (expected to double by 2030). In South Africa there are a little more than 400 formally registered homes where less than 4% of its residents are Black. Even some of the Black nurses who worked at

Grace had never heard of such a place prior to their training or hiring there. Grace lies near the safari behemoth and UNESCO site of Kruger National Park and in part of the country producing most of the world's macadamia nuts.

The individuals featured in the book are a mixed bunch. Inside the home are mostly white older residents, lower- and middle-class women and men who were part of the apartheid-era generation. They were born before or around the start of the apartheid era (1930s-40s) and variably fought against, benefited from, and lived through years of its racist policies. They were mostly middle aged during the political transition for Black liberation and Mandela's presidency (1990s). Today they are older adults or at the end of life. Grace's nurses and caregivers are mostly Black younger women of the born-free generation (1990s and later), daughters and sons of families who also actively or passively resisted the apartheid regime or worked within it to raise their families and get by.

The people of Grace offer interesting exceptions to the familiar contrast of whites being cared for Blacks in domestic-like roles and settings. Like South African schools, clinics, and other institutions, Grace was racially integrated after apartheid ended, and it now houses some older Black residents. These individuals range from indigent migrants who come to the home as charity cases through Black social workers, to the parents of a newer generation of upwardly mobile Black middle class adults—'Black diamonds'—who subsidize their care costs. In moving in, older Black women and men of the apartheid-generation become roommates with their white age peers—some comfortably and some not so much.

The majority of the staff are younger Black nurses and nurse aides, with some having careers as traditional healers, truck drivers, and police officers before getting into health care. Grace's head nurses ('matrons') and managers are older white women. Their more powerful positions reflect the home's Afrikaner heritage and a history of white women's social welfare projects supporting white nationalism more broadly. Among the white staff members is Noeline, the first woman to work as a corrections nurse at Robben Island Prison, and one who personally cared for Nelson Mandela, Walter Sisulu, Ahmed Kathrada, and other anti-apartheid political prisoners for over 10 years. She has yet to be mentioned in any histories of apartheid or auto/biographies of these world-famous men. Christo Brand, who guarded Mandela for nearly a decade at multiple prisons and authored *Mandela: My Prisoner, My Friend* (2014, St. Martin's, 272 pages), corroborated her presence for me in email conversations via The Mandela Foundation—she was there.

In 1999, Mandela made a speech for the UN's first International Year of Older Persons and near the end of his presidential term. He asked South Africa's citizens to reflect on what older adults

had done for (and to) their recently freed country. “Their sweat and blood laid the foundations of our democracy and built the infrastructure for future generations,” he noted, recalling their role in fighting against (or supporting) apartheid. “A society that does not value its older people denies its roots and endangers its future,” he continued, asking South Africans to also care for them when they could no longer do so. At the time, Mandela was 81, foregrounding questions how to honor older adults as elders (or which ones to honor) and who cares for whom.

Stories from the people of Grace and the juxtapositions that color their daily lives and deaths show that there are no easy answers to these questions. Importantly, this book shows that much of the political furor around the loss of white power, as a lever for Black empowerment or otherwise, may not matter—at least from the perspective of Black nurses and caregivers especially, and from most of the older white and Black residents themselves.

The stories they shared with me and featured in *Comfort Measures Only* more so reflect their concerns for their families, the memories of the bitter and sweet moments that marked their lives, and how they juggled different identities over the course of their lives—as daughters, mothers, and grandmothers, as sons, fathers, and grandfathers, as spouses and widows, and now in the home, as givers and receivers of care.

If there’s one thing almost everyone in the home told me, it was that they were “like a family”—just not quite fully. The title, *Comfort Measures Only*, is a clinical term for end-of-life nursing procedures where life-extending treatment is withdrawn and also suggests that there are limits to relationships between people who’ve been primed to hate each other. They must still somehow get along—amicably, politely, just to keep things comfortable—given their delicate work-life circumstances of the old age home.

South Africa’s history of violence cannot be displaced in retelling their stories. It has inevitably shaped their varied friendships or distaste for each other, as well as their social erasure. As in many countries, ageism and racism make both Black people and older adults out to be peripheral people. In the case of Grace, their respective lives are also made mutual by their dependence on the old age home – for one group, the mostly Black nursing staff, it is a place of wage labour to make a living amid 30-60% unemployment, and for the other, the old residents, it is a place to go on living in late life when there is no one else to care for them (or no one wants to). Despite their differences, they’re tied to each other within and by a system of oppression.

*Comfort Measures Only* is based on seven years (2015, 2017, 2019, 2022) of immersive research—ethnography—in Mpumalanga, South Africa, including multiple in-depth interviews with individuals,

participant observation of the home's goings-on, and review of archival records like the home's property records and related government documents. In a range of one week- to four-month visits, I spent 20-30 hours per week at Grace where I helped to feed and ambulate residents, participated in leisure and spiritual activities, and aided in non-clinical duties. I observed daily nursing and care procedures around activities of daily living (toileting, transferring, bathing, and the like), as well as the home's general operations like the intake of new residents and liaising with municipal and nonprofit social services related to elder care like hospice. Outside Grace, I visited other old age homes in the area as well as staff members in their communities. (For Black staff members, these were located nearly an hour away in former 'Native reservations' created by the apartheid government called 'homelands.'). I accompanied staff on shopping and business errands and went on occasional day-trips like safaris with the residents.

From all the people I met and interviewed across three years of research, I have selected a handful of individuals – four nurses, three residents, and the manager – and draw on their experiences to structure the narrative of the book. Elder care entails intimate, often-difficult work of aiding the aging and dying, as well as reflecting on our own and others' mortality. *Comfort Measures Only* centers this mutual gaze by recreating conversations between myself and these eight individuals amid daily life in the home.

### **Book Structure**

*Comfort Measures Only* is written as a work of creative and narrative nonfiction. It uses a hermit-crab like form and method to convey the bigger story of white dying in the wake of apartheid through a narrative progression loosely structured as single-day, room by room tour of the old age home. In each room or space, readers learn about aspects of the home or meet one of the eight main individuals, all of whom are featured in their own chapters. Ancillary staff members, residents, volunteers and visitors, all of whom I met or documented in my research there, also appear throughout the book as minor characters to support scene descriptions and interweave the main individuals' storylines.

The book is written mostly in first-person perspective through me as the author and main narrative voice, and the eight featured individuals through dialogue drawn from extensive interviews and field notes. Each individual essentially offers a memoir about their life, work, and thoughts about aging, racism, and what matters in the end. In each chapter, the narrative briefly and consistently scales back from the dialogue or scene to give more in-depth or broader contextual

detail about the person, the home, and the country in global or historical perspective. This helps draw in readers unfamiliar with South Africa-specific details, and it helps to shore up important differences between South Africa and the US or other multiracial democracies where popular assumptions about their similarities might prevail.

To convey a sense of immediacy in touring the home and the realities of aging and racism that affect us all, the narrative also intermittently moves to the second-person perspective, addressing ‘you’, the reader, as someone who might be on such a tour as an aging person or for an aging parent. While mostly set in the present tense, the overall timescale is non-linear. This reflects the different sense of time’s passing for some residents with dementia and allows me to include chapters based on events with main characters that took place outside the home.

After a prologue that brings readers on a road trip through the nutty subtropical countryside, the first chapter transitions into the old age home’s waiting room and then onto meet the manager, Angel, in the second chapter. The book then oscillates between these two chapter types—longer dialogue-driven chapters of 5500-6500 words based on interviews with an individual resident or staff member, and shorter chapters of 3500-4500 words based on observations of everyday goings-on in and nearby the home. The book ends in a chapter with a deathbed scene and then an epilogue.

The eight main individuals are not meant to be fully representative of any group in South Africa or elsewhere. They are real individuals, rather than composite characters, and some of them have passed away since our initial research encounters and interviews on which their chapters are based. *Comfort Measures Only* reveals how they were caught up in larger historical forces. In order to survive or make do, some made compromised ethical decisions. Some were, at their word, only partially aware of how their decisions played into or supported violent regimes, or not so concerned with how their nursing work sustains the lives of those who did. Foregrounding memoir-like stories also shows how contradictions and mis-rememberings come to define peoples’ lives, and in effect, complicate and re-write histories of racial violence that get overdetermined for taken for granted.

### **Annotated chapter outline**

Prologue            You need two things to make it out alive on any road trip, a map and snacks. We open on the road to the small town old age home as it winds through a countryside marked by the world’s largest macadamia producers and road-side market stalls among the blue gum trees—there, a widow sells me a bag of nuts. In a prose-poetic form that grounds the book’s narrative voice, we learn about the initial motives to explore this topic and part of the world, and question

what it means to be old, and what or who is a home. (This chapter is written and included in the book proposal package.)

Chapter 1 - Waiting      Waiting rooms are strange places. They bring you from the parking lot through to your main destination, portals you pass through from the ‘real’ world to one more extraordinary or special. This chapter introduces the home by waiting in and passing through the foyer to meet the manager. We read key information about the home in its welcome signage, operating licenses, news clippings and other bits of paper and craftwork hung on the wall. We also catch initial glimpses the people inside, and see ourselves on the home’s security camera monitors. This chapter also scales back from these impressions to introduces readers to some of the key ideas in the book of white dying, whether older adults are more racist in general or in a place like this specifically, and what waiting means—for social change in the country, for a better life, or for death. (This chapter is partially written, and an excerpt is included in the book proposal package.)

Chapter 2 – Angel An apt pseudonym for a woman who runs the home for a charitable home affectionately known as ‘heaven’s waiting room,’ Angel oversees daily operations. This is the first dialogical, autobiographical chapter of the book. Angel is an ultra feminine, but no-nonsense Afrikaner married (and since-widowed) woman. Her mother also lives in Grace. She explains the home’s room and board costs and local competitors, their charitable scope vis-a-vis state grants and subsidies, and how she brings in new residents. This means working now with black social workers and doctors and overcoming previously segregated admissions to make up a place where everyone, white or black, is ‘like a family.’ She introduces us to Noeline, the head nurse, and we begin the tour.

Chapter 3 - Heartaches      It is shift changeover. After prayers and a warbled multilingual hymn, the night nurse Janice reads aloud the matters for Noeline and the staff to watch for—incontinence, wandering, fall recoveries, bedsores. This chapter hones in on the residents’ chronic illness experiences, physical ailments of aging in place, and the tired but valiant efforts of the nursing staff who deal with people who are sometimes seemingly ungrateful for the aid.

Chapter 4 - Precious      In a house full of widows, this chapter centers the tale of Precious, a black auxiliary nurse. She married a man named Sono (the Sinner) whom she loved intensely, fell out of love with, and then came to love again just before he mysteriously died, the premonitions for his passing coming to her in a Garth Brooks’ song—“If Tomorrow Never Comes.” In her early 30s, she became a widow, juggling workplace bereavement leave policies and her in-laws mourning customs with single mother-hood two to teenagers. She’s not the same as the mostly widowed white women charges, and yet she is—a woman as a wife who loved her husband despite all his good and rotten

qualities, and a woman who wishes for a life beyond a marriage ended in death. (This chapter is written, adapted from a chapter for an edited volume on widowhood to be published by Bloomsbury, and included in the book proposal package.)

Chapter 5 – Gifts In observations of expired luxury groceries, old romance novels, teddy bears, and pancakes, we get to taste or touch the goods donated to the home and the goods residents and staff make to sell as a way to raise money. Among all the stuff, we hear from a resident that ‘yesterday is history, tomorrow is a mystery, and today is the present is a gift that’s given by God.’ One takeaway from this greeting card quip is that material things don’t matter so much at the end of life. Another is that conversations with many of the residents about their country’s past are lost to fading memory or disregarded in their shortening days of life in the home.

Chapter 6 - Andrew Gay and lesbian older adults often go back in the closet in old age homes. Andrew, an older white resident of British heritage narrates a life of moving in and out of secrecy as he’s lived mostly in strait-laced and sometimes-repressively conservative Afrikaner communities. After meeting the love of his life at their office job, they married in secret by an Anglican priest, kept house, and raised puppies for fifty years. When they could no longer care for themselves, they became “friends” and moved into the home where his husband passed away shortly thereafter. Detecting my gay identity, which I also kept covert, Andrew confides in me as we watch Pride events on television and share cigarette breaks in the garden. He’s the nurses’ go-to for gossip and shopping trip help. (Andrew passed away in 2021.)

Chapter 7 - Diversity How does the country’s traumatic history of racial segregation and dispossession get transformed into ‘diversity’ and other organizational buzzwords? This chapter sits in with Angel to watch a YouTube training session on spotty wifi run by a Black feminisms scholar. We eat cookies and listen. We reckon with Angel’s fleeting attention span and business-related interruptions and our attempts to interpret what we learn.

Chapter 8 - Bethal A young Black nurses’ aide, Bethel grew up in a multigenerational household. His family experience, especially watching his mother and grandmother care for his grandfather with dementia, led him to study nursing. He contrasts his professional successes with ‘cultural’ obligations to care for one’s family, contrasting this and other care duties to whites’ ways. More intimately, Bethal recounts his gender transition journey—from psychologists’ counseling, hormone therapy, and surgery—to the position of being the only male staff member in the home. In this role he is the one who mostly dresses, toilets, and bathes the male residents. By his job, he hopes to one day build his dream house (and perhaps find a white spouse).



Chapter 9 – Safari Here we go on a pre-sunrise trip outside the home with Angel, Andrew, Yvonne, and other residents to nearby Kruger National Park, a UNESCO site and one of the biggest game parks on the continent; munching on snacks and crooning from songbooks, the residents gleefully look for animals from the safety of the minibus windows. What they spy incites reflections on their families, former pets, former vacations, and aging. After a grill-out lunch of sausages, someone goes missing in the bush, and we wonder if we'll make it out alive. (This chapter is written.)

Chapter 10 - Goodness Flashing a shorn-off tooth, Goodness is married, middle age black woman nurses' aide and mother living with HIV. As a high schooler she was a member of the Comrades, an anti-apartheid movement active in the 1980s which doubled as a vigilante justice movement—both sought to stamp out “evil” in various forms, which sometimes meant killing old adults suspected to be witches in her community; she later trained to drive semi-trailer trucks and be a policewoman but quit after witnessing corruption. She went back to studying nursing and became well-liked by her Grace employers; Goodness describes the change of heart she felt for older adults after starting her job there and overcoming the home's initial strangeness.

Chapter 11 - Jokers The joke's on you. (*Who? I can't hear you!*) Amid the agonies of debility and communicative confusion due to directionless storytelling, hearing loss, multi-lingualism, and sudden or fading memories, jokes among staff and residents offer a much needed release. And sometimes, the jokes are racist. This chapter listens in on some of this uncomfortable laughter around jokes and cheeky behavior. (This chapter is written, partially adapted from selections from my previously published article in *Africa*.)

Chapter 12 - Yvonne An older white woman resident born in Bristol, Yvonne is part of a generation of Europeans recruited to migrate to and modernize South Africa in the pre-apartheid years; she recounts her family's settler moves from Cape Town to then-Bechuanaland to then-Rhodesia where she lived on a forest estate; as ZANU-PF and Robert Mugabe's Zimbabwean War of Liberation came to fruition, she trained and worked as a radio operator to fight the anti-colonial forces, surviving shootouts and saving some bullets as keepsakes. Saying she's had a good life, she's sure the future will be good too, a premonition she delivers with a shaky Pentecostal passion.

Chapter 13 – God After the weekly fire and brimstone bible study session in the parlor, Bethel, Angel, and Precious (who has since quit the home and being a nurse to become a traditional healer) offer some answers to the question, ‘what happens when we die?’ Waxing spiritual, they dwell in uncertainty about where souls go (and when or if they'll come back to affect us, like the deceased

Black community members buried beneath the property). Still, they stand strong in the belief that (a) God is near and protecting them, including from ‘witchcraft’ murders inside the home. (This chapter is written, partially adapted from selections from my previously published article in *Anthropology and Aging*.)

Chapter 14 - MaZulu Among the mostly white residents are two to three black residents, reflecting the home’s new race-blind, social worker-vetted admissions process. MaZulu is one of these Black residents. Always laughing, MaZulu’s storytelling is partial due to dementia but a source of joy for the Black staff who see her and other black residents as some of their own. She grew up near then-Swaziland, experiencing apartheid-related dislocations due to whites’ farms and game parks development; today, her upwardly-mobile daughter works in the game parks’ tourism industry, gaining means to place her mother in the majority-white home. It’s needed given MaZulu’s debilities. a former traditional healer, MaZulu’s stories also incite the Black nurses to contrast their profession with traditional medicine and healing, and the place and power of ancestors in our lives. (MaZulu passed away in 2021.)

Chapter 15 - Security Can an old age home be a place of cure, rather than care? Can indigenous beetles treat dementia? This chapter continues Goodness’s story as we travel on her day off to the edges of Kruger National Park. Winding through the dusty backwoods of the former ‘Native reservation’, we come visit a newly opened old age home called Hlayisekani (“security” in Xitsonga), run by and for Black people in the community. Goodness’s own aging mother made her place her there, and then bring her back home when she found the home was not curing her maladies. We meet the young male nurse who runs it and learn about families’ expectations for their older relatives’ care vis-a-vis traditional medicine and the overall novelty and necessity of Security. (This chapter is partially written, adapted from various academic seminar papers.)

Chapter 16 - Noeline A head nurse whose storied career includes being the first woman to work at Robben Island prison as a correctional nurse, she recounts her training, accompanying her warder husband, and caring for Mandela, Ahmed Kathrada, and other high-profile political prisoners. She and her family spent ten years there before moving to other state and private prisons and her current position; she reports deep friendships with the prisoners, and is well-liked by both black and white individuals in the home. Noeline’s experiences uneasily link moral duties to carefully treat patients with the disciplinary duties of work within prisons and other institutional spaces. (This chapter is partially written, and an excerpt is included in the book proposal package.)

Chapter 17 - The Circle The final chapter is slightly fictionalized. It closes with me, Noeline, and Goodness at the deathbed of an older white woman named 'Frikkie', a composite character based on several women who lived with dementia and one whose husband was rumored among the black staff to have been a state executioner. The chapter interlaces Frikkie's words, fragments picked from past conversations and interviews with these women, and fragments of nurses' stories and the general procedures they undertake in attending to any normal death in the home. (This chapter is written and adapted from a chapter for an edited volume on death to be published by Cambridge University Press and included in the book proposal package.)

Epilogue We conclude the tour with Angel, where it is surmised that she is an angel of death, one who forecloses the possibilities for forgiveness, reconciliation, and social change among the residents and staff, if not the nation of South Africa and other multi-racial countries still shaped by white supremacy and historical traumas of racial violence.

Endnotes An appendix of endnotes and references to background information and secondary source quotes' citations for each chapter completes the book.