

LLEWELLYN J. COPPEDGE, M. D. (Retired)

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Dear Blanche:

Soon after the last letter to you, I began to suffer
pains in the chest in the region of the heart. I went to my doctor
who ordered an electrocardiogram. When he saw it he ordered
me to go home and stay in bed. That has been about two
weeks and a half. During this time I have groan steadily
weaker. I see no prospect of my being ^{able} to visit my son
in Richmond or to go anywhere else unless it is to a hos-
pital. The hospital ^{here} is well kept but the minimum
charge for a room is \$28.00 per day. I have a little mon-
ey in the bank but I want it left to take care of the
expenses of my burial so that my loved ones here will
not have it to bear.
Any one 87 years old with all of my disabilities, should
know that he has not long to live.
Before I die there are certain things I want to explain
to you. Before I went to the Congo Mission in 1906, three
white women and three negro women had been sent out.
The first white woman, a Mrs. Adamson, died within
two years. The second, Mrs. Snyder, lived about three
years and died on the way home. The second ^{wife of Mr. Snyder} Mrs. Snyder, on
her way home after several years, reached England and
barely escaped with her life, after suffering an attack of
the dreaded black water fever, contracted in the Congo.
The three colored women lived and worked many years
and eventually, after a successful career, died in the homeland.
Two were in their eighties.
For years it was the policy of the Mission Board not to
send out any white women. When I arrived in 1906, I found ⁱⁿ five bachelors and a widow on our

Mission. The last two married couples, both colored (2)
but highly educated and successful missionaries.
Rev. Dr. Morrison, with whom I went out, was taking
his bride, a teacher and devoted missionary. In some
way Dr. Morrison had persuaded the Mission Board
to change its rule. Mrs. Morrison was kind and sweet
but quite stubborn. After four years on the field I saw
the need of a change and urged them to go home on
furlough. Instead, Dr. M. took a tent and caravan
and made an extensive trip visiting scores of villages
where we had schools and churches, against my
counsel, Mrs. Morrison accompanied him.
Soon after her return, she developed perhaps the most
malignant case of bilious remittent fever I had
seen. For more than a week, her stomach rejected
all food and all medicines had to be given by injection.
At last the fever disappeared and she was again
taking food by mouth. I had watched over her day
night and had ~~not~~ taken off my clothes and bathed
for ten days. What sleep I got was on a cot in the sick
room. Now I was relieved and felt that I could safely
go to my house 200 yards away, shave, bathe and get
some much needed sleep. I did not risk getting into flax-
meas, but drew and on top of the cover on my bed. I was
not there very long before a hurry call came to see
Mrs. Morrison. I rushed to see her. She had against
my orders, sat up and promptly fainted. She was dead
when I arrived. Artificial respiration and injections of
stimulants were of no avail, ~~if~~ I had not left the sick
room, she would not have tried to sit up.
So of the first four white women sent out by our Board
of World Missions, Mrs. Morrison was the third to die on
the field during the first term of her service.
My good friend, Rev. Matthe Martin brought his bride
in 1909. She was a student in Agnes Scott College
but Matthe Martin swept her off her feet two years
before she could graduate. She was sweet, talented and

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beautiful. Her husband was so busy being a missionary that his wife saw nothing of him except for meals. He was busy seven days and seven nights a week. She was starved for love. There was a young dentist, also a bachelor, on our mission and frequently we were invited for an evening meal with the Martins. As soon as Wm. Martin had swallowed his last bite, he would rush off to a meeting of the elders, the deacons or perhaps to the Women of the Church, who had been organized as a society. There were also classes for the evangelists and teachers in our local schools, and the instruction given them was usually at night. Mrs. Martin's health was poor. When I had been in Africa nearly five years, the mission ordered me home on furlough. For weeks I had been with fever every day. I had lost weight and developed a cough. The nearest doctor was at Lusambo, 250 miles, ten days journey away. I was convinced and still believe that if I had left Mrs. Martin that she should soon die. I refused to go a step unless Mrs. M. also went. She did not want to leave her husband but mission orders must be obeyed. She was young and innocent and some of the passengers seemed to be so friendly with her. That was when I exercised a little big brotherly chaperonage. There were dinner when I could not go to my meals. I overheard two passengers talking. One said "that poor young doctor no doubt had J.B. and will barely get home in time to die." But on reaching cooler latitudes I began to get stronger. After I had spent two weeks with my parents, order came from the Mission Board to go on a speaking tour which took more than half a dozen states. There were times when I would speak five times in one day.

In many places the local minister or his wife would
say "I want you to meet Miss So and so. She is a fine
teacher or nurse or laboratory worker. She would make a
good missionary" sometimes I would try to recruit a
new missionary but usually some one thought it
was to get a wife!

Under the pressure of this work and the heat of sum-
mer, my malaria developed from the long dormant
germs, fever and loss of appetite returned.
At this juncture I went to 'Montreat' in the moun-
tains of North Carolina. Here I met a beautiful blonde
from Mississippi. She was from the Delta, where malaria
abounded. If any could stand the climate of Africa,
this one I thought could. I dated her several times a day
for fifteen days and then asked her to marry me. She accepted.
We were married in 1912 and went almost immediately
to the Congo. Within a year I brought her home on
a stretcher. She almost lost her life. As soon as our baby
was born and Coralie, my wife could walk, I returned
to the Congo leaving wife and baby in the Homeland.
Coralie was so distressed at my leaving that I actually
was afraid she might lose her mind.
I was 8 months & returned. After a few weeks with our
two year old baby girl, we left her with her grandmother and
returned to the Congo where more young missionaries
had brought their young wives and more babies were
to arrive.

When the United States became involved in World War I
I returned for military service. After I left the service and
peace returned to Mexico, I was asked to go to Mexico and
open a hospital there.
I have often thought of my work in the Congo and have
thought it a wise decision that you did not go there.
I did not have the heart to ask you to share the risks and hard-
ships with me. There were times that first weeks I would pass
without my seeing a white face or hearing any
language except native tongues.

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Now conditions are much better. Now there are roads and missionaries travel by automobiles instead of by caravan.

Houses are of brick and cement and not of mud and sticks with thatched roof, harboring bats, even snakes and rats.

I hope that this letter will make it clear that I thought too much of you than to take you to a place the climate and hardships might cost your life. With love and warmest greetings, I am

Affectionately

Since I left the Congo, there have been two suicides among our Congo missionaries. Both were single women and both must have lost their minds. One, a nurse, gave herself a fatal injection. The other was doing book keeping and secretarial work for the mission treasures. She was a sister of two prominent ministers in the Home-land and another brother who is a distinguished surgeon and still another who has a Ph.D. in Education. This lady saturated her clothes with kerosene and applied a match. She lived long enough to say that she was offering herself as a burnt offering to the Lord. Poor woman. She had gone crazy.

Written from sick bed with frequent pauses for rest