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POVERTY, HEALTH AND REPRODUCTION IN EARLY COLONIAL UGANDA

Jan Kuhanen

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Approximately five years ago, when I was making the final preparations for my first-ever research trip to the African continent, one of the professors at my department told me that I was about to embark on a journey that would be hard, demanding and even thankless, but one that would certainly make my life much more interesting. Today, when I look back on the few years that I have spent on this project I realize how right he was.

I cannot imagine a better training ground for a prospective historian than research into the African past - a past that is often beyond the reach of the standard tools and methods of historians, a past that makes a mockery of many conventional theoretical explanations, and a past with a complexity that constantly challenges the historian to re-evaluate his or her own ideas, methods and approach in order to make the situation comprehensible.

During this project I often became painfully aware of my limitations as a researcher and author on African history. I realized that writing about a culture that was not my own was extremely difficult, and that it would have required a much longer period of time to familiarise myself properly with the culture, language and social conventions of that society. As an outsider coming to Africa and Uganda, I may have had the advantage of seeing things from a neutral viewpoint, free of any personal, social, political or other restraints, but at the same time, I have been liable to errors of interpretation and oversimplification because of my limited knowledge of the culture that I was writing about. Some of the many pitfalls were avoided with the help of friends, colleagues and more experienced researchers, but there are undoubtedly a number of others left to be discovered by skilled and observant readers. I trust, however, that authors in the future will fill in my gaps and correct my misunderstandings.

This book does not tell the truth about any part of African or Ugandan history. It is rather an interpretation of the surviving historical evidence as it appears to this author with the limited tools and skills at his disposal. If it succeeds in answering some questions about history, I shall be happy. If it does not, I shall still be happy. But if it fails to raise questions or to stir up debate on the issues involved in this particular field of history, I shall feel disappointed. History should not be axiomatic or ready-made, but something that is constantly being discussed and reassessed.

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New Year's Day 2005
Jan Kuhanen

Abbreviations

ACML - Sir Albert Cook Medical Library
Arch. Dis. Child. - Archives of Diseases in Childhood
BDFA - British Documents on Foreign Affairs
Bull. Wld. Hlth. Org. - Bulletin of the World Health Organisation
C.M.S. - The Church Missionary Society
CMS - The Church Missionary Society Archives
CO - Colonial Office
E. Afr. Med. J. - East African Medical Journal
FAO - United Nations Food and Agricultural Organisation
FO - Foreign Office
IBEAC - The Imperial British East Africa Company
IJAHS - International Journal of African Historical Studies
JIH - Journal of Interdisciplinary History
J. Med. Ethics - Journal of Medical Ethics
J. R. Ar. Med. Corps - Journal of the Royal Army Medical Corps
J. Trop. Med. - Journal of Tropical Medicine
J. Trop. Med. Hyg. - Journal of Tropical Medicine and Hygiene
K.A.R. - King's African Rifles
MH - Mengo Hospital
MHCF - Mengo Hospital Case Files
MHM - Mill Hill Mission Archives
P.M.O. - Principal Medical Officer
PRO - Public Record Office
R.A.M.C. - Royal Army Medical Corps
RH - Rhodes House Library
Soc. Sci. & Med. - Social Science & Medicine
Trans. R. Soc. Trop. Med Hyg. - Transactions of the Royal Society of Tropical Medicine and Hygiene
UMOH - Uganda Ministry of Health
UNA - Uganda National Archives
WHO - World Health Organisation
WTL - Wellcome Trust Library

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I Introduction

FRAMEWORK FOR THE RESEARCH

POVERTY, HUNGER AND HEALTH IN THE HISTORY OF SUB-SAHARAN AFRICA
Sub-Saharan Africa remains the only continent in the world that is still plagued by large scale poverty, hunger and disease. Nearly five decades of independence have not brought the much desired peace, prosperity, and progress. On the contrary, many African countries have sunk into a vicious circle of violence, economic degeneration and political and social chaos. Industrialised countries and international organisations, with their own economic and political agendas, have contributed to this chaos by keeping Africa partly politically and economically dependent. This is not only because of their greater economic, political and military power, but also because of the weakness of the African political leadership, which has sacrificed peace, unity and development for greater political power. As many African leaders have grown fat and mighty while bowing to the West, their people have grown hungry, ill and powerless, increasingly vulnerable to political, economic and other forms of exploitation which often takes place before the eyes of the state and with its permission and acceptance. The indifference by leaders to the needs of their people contributes to the fact that many African countries today have difficulties in feeding their population, in providing them with safe water, or giving them access to health care and education. The lack of political leadership and responsibility has led to a massive epidemic of AIDS, which threatens to undermine all development efforts on the continent. Yet there is evidence from some African countries of how a scourge such as AIDS can be brought under control with radical and courageous political intervention. Unfortunately, the positive examples so far remain exceptions to the rule.

Today, as in the past, the questions of poverty, hunger and health continue to be fundamentally political ones. Poverty and deprivation cannot generate nor sustain political power for long. In any society prolonged deprivation will erode the economic and social reproduction of power, unless this power can rely on an outside source for its material support and legitimacy. For leaders whose real source of power lies outside their people and country, subjects who no longer provide them with the necessary material basis of power are useless in terms of legitimacy, and are therefore readily and easily over-exploited or ignored. The problem, though common today, has historical roots of its own. We will attempt here to gain an understanding, by means of historical analysis, of how politics and social reproduction have interacted in the past, especially under external pressure, and how the failure of one has led to failure of the other by bringing about not only political and economic crisis, but a larger crisis of social reproduction and health.

The history of health, disease and medicine in Africa has gained increasing attention during the past two or three decades. The interest shown by the western scholars is derived not only from the popularity of the topic in the west, but also from the contemporary and historical health problems of Africa itself. Medicine played a crucial role in the colonial conquest of the African continent, and the ensuing health problems, for Africans and Europeans alike, have received much attention. Besides the local disease environments and pathogens, worldwide

pandemics and scourges such as smallpox, Spanish influenza and more recently HIV/AIDS have been studied in an African context, and interest in the multiple consequences of these epidemics is, and should be, growing.¹

Scholarly interest in African medical history within Africa has varied from European encounters with African disease environments² to indigenous African ideas on sickness, health and healing, and on to African and colonial responses to disease and epidemics and to their social consequences.³ Colonial medicine and its confrontation with the indigenous societies has naturally been one of the most popular subjects. Medicine has been studied as instrument of power, subjugation and social control, and as an actor within the colonial establishment.⁴ Missionary medicine, as an independent 'branch' closely knit to 'colonial medicine', has justly received plenty of attention.⁵ Partly because of the considerable missionary

¹ See Roy Macleod and Milton Lewis, *Disease, Medicine, and Empire. Perspectives on Western Medicine and the Experience of European Expansion*. London; New York: Routledge 1988; Maureen Malowany, 'Unfinished Agendas: Writing the History of Medicine of Sub-Saharan Africa', *African Affairs* 99 2000, 325-49.

² Philip D. Curtin, *Death by Migration. Europe's Encounter with the Tropical World in the Nineteenth Century*. Cambridge University Press 1989; Oliver Ransford, *'Bid the Sickness Cease.' Disease in the History of Black Africa*. London: John Murray 1983; G.W. Hartwig and K.D. Patterson (eds.), *Disease in African History*. Durham: Duke University Press 1978.

³ A.B.T. Byaruhanga-Akiiki, 'The Theology of Medicine', *Journal of African religion and Philosophy* 2 (1) 1991, 23-33; John M. Janzen, *Ngoma. Discourses of Healing in Central and Southern Africa*. Berkeley: University of California Press 1992; Steven Feierman & John M. Janzen (eds.), *The Social Basis of Health and Healing in Africa*. Berkeley: University of California Press 1992; Tola Olu Pearce, 'Lay Medical Knowledge in an African Context', in Shirley Lindenbaum and Margaret Lock (eds.), *Knowledge, Power, and Practice. The Anthropology of Medicine and Everyday Life*. Berkeley; Los Angeles: University of California Press 1993, 150-65; Terence Ranger, 'Plagues of Beasts and Men: Prophetic Responses to Epidemic in Eastern and Southern Africa', in Terence Ranger & Paul Slack (eds.), *Epidemics and Ideas. Essays on the Historical Perception of Pestilence*. Cambridge University Press 1992, 241-68; Maryinez Lyons, *The Colonial Disease. A Social History of Sleeping Sickness in Northern Zaire, 1900-1940*. Cambridge University Press 1992; David K. Patterson, *Health in Colonial Ghana: Disease, Medicine and Socio-Economic Change, 1900-1955*. Waltham: Crossroads Press 1981; J.N.P. Davies, 'The Development of 'Scientific' Medicine in the African Kingdom of Bunyoro-Kitara', *Medical History* 3 1959a, 47-57.

⁴ E.E. Sabben-Clare, D.J. Bradley & K. Kirkwood (eds.), *Health in Tropical Africa During Colonial Period*. Oxford: Clarendon Press 1980; David Arnold (ed.), *Imperial Medicine & Indigenous Societies*. Manchester University Press 1988a; Megan Vaughan, *Curing Their Ills. Colonial Power and African Illness*. Oxford: Polity Press 1991; Ann Beck, *A History of the British Medical Administration of East Africa, 1900-1950*. Harvard University Press 1970; Alexander Butchart, *The Anatomy of Power. European Constructions of the African Body*. London: Zed Books 1998; Jean Comaroff, 'The Diseased Heart of Africa. Medicine, Colonialism, and the Black Body', in Lindenbaum and Lock 1993, 305-29; Diane Zeller, 'The Establishment of Western Medicine in Buganda', Ph.D. thesis, Columbia University 1971; John Iliffe, *East African Doctors*. Cambridge University Press 1998; Heather Bell, *Frontiers of Medicine in the Anglo-Egyptian Sudan 1899-1940*. Oxford: Clarendon Press 1999; Nancy Rose Hunt, *A Colonial Lexicon of Birth Ritual, Medicalization, and Mobility in the Congo*. Durham; London: Duke University Press 1999; Marc H. Dawson, 'The 1920s Anti-Yaws Campaigns and Colonial Medical Policy in Kenya', *IJAHS* 20 (3) 1987, 417-35; D.C. Ohadike, 'The Influenza Epidemic of 1918-19 and the Spread of Cassava Cultivation on the Lower Niger: A Study of Historical Linkages', *Journal of African History* 22 1981, 379-91.

⁵ W.D. Foster, *The Early History of Scientific Medicine in Uganda*. Nairobi: East African

influence in medicine in many parts of Africa, the sexually transmitted diseases have attracted much interest in both colonial and post-colonial contexts.⁶ A somewhat less studied subject has been the influence of epizootics and enzootics on African communities at the social, economic and political levels.⁷

Besides the health hazards presented by the ecological environment, one of the greatest causes of ill-health in Africa has been poverty.⁸ As elsewhere, wealth and health in Africa have tended to go hand in hand; the rich and the powerful were able to escape disease because of their higher standard of living achieved by better access to such means of production as land and labour, as well as medical care.⁹ Disease and its connection with indigenous and colonial socioeconomic and political conditions,¹⁰ and the health and welfare of frequently marginalised groups such as women, have also gained well-deserved attention.¹¹

Literature Bureau 1970; W. D. Foster, 'Doctor Albert Cook and the Early Days of the Church Missionary Society's Medical Mission to Uganda', *Medical History* 12 1968, 325-43; Charles M. Good, 'Pioneer Medical Missions in Colonial Africa', *Soc. Sci. Med.* 32 (1) 1991, 1-10; N. Thomas Håkansson, 'Pagan Practices and the Death Of Children: German Colonial Missionaries and Child Health Care on South Pare, Tanzania,' *World Development* 26 (9) 1998a, 1763-72.

⁶ Karen Jochelson, *The Colour of Disease. Syphilis and Racism in South Africa, 1880-1950*. Chippenham: Palgrave 2001; Michael Tuck, 'Syphilis, Sexuality, and Social Control: A History of Venereal Disease in Colonial Uganda.' Ph.D. thesis, Northwestern University 1997; Megan Vaughan, 'Syphilis in Colonial East and Central Africa: The Social Construction of the Epidemic', in Ranger & Slack 1992a, 269-302; Philip W. Setel, Milton Lewis & Maryinez Lyons (eds.), *Histories of Sexually Transmitted Diseases and HIV/AIDS in Sub-Saharan Africa*. Westport: Greenwood Press 1999.

⁷ Pule Phoofole, 'Epidemics and Revolutions: The Rinderpest Epidemic in Late Nineteenth-Century Southern Africa.' *Past and Present* 138, 1993, 112-43; Holger Weiss, "'Dying Cattle": Some Remarks on the Impact of Cattle Epizootics in the Central Sudan During the Nineteenth Century,' *African Economic History* 26 1998, 173-99; Diane Gifford-Gonzalez, 'Animal Disease Challenges to the Emergence of Pastoralism in Sub-Saharan Africa,' *African Archeological Review* 17 (3) 2000, 95-139; Richard Waller, 'Emutai: crisis and response in Maasailand 1883-1902', in Douglas H. Johnson and David M. Anderson (eds.), *The Ecology of Survival. Case Studies from Northeast African History*. London: Lester Crook 1988, 73-112; James L. Giblin, 'East Coast Fever in Socio-Cultural Context: A case Study from Tanzania', *IJAHS* 23 (3) 1990, 401-21; Juhani Koponen, *People and Production in Late Precolonial Tanzania. History and Structures*. Helsinki: Finnish Historical Society 1988a, 168-170; John Ford, *The Role of The Trypanosomiases in African Ecology. A Study of a Tsetse Fly Problem*. Oxford: Clarendon Press 1971; Helge Kjekshus, *Ecology Control and Economic Development in East African History. The Case of Tanganyika 1850-1950*. London: Heinemann 1977, especially pages 51-56, 126-60.

⁸ Iliffe 1998, 8.

⁹ David Lee Schoenbrun, *A Green Place, A Good Place. Agrarian Change, Gender, and Social Identity in the Great lakes Region to the 15th Century*. Portsmouth: Heinemann; Oxford; James Currey 1998, 108; Gloria Waite, 'Public Health in Precolonial East-Central Africa', in Feierman and Janzen 1992, 216.

¹⁰ Randall M. Packard, *White Plague, Black Labour. Tuberculosis and the Political Economy of Health and Disease in South Africa*. University of Natal Press 1990; Meredith Turshen, *The Political Ecology of Disease in Tanzania*. New Brunswick: Rutgers University Press 1984; Dennis D. Cordell and Joel W. Gregory (eds.), *African Population and Capitalism. Historical Perspectives*. Second edition. Madison: The University of Wisconsin Press 1994.

¹¹ Meredith Turshen (ed.), *Women and Health in Africa*. Trenton: Africa World Press 1991; Carolyn M. Clark, 'Land and Food, Women and Power in Nineteenth Century Kikuyu', *Africa* 50 (4) 12

Hunger and famines have attracted much interest in the context of both contemporary and historical Africa. Famines have gained more attention because of their "visibility" as acute subsistence catastrophes, often easily definable in place and time,¹² whereas chronic hunger and malnutrition, in the form of "hidden hunger"¹³ not associated with famines, have been largely overlooked as a historical phenomenon in Africa. This is somewhat surprising, judging from the amount of literature on the African food crisis, and the importance of this issue in contemporary Africa.¹⁴ The reason behind this state of affairs is not necessarily a lack of interest, but a lack of suitable and adequate evidence for historical analysis,¹⁵ which tends to limit the scope of research to fairly recent times. Malnutrition in history has been related to the prevailing ecological conditions and problems created by population growth and overcrowding,¹⁶ and also to the transformation of the indigenous agricultural practises and division of labour under colonial rule.¹⁷ Also, the colonial agricultural policies, propagating cash crops and the cultivation of nutritionally poor foods for famine reserves, have been seen as a reason behind

1980, 357-69; David L. Schoenbun, 'Gendered Histories Between the Great Lakes: Varieties and Limits', *IJAHS* 29(3) 1996, 461-92; Iris Berger, 'Fertility as Power. Spirit Mediums, Priestesses & the Pre-Colonial State in the Interlacustrine East Africa', in David M. Anderson & Douglas M. Johnson (eds.), *Revealing Prophets. Prophecy in Eastern African History*. London: James Currey 1995.

¹² Donald Crummey & C.C. Stewart (eds.), *Modes of Production in Africa*. Beverly Hills: Sage 1981; Rebecca Huss-Ashmore & Solomon Katz (eds.), *African Food Systems in Crisis. Part One: Microperspectives*. Philadelphia: Gordon & Breach, 1989; R.E. Downs, Donna O. Kerner & Stephen P. Reyna (eds.), *The Political Economy of African Famine*. Second print. Philadelphia: Gordon & Breach 1993; Megan Vaughan, *The Story of an African Famine. Gender and Famine in Twentieth-Century Malawi*. Cambridge University Press 1987.

¹³ Ann G. Carmichael, 'Infection, Hidden Hunger, and History', *JIH* 14 (2) 1983, 249-64.

¹⁴ For a review of the related literature, see Sara S. Berry, 'The Food Crisis and Agrarian Change in Africa: A Review Essay', *The African Studies Review* 27 (2) 1984, 59-112; Parker Shipton, 'African Famines and Food Security: Anthropological Perspectives', *Annual Review of Anthropology* 19 1990, 353-394; and Ray Bush, 'The Politics of Food and Starvation', *Review of African Political Economy* 68 1996, 169-95.

¹⁵ John Iliffe, *The African Poor. A History*. Cambridge University Press 1987, 2-3.

¹⁶ Jacques M. May, *The Ecology of Malnutrition in Middle Africa. Studies in Medical Geography*, Vol. 5. New York: Hafner 1965; Zbigniew A. Konczacki, 'Infant Malnutrition in Sub-Saharan Africa: a Problem in Socio-Economic Development', *Canadian Journal of African Studies* 6 (3) 1972, 433-49. For population see J.C. Caldwell, 'The social repercussions of colonial rule: demographic aspects', in A. Abu Boahen (ed.), *UNESCO General History of Africa, Vol. VII: Africa under colonial domination, 1880 - 1935*. Berkeley: Heinemann; UNESCO; University of California Press 1995a, 458-86; John C. Caldwell, 'The Population Factor in African Change', in Archie Mafeje and Samir Radwan (eds.), *Economic and Demographic Change in Africa*. Oxford: Clarendon Press 1995b, 11-35.

¹⁷ Meredith Turshen, 'Population Growth and Deterioration of Health. Mainland Tanzania, 1920-1960', in Cordell and Gregory 1994, 187-200; Brooke Grundfest Schoepf & Claude Schoepf, 'Land, Gender, and Food Security in Eastern Kivu, Zaire', in Jean Davison (ed.), *Agriculture, Women, and Land. The African Experience*. Boulder; London: Westview Press 1988, 107-110.

colonial malnutrition.¹⁸

Attempts have been made to tackle the problem of food and nutrition in African societies since the early 1930s, when, following the emergence of nutritional anthropology in Africa, the crucial role of adequate nutrition for the general development of African societies was recognized for the first time.¹⁹ The interest in nutrition shown by anthropologists in the 1930s culminated in Richards' ground-breaking work on the Bemba of Northern Rhodesia.²⁰ This still carries much value for contemporary anthropologists and historians concerned with African food and nutrition, and it has recently been revisited and "expanded" by distinguished contemporary scholars in these fields.²¹ After the anthropologists, the problem of African nutrition was taken up by medical professionals and nutrition specialists, and following the sharp increase in interest in malnutrition after the Second World War,²² the amount of literature on the subject has grown immensely.

Those who have studied African food systems and dietary practises in the pre-colonial period have remained few in number, since inadequate sources render a closer study of indigenous food production and consumption habits virtually impossible.²³ Our picture of this side of African life - based on the vague descriptions given by early European travellers, merchants and missionaries - therefore remains a narrow one.²⁴ Recently a more cross-scientific approach has shed light on the early development of economic, social and political systems and food production.²⁵

¹⁸ Iliffe 1987, 5-6, 160-1

¹⁹ Audrey I. Richards, *Hunger and Work in A Savage Tribe. A Functional Study of Nutrition Among the Southern Bantu*. First American edition. Glencoe: The Free Press 1948, 14; See also A.I. Richards & E.M. Widdowson, 'A Dietary Study in North-Eastern Rhodesia', *Africa* 9 1936, 166-196; E.B. Worthington, 'On the Food and Nutrition of African Natives', *Africa* 9 1936, 150-165. See also League of Nations, *The Problem of Nutrition. Vol. I. Interim Report of the Mixed Committee on the Problem of Nutrition*. Geneva, 1936a; Lord Hailey, *An African Survey*. Revised edition. Oxford University Press 1957, 1070-1072.

²⁰ Audrey I. Richards, *Land, Labour, and Diet. An Economic Study of the Bemba Tribe*. First published in 1939. Münster: LIT; IAI 1995.

²¹ Henrietta L. Moore & Megan Vaughan, *Cutting Down Trees. Gender, Nutrition, and Agricultural Change in the Northern Province of Zambia, 1890-1990*. Heinemann-James Currey-University of Zambia, 1994.

²² F.M. Purcell, *Diet and Ill-Health in the Forest Country of the Gold Coast*. London: H.K. Lewis 1939; Lucius Nicholls, *Tropical Nutrition and Dietetics*. Second edition. London: Baillière, Tindell & Cox 1945; E.V. McColloum, *A History of Nutrition. The Sequence of Ideas in Nutrition Investigations*. Cambridge: Riverside Press 1957.

²³ Rebecca Huss-Ashmore, 'Perspectives on the African Food Crises', in Huss-Ashmore & Katz 1989, 5-8.

²⁴ Jean-Pierre Chrétien, 'The Historical Dimension of Alimentary Practises in Africa', *Diogenes* (English edition) 144 1988, 92-115; Sjoerd Rijpma, 'Malnutrition in the History of Tropical Africa', *Civilisations* 43 (2) 1994, 54-63.

²⁵ David L. Schoenbrun, 'We Are What We Eat: Ancient Agriculture Between the Great Lakes',

The effect of colonial conquest and colonial policies on subsistence have been covered more effectively, and food production, food entitlements, cash cropping and their effect on nutrition have been studied in societies inhabiting different social, political and ecological environments.²⁶ The transformations of some indigenous social and economic structures, habits and customs related to food production and food consumption have also been investigated, sometimes with surprisingly contrasting results.²⁷ The role of colonial science in the discovery and investigation of African malnutrition has also received attention, especially in the context of East Africa.²⁸

Historians have approached the problems of African subsistence since the 1970s in the footprints of the pioneering works on Tanganyika by Feierman, Kjekshus and Iliffe.²⁹ Although not primarily dealing with the issues of poverty and hunger, these works contributed greatly to the understanding of material well-being and its determinants in the indigenous African societies before and after the colonial conquest. The picture of African health and material welfare emerging from these historical interpretations is not uniform.³⁰ On the one hand there is the view that the

Journal of African History 34 (1) 1993a, 1-31; Schoenbrun 1998.

²⁶ David W. Cohen, 'Food Production and Food Exchange in the Precolonial Lakes Plateau Region', in Robert I. Rotberg (ed.), *Imperialism, Colonialism, and Hunger: East and Central Africa*. Lexington: D.C. Heath and Co. 1983, 1-18; Holger Weiss, *Babban Yunwa. Hunger und Gesellschaft in Nord-Nigeria und den Nachbarregionen in der Frühen Kolonialzeit*. Helsinki: Suomen Historiallinen Seura 1997; David J. Webster, 'The Political Economy of Food Production and Nutrition in Southern Africa in Historical Perspective', *The Journal of Modern African Studies* 24 (3) 1986, 447-463; John Tosh, 'The Cash Crop Revolution in Tropical Africa: An Agricultural Reappraisal', *African Affairs* 79 (314) 1980, 79-94; Marilyn Little, 'Colonial Policy and Subsistence in Tanganyika 1925-1945', *The Geographical Review* 81 (4) 1991, 375-88; Douglas Rimmer, 'The Economic Imprint of Colonialism and Domestic Food Supplies in British Tropical Africa', in Rotberg 1983, 141-65; Marc H. Dawson, 'Health Nutrition, and Population in Central Kenya, 1890-1945', in Cordell and Gregory 1994, 201- 17.

²⁷ Deborah Fahy Bryceson, *Food Insecurity and the Social Division of Labour in Tanzania, 1919-85*. Bristol: Macmillan 1990; Loretta Brabin, 'Polygyny: An Indicator of Nutritional Stress in African Agricultural Societies?', *Africa* 54 (1) 1984, 31-45; Eno Blankson Ikpe, *Food and Society in Nigeria. A History of Food Customs, Food Economy and Cultural Change 1900-1989*. Stuttgart: Franz Steiner 1994; Bill Rau, *From Feast To Famine. Official Cures and Grassroots Remedies to Africa's Food Crisis*. London; New Jersey: Zed Books 1991.

²⁸ Marilyn Little, 'Imperialism, Colonialism and the New Science of Nutrition: The Tanganyika Experience, 1925-1945', *Soc. Sci. Med.* 32 (1) 1991, 11-14; Michael Worboys, 'The Discovery of Colonial Malnutrition Between the Wars', in Arnold 1988a, 208-25; Cynthia Brantley, 'Kikuyu - Maasai Nutrition and Colonial Science: The Orr and Gilks Study in Late 1920's Kenya Revisited', *IJAHS* 30 (1) 1997, 49-86; J. Stanton, 'Listening to the Ga: Cicely Williams' Discovery of Kwashiorkor on the Gold Coast', in Anne Hardy and Lawrence Conrad (eds.), *Women and Modern Medicine*. Clio Medica 61, Amsterdam 2001.

²⁹ Steven Feierman, *The Shambaa Kingdom. A History*. Madison: The University of Wisconsin Press 1974; Kjekshus 1977; John Iliffe, *A Modern History of Tanganyika*. Cambridge University Press, 1979. See also Koponen 1988a.

³⁰ See Koponen 1988a, 21-3, for a brief discussion of the contrasting arguments presented by Kjekshus and Iliffe.

pre-colonial Africans in East Africa had developed control over their ecological environments to the degree that a relatively ample food supply could be ensured all year round and epidemics and epizootics were kept at bay by carefully managed environmental control. According to this view, war, disease and hunger emerged as a direct consequence of the opening up of East and Central Africa to international trade from the early nineteenth century onwards. The colonial conquest that followed exacerbated the environmental, political and social disruptions created by the ivory and slave trade, resulting in a serious decline in health and material well-being, which in turn contributed to the depopulation of vast areas in late nineteenth century East Africa.³¹ The other view holds that material and health conditions in pre-colonial Africa were somewhat modest, barely offering adequate subsistence. The harsh ecological environment narrowed the basis for food production, and seasonal fluctuations in food supply were a grave problem. Disease was a frequent visitor, and this together with the struggle for subsistence made life hard and insecure. Although admitting that the growing external trade, slavery and colonial conquest made the situation worse, it claims that, in the long run, the structures and stability created by colonial rule worked for the benefit of the people.³²

Though both views harbour a seed of truth, they may be criticised for the fact that their analysis of pre-colonial Africa is focused almost completely on the nineteenth century. Considering the ecological, political and social transformations that took place in nineteenth century East and Central Africa, it can hardly be said that the picture provided by that particular period represents normal living conditions as they were before the growth in external influence. Unless the scope is extended beyond the immediate nineteenth century, one cannot expect to be able to say much about everyday African reality.³³ Information would have to be derived from sources other than strictly historical ones in order to penetrate further back in time and to understand the relations between ecology, production and reproduction, the circumstances under which their interaction generated wealth and health or poverty and sickness, and how these were linked to the prevailing power structures and dynamics.³⁴

THE PRE-COLONIAL AND COLONIAL HISTORY OF UGANDA

Historical research on Uganda is rich and voluminous, so that this brief review cannot do proper justice to it. It is somewhat regrettable, however, that "total histories" like those written by Iliffe and Koponen on pre-colonial and colonial Tanganyika are still lacking. Walter Rusch's analysis of pre-colonial Buganda, though based solely on secondary sources, provides a good cross-section and still

³¹ Kjekshus 1977, 4-5, 9-10, 185. See also Turshen 1994, 187-200.

³² Iliffe 1979, 11-15, 40-50, 166-7, 576.

³³ According to Koponen (1988a, 390), '... pre-colonial life may not have been altogether unbearable, at least not before and outside the nineteenth century calamities.'

³⁴ For a reconstruction of the early pre-colonial history of interlacustrine Africa, see Schoenbrun 1998.

carries much weight on topics such as the pre-colonial economy and social and political relations.³⁵ Likewise, Kiwanuka's study of the evolution of the kingdom of Buganda has established itself as one of the cornerstones of research into that society in pre-colonial times.³⁶ Wrigley's work on the Buganda economy and kingship incorporates economic and demographic analyses which cannot be entirely accepted in the light of the most recent research,³⁷ whereas Richard Reid's analysis of the pre-colonial Buganda's economy and military surpasses all previously published works on these subjects.³⁸ Reid's analysis of slavery is especially rewarding, as also are those of agriculture and famine, but he only just touches on famine and its effects on society and the role of disease in demographic processes. Henri Médard's voluminous and thoroughly documented thesis on the growth and crisis of the Buganda monarchy represents the most ambitious attempt to write a total history of pre-colonial Buganda.³⁹ From the viewpoint of this research, his analysis is most illuminating in its treatment of pre-colonial trade and food systems, showing convincingly the complex nature of the economy and its relation to the military and to politics. Shane Doyle's thesis, despite its title, is in fact the best and only attempt so far to write a total history of pre-colonial and colonial Bunyoro.⁴⁰ Based on remarkably diverse archival and oral evidence, it covers a wide range of subjects, but its theoretical basis somewhat limits interpretation of the evidence, so that it actually yields no dramatic new insights into the relationship between politics, economics and demography in Bunyoro.

Colonial and post-colonial historiography on colonialism in Uganda, particularly the socioeconomic aspect of it, represents a dynamic field of research. The colonial authors, while admitting the limitations of their economic system, tend to emphasize the economic, social and political possibilities opened up by colonial rule, which were nevertheless mostly wasted. Ingham sees that establishment of colonial rule in Buganda led to oppression of the Baganda peasantry by their chiefs, while, on the other hand, the cultivation of cotton was beneficial and brought wealth not only to the chiefs but to the peasants as well.⁴¹ According to Wrigley, the economic and social consequences of colonial rule before 1939 did not raise the

³⁵ Walter Rusch, *Klassen und Staat in Buganda vor der Kolonialzeit*. Berlin: Akademie 1975.

³⁶ Semakula Kiwanuka, *A History of Buganda. From the Foundation of the Kingdom to 1900*. London: Longman 1971.

³⁷ Christopher Wrigley, *Kingship and State. The Buganda Dynasty*. Cambridge University Press 1996.

³⁸ Richard Reid, *Political Power in Pre-Colonial Buganda. Economy, Society & Warfare in the Nineteenth Century*. Oxford: James Currey; Fountain; Ohio University Press 2002.

³⁹ Henri Médard, 'Croissance et crises de la Royauté du Buganda au XIXe siècle.' Thèse pour obtenir le grade de Docteur de L'Université Paris I, 2001.

⁴⁰ Shane Doyle, 'An Environmental History of the Kingdom of Bunyoro in Western Uganda, From C.1860 To 1940', Ph.D. thesis, University of Cambridge 1998.

⁴¹ Kenneth Ingham, *The Making of the Modern Uganda*. London: George Allen & Unwin 1958, 113, 166.

material standard of living of the rural masses, since they - apparently deliberately - missed the economic opportunities brought about by the colonial rule; people remained poor 'because they did not choose to be richer.' He maintains that men were more willing to contribute their time to such activities as socializing and politics than to producing cash crops. He attributes this to the fact that poverty in Uganda was not 'distressful': 'There was no destitution... and little real hardship, unless it was that which was suffered by the migrants... Except for the prevalence of disease, there was nothing in the condition of the people that cried urgently for cure, and in their easy-going way of life there was much that was positively gracious and attractive.'⁴² The peasants in Buganda were, according to Wrigley, so well off that greater inputs in agriculture were deemed unnecessary.⁴³

Dunbar, in his history of Bunyoro-Kitara, though sympathetic towards the Banyoro, is totally uncritical of colonial rule, seeing it largely as a period of progress in terms of the economy, education, religion and politics.⁴⁴ A more analytical approach is adopted by Ehrlich, who saw that colonial policy in Uganda, because of its 'restrictive nature', failed to stimulate real economic development or to establish a society 'capable of future autonomous development.'⁴⁵ The colonial state sacrificed progress for the sake of stability, creating a static society with a conservative indigenous landed aristocracy, an Indian middle class and agricultural rural masses who, according to Ehrlich, came to enjoy 'a life of easeful poverty.'⁴⁶

For Brett, colonialism represents 'the development of underdevelopment', which brought about a situation where the local society was only able to function properly when accepting external dominance and control.⁴⁷ Old social formations and forms of authority were largely left in place, while at the same time, colonial society generated new social classes which in time would compete for power with the traditional authorities. Brett argues that failure to develop could be attributed to the failure of the colonial system to produce indigenous groups which could have replaced the external authority and acted as an avant-garde for autonomous development. For him this was a consequence of the restrictive policy of 'dominant

⁴² C.C. Wrigley, *Crops and Wealth in Uganda. A Short Agrarian History*. Kampala: E.A.I.S.R. 1959, 58-59.

⁴³ C.C. Wrigley, 'The Changing Economic Structure of Buganda' in L. A. Fallers (ed.), *The King's Men. Leadership and Status in Buganda on the Eve of Independence*. London: Oxford University Press 1964, 36.

⁴⁴ A.R. Dunbar, *A History of Bunyoro-Kitara*. Nairobi: Oxford University Press 1965, 209-225.

⁴⁵ Cyril Ehrlich, 'Some Social and Economic Implications of Paternalism in Uganda' in Z.A. Konczacki and J.M. Konczacki (eds.), *An Economic History of Tropical Africa. Vol. II. Colonial Period*. London: Frank Cass 1977, 138.

⁴⁶ Cyril Ehrlich, 'The Uganda Economy', in Vincent Harlow, E.M. Chilver, and Alison Smith (eds.), *History of East Africa. Vol. II*. Oxford: Clarendon Press 1965, 468-469.

⁴⁷ E.A. Brett, *Colonialism and Underdevelopment in East Africa. The Politics of Economic Change 1919-39*. London: Heinemann 1973, 18.

forces' limiting access to crucial sources of political and economic power.⁴⁸ But as will be seen later on, the colonial state in Uganda was not the only 'dominant force' presenting obstacles to development. The local elites, very jealous of their power, also had their reasons to cause the socioeconomic and political structures to stagnate. Moreover, the colonial state - at least in the case of Buganda - did not entirely limit the access of the indigenous elite to the crucial resources required for autonomous development. The reason why this elite did not form an avant-garde for development or for indigenous capitalists was not because they did not have access to land, labour or trade, but because they choose to concentrate on perpetuating their traditional economic and social roles and social and political control over their subjects at the expense of development.

The extent and nature of indigenous capitalism in Uganda, and particularly in Buganda, is not entirely clear. van Zwanenberg and King have argued that colonialism enabled the development of capitalist farming in Buganda, while old forms of land tenure and land use prevailed in the rest of Uganda. They nevertheless see that agriculture in Uganda in general before 1939 could be described as 'growth without development', which appears to contradict their claim of emerging capitalist production.⁴⁹

The Africanist writers on Ugandan colonial history, often with a Marxist lacquer, likewise stress the failure to develop the colony. Kabwagyere emphasized the extreme inequalities - social, economic and political - brought about by colonial rule, which sowed the seed of discontent within society. He sees that the chiefs' power in colonial Uganda grew disproportionately, as did their economic standing, creating a wide gap between the rulers and the ruled.⁵⁰ Karugire, on the other hand, perceives the colonial chiefs as merely the tools of indirect rule, with no political or economic ambitions of their own. He praises the benefits of the cotton economy, though admitting that its benefits were restricted only to certain geographical areas in Uganda.⁵¹ Mamdani sees that the cash crop economy enabled the colonial chiefs to extract a great surplus from their tenant farmers, which eventually led to a deterioration in the economic position of the latter and threatened to hamper cash crop production. When the colonial state stepped in to protect the tenant producers, it undermined the political and economic base of the landlords in favour of colonial civil servants and bureaucrats.⁵² Jørgensen has argued that in order to avoid creating an indigenous proletariat in Uganda, which would have hampered cash crop production, the colonial state embarked on a policy of uneven development in which

⁴⁸ Brett 1973, 20-22.

⁴⁹ R.M.A. van Zwanenberg with Anne King, *An Economic History of Kenya and Uganda 1800 - 1970*. London: Macmillan 1975, 58-59, 64-69.

⁵⁰ Tarsis B. Kabwagyere, *The Politics of State Formation. The Nature and Effects of Colonialism in Uganda*. Nairobi: East African Literature Bureau 1974, 147-153.

⁵¹ Samwiri Rubaraza Karugire, *A Political History of Uganda*. Nairobi: Heinemann 1980, 120-121, 130.

⁵² Mahmood Mamdani, *Politics & Class Formation in Uganda*. London: Heinemann 1976, 120-135.

the marginal areas of the Protectorate were converted into labour reserves. It was migrant labourers who came to form a semi-proletarianised lower class, particularly in Buganda.⁵³ However, as will be seen later on, the creation of a proletariat and the pushing of cash crop production were not mutually exclusive; the colonial state seriously attempted to create a local labouring class in Buganda, but failed because of serious competition over labour from the local chiefs.

More recent works, being capable of larger syntheses, clearly present the early colonial period in Uganda as unprogressive in terms of economic and social development. Mafeje sees that the introduction of colonial capitalism and private property did not generate genuine economic development, but that old forms of dependence and accumulation prevailed under a colonial guise. British rule brought Buganda closer to 'feudalism' by augmenting the chiefs' power over the land and by allowing the extraction of traditional and new forms of tribute from the peasantry.⁵⁴ Hanson emphasizes the social consequences of one aspect of colonial rule in Buganda, namely private land tenure, and how it tended to erode the old moral economy based on reciprocity and redistribution, eventually leading to a decline in the political and social authority of the chiefs. She also sees that colonial rule interfered with local productive processes in a way which threatened the social reproduction.⁵⁵ According to Doyle, colonial rule in Bunyoro created large-scale migration and other social obstacles to reproduction which, together with famine and disease, undermined population growth and economic development.⁵⁶ Havinden and Meredith see that by the end of the 1930s, Uganda, together with many other British tropical colonies in Africa, was debt-ridden, undeveloped and suffering from increasing poverty and declining standards of living.⁵⁷

It is clear from the above that there is no consensus about the true nature of colonial rule in Uganda. The role of the chiefs in the colonial apparatus is not without ambiguities. Neither is the economic impact of colonialism, whether more beneficial or detrimental, completely clear. This is partly because most of the works published in previous decades have concentrated solely on political or economic issues rather than on social history. Such issues as health or social reproduction have received relatively little attention or have been dealt with independently of the broader political economic and social framework.⁵⁸ There is need for an approach

⁵³ Jan Jelmert Jørgensen, *Uganda. A Modern History*. London: Croom Helm 1981, 109-110.

⁵⁴ Archie Mafeje, *Kingdoms of the Great Lakes Region. Ethnography of African Social Formations*. Kampala: Fountain Publishers 1998, 93-108.

⁵⁵ Holly Elisabeth Hanson, 'When the Miles Came: Land and Social Order in Buganda, 1850-1928', Ph.D. thesis, University of Florida 1997.

⁵⁶ Doyle 1998, 303-304, 372.

⁵⁷ Michael Havinden and David Meredith, *Colonialism and Development. Britain and its Tropical Colonies, 1850-1960*. London; New York: Routledge 1993, 183, 205.

⁵⁸ For example, the sleeping sickness epidemic in Uganda has sometimes been analysed independently of social and economic circumstances. See Harvey Soff, 'Sleeping Sickness in the Lake Victoria Region of British East Africa, 1900-1915', *African Historical Studies* 2 (2) 1969, 255-268; Kirk Arden Hoppe, 'Lords of the Fly: Environmental Images, Colonial Science and Social Engineering in

which attempts to place colonial health and demographic history in a wider socioeconomic and political context.

OBJECTIVES OF THE RESEARCH

This aim here is to analyse the relationships between poverty, health and reproduction in early colonial Uganda. With a few exceptions, analyses of the economic and political history of colonial Uganda have tended to disregard the impact of colonialism on biological and social reproduction. Likewise, many studies of medical history in Uganda focus in the first place on the political, social and economic consequences of disease but do not analyse the role of these particular factors in generating disease and ill-health. It is argued here that health and disease cannot be understood in isolation from wider ecological, economic, social and political contexts. Ecological conditions set the framework for economic activity, which is directed by the biological and social needs of different social groups. Political decision-making is a tool by which different groups attempt to manipulate the realm of economics towards their own biological and social ends, i.e. successful biological and social reproduction. Competition over the economic spoils tends to foster economic and social inequalities between groups, leading to a situation in which the biological and social reproduction of politically weaker and less affluent groups may be threatened. These inequalities and threats and the political and social inventions, traditions and decisions that perpetuate them are the main objectives of this analysis.

While the aim is to identify the structures that generated and maintained poverty, we will at the same time examine the political and social practices and customs that were invented to prevent it. As will be seen, some social and cultural ideas and practices employed to fight poverty and destitution or to alleviate its physical effects may actually have worked against these goals. These inventions were nevertheless rational and coherent within the system of beliefs of the culture that created them, though their meaning for later generations may have been lost in the course of history. Some of the customs and social institutions were already rapidly changing in the nineteenth century, and in many cases colonial rule completed their transformation, or contributed to their gradual destruction. When old forms of social reproduction were largely failing, but before new opportunities emerged, there is every reason to speak of a crisis of social reproduction. The health and demographic repercussions of this crisis will be documented and discussed, for it is argued that the exceptionally severe public health crisis in Buganda and Bunyoro was largely attributable to the increased hunger and malnutrition caused by the partial destruction and paralysis of the local food systems under colonial rule.

Problems of poverty, health and reproduction have often been approached on a macro level, i.e. on the level of society, but an attempt will be made here to shed light on micro-level experiences, i.e. those of the individual, regarding poverty, destitution and ill-health, by showing their drastic consequences for human reproductive health. Because of the limited evidence, however, the individual-level approach cannot dominate the analysis. Instead, its role is to make concrete and

visible the deprivation and suffering that too often remains blurred behind abstract numbers and figures.

This study likewise attempts to clarify our picture of the nature of pre-colonial and colonial politics in Uganda and their role regarding poverty and reproduction. It portrays the pre-colonial states as heavily bureaucratic systems based on multiple economic, social and political dependences capable of serving the interests of the rulers and chiefs. It is argued that maintenance of state structures eventually constituted a major economic burden for the peasantry, increasing their vulnerability and thus endangering biological and social reproduction.

Lastly, the study also questions some previously held ideas about the nature of British colonial rule in Uganda, which has often been described as having been relatively free of coercion and violence⁵⁹ and, as seen above, economically beneficial. The destructive effects of colonial rule on production and reproduction are discussed, arguing that much of the misery and suffering so characteristic of early colonial Uganda was attributable on the one hand to the paralysing effect of colonialism on indigenous economic and social practises, and on the other to the extensive reliance on 'tradition' and 'traditional authority'. Therefore, instead of treating poverty and deprivation as something inherent to and rather typical of 'primitive' African societies - pre-colonial and colonial - it is argued that they were actually products of more or less deliberate political choices, both African and European, involving a considerable amount of coercion and violence.

Within Uganda, the scope of the research is confined to two old, neighbouring kingdoms of Buganda and Bunyoro. The fortunes of these kingdoms have been intertwined throughout the history, and they form an interesting couple in terms of comparison, with many shared cultural characteristics and social and political institutions, but with differing ecological environments and agricultural economies. Their differing historical experience in encountering British imperialism in the second half of the nineteenth century came to shape their contrasting roles and importance under colonial rule, the consequences of which are still visible even today.

The present research can be divided into three major parts, of which the first analyses pre-colonial society. Though the main focus lies on the early colonial period, it is necessary to provide a brief sketch of the development and deterioration of political and social institutions in the pre-colonial period in order to provide an adequate background for describing the changes brought by colonial rule. This will be done in chapters 2 and 3. The second part, chapters 4 - 6, will concentrate on colonialism and its discontents, starting from the establishment of the colonial economic system and proceeding to analyse its social and economic, and also health and demographic consequences. Disruptions to the Baganda and Banyoro production systems are demonstrated which apparently contributed to a life of 'diseaseful' poverty with frequent food shortages, famines, chronic malnutrition and disease. The third part, chapter 7, deals with the discovery of colonial poverty in the 1920s and 1930s. It demonstrates how the discovery was not made by political leaders or administrators but by colonial scientists, mainly doctors. For this reason, questions of poverty, hunger and malnutrition first became technical problems rather than political ones, something to be dealt with by colonial agricultural and medical

⁵⁹ See Brett 1973, 305.

professionals. It was only in the late 1930s, after the scale of poverty in the British colonies was finally realised, that poverty started to become a political question.

Although the research focuses on early colonial Uganda, i.e. 1894-1939, it is necessary to extend its scope to include the late pre-colonial period, for the reasons given above. The year 1939 marks the end of the high noon of colonialism in Uganda, during which some of the most unwanted characteristics of indirect rule were most pronounced. Decisions were made during this period which were widely questioned after the Second World War and partially amended by the new colonial development policies. The early colonial period also represents a culmination of the crisis of biological and social reproduction in Buganda and Bunyoro, the true nature of which was only partly realized by the late 1930s.

SOURCES

The greatest problem in writing African history, with the exception of North and South Africa, is the scarcity of reliable documentary sources. With few exceptions, mainly from West and East Africa, there are very few written documents from before the twentieth century. The material from the sixteenth to nineteenth centuries consists mostly of travel journals and diaries written by early European traders, soldiers, administrators, explorers and missionaries. Historians wishing to go back beyond the nineteenth century generally need to consult the archaeological literature, linguistics and dynastic traditions.

Within the context of the East African interior and Central Africa, the earliest surviving written sources date from the nineteenth century. European exploration reached Buganda and Bunyoro in the early 1860s, and in the following three decades the group of casual and more permanent visitors came to include soldiers, missionaries, doctors and administrators. These men formed a very heterogeneous group with different social backgrounds and motives, varying from scientific curiosity and a lust for adventure to egoism and self-interest, and their descriptions of Africa were naturally affected by their personal characteristics and agenda. For many, travel accounts were means of economic benefit and personal prestige, and authors frequently edited their original notes and diaries into a more reader-friendly form. Sometimes the line between fact and fiction, truth and fantasy, became blurred; in fact it is hard to know whether certain incidents actually took place at all, or whether they were only added in order to make the book sell. Another fact that might have distorted the picture given in journals was the physical and mental condition of the travellers. Europeans suffered a great deal from tropical illnesses and from the harsh conditions and the vicissitudes of caravan travel, which must have affected their judgement. Hunger, thirst, fever, rain, burning sun, mosquitoes, flies and other nuisances and obstacles may have diverted their energies towards their own poor condition rather than to the objective observation of people and cultures, which, through the veil of obscurity and frustration, often appeared to be strange and annoying.⁶⁰

⁶⁰ See Robert I. Rotberg (ed.), *Africa and Its Explorers. Motives, Methods, and Impact*. Cambridge (Mass.): Harvard University Press 1970, 1-11 *passim*.; Koponen 1988a, 25-27.

Much of the above likewise holds good for the accounts of early colonial administrators and missionaries. Physical hardships afflicting officers stationed in Uganda affected their ability for documentation. A single officer manning a distant outpost might be ill for weeks, during which his administrative duties and reporting suffered. Partly because of this and partly because of the need to convince, impress, or placate superiors, the reports were often tailored. A medical officer stationed in Uganda recalled how medical reports were prepared in the 1940s: '... it was [the] practice to take 10% off each epidemic disease figure in the previous year's report, add 10% of the previous years to the current year to show that the work had increased and distribute the 10% reduction in the number of epidemic disease patients over all other common diseases, carefully avoiding exotica which might have aroused suspicion.'⁶¹

The unpublished documentary material of the colonial administration include both internal and external correspondence, as well as various reports written by district and provincial officers on an annual, quarterly or monthly basis. The district reports and correspondence contain information on political and administrative issues such as taxation, population, labour recruitment, local administration, law, etc., and they also have information on climate and rainfall, agriculture, disease, health and the food situation. In general, their scope is large, though in some cases their information is not based on first-hand observation but on questioning of local informants, mainly chiefs. Yet this documentary material provides a very interesting and also quite broad approach to early colonial history in Uganda, especially before the 1930s.⁶² The voluminous correspondence of the Uganda Protectorate officials with the Colonial Office in London likewise includes reports enclosed from officers in the field and other actors on various subjects. Personal papers, memoirs and diaries of officers, mainly doctors in this case, provide depth and a grass-root perspective for the events described in the official documents.

The documents published by the British colonial administration in Uganda consist of the annual reports of the various colonial departments, the annual statistics (the Blue Books) and the population assessments undertaken by the colonial government. These sources have been much criticized, and the reliability of the colonial population and agricultural statistics - both crucial for this research - has been seriously questioned.⁶³ In Uganda, for example, much information was gathered during the annual collecting of taxes by questioning the assisting local chiefs. This method was obviously extremely prone to misunderstandings, and there were often no means of checking the information received. The colonial administrators themselves were aware of the shortcomings, and did not hesitate to

⁶¹ J.N.P. Davies, untitled typescript. Mss. Afr. s. 1872. Rhodes House Library (RH).

⁶² The material in the Uganda National Archives was properly organised only up to 1929. Most of the evidence concerning the 1930s therefore had to be derived from other sources.

⁶³ For problems related to colonial demography and vital statistics, see Bruce Fetter, 'Demography in the Construction of African Colonial History', in Bruce Fetter (ed.), *Demography from Scanty Evidence. Central Africa in the Colonial Period*. Boulder; London; Lynne Rienner 1990, 1-22. See also R.R. Kuczynski, *Demographic Survey of the British Colonial Empire. Vol. 2: East Africa*. London: Oxford University Press 1949, 266-320.

admit this. They considered the colonial population statistics fairly reliable for judging general trends and making broad estimates, but poor for accurate calculations. Similarly, information on agriculture and farming was obtained by simply multiplying the number of households or farms in a given area by the estimated average farm and plot sizes for that area. Needless to say, the early colonial agricultural statistics are highly inaccurate in terms of the areas and crops cultivated, and their value for research purposes is further weakened by the overemphasis on cash crop cultivation. There is very little if anything on food production, which makes them a rather poor source in this respect.

Another important source of information includes the annually published reports of the Uganda Medical Department, which contain information on population and diseases. Although the early estimates are subject to serious shortcomings because of the weakness of the early colonial medical establishment, it is believed that the general trends visible in the reports, perhaps with the exception of early population figures, can fairly safely be accepted. This is not to say that there are no serious flaws in these reports; like the colonial agricultural department, the medical department relied on local chiefs and missionaries for their information, and, as seen above, the officers themselves modified the reports quite recklessly.

The publications and unpublished documents of missionary societies active in Uganda provide an abundant body of evidence on social, political and medical issues. The missionary journals and other published material tend, however, to present a rather polished picture of life and living in Uganda. Politically improper questions were withdrawn, and criticism of the missionary societies or the whole colonial establishment in Uganda were largely removed from journals and published annual letters.⁶⁴ The missionary journals nevertheless provide interesting and important evidence on many subjects, including medical missionary and relief work. Though permeated with religious zeal and often aimed at convincing and astonishing the reading public in Britain, they contain some valuable descriptions about early health conditions in Uganda and the nature of early medical work among the Africans. Though the quality of the articles varies, often presenting only the negative sides of the Africans and their culture, there are some valuable reports on rural living conditions in the late nineteenth and early twentieth centuries. The unpleasant things withheld from journals and published reports are frequently encountered in official and unofficial correspondence, memoirs and diaries, which give the necessary depth and perspective to the events that took place.

The Church Missionary Society's Mengo Hospital archives provide much interesting historical evidence. They include some of the correspondence of the C.M.S. doctors from the early twentieth century onwards as well as the clinical case files and admission register of the hospital itself. The case files contain a large number of actual hospital cases with full clinical descriptions, starting from 1897 and continuing to the 1940s. The admission register covers the period between 1903 and 1927, though some years are partly or entirely missing. Though providing an exciting and excellent source for numerous research purposes, the material is subject

⁶⁴ See Crabtree to Baylis, 24 Nov. 1902. G3/A7/O/1903/2/Church Missionary Society Archives (CMS); Hanlon to Casartelli, 15 April 1896. UGA/4/II/Mill Hill Mission Archives (MHM).

to some shortcomings.⁶⁵ The amount of information included in the individual case files varies considerably, and there are hardly any "perfect" cases in this sense. Ages are often missing from the earliest documents, or have been estimated by the doctor, and these estimates are problematic as they often seem to be very vague. The numbering of cases was also slack, especially during the first years of operation, and some cases have not been given a number at all. Also, some confusion exists between the admission register and the case files, as numbers do not necessarily refer to same cases, so that one has to check each case by comparing the information given in the register with that in the case file.

Diagnoses were also subject to variation and were affected by various causes of interference. Less notes were taken on busy days, and they were often written down in a hurry and left incompletely. Sometimes the language skills of the doctor were insufficient to understand properly what the problem was, and misinterpretations arising from cultural and language differences left their mark on the notes. The diagnoses were also affected by the informants and their physical condition, state of health and communication skills. The authority represented by the doctor may also have affected the testimonies given. Cultural preferences may have shaped the testimonies given to doctors as well, so that a woman attending to give birth may have reported several earlier pregnancies just in order to emphasize that she was prolific, while she may actually have had only a few. The diagnoses, too, were subject to mistakes because of the ignorance of the doctors themselves. Dr. Albert R. Cook, the founder of the Mengo Hospital, was a fresh young doctor, for example, enthusiastic but rather inexperienced, and the same applied to his brother, Dr. J. H. Cook, and when they arrived in Uganda they could hardly have been regarded as specialists in tropical medicine with their limited experience of African disease environments and tropical diseases.

The hospital material is not entirely reliable in terms of the diseases encountered. Besides the hospital, health care was provided at a small number of dispensaries, and the majority of those in need of medical attention were treated there and never reached the hospital at all. Thus the most common ailments are not necessarily visible in the hospital records and statistics, for only diseases regarded as serious, or cases requiring special treatment, were taken into the hospital. Unfortunately no records survive from these dispensaries.

The patients attending the hospital do not represent the whole population of Buganda, although people arrived at the clinic from far and near. There seems to be a male bias in the cases, however, presumably because it was easier for the men to leave their farms and come to hospital than for the women.⁶⁶ Inpatients were mainly either Protestants or 'heathens', but there were also Catholics, and some Muslims and Indians. Although the social status of the bulk of the inpatients was unknown, they presumably formed a cross-section of the nearby population.

⁶⁵ For more about the suitability of the materials' for historical research, see Jan Kuhanen, 'Hospital Records as Source Material for African Historical Studies. The C.M.S. Mengo Hospital Case Files and Admission Register', *African Research & Documentation* 85 2001, 15-24.

⁶⁶ This point is well illustrated in the Government-run hospitals in Uganda, where most of the inpatients were male. See Uganda Protectorate. *Blue Book 1911-12*. Government Printer, Entebbe 1912, section Ca 26,53.

Despite these shortcomings, the Mengo Hospital case files are a rich source of evidence providing much-desired grassroot-level information. Individual case histories offer a window for understanding the reproductive problems faced by women in early colonial Buganda, for example, thus providing means of explaining the demographic developments observed at that time. Considering the possibilities offered by the evidence, it is somewhat surprising that it has not been more widely used by historians. That said, it is regrettable that the human and economic resources available for this study did not allow more thorough and extensive use to be made of this material.

The Mengo Hospital archive has been subjected to some damage during its history, and part of the material is in poor condition. This sometimes makes consultation difficult, although it can be said that the general condition of the material is satisfactory.

POVERTY, HUNGER AND HEALTH: A CONCEPTUAL AND THEORETICAL FRAMEWORK

POVERTY AS DEPRIVATION AND VULNERABILITY

There always have been, and always will be, poor people in every human society at any given time. Poverty is often relative, meaning that definitions of the concept may vary from one society or culture to another, which poses a challenge for historians attempting to write on it. Poverty defies any simple definitions, even within a single society and within a limited period. Definitions of poverty, often referred as 'poverty lines' or standards, drawn up by economists or social scientists on the basis of contemporary and often quantitative data, have varied from physiological standards to social definitions, and from the idea of basic needs (extending the concept to housing, health and education needs) to a structural definition of poverty as a product of a social system that reflects differences in access to the sources of economic and political power between groups. The social definition, in focusing on the underlying causes of poverty, is the only approach which necessarily incorporates a historical knowledge of the roots of the phenomenon.⁶⁷ The value of these modern definitions of poverty for historians has been questioned. In Africa and much of the Third World, measurements based on quantitative data are useless, since the data required are either non-existent or highly unreliable.⁶⁸ Instead of measuring and studying poverty with models derived from modern-day experience, historians should seek the concepts and definitions of poverty present in historical societies at historical times, in order to place poverty in

⁶⁷ Jossy R. Bibangambah, 'Approaches to the Problem of Rural Poverty in Africa', in Fasil G. Kiros (ed.), *Challenging Rural Poverty in Africa*. Trenton: World Press 1985, 25-6.

⁶⁸ Iliffe 1987, 2. For modern measurements poverty, see Philip Payne, 'Malnutrition and Human Capital: Problems of Theory and Practise,' in Edward Clay & John Shaw (eds.), *Poverty, Development and Food*. Basingstoke: Macmillan 1987, 23-41; Sudhir Anand & Christopher Harris, 'Food and Standard of Living: An Analysis Based on Sri Lankan Data', in Jean Drèze & Amartya Sen (eds.), *The Political Economy of Hunger. Vol.1: Entitlement and Well-Being*. Reprinted. Oxford: Clarendon Press 1993, 297-99; Paul Shaffer, 'Gender, Poverty and Deprivation: Evidence from the Republic of Guinea', *World Development* 26 (12) 1998, 2119-2135; John Gibson, 'Measuring Chronic Poverty without a Panel', *Journal of Development Economics* 65 2001, 243-266.

its proper historical and cultural context. But there is a problem here, too: historical definitions of poverty tend to be obscure, vague and often rhetorical, written by a colourful group of officials and authorities with their own agendas, and lacking the voice of the poor themselves.⁶⁹

Though modern definitions of poverty may be misleading in their ignorance of past values and ways of life, it is nevertheless beneficial to analyse briefly the recent discussion that has revolved around poverty in order to illuminate some of its general characteristics and linkages with phenomena such as hunger and health. As noted above, the greatest problem in defining poverty is its relative nature: a person or a group considered poor in one society at one time may be considered well-off or wealthy in another at the same time. Thus any definition of poverty must arise from the social reality of the society in question:

'Individuals, families and groups in the population can be said to be in poverty when they lack the resources to obtain the types of diets, participate in the activities and have the living conditions and amenities which are customary, or are at least widely encouraged and approved, in the societies to which they belong. Their resources are so seriously below those commanded by the average individual or family that they are, in effect, excluded from ordinary living patterns, customs and activities.'⁷⁰

Townsend argues that poverty can only be measured objectively with the concept of 'relative deprivation'. To do this, one needs information on objective or actual deprivation and on conventionally acknowledged or normative deprivation and subjective deprivation.⁷¹ If deprivation is understood as a conglomeration of unmet needs, then objective or actual deprivation would constitute a situation where an individual or group cannot fulfil even its basic needs for nutrition, clothing and shelter.⁷² Extreme deprivation of this kind has also been referred to as absolute poverty.⁷³ Alcock argues that even absolute poverty, the minimum needed for humans to survive, is relative and cannot be objectively defined, for requirements with regard to food, clothing and shelter vary according to the climatic conditions, quality of the food, gender and even genetic factors.⁷⁴

If objective deprivation is fundamentally relative, normative and subjective deprivation are even more so. Their definitions arise from the cultural framework of

⁶⁹ Robert Jütte, *Poverty and deviance in early modern Europe*. Cambridge University Press 1994, 45-6.

⁷⁰ Peter Townsend, 'Poverty as relative deprivation: resources and style of living', in Dorothy Wedderburn (ed.), *Poverty, inequality & class structure*. Reprinted. Cambridge University Press 1975, 15.

⁷¹ Townsend 1975, 26.

⁷² Pete Alcock, *Understanding Poverty*. Basingstoke: Macmillan 1993, 76.

⁷³ Alcock 1993, 58; Iliffe 1987, 2.

⁷⁴ Alcock 1993, 60-1.

the society and from personal sensations and preferences. The deprivation experienced by the poor is dependent on the condition of the non-poor; feelings of deprivation are felt when one is lacking or unable to secure something considered essential for an acceptable style of living.⁷⁵

All three forms of relative deprivation result from inequalities in resource allocation, or entitlements as Sen calls them, within society. Some people have more limited access to labour, trade, production and inheritance and other property transfers than others. If access to one resource or entitlement is blocked, the loss may be compensated for by greater access to another.⁷⁶ The more entitlements are being restricted or even denied, the more vulnerable a person or a group will be. This vulnerability, which characterizes poverty, means an incapability to react to social conventions such as marriage payments, weddings and funerals, or to unexpected events such as sickness, childbearing, accidents, natural disasters, or virtually anything requiring extra spending.⁷⁷

In his analysis of rural poverty in the Third World, Chambers writes about clusters of disadvantage, or alternatively, dimensions of deprivation.⁷⁸ These include poverty, social inferiority, isolation, physical weakness, vulnerability, seasonality, powerlessness and humiliation.⁷⁹ It is worthwhile examining these concepts in greater detail. Chambers understands poverty as one of the dimensions of deprivation, being distinguishable from other dimensions such as physical weakness, isolation, vulnerability and powerlessness. Poverty is essentially a lack of necessities, assets and incomes, and as such it contributes to the creation of the other dimensions, especially the four just mentioned, which in turn deepen poverty. Chambers calls this 'a deprivation trap', something that easily becomes a self-supporting and ever-deepening vicious circle. But what is essential here is the initial cause of poverty, the 'poverty ratchets', as Chambers calls them, which are created by a loss of assets or rights on the part of individuals or groups. The loss may take place because of social conventions (a conventionally accepted lifestyle and behaviour), disasters (drought, flood, famine, war), physical incapacity (illness, accidents, disability), unproductive expenditure (taxes, hospital fees), or exploitation (economic, political, religious, or class, gender or age-based).

Chambers stresses the difference between vulnerability and poverty in the broader sense: vulnerability is not 'lack or want, but exposure and defencelessness.' Vulnerability means external exposure to shocks, stress and risk, and also internal

⁷⁵ Amartya Sen, *Poverty and Famines. An Essay on Entitlement and Deprivation*. Oxford: Clarendon 1981, 10, 15-17; Townsend 1975, 24, 28-9.

⁷⁶ Townsend 1975, 33; Sen 1981, 2.

⁷⁷ Robert Chambers, *Rural development. Putting the last first*. Reprinted. New York: Longman 1990, 103-4.

⁷⁸ Chambers 1990, 109-110; Robert Chambers, *Poverty and Livelihoods: Whose Reality Counts?* Brighton: IDS Discussion paper 347, 1995, 18-21.

⁷⁹ This discussion draws from Chambers 1990, 109-115, and Chambers 1995, 118-21. A good collection of essays on poverty and seasonality can be found in Robert Chambers, Richard Longhurst and Arnold Pacey (eds.), *Seasonal Dimensions of Rural Poverty*. London: Frances Pinter 1981.

defencelessness - the 'lack of means to cope without damaging loss.' The more vulnerable one is, the poorer one is likely to become. The other dimensions of deprivation seem to determine the level of vulnerability itself. Physical weakness is often one of the major causes of deprivation in the developing world. A healthy, strong body is an asset and a major resource in itself. Physical weakness or sickness on the part of any household member will affect the household's livelihood either through loss of labour or through increased health expenditure, or both, and is therefore an important cause of poverty. The sick become a burden to the rest of the household and face a decline in their social status. Social inferiority is often linked to age, sex, ethnicity, race, occupation, etc., and also health, in that children, women, the elderly and the sick are the most vulnerable in this sense. This inferiority makes them powerless and dependent on the help and goodwill of others, and as such easy objects of exploitation and humiliation.

Partly for the reasons mentioned above, and partly on account of geographical factors, the poor are often unseen and unheard. Sickness, low social standing, feelings of humiliation and shame, and powerlessness in terms of lack of the necessary skills and knowledge, limit participation in the affairs of the community and society. Many community leaders are well-to-do persons, mostly male, and they have their own agenda, which rarely includes the poor and their needs. Poverty and deprivation also go unnoticed because of geography, physical isolation and seasonality. People live in distant areas only rarely visited by the authorities or by relief workers since the roads may only be accessible during the dry season. Many women are continuously working in the fields with their malnourished children, and the sick are often restricted to separate locations. The rainy season, when outside observers are mostly absent, coincides with the time of particularly heavy agricultural work, food shortages, sickness, the later stages of pregnancy and limited access to services such as health and maternity care. Thus the plight of the rural poor remains unnoticed at the times when its manifestations are at their most severe.

It is important to note that vulnerability is socially and politically generated. Its roots lie in the economic and political sphere, which determines access to political power and economic resources. People with no political power rarely have safe access to resources such as land, or to services such as education, which would enable them to improve their situation and reduce the risk of external hazards. Instead, particularly in the hierarchical societies of Africa, the social reproduction of vulnerability has been and still is a means of political control and the exercise of power.⁸⁰

It is clear that poverty in Africa, as in much of the Third World, is caused by many different sets of circumstances operating together. Climate, disease, population growth, colonialism, neo-colonialism and war all contribute to the problem, but none of them can alone be pinpointed as the primary cause of poverty.⁸¹ In order to understand the logic behind the forces that create and maintain

⁸⁰ Piers Blaikie, Terry Cannon, Ian Davis and Ben Wisner, *At Risk. Natural hazards, people's vulnerability, and disasters*. London: Routledge 1994, 21-24; Igor Kopytoff, 'The Internal African Frontier: The Making of African Political Culture', in Igor Kopytoff (ed.), *The African Frontier. The Reproduction of Traditional African Societies*. Bloomington: Indiana University Press 1989, 35-37.

⁸¹ Anthony O'Connor, *Poverty in Africa. A Geographical Approach*. London: Belhaven Press 1991, 167-9.

poverty, it is advisable to examine their history. Climatic, ecological and demographic change, the history of epidemics, colonialism and political, social and cultural changes need to be understood not only separately but in the ways in which they have interacted in history and how this interaction has brought about the massive problem of poverty known to us today.

POVERTY IN HISTORY

Ilfie divides historical poverty in Africa into absolute and relative types. He understands relative poverty as described above, but criticizes any attempts to define absolute poverty any further, for, as stated above, these definitions based on quantitative data derived from modern social, economic and nutritional studies, are useless for historians, at least in the context of Africa, since such data are non-existent here before the 1930s.⁸² He further divides poverty into structural and conjunctural types, the former being caused mainly by the lack of access to labour, and the latter by natural and political hazards such as droughts, famine and war. In his opinion, poverty in Africa would seem to be less affected by such factors as landownership, technology or religion.⁸³ The nature of poverty in Africa has become liable to change in the course of history, however. 'Land scarce' poverty, as Iliffe calls it, emerged during the colonial period and afterwards. Sender and Smith, in their analysis of post-colonial Tanzania, stress the importance of land rights, claiming that the lack of access to land constitutes the main reason for poverty in contemporary Africa.⁸⁴ They emphasize the poverty-alleviating effects of paid labour, and look on small-scale peasant farming, which has been propagated as an ideal solution for African development, as effectively maintaining rural poverty and gender inequality. They argue that in rural Tanzania only large landowners, with good access to either female labour, in terms of polygyny, or hired agricultural labour, or both, are able to escape from poverty.⁸⁵ A more historical approach relates poverty to the loss of political autonomy and self-regulation caused by colonialism, and depicts anti-colonial resistance as a popular struggle against and response to impoverishment.⁸⁶ This approach can be criticized, however, for disregarding the pre-colonial political and social divisions and assuming pre-colonial Africa to have been undynamic, harmonious and tension-free. Shortcomings of this kind may be

⁸² Iliffe 1987, 2.

⁸³ Iliffe 1987, 4-6.

⁸⁴ John Sender and Sheila Smith, *Poverty, Class, and Gender in Rural Africa. A Tanzanian Case Study*. London; New York: Routledge 1990, 31; Iliffe 1987, 6.

⁸⁵ Sender and Smith 1990, 36-7, 43-5, 50.

⁸⁶ Werner Biermann, 'Introduction: Contextualising Poverty In Africa', in Werner Biermann and Humphrey P.S. Moshi (eds.), *Contextualising Poverty in Tanzania. Historical Origins, Policy Failures and Recent Trends*. Dar-es-Salaam University Press 1997, 2-3; Werner Biermann, 'A Survey of Generative Factors of Poverty: Colonialism and Politics of Transformation', in Biermann and Moshi 1997, 19-39; Kjekshus 1977, 181; Walter Rodney, *How Europe Underdeveloped Africa*. Washington: Howard University Press 1974, 33-71.

avoided by approaching poverty as a genuinely historical phenomenon and understanding impoverishment essentially as a long-term process involving varying levels of insecurity in terms of food, income and property rights, not forgetting the personal and psychological aspects of poverty and destitution and their effect on the wider moral economy.⁸⁷

Much of our knowledge of pre-colonial, colonial and also post-colonial East Africa comes from western observers and sources. This makes research into the history of African poverty difficult because of the differences between Europeans and Africans in their understanding of poverty, especially in the late nineteenth and early twentieth centuries. In his groundbreaking study of poverty in London in 1889, Charles Booth defined it as follows:

'By the word "poor" I mean to describe those who have a sufficiently regular though bare income, such as 18s to 21s per week for a moderate family, and by "very poor" those who from any cause fall much below these standards. The "poor" are those whose means may be sufficient, but are barely sufficient, for decent independent life; the "very poor" those whose means are insufficient for this according to the usual standard of life in this country. My "poor" may be described as living under a struggle to obtain the necessaries of life and make both ends meet; while the "very poor" live in a state of chronic want.'⁸⁸

This is very close to Iliffe's categorization of 'ordinary poor' and 'very poor' in historical Africa.⁸⁹ Though Booth's definition was based on a quantitative analysis of incomes, it also had a qualitative side, the assumption of a 'usual standard of living.' The majority of the British did not share Booth's refined ideas about the poor, however. In Victorian England poverty was seen as a 'shameful disease' of the modern age. Christian and philanthropic communities regarded it as a cause of moral degradation, and therefore attempted to impose strict social control and surveillance over the poor - on their personal lives, morals, religious practices, personal hygiene and everyday behaviour. The control was justified by the alleged Malthusian threat posed by the rapidly increasing poor population.⁹⁰ Studies of poverty undertaken in

⁸⁷ Vigdis Broch-Due and David M. Anderson, 'Poverty & the Pastoralist: Deconstructing Myths, Reconstructing Realities', in David M. Anderson and Vigdis Broch-Due (eds.), *The Poor Are Not Us. Poverty and Pastoralism in Eastern Africa*. London: James Currey 1999, 5-6. For moral economy, see James C. Scott, *The Moral Economy of the Peasant. Rebellion and Subsistence in Southeast Asia*. Westford: Yale University Press 1976; Michael Watts, *Silent Violence. Food, Famine & Peasantry in Northern Nigeria*. Berkeley; Los Angeles: University of California Press 1983.

⁸⁸ Charles Booth (ed.), *Labour and life of the people. Vol I: East London*. Second edition. London: Williams and Norgate 1889, 33.

⁸⁹ Iliffe 1987, 2.

⁹⁰ Bronislaw Geremek, *Poverty. A history*. Oxford: Blackwell 1994, 1,4, 232-3, 242; M.E. Rose, 'Social Change and the Industrial Revolution', in Rederick Floud and Donald McCloskey (eds.), *The Economic History of Britain since 1700. Volume 1: 1700-1860*. Cambridge University Press 1981, 273-75; Gertrude Himmelfarb, *The Idea of Poverty. England in the Early Industrial Age*. New York: Vintage Books 1985, 100-107, 323-325.

late nineteenth and early twentieth century Britain stress erosion of the moral economy. Otherwise they see poverty primarily as income-poverty, where inadequate and irregular incomes together with large family size and careless spending maintained this condition among the poorest classes. This resulted in physical debility and sickness, further reducing earning possibilities.⁹¹ Thus the popular British concept of poverty at the end of the nineteenth century understood it as poor economic performance, characterized by corrosion of morals and behaviour, irresponsibility, laziness and sickness. Poverty was seen as a consequence of one's own lack of effort, i.e. the poor had only themselves to blame for their situation.

It would be quite pretentious to speak of an 'African' understanding of poverty as something uniform, unique and probably inherently different from the western concept, for there hardly exists any all-encompassing concept of poverty for Africa in general. By an 'African' idea of poverty, we mean here ideas that were related to 'being poor' in one part of tropical East Africa, mainly Buganda. It is assumed that poverty, like many other political, economic, cultural and social features, bore similar connotations from one society to another, despite the marked variations between ecological environments and human subsistence strategies within this relatively small north-western corner of interlacustrine Africa.

Production of exchangeable agricultural surplus and prestige goods was mainly dependent on the access to labour, which was in turn dependent on the reproductive capacity of society and its ability to acquire a servile population. Marriage allowed the exchange and circulation of women in exchange for prestige goods given as bridewealth payments. These payments in effect enabled a man to hire the productive and reproductive capacity of a wife from her kin. The women would cultivate the land and produce food, and give birth to children, who would in time enrich the family with their own work and enable further marriages. Lineages with a greater number of pubescent girls would be in dominating positions in relation to those who had few, since they could master a greater volume of production of essential goods and attract suitors eager to marry, both factors increasing their economic power and facilitating ties of economic and social dependence. Young unmarried men, still lacking the material wealth produced by women cultivators, were dependent on their fathers, lineage elders or patrons in terms of bridewealth. They had to borrow from their elders and chiefs, and often agreed to give their unborn children as pawns for debt. This way the system made juniors dependent on their elders and created conditions for debt bondage and slavery. Lineages also acquired a servile population through compensation and warfare. If one member of a lineage was harmed by an outsider, it would claim compensation, which usually meant that the lineage of the offender would give away one of its members to be redeemed later, or if not redeemed, to remain in servitude. Slaves were acquired in wars and raids, sometimes being reclaimed by their lineages of origin, but often remaining in their new kin groups, where they enjoyed inferior legal status but were reasonably well treated since they contributed to the welfare of the community through their work. Thus in predominantly agricultural societies it was people who formed the crucial means of production, and, as a means to greater

⁹¹ B. Seebohm Rowntree, *Poverty. A study of town life*. London: Macmillan 1901, 40-6, 58, 60-1, 142; Booth 1889, 38.

productivity and greater wealth, humans became one of the chief economic assets, something which could be accumulated and exchanged. Capital in much of Africa therefore took on a social form, for access to labour, especially that of women, secured not only material production but also the social and biological reproduction of communities.⁹²

Social capital can be defined as trustworthiness existing in relations between members of the community, involving a reciprocal exchange of gestures, goods and services which maintains social cohesion and solidarity, having evolved from the social dynamics characteristic of the community. Trustworthiness creates social integration, or belonging, with respect to family, kin or clan, which in turn gives a person certain rights, e.g. the right to occupy and cultivate land, or the right to marry. Social capital is not all-encompassing or all-incorporating but is inherently exclusive and constantly tested in crisis situations. Within a family or kin, erosion of trust brings loss of rights and social isolation, and persons who are excluded often experience a lack of access to labour, land, marriage or inheritance. It seems that communities with a high level of social capital, i.e. trust, openness of communication, etc., fare better than communities with low level of social capital, where mistrust generates economic, social and political inactivity and insecurity.⁹³ Loss of social capital would therefore seem to precondition poverty by marginalising individuals and groups, but this alone is not, as we have seen, the sole cause of poverty.

In the *kiganda* folk tradition⁹⁴ poverty was related to social exclusion, or social isolation, which may have been a result of laziness, disobedience, physical incapability (such as barrenness in women), sickness, or old age.⁹⁵ Securing

⁹² Claude Meillassoux, *Maidens, Meal and Money. Capitalism and the domestic community*. Cambridge University Press 1981, 42-47, 72-74, 78-81; Igor Kopytoff and Suzanne Miers, 'African Slavery as an Institution of Marginality', in Suzanne Miers and Igor Kopytoff (eds.), *Slavery in Africa. Historical and Anthropological Perspectives*. Madison: The University of Wisconsin Press 1977, 10-12; Mafeje 1998, 83-5; John Thornton, *Africa and Africans in the making of the Atlantic World, 1400-1680*. Cambridge University Press 1992, chapter 3; John C. Miller, *Way of Death. Merchant Capitalism and the Angolan Slave Trade 1730-1830*. London: James Currey, 1988, 48-54; Philip Curtin, Steven Feierman, Leonard Thompson and Jan Vansina, *African History*. London: Longman 1978, 156-161; Koponen 1988a, 389.

⁹³ Goran Hyden, 'The social capital crash in the periphery: an analysis of the current predicament in sub-Saharan Africa', *Journal of Socio-Economics* 30 (2001) 161-163; M. Janice Hogan, 'Social capital: potential in family social sciences', *Journal of Socio-Economics* 20 (2001) 151-155; Kopytoff and Miers 1977, 17; Jennifer Widner and Alexander Mundt, 'Researching social capital in Africa', *Africa* 68 (1) 1998, 1-24.

⁹⁴ Ferdinand Walser, *Luganda Proverbs*. Berlin: Dietrich Reimer 1982. Walser was a Catholic missionary active in Uganda, and he organized proverbs collected by a number of authors in the late nineteenth and early twentieth centuries into a single volume.

⁹⁵ 'Omukadde afa empewo n'amaddu' - 'Old man dies of cold and hunger'; 'Omwavu takwana' - 'A poor man has no friends'; 'Omunaku kaama: yeerandiza yekka' - 'A person in trouble is like the yam plant: it climbs upwards by its own efforts'; 'Bukulu bw'omu: Kwesitukira' - 'To be old and alone: means "help yourself"'; 'Ekisa ky'omugumba: kija emmere eggawo': 'Pity comes to a barren woman: when the food is nearly finished'; 'Nnantaganyula: ng'omunafu omugumba' - 'A useless person: like a lazy woman who is barren'. Walser 1982, 124, 294, 371, 383, 400.

adequate material wealth, often referred as adequacy and quality of food, required constant efforts, and when one became unable to work constantly for this aim one was likely to face poverty and destitution.⁹⁶ One could place one's hope in one's children - if there were many, maybe one given to a chief would eventually become a chief himself and take care of his poor parents.⁹⁷ If one did not manage to keep up or create new social ties, however, the outcome would be loneliness and isolation, which meant falling out of the community and being utterly unable to provide oneself with food and the other necessities of life. A poor man would experience difficulties in terms of marriage, having nothing to give as a bridewealth payment, he would find it hard to secure a wife.⁹⁸ No wife meant no children, i.e. no one to look after his needs when he grew old. Poverty was also seen as a product of social hierarchies and subjugation; the peasants had to enrich the chiefs with their work while they themselves remained poor.⁹⁹ However, as we shall learn later, this practice which tied the welfare of the elite to the work of the common people also acted to secure the subsistence of the peasant in troubled times.¹⁰⁰ Chiefs were expected to cherish their relations with their hardworking peasants and to help them when they were struggling. During hard times it was the prosperity of the chief that was expected to rescue the peasant.

The above characterization of the *kiganda* idea of poverty is at its best impressionistic, but it has some features which bear significance and will be put in their proper context later. The crucial idea that constitutes poverty is isolation, or not belonging, which makes it impossible for one to meet the social conventions of the community. A material standard of living seems to be less significant; for as long as one belongs, one will enjoy a socially accepted standard of living and reasonable security in terms of food and other necessities. In order to belong, one has to work and contribute to the welfare and common good of the community. Failure to do so for one reason or another would bring decline in social status and social capital,

⁹⁶ 'Eby'obugagga ntuiyo: bw'owummula nga bikala' - 'Riches are like perspiration: if you rest, they dry up'; 'Obugayaavu: buzaala obunafu' - 'Laziness begets weakness'; 'Obusenze butta munaanya' - 'Serfdom kills the lazy man - he will be sent away soon.' Walser 1982, 112, 307, 311.

⁹⁷ 'Mu abaana abangi: timubula azza nmoma' - 'Amongst many children, there is surely one who will become chief'; 'Ssebaana bangi: sikubula alya nmoma' - 'Somebody with many children: one of them will certainly receive a chieftainship'. Walser 1982, 253, 437.

⁹⁸ 'Obwavu tebukumanyisa gw'oyagal' - 'Poverty does not let you know whom you might love - when you have nothing there's no way of showing your love'. Walser 1982, 316.

⁹⁹ 'Omunaku y'amala ebibamba: abaana b'emmesse be bakuza ab'embwa' - 'A poor man provides the means of meeting the needs of the rich: the young of the mouse make the young dogs grow - peasants make the chiefs rich.'; 'Mmere egulwa: kwe kugikolera ekisaakaate' - 'Food must be paid for: the peasant goes to work for his chief in order to be left in peace in his *kibanja* [garden]'; 'Abaana ab'omwamu: bakazu ab'omugagga' - 'The children of the poor man make those of the rich one fat'. Walser 1982, 5, 250, 383-4.

¹⁰⁰ 'Akuwa okulya: y'akutwala omuluka' - 'He who feed[s] you makes you his tenant'. Walser 1982, 30.

making one more vulnerable in times of crisis. This would seem to be the especially case with women, old people and the sick.¹⁰¹

HUNGER, FAMINE AND POVERTY

The hunger, malnutrition and ill health that characterize poverty in the Third World today have their historical roots.¹⁰² In order to understand how poverty and hunger have interacted synergistically in history, the rather broad concepts of hunger, famine, starvation, malnutrition, and undernutrition must be outlined in greater detail. Hunger denotes a lack of one basic human need, food. It can be broadly defined as a 'condition resulting from an individual's inability to eat sufficient food to lead a healthy and active life',¹⁰³ or 'an inadequacy in individual dietary intake relative to the kind and quantity of food required for growth, for activity and for the maintenance of good health', being either voluntary or involuntary,¹⁰⁴ or as an 'acute and persistent undernourishment that causes physical discomfort and pain'.¹⁰⁵ The three definitions, despite their similarity, are drawn from slightly different approaches to the problems of hunger and famine, underlining the elusiveness of these concepts. In the following discussion hunger will be understood as a historical problem, arising primarily from environmental and ecological conditions, yet largely manageable through social and political actions and decisions. It is believed that an understanding of hunger requires a historical understanding of the social and political responses to environmental challenges and consequent food shortages. Thus hunger and famine provide a window on the social structure of society. It is also important to try to understand how hunger and famine were appreciated by contemporaries, for this understanding was reflected in the actions they took to deal with the situation.¹⁰⁶

Hunger and famine are sometimes used as equivalents, which can be misleading,¹⁰⁷ as there can be hunger without famine. In pre-colonial Africa, as in much of contemporary rural Africa, seasonal fluctuations in food supply bring

¹⁰¹ See also Iliffe 1987, 7, 59-60.

¹⁰² Diana Wylie, *Starving on a Full Stomach. Hunger and the Triumph of Cultural Racism in Modern South Africa*. Charlottesville: University Press of Virginia 2001, 3-10; Carole M. Counihan. *The Anthropology of Food and Body. Gender, Meaning, and Power*. London; New York: Routledge 1999, 7; Broch-Due and Anderson 1999, 6; Sen 1981, 13-4.

¹⁰³ Joachim von Braun, Tesfaye Teklu, and Patrick Webb, *Famine in Africa. Causes, Responses, and Prevention*. Baltimore: Johns Hopkins University Press 1998, 6.

¹⁰⁴ Sara Millman and Robert W. Kates, 'Towards Understanding Hunger', in Lucile F. Newman (ed.), *Hunger in History. Food Shortage, Poverty and Deprivation*. Oxford: Blackwell 1990, 3.

¹⁰⁵ William A. Dando, *The Geography of Famine*. London: V.H. Winston & Sons 1980, 42.

¹⁰⁶ See Kirsten Hastrup, 'Hunger and the Hardness of Facts', *Man*, New Series 28 (4) 1993, 727-39.

¹⁰⁷ Millman and Kates apparently treat hunger as a synonym for famine. See Millman and Kates 1990, 9.

shortages of food, and, if food requirements cannot be met by any other means, seasonal hunger. It seems that in communities practising sedentary agriculture months of hunger were a regular part of the annual cycle. As was often the case, there was some food available all year around, so that seasonal hunger did not mean a total lack of food, but it did mean a decreased food intake and a less varied diet. Seasonal food shortages were related to the annual agricultural cycle and to shifts between a dry and a rainy season, the pre-harvest rainy season being the time of shortest supply. More specifically, shortages were caused by the low productivity of peasant farming, resulting either from a shortage of land, inadequate rainfall, poor soil, or a shortage of labour. Likewise, the inability to store food in adequate quantities reduced the supply, and much of the stored food was spoiled in the process. Moreover, agricultural labour from the colonial period onwards was directed towards cash cropping, which created labour shortages and a decline in food production. Hunting and gathering, and in some places fishing, were practised to supplement diets during shortages, but catches were small and could not provide the whole community with sufficient food. Therefore individual food consumption had to be regulated; people had to skip meals during the hunger period, usually lasting about three months, during which many suffered weight loss.¹⁰⁸

The seasonality of the food supply reflected the vulnerability of the pre-colonial food systems. In the absence of effective markets, there were few possibilities to compensate for the lack of local agricultural produce by means of exchange. Pastoral people, whose main source of food was their mobile cattle, probably fared better all year round, with no sharp alterations in the quantity and quality of the food consumed.¹⁰⁹ For cultivators, any delay in the arrival of the rains meant that no new crops could be planted and the 'ordinary' seasonal hunger would deepen. If the rains failed altogether, the annual crop would be lost and the already malnourished people would be gripped by famine and undernutrition, and, if no food became available, would soon face starvation.¹¹⁰

¹⁰⁸ Robert Chambers, *Health, Agriculture, and Rural Poverty: Why Seasons Matter*. Discussion Paper 148. University of Sussex: Institute of Development Studies 1979, 2-5; John U. Ogbu, 'Seasonal Hunger in Tropical Africa as a Cultural Phenomenon', *Africa* 43 No. 4 1973, 317-32; Richards 1995, 35-7; William Allan, *The African Husbandman*. Westwood: Greenwood Press 1965, 45-8.

¹⁰⁹ Feierman 1974, 18-9; Vaughan 1987, 10-11; Michael Mortimore, 'Five Faces of Famine: The Autonomous Sector in the Famine Process', in Hans G. Bohle, Terry Cannon, Graeme Hugo, Fouda N. Ibrahim (eds.), *Famine and Food Security in Africa and Asia. Indigenous Responses and External Intervention to Avoid Hunger*. Bayreuth: Bayreuther Geowissenschaftlichen Arbeiten 1991, 16; Watts 1983, 4-5.

¹¹⁰ Paul Richards, *Indigenous Agricultural Revolution. Ecology and Food Production in West Africa*. London: Unwin Hyman 1985, 42; Terry Cannon, 'Hunger and Famine: Using Food Systems Model to Analyse Vulnerability', in Bohle et.al. 1991, 291. The difference between malnutrition and undernutrition may be described as follows: 'Malnutrition... is a broader term defined as a 'pathological state', general or specific, resulting from a relative or absolute deficiency or an excess in diet of one or more essential nutrients. Undernutrition is primarily due to inadequate intake of calories, whereas malnutrition is caused by inadequacy of particular, or several, essential nutrients, thus a person who is undernourished is also malnourished, though the converse may not hold' (N. Kakwani, *On Measuring Undernutrition*. Helsinki: WIDER 1986, 1). Malnutrition is taken here to mean either a relative or absolute deficiency, depending on the context and circumstances, but never an excess. Undernutrition is used as a quantitative concept signifying a situation where there is insufficient intake of all nutrients. Starvation means 'a pathological condition in which lack of food consumption threatens, or causes,

When do seasonal food shortages turn into famines? This line is difficult if not impossible to draw satisfactorily. Famine as a term carries 'emotional overtones', as acknowledged by Dando, echoing widespread human disaster characterized by starvation and death. In Dando's opinion, hunger can be '... everything from latent deficiencies to absolute starvation. It is an extremely variable phenomenon that can turn a victim into a walking skeleton or produce subtle chronic deficiencies with limited outward signs. Hunger can be a craving, an urgent need of food, or a strong desire; but *hunger is not famine*.'¹¹¹ It would seem that famine is characterized by other things besides hunger.

The view that famines in Africa have been primarily a result of natural and ecological disasters such as drought, floods or locusts, or of Malthusian population pressure, has been questioned. Today famines are understood as arising from a combination of multiple environmental, economic, political and social factors operating together.¹¹² Famine can be understood either as a structural process¹¹³ or as an acute event, or both. Arnold describes the 'paradox of famine' in which famine is both a structure and an event, triggered by some unexpected phenomenon such as a drought or flood, but in reality caused by the weakness of political, social and economic structures.¹¹⁴ Famine can be seen as a 'widespread breakdown of social and economic functions leading to increasing food shortages and eventually loss of assets and starvation among those groups [and] individuals who are most vulnerable.'¹¹⁵ It would seem that, unlike seasonal food shortages, famine greatly modifies the economic, social and political relationships and power structures of society, probably by enhancing them at first, but eventually by causing their erosion, resulting in widespread destitution of a relatively large proportion of the less well-off members.

No detailed analysis of the multiple causes of famine today is necessary for the present purposes.¹¹⁶ Rather, the focus will be on the character of the famine process, its consequences, and finally a historical understanding of famine. The

death.' See Michael C. Latham, *Human Nutrition in the Developing World*. Food and Nutrition Series 29. Rome: FAO 1997, 229.

¹¹¹ Dando 1980, 60.

¹¹² Stephen Devereaux, 'Famine in Africa', in Stephen Devereaux and Simon Maxwell (eds.), *Food Security in Sub-Saharan Africa*. London: ITDG Publishing 2001, 121-38.

¹¹³ Donald Curtis, Michael Hubbard and Andrew Shephard, 'Introduction' in *Preventing Famine. Policies and Prospects for Africa*. London; New York: Routledge 1988, 5-6.

¹¹⁴ David Arnold, *Famine. Social Crisis and Historical Change*. Oxford: Basil Blackwell 1988b, 6-8.

¹¹⁵ Stephen Devereaux, *Theories of Famine*. London: Harvester-Wheatsheath 1993, 15.

¹¹⁶ For causes of famine and theories, see Michael Watts, 'Heart of Darkness. Reflections on Famine and Starvation in Africa', in R.E. Downs, Donna O. Kerner and Stephen P. Reyna (eds.), *The Political Economy of African Famine*. Philadelphia: Gordon and Breach 1991, 23- 68; Devereaux 1993, 35-100; Michael H. Glantz (ed.), *Drought and Hunger in Africa: Denying Famine a Future*. Cambridge University Press 1987; Blaikie et. al. 1994, 75-100.

famines experienced in Africa in the 1970s and 1980s were linked to the difficult weather conditions, especially drought, which triggered the process.¹¹⁷ Drought was also frequently the triggering factor in the food shortages and famines that affected pre-colonial and colonial Africa.¹¹⁸ If the onset of rains was delayed, seasonal hunger became more severe as food supplies, including the seed for the next crop, were gradually consumed. People would rely more and more on wild foods gathered from the forests and savannas, so that berries, roots and fruits became valuable items, and continued drought would force them to wander ever further in search of any kind of food.¹¹⁹ The shortage of safe water would become a serious matter, as the shrinking supplies, whether in rivers, springs or underground waterholes, would be used by humans and animals alike, leading to eventual contamination. Waterholes, river banks and lake shores became ideal spots for the spread of waterborne epidemics such as dysentery and diarrhoea.¹²⁰ People would wander to nearby villages or towns in search of food that they could buy by selling their livestock or any other assets they might have. As the demand for grain was high, so were the prices, while the price of livestock would sink because of the abundant supply and the wretched condition of the drought-ridden animals. As the hungry rural people flocked to the villages and towns they became a source and target for epidemics. In colonial Africa the men tended to migrate to the towns to work for money, leaving their families behind. Some of them sent money back, or returned to support their families, but many did not. Thus deepening famine caused a disruption of family life by separating spouses, often for good. Those who were left behind, mainly the women, children and elderly people, survived the best they could. In desperate need for food, people would sell anything they had, including agricultural tools, cooking utensils, personal items, etc. Some would pawn or sell their children, or even themselves, and women would exchange sexual services for food. Theft and murder became common as the breakdown of social order proceeded further.¹²¹

If a famine ran its full course it would leave the community utterly disrupted. People would be stripped of their assets and possessions, indebted and physically weakened through a long period of nutritional deprivation. The breakdown in social

¹¹⁷ Michael H. Glantz, 'Drought, Famine, and the Seasons in Sub-Saharan Africa', in Huss-Ashmore and Katz (eds.) 1989, 45-71; Michael H. Glantz, 'Drought and economic development in sub-Saharan Africa', in Glantz 1987, 37-58.

¹¹⁸ Watts 1983, 14; John Iliffe, *Famine in Zimbabwe 1890-1960*. Gweru: Mambo Press 1990, 8; Jill R. Dias, 'Famine and Disease in the History of Angola', *Journal of African History* 22 1981, 349-78; Joseph C. Miller, 'The Significance of Drought, Disease and Famine in the Agriculturally Marginal Zones of West-Central Africa', *Journal of African History* 23 1982, 17-33.

¹¹⁹ Wolde-Mariam 1985, 15; Alex de Waal, *Famine that Kills. Darfur 1984-85*. Typescript. Save the Children Fund 1988, 70-2.

¹²⁰ Wylie 2001, 53.

¹²¹ Megan Vaughan, 'Famine Analysis and Family Relations: Nyasaland in 1949', in Feierman and Janzen (eds.) 1992b, 75-80; James L. Giblin, *The Politics of Environmental Control in Northeastern Tanzania, 1840-1940*. Philadelphia: University of Pennsylvania Press 1992, 125; Iliffe 1990, 58; Watts 1991, 39; Weiss 1997, 230-3.

order would have strained and destroyed previous reciprocal ties and individual rights. Those who left their farms in search of food could lose their traditional cultivation rights to their fields. Family members were probably lost, and the loss of an adult would seriously weaken the production capacity of the rural household. Agricultural tools may have been sold, and they had to be recovered by exchange or debt. Heavy agricultural work had to be undertaken by undernourished men and women.¹²² The onset of rains, which was the time of planting and sowing, was also the time of disease, so that malaria and common colds returned and the rainwater flushed human and animal excrement into the springs and waterholes, turning them into sources of infection.¹²³ Ecologically, the deserted, overgrown fields, gardens and pastures would present a health hazard for the returning people and their animals by harbouring such diseases as trypanosomiasis and East Coast Fever.¹²⁴

Thus a serious famine could undermine the productive and reproductive capacity of a community and set a process of impoverishment in motion. It would take a considerable time for communities to recover, and in the event of recurrent drought, they would sink deeper into poverty. But the pangs of hunger and famine would be felt unequally. The wealthiest segments of society could derive benefits by selling food, lending money or providing refuge and patronage for those who were suffering. Traders would grow richer as the price of grain rose.¹²⁵ The position of traders and wealthy elites was not threatened by small local famines or food shortages, since these probably only affected a small group of the most vulnerable, while most of the people would manage without any serious damage. As noted by Koponen in the context of pre-colonial Tanzania, famines tended to be selective in terms of mortality, killing the weakest members of the community - the old people and children.¹²⁶ More severe famines would affect larger numbers of people, however, and the breakdown of social order would also put the position of the wealthy in peril.¹²⁷

Famine as a historical phenomenon has also been subject to change, in both frequency and character. In pre-colonial Africa, according to Iliffe, 'men measured out their lives in famines.'¹²⁸ Drought was the major hazard for human communities which could trigger the famine process. There is not much surviving evidence on the magnitude and impact of pre-colonial famines in eastern and central Africa, but it

¹²² Wolde-Mariam 1985, 14-17.

¹²³ Chambers 1979, 3-5; Wylie 2001, 53.

¹²⁴ Giblin 1992, 130.

¹²⁵ See David Keen, *The Benefits of Famine. A Political Economy of Famine and Relief in Southwestern Sudan, 1983-1989*. Princeton University Press 1994, 3-8.

¹²⁶ Juhani Koponen, 'War, Famine, and Pestilence in Late Precolonial Tanzania: A Case of Heightened Mortality', *IJAHS* 21 (4) 1988b, 637-676, especially 672-673.

¹²⁷ Richard Reid, 'Economic and Military Change in the Nineteenth Century Buganda', Ph.D. thesis, University of London 1996, 57.

¹²⁸ Iliffe 1979, 13.

seems that most of those that occurred before the end of the nineteenth century were localised, with limited impact on general mortality or social stability.¹²⁹

Iliffe writes in his analysis of famine in Zimbabwe about pre-colonial, transitional, and colonial famines.¹³⁰ Despite first claiming that most of the pre-colonial famines were local, with insignificant mortality, he nevertheless seems to think that the disastrous famines of the second half of the nineteenth century, caused by droughts, locusts, cattle disease, increased slave raiding and warfare and leading to mass mortality and social disruption, can be genuinely regarded as 'pre-colonial'. They were 'famines that killed', 'the ultimate horrors of mass starvation which destroyed kinship obligations, broke down the distinctions between forest and field, and turned men into animals.'¹³¹ In the context of nineteenth century East and Central Africa, however, external forces were already undermining the environmental and political control of the African communities, which, together with unfavourable weather conditions, made famines especially severe. Therefore the success or failure of African survival strategies cannot be properly addressed in the framework of the late nineteenth century alone.¹³²

Iliffe uses the term transitional famine for a famine in which there are features of both pre-colonial and colonial subsistence crises present. Transitional famines were characterized by high mortality and destitution in a situation where there was no significant reduction in food supply. It was the poor infrastructure and the weakness of the early colonial political and economic system which prevented effective famine relief. The impoverished population had partly lost their old coping mechanisms because of the colonial rule, and they had become increasingly vulnerable not only to the forces of nature, but also to fluctuations in commodity prices resulting from shifts in the world market. As a result, one bad year could bring about severe famine conditions.¹³³ Colonial famines, on the other hand, would be more acute, event-like and sudden crises, and not products of a series of bad harvests as before, with decreased famine mortality because of famine relief. It should be noted, however, that the administrative weaknesses of the early years of colonial rule can at least partly explain this 'suddenness', as the officials and administrators had only limited information and knowledge about the areas and people they governed and food shortages could develop in the isolated rural backwaters without arousing much or any notice. When crisis then hit the community after the rains failed, it appeared to be a 'sudden' and evident consequence of drought. Neither should the effectiveness of the colonial famine

¹²⁹ Iliffe 1990, 10, 14; Koponen 1988a, 134.

¹³⁰ Iliffe 1990, 18-22, 31.

¹³¹ Iliffe 1979, 13.

¹³² For criticism of Iliffe's oversimplified argument, see Juhani Koponen, *Famine, Flies, People and Capitalism in Tanzanian History: Some critical historiographical comments on works by John Iliffe and Helge Kjekshus*. Occasional Papers 8. University of Helsinki: Institute of Development Studies 1989, 8-9; Koponen 1988b, 638-648.

¹³³ Iliffe 1990, 68.

relief efforts be exaggerated. It is likely that, because of poor communications, some famine deaths remained unregistered. While mortality was probably reduced by food relief, colonial famines were still destructive to the communities in terms of impoverishment. Food relief could save people, but it could not save starving and parched cattle. Losing their cattle to starvation and disease often meant that the people lost the only wealth they had. Moreover, at least in the case of early colonial Uganda, the colonial state covered the costs of food aid and distribution by means of additional taxation, making recovery from famine even more difficult for the impoverished people.¹³⁴

Despite the rather hopeless view of pre-colonial African existence presented by Iliffe, the ability of the pre-colonial communities and societies to deal with droughts and famines should not be underestimated. African communities had several strategies for enhancing their survival, including social strategies such as patronage, reciprocal exchange of goods and services, etc., i.e. in modern terms, moral economy and social capital.¹³⁵ The peasants and elites alike were dependent on the productivity of the land, people and cattle, and therefore fertility was of the highest importance for all concerned. To put it quite simply, if the peasants starved, the chiefs and kings would soon starve too. Since the upper stratum in the more centralized and hierarchical societies derived its wealth and power from the peasantry, the peasants could not be neglected or abused excessively without placing the welfare and political power of the upper stratum itself at risk. Nevertheless, the success of moral economy as a buffer against famine should not be exaggerated, since the ability of pre-colonial communities to control their environment was limited - they were unable to deal with serious natural disasters for long without erosion of the patronage and reciprocal relationships. Therefore a severe famine was also a political crisis, for it eventually eroded the political authority of the ruling elite, leading to a breakdown in social order.¹³⁶ Later, colonial rule would change all this. By allying with local elites colonialism severed the material dependence of African rulers on their subjects. It offered the elites an opportunity to escape the perilous existence of the pre-colonial life by allowing greater capital accumulation and integration into world markets. The subsistence of the elite, even in the worst of times, was secured by their greater command over crucial resources and by their unchallenged political and economic power, both of which were guaranteed by the colonial state. The starving masses no longer threatened their rule, the legitimacy of which now came not from the people but from the colonial state. The old reciprocal relationships between rulers and ruled were replaced by unidirectional over-exploitation by the ruling class of the chiefs.

¹³⁴ Telegram from Bell to the Secretary of State for the Colonies, 23 May 1908. Famine in Busoga. CO 536/19/Public Record Office (PRO).

¹³⁵ Watts 1983, 14-19; Iliffe 1990, 8-9.

¹³⁶ Vaughan 1987, 10-11; Miller 1982, 22-7; Steven Feierman, *Peasant Intellectuals. Anthropology and History in Tanzania*. Madison: The University of Wisconsin Press 1990, 48; Randall M. Packard, *Chiefship and Cosmology. An Historical Study of Political Competition*. Bloomington: Indiana University Press 1981, 30-1; J.B. Webster, B.A. Ogot and J.P. Chretien. 'The Great Lakes Region, 1500-1800', in B.A. Ogot (ed.), *UNESCO General History of Africa Vol. V. Africa from the Sixteenth to Nineteenth Century*. Berkeley: California University Press 1992, 781-3.

AMBIGUITY OF HISTORICAL CONCEPTS OF FAMINE

Some attention should be drawn to the understanding of famine on the part of Europeans and Africans. It is important to realize what the colonial officials meant when they spoke about droughts, food shortages and famines. It is proposed here that a slightly difference in this understanding prevented the Europeans from grasping the dynamics of production and reproduction in the African communities, blinding them from the problem of increasing rural poverty in the early colonial period.

The western concept of famine has not in itself remained constant. In the pre-industrialized agrarian world famines caused by unfavourable weather conditions and crop failures were understood as 'acts of God'. In the academic and intellectual circles of the late eighteenth century this view was replaced by the Malthusian model of population pressure, in which population grew faster than food production and famines acted as 'positive checks' on population growth. Thus famines were understood as part of the natural order of things, the sequence of good and bad years, the ebb and flow of plenty and want. Well into the twentieth century, famines were seen as endemic, something incorporated in the structures of the present, rising to the surface because of some unexpected, disastrous event. Only lately have famines been seen as 'man-made', for up to the 1980s they were still largely understood in demographic and climatic terms. Amartya Sen's work demonstrated, however, that there could be famine without any food shortage, when people from one reason or another experienced a decline in their entitlements to food. Famine was thus deprived of its secret life, politicized and subjected to increasing scrutiny by economists, social and political scientists, geographers and historians.¹³⁷

In the western understanding, starvation and mass mortality have for long been considered inseparable elements of famine, and this idea has been fed by the media in the past few decades with images and news clips of starving Nigerians, Ethiopians, Sudanese and Somalis. But famines can occur without starvation and death, and there might be people starving in the absence of famine. The European understanding of famine in the nineteenth century was shaped by the immense subsistence crises of the Victorian era: famines in Ireland, China, India and Ethiopia were all witnessed and documented by the Europeans. The British colonizers, traders, soldiers and occasional travellers recorded horrific scenes of starvation, walking skeletons and mass deaths in Asia, Africa and Europe.¹³⁸ Starvation and death became inseparable from famine in people's minds. Famines also became linked with unfavourable weather conditions, the cold and rain in Ireland and long periods of drought in Ethiopia, India and China. Moreover, the high population densities in China and India seemed to confirm the Malthusian idea of famines as checks on population growth.¹³⁹ This fact is significant, since it was later difficult

¹³⁷ Dando 1980, 57-60; Devereaux 2001, 120-1; Watts 1991, 24-6; Sen 1981, 52-85.

¹³⁸ Mike Davis, *Late Victorian Holocausts. El Niño Famines and the Making of the Third World*. London; New York: Verso 2001, 7-9.

¹³⁹ Davis 2001, 306-7.

for some colonial administrators in Eastern and Central Africa to comprehend the presence of food shortage or famine in the absence of drought and overpopulation.

By contrast, it is difficult to define the African idea or concept of famine. According to Doyle, 'for Banyoro, a famine was any period of social distress caused by particularly severe food shortages and poverty'.¹⁴⁰ It seems that famine, as well as other misfortune, was related to human failure to deal with the spiritual world, i.e. the divinities and spirits controlling the forces of nature. In Buganda the king was expected to send presents annually to Mukasa, the god of plenty, to secure crops and blessings for his people, while in Banyoro the god of plenty, Wamala, was often consulted by the king and his principal chiefs, and offerings were made in order to save the nation from famine, war, sickness and all other evils.¹⁴¹ Thus, when the welfare of society was dependent on the successful management of nature through the spiritual world, the occurrence of famine would signal a neglect of the duties of the ritual leaders, or a waning of their powers and control over nature.¹⁴²

A deadly famine would occur at certain intervals, so that the droughts that affected Buganda in the late nineteenth century, often causing severe famine, were said to have taken place once in eight or ten years.¹⁴³ Famine was considered a serious threat, and the Baganda and Banyoro both had their rituals for preventing it and securing the crops, and they also recognized a variety of famine foods.¹⁴⁴ The *kiganda* folk tradition, however, does not recall famines as great catastrophes involving high mortality, but rather as times of shortage when abnormal strategies and customs were employed to overcome hunger and to avoid destitution. Famine was associated with an interruption of normal existence, but nothing points to it as a great mortality crisis.¹⁴⁵ As de Waal has documented in connection with the famine in the Sudan in the mid-1980s, the overriding concern of the people was not the risk of starvation and death but the risk of losing one's possessions and thereby the ability to continue the conventional way of life. Poverty posed a greater threat to the existence of the community than the immediate death of some of its members through starvation, and in the case of the Sudan, people were willing to go hungry and starve voluntarily rather than exchange their assets and meagre savings for food.¹⁴⁶

¹⁴⁰ Doyle 1998, 311, fn. 15.

¹⁴¹ John Roscoe, *The Baganda. An account of their native customs and beliefs*. London: Frank Cass 1965, 298-99; John Roscoe, *The Bakitara or Banyoro. The first part of the report of the Mackie Ethnological Expedition to Central Africa*. Cambridge University Press 1923, 22-3, 37-8.

¹⁴² See Packard 1981, 3-6. Ritual leadership is discussed further in the following chapter.

¹⁴³ Feierman 1974, 23; Ternan to Salisbury, 7 Oct 1899. FO 2/204, PRO. It must be remembered that more permanent European presence in Buganda began only in 1877, so there is no reliable documentation on the frequency of famines before that. The pattern observed by the early Europeans continued into the twentieth century, however.

¹⁴⁴ Roscoe 1965, 290, 315; Roscoe 1923, 37; Kagwa 1934, 122; Walser 1982; 87, 205, 230.

¹⁴⁵ See also Koponen 1988b, 639-648.

¹⁴⁶ deWaal 1988, 3, 28, 33.

It would be presumptuous to make broad conclusions on indigenous meanings of famine on the basis of limited ethnographic evidence and modern famine studies, but the sketchy picture emerging from this discussion underlines differences between the Africans and Europeans in their understanding of famine. The point here is that while Africans saw famine primarily as a threat to their community's ability to produce and reproduce, the Europeans regarded famine as a threat only when people were actually succumbing, and therefore missed the structural damage already caused by prolonged hunger. Therefore, when the Europeans in colonial Uganda and elsewhere reported famine conditions they were presumably reporting on famines that entailed deaths, i.e. famines at their later stages, when social unrest was already widespread and the livelihoods of the people were seriously endangered. Conversely, local food shortages serious enough to cause impoverishment were probably not reported at all, or reported as dearth, or 'near-famine conditions'.

HUNGER, HEALTH AND REPRODUCTION

Hunger affects to people's health directly in the form of nutritional deficiencies hampering physical growth and development, and by reducing their immune response to infections. The higher incidence of disease in turn contributes to higher mortality, while severe and prolonged nutritional deprivation in women reduces female fertility. Hunger, therefore, also has its say within the demographic regime. In the following discussion we will seek an explanation for the consequences of nutritional deprivation by briefly analysing some common nutritional deficiency diseases and discussing the broader social and demographic consequences in connection with fertility and mortality. The discussion is of significance partly because of the need to understand the dynamics of disease transmission, and partly because of the methodological approach employed in this study.

The western concept of health in the nineteenth and early twentieth centuries, originating from the eighteenth century, was laden with moral judgements. Illness was seen as something brought about by 'evil' and associated with wickedness, depravity and immorality bearing a close resemblance, in fact, to the moral ideas related to poverty at that time. Health was seen as sign of moral goodness, springing from a good life and good deeds. This idea was close to the African understanding of health and illness, where the latter was similarly associated with evil and wrong doing. Illness might be caused by spirits angered by the person's improper conduct, or by witchcraft practised by someone wishing to harm others.¹⁴⁷

Health can be broadly defined as a 'continuing property', measured by the 'individual's ability to rally from a wide range and considerable amplitude of insults... [whether] ...chemical, physical, infectious, psychological, [or] social.'¹⁴⁸

¹⁴⁷ See Kenneth M. Boyd, 'Disease, illness, sickness, health, healing and wholeness: exploring some elusive concepts', *J. Med. Ethics: Medical Humanities* 2000; 26: 9-17; Zeller 1971, 32-42; Susan Reynolds Whyte, 'Social Implications of the Interpretation of Misfortune in Bunyole', Ph.D. thesis, University of Washington 1973, 46-48.

¹⁴⁸ Melinda S. Meade and Robert J. Earickson, *Medical Geography*. 2nd edition. New York: Guilford Press 2000, 22.

Another, and perhaps more useful definition of health for present purposes is a social one, in which it is seen as 'a society or social unit's ability to regenerate itself',¹⁴⁹ i.e. to create and maintain the conditions necessary for its survival, reproduction and regeneration.¹⁵⁰ According to this view, an individual's or community's health is a result of a broader interaction between ecological, economic, social and political factors that create the physical and mental health environment. Meillassoux emphasizes that the process of social reproduction is not a natural but a political one. Therefore health is ultimately something that is negotiated in the realm of the political economy and closely connected with access to certain resources and services.¹⁵¹ Health, like poverty and disease, can be seen as socially produced and reproduced, as a product of social and political relationships and arrangements within society.¹⁵²

As Cordell, Gregory and Piché have argued in their analysis of morbidity, mortality and demographic processes, causes of death - like causes of illness - are not discrete, and may be seen as indicators of 'broader social determinants' that generate or determine disease. Mortality can only rarely be explained solely by the presence of some specific disease or diseases. According to them, death is caused by a series of accumulating biological insults that eventually wear down the individual's resistance to disease. The final cause of death, whether pneumonia, smallpox, or any other disease, is rarely the only or decisive cause, but merely the last insult in the series that pushes the individual to his grave.¹⁵³ Therefore, morbidity and disease mortality should not be treated in isolation from the underlying social, political, economic, ecological and epidemiological conditions.

Most of the biological insults affecting humans are viruses, bacteria and protozoa, the majority of which are quite harmless but some of which are capable of causing human illness. But ill health is not only produced by invading external agents. As will be seen later, the realization that deficiency or lack can generate disease has been one of the most important discoveries in medicine since the germ theory. Thus deficiencies generated by quantitative or qualitative nutritional deprivation may cause specific diseases, which may result from the lack of a single nutritional component in the diet, e.g. thiamin, or vitamin B1 deficiency, causing beriberi, or the lack of iron or vitamin B12, causing iron deficiency anaemia and pernicious anaemia, respectively, or they may involve severe nutritional deprivation, like that experienced during famine, which often causes multiple deficiencies, each

¹⁴⁹ Janzen 1992, 6.

¹⁵⁰ According to Meillassoux (1981, 52-53), 'in order for the functional productive unit to reproduce itself, the volume of subsistence goods produced by each producer must equal or surpass the amount needed to maintain the producer himself, to bring up future producers, and to service the retirement of those who are no longer producing.'

¹⁵¹ Meillassoux 1981, 46. See also Dennis D. Cordell, Joel W. Gregory and Victor Piché, 'The Demographic Reproduction of Health and Disease: Colonial Central African Republic and Contemporary Burkina Faso', in Feierman and Janzen 1992, 44-8.

¹⁵² Janzen 1992, 156-159.

¹⁵³ Cordell, Gregory and Piché 1992, 44-7.

with its own symptoms and clinical features, making accurate diagnosis difficult. Prolonged severe deprivation nevertheless brings about the recognizable clinical signs of undernutrition and starvation, including general muscular wasting, dry, loose skin, hair changes, slow pulse, low blood pressure, hormonal disturbance (amenorrhoea in women), anaemia, oedema of the face, feet and legs, and diarrhoea, accompanied by the signs of the known and more specific nutritional deficiencies such as riboflavin (vitamin B2) deficiency, causing - among other things - tropical ulcer. 'Starvation death' is commonly caused either by heart failure or by infections such as pneumonia and tuberculosis.¹⁵⁴

Malnutrition and undernutrition are generally easier to detect in children. Two common and often lethal nutritional deficiency diseases of early childhood, marasmus and kwashiorkor, are caused by inadequate protein and energy intake. Marasmus afflicts infants under one year of age and is characterized by extreme wasting, oedema and hair changes, and kwashiorkor is common in children between one and four years of age in wet tropical regions, often being associated with the weaning process. The condition is characterized by underweight, oedema, wasting, a distended abdomen, hair changes, reduced appetite, retarded growth, feebleness and general weakness. Although labelled as diseases of children, marasmus and kwashiorkor also occur in adults, where the symptoms are more or less the same, though less visible. Contrary to adult marasmus, adult kwashiorkor is not very common, but it has been met with in tropical areas where people have starchy, protein-deficient diets. Both diseases cause a great deal of debility and suffering but are rarely lethal in adults.¹⁵⁵

Malnutrition makes humans more susceptible to infections, and infections in turn undermine the individual's nutritional status. According to the widely accepted model, there is synergism between malnutrition and infection, in that a malnourished person is more susceptible to diseases than a well-nourished one, while an infectious disease consumes the body's energy stores and weakens its ability to absorb nutrients, which leads to a state of more severe malnutrition. A properly nourished person, when exposed to a severe infection, may consequently be malnourished because of the severity of the disease, which reduces immunocompetence and paves the way for other infections. Historically, this synergism has been particularly prevalent among the lowest socioeconomic strata with the most inadequate living conditions and nutrition. It is often related to social and political disruptions such as war and migration, during which the living conditions of the population deteriorate.¹⁵⁶

¹⁵⁴ Latham 1997, 114, 230-1; Meade and Earickson 2000, 45-6; Christy C. Tangney, 'Diet, the Menstrual Cycle, and Sex Steroid Hormones', in Debra Krummel and Penny M. Kris-Etherton (eds.), *Nutrition in Women's Health*. Gaitersburg: Aspen Publishing 1996, 164-6.

¹⁵⁵ Latham 1997, 130-6, 141-2; J.F. Brock and M. Autret, *Kwashiorkor in Africa*. Rome: FAO 1952, 11- 11-29 *passim*.; R. Passmore and M.A. Eastwood, *Human Nutrition and Dietetics*. Eight edition. Hong Kong: Longman 1986, 279-81; M.H.N. Golden and B.E. Golden, 'Severe Malnutrition', in J.S. Garrow, W.P.T. James, and A. Ralph (eds.), *Human Nutrition and Dietetics*. Tenth edition. London: Churchill Livingstone 2000, 522.

¹⁵⁶ Carl E. Taylor, 'Synergy Among Mass Infections, Famines, and Poverty', *JIH* 14 (2) 1983, 483, 485, 487; Latham 1997, 23-4; Thomas McKeown, *The Modern Rise of the Population*. Reprinted. London: Edward Arnold 1977, 78, 135.

The synergistic model has been criticized from both a biological and a historical perspective. It has been suggested that it is only in cases of severe undernutrition that human immunocompetence fails to the degree which frequently permits fatal infections. Chronic moderate malnutrition is not regarded as harmful in this sense.¹⁵⁷ In fact, it is known from the famine in Darfur that destitution was of little significance as an indicator of who might fall ill and die, and that famine mortality was actually higher in better-off groups. The increased mortality was explained by the radical change in the disease environment, which deteriorated rapidly during the famine.¹⁵⁸ From a historical point of view, the criticism has concentrated on the fact that famines and infections do not necessarily coincide in history. As Carmichael points out, there is 'synergism between disease and disease rather than between nutritional status and disease,' and this synergism is caused by 'the social circumstances of infection.'¹⁵⁹ Likewise, writing on eighteenth century Europe, Post has argued that malnutrition does not necessarily aggravate infections, and that 'the principal link between the shortage of food and epidemic disease was more social than nutritional.'¹⁶⁰

As far as Africa is concerned, however, this criticism overlooks two factors. First, the regularity of seasonal hunger in much of Africa is a source of ill health and economic insecurity. The pre-harvest season - characterized by a shortage of food, heavy agricultural work and rain - is marked by the prevalence of common colds, malaria, intestinal parasites and diarrhoea. While all these diseases themselves contribute to the high incidence of malnutrition, their appearance after a period of nutritional deprivation can hardly be explained only by a seasonal upsurge of endemic disease at times when the body's energy demand is highest and the supply lowest.¹⁶¹ Moreover, it is now well established that dietary deficiencies reduce the body's resistance to infections by hampering the production of antibodies and leucocytes. People suffering from hunger are more vulnerable to infections, which put further strain on the body's energy supplies and worsen malnutrition. Weaker bodies do less work, productivity declines because of fatigue and disease, less food is produced, and eventually less is consumed. A vicious circle of malnutrition is generated and perpetuated, and the ability of the economic and political system to secure adequate food for people is further reduced.¹⁶² Secondly, infections and

¹⁵⁷ Carmichael 1983, 250-51.

¹⁵⁸ De Waal 1988, 69, 126; Alex de Waal, 'Famine Mortality: A Case Study of Darfur, Sudan 1984-5', *Population Studies* 43 1989, 5-24; Weiss 1997, 21-4.

¹⁵⁹ Carmichael 1983, 264.

¹⁶⁰ John D. Post, 'Nutritional Status and Mortality in Eighteenth-Century Europe', in Newman 1990, 267.

¹⁶¹ There is evidence of a seasonal incidence of kwashiorkor in children, being most common during the seasonal food shortages. See R.G. Hendrickse, 'Some Observations on the Social Background to Malnutrition in Tropical Africa', *African Affairs* 65 (261) 1966, 341-349.

¹⁶² Helen Young, 'Nutrition and Intervention Strategies', in Devereaux and Maxwell 2001, 232-9; Latham 1997, 24-5; Chambers 1979, 2-3; Arnold Pacey and Philip Payne (eds.), *Agricultural Development and Nutrition*. London: Hutchinson 1984, 117; Robert M. Suskind, 'Characteristics of and

epidemics are far more frequent in history than famines, and one reason for this is the process described above; the persistence of hunger and poverty, which contribute to a low standard of sanitation and hygiene. One should not study the interaction between nutritional deprivation and disease mortality at times of famine, since famine situations are characterized by extremes - severe nutritional deprivation and social disorder, and thus a significantly worse disease environment. There is a growing body of evidence to suggest that mortality during famines, both contemporary and historical, is primarily caused by infections such as pneumonia, tuberculosis, malaria, smallpox, measles, cholera, diarrhoea and dysentery. These are related to the breakdown in social order, large population movements and gatherings, the deterioration in sanitary conditions and the reduction in the availability of safe water for drinking, cooking and washing.¹⁶³ Since they create conditions for such water-borne infections as cholera and dysentery, which are likely to kill even well-nourished individuals, it is doubtful whether one can draw any conclusions about the relationship between nutritional status and infection from famine situations.

Human beings are constantly being attacked by bacteria and viruses, most of which are defeated by the body's defence systems. The functioning of these systems, as noted above, is to a degree dependent on the nutritional status of the individual, but even adequate, rich nutrition cannot protect people from the most virulent infections, which produce diseases regardless of the functioning of the immune system.¹⁶⁴ Nutritional imbalances necessarily cause a decrease in the health status of the individual, however. Up to a certain point, the human body can adapt to nutritional stress without health impairments, but if the nutritional status deteriorates further, certain deficiency diseases are likely to appear. It has been argued that even a slight deterioration in nutritional status will influence the body's metabolic system, weakening individual immunocompetence, although there is also evidence that moderate malnutrition could in fact enhance the body's capacity to resist diseases.¹⁶⁵

Causation of Protein-Calorie Malnutrition in the Infant and Preschool Child', in Lawrence S. Green (ed.), *Malnutrition, Behaviour, and Social Organization*. New York: Academic Press 1977, 7-11; David Arnold, 'Social Crises and Epidemic Disease in the Famines of Nineteenth-Century India', *Social History of Medicine* 6 (3) 1993, 385-404, esp. 400-1. In his study of the Darfur famine, however, de Waal was unable to show any connection between malnutrition and higher susceptibility to disease, even though he does not deny this possibility altogether. See de Waal 1989, 24.

¹⁶³ Arup Maharatna, 'The demography of Bengal famine 1943-44: a detailed study', *The Indian Economic and Social History Review* 31 (2) 1994, 169-215; Susan Scott, S. R. Duncan, and C.J. Duncan, 'Infant mortality and famine: a study in historical epidemiology in northern England', *Journal of Epidemiology and Community Health* 49 1995, 245-52; de Waal 1989, 5-24; Arnold 1993, 385-404. An example of famine with insignificant disease mortality is the Greek famine of 1941-43, where social order was maintained by the occupying German forces and there was no population movement or overcrowding. The author was able to conclude that starvation contributes a great deal to mortality during famines. See Violetta Hionidou, 'Why do people die in famines? Evidence from the island populations', *Population Studies* 56 2002, 65-80.

¹⁶⁴ Bellagio Conference, 'The Relationship of Nutrition, Disease, and Social Conditions: A Graphical Presentation', *JIH* 14 (2) 1983, 505-6.

¹⁶⁵ Suskind 1977, 7-11; Carmichael 1983, 251-2.

If the nutritional status deteriorates considerably, however, disease becomes frequent, contributing to a more severe state of malnutrition. Thus, at least in cases of intermediate virulent infections, the individual's nutritional status is often crucial for determining the outcome, i.e. whether the invading pathogen is defeated by the body's immune system, or whether it is virulent enough to cause disease. Infections in which the outcome is known to be highly dependent on the individual's nutritional status include measles, diarrhoea, tuberculosis, most respiratory infections, pertussis, most intestinal parasites, leprosy and herpes. Nutrition also determines the outcome to some degree in the case of infections such as typhus, diphtheria, influenza and syphilis.¹⁶⁶

Hunger and malnutrition also interfere with the process of human reproduction by affecting levels of fertility and mortality. Declines in female fertility have frequently been recorded during famine and war, and although these have been associated with a deliberate policy aimed at survival over a period of scarcity and stress, they actually seem to be much more clearly of biological and psychological origin.¹⁶⁷ Le Roy Ladurie, for example, has argued for the existence of *Kriegsamenorrhoe*, wartime amenorrhoea. There is evidence that nutritional deprivation and psychological stress contributed to temporary sterility among women living under harsh conditions during the two World Wars, so that as their nutritional status deteriorated, menstruation ceased entirely, or at least became highly irregular. When the conditions remained unchanged for a long time, e.g. eighteen or twenty months, menstruation, although irregular, began again as the body adapted to nutritional stress. Similarly, although nutritional stress interrupted normal menstruation, improvements in nutrition quickly restored the normal menstrual cycle.¹⁶⁸ Recent further investigations into the consequences of chronic nutritional deprivation for human reproductive health outside famines have suggested that hormonal imbalances and reduced body size because of malnutrition have greater effects on female fertility than had previously been assumed, and that prolonged malnutrition tends to lower female fertility by shortening the reproductive lives of women and increasing complications during pregnancy.¹⁶⁹ These issues, including the impact of nutritional deprivation on infant survival in Africa, will be discussed in more detail in chapter 7.

¹⁶⁶ Bellagio Conference 1983, 505-6; Suskind 1977, 7-11.

¹⁶⁷ Siddiq Osmani, 'Famine, Demography and Endemic Poverty', in Helen O'Neill and John Toye (eds.), *A World Without Famine? New approaches to Aid and Development*. Wiltshire: Macmillan, 1998, 186. According to Scrimshaw and Young, trauma, anxiety, fear or some other cause of stress may increase the protein requirement of the body, making an individual more susceptible to malnutrition. See Nevin S. Scrimshaw & Vernon R. Young, 'The Requirements of Human Nutrition', *Scientific American* 235 (3) 1976, 51-64.

¹⁶⁸ Emmanuel Le Roy Ladurie, *The Territory of the Historian*. New edition. Brighton: Harvester Press 1979, 255-271 *passim*.

¹⁶⁹ Peter T. Ellison, *On Fertile Ground. A Natural History of Human Reproduction*. Cambridge (Mass.): Harvard University Press 2001, 94-95, 203; Peter T. Ellison, 'Human Ovarian Function and Reproductive Ecology: New Hypotheses', *American Anthropologist* 92 1990, 933-952; Tangney 1996, 164-6; Latham 1997, 45-50.

Besides fertility, nutrition also affects the levels of mortality, particularly disease mortality. According to McKeown, the population increase in eighteenth century Western Europe was a consequence of reduced disease mortality caused by improved nutritional status. Since the prevalence of various lethal diseases remained high at the time, the decrease in mortality would imply that the improved nutritional status provided better immunocompetence, reducing infections and disease mortality. According to McKeown, reduced exposure to infections, medical interventions, changes in the character of infectious diseases and fertility control methods cannot satisfactorily explain the decrease in mortality in eighteenth century Europe.¹⁷⁰

If proper nutrition in fact enhances human immunocompetence and thus reduces mortality, the rich upper classes of Europe should have had lower mortality rates in the past than the lower classes. According to Livi-Bacci this was not the case in Europe before the mid-eighteenth century, as mortality was high and the expectation of life low among all social classes, even though the upper classes enjoyed better nutrition. Even well after the 1750s, life expectancy remained low and disease mortality high despite nutritional improvements.¹⁷¹ There was one field in which nutrition clearly had a beneficial effect, however, and that was infant and child mortality, for according to McKeown, the greatest contribution to the total decline in mortality was the reduction in deaths from prematurity, immaturity and diseases of infancy. Although life expectancy and disease mortality among adults remained at their previous levels, better maternal and infant nutrition reduced the risk of infection among infants and small children, thus reducing infant mortality and fostering population growth.¹⁷²

In his analysis of changes in infant mortality and stillbirth rates in eighteenth century England, Wrigley makes a distinction between endogenous and exogenous infant mortality. Endogenous, or neonatal infant mortality usually takes place during the first month of the infant's life and is caused by prematurity, genetic or physical defects, accident or trauma at birth, etc. Infant mortality after the first month is regarded as exogenous, and is caused by disease, maltreatment, or an accident. He notes that endogenous infant mortality in England decreased steadily after the 1670s, the trend continuing throughout the eighteenth century, even though total infant mortality did not decline significantly until the 1750s, mainly because of exogenous mortality, which remained at a high level during the whole of the eighteenth century. Stillbirths, although incompletely recorded, were also in decline. According to Wrigley, these changes in infant mortality and stillbirth rates had a positive effect on marital fertility, the decline in stillbirths (foetal mortality after the first twenty-eight weeks of pregnancy) being the most important single factor in the increase in fertility. The reason behind this development was, he maintains, the improved

¹⁷⁰ Mc Keown 1977, 92-4, 101-8, 126-7, 161; see also Thomas McKeown, 'Food, Infection and Population', *JIH* 14 (2) 1983, 227-247.

¹⁷¹ Massimo Livi-Bacci, 'The Nutrition-Fertility Link in Past Times: A Comment', *JIH* 14 (2) 1983, 293-298. See also E.A. Wrigley & R.S. Schofield, *The Population History of England 1541-1871. A Reconstruction*. Reprinted. Cambridge University Press 1989, 230-232.

¹⁷² McKeown 1977, 142; McKeown 1983, 236. See also Ellison 2001, 94-97.

nutritional situation, and especially improved maternal nutrition, which increased the birth weights of the babies and reduced the risk of stillbirths and endogenous infant mortality.¹⁷³ Moreover, it would seem that adequate nutrition reduces susceptibility to disease, thus contributing to lower foetal, infant and child mortality and leading to increased fertility and population growth.

The above discussion demonstrates the effects of hunger and nutritional deprivation on human reproduction. Much of the evidence presented has been derived from outside Africa, from outside the field of history and from contemporary populations rather than historical ones. It is felt that the utilization of results from the modern social, medical, nutritional and population sciences can help to enhance the historical argument and evidence, but they should not be allowed to dictate them. The duty of historians is to sketch a picture of past life on the basis of fragmented materials and documents left behind by earlier human beings. By combining modern and historical evidence they can strengthen their lines of argument and possibly, if the historical evidence, after careful judgement, permits, even draw some comparisons between the past and today. Thus the approach chosen here may be defend against accusations of presentism on the grounds that it is felt that the use of the results of modern-day science is justified if one wishes to understand what our predecessors in history *were actually* achieving, rather than merely seeing what *they thought they were* achieving.¹⁷⁴

¹⁷³ E.A. Wrigley, 'Explaining the rise in marital fertility in England in the 'long' eighteenth century', *Economic History Review* 51 (3) 1998, 435-464, especially 436-439, 441-443, 452-453, 459-460. See also Latham 1997, 47-48.

¹⁷⁴ McKeown 1977, 14-5, emphasis added.

II Before and after 1800

ECOLOGY, SOCIETY AND THE GROWTH OF POLITICAL COMPLEXITY

THE ECOLOGICAL AND EPIDEMIOLOGICAL SETTING

The geographical area under consideration comprises two neighbouring kingdoms in the northern interlacustrine region, Buganda and Bunyoro, as they were understood at the beginning of the twentieth century.¹ Both kingdoms belong to what is referred to as the Kitara cultural sphere,² dating back to the eleventh century A.D. or even further. Geographically, the area extends from Lake Albert (Mwanzige) and the Victoria Nile southwards to the north-western shores of Lake Victoria (Nalubaale). In the east it extends as far as the Nile, and in the south as far as the mouth of the Kagera River (see Map 1). In the extreme west, it covers the land running from the southern tip of Lake Albert southeast towards the Katonga River, and from there south towards the Kagera. The region varies in altitude between 800 and 1600 metres above sea level. In Bunyoro the altitude is around 800, falling sharply on the eastern shore of Lake Albert. The higher ridges and peaks contrast with the flat country. Similarly, the Nile valley adjoining the lake is of lower altitude, but with an undulating landscape. The northern parts of Buganda up to Lake Kyoga and the Kafu River are similarly flat country, like much of Bunyoro, but the western parts of the kingdom, like the Buganda heartlands on the northern shore, are of higher altitude with steep hills dominating the landscape.³

The relatively high altitude moderates the temperatures of this equatorial region. The mean annual temperature varies between 20°C and 33°C. Rainfall is quite well distributed throughout the area. Mean annual rainfall varies from between 1500 mm and 2000 mm on the islands and shores of Lake Victoria to only between 500 mm and 750 mm on the eastern shores of Lake Albert. The area of relatively high rainfall extends from the Buganda's fertile crescent - the crescent-shaped area

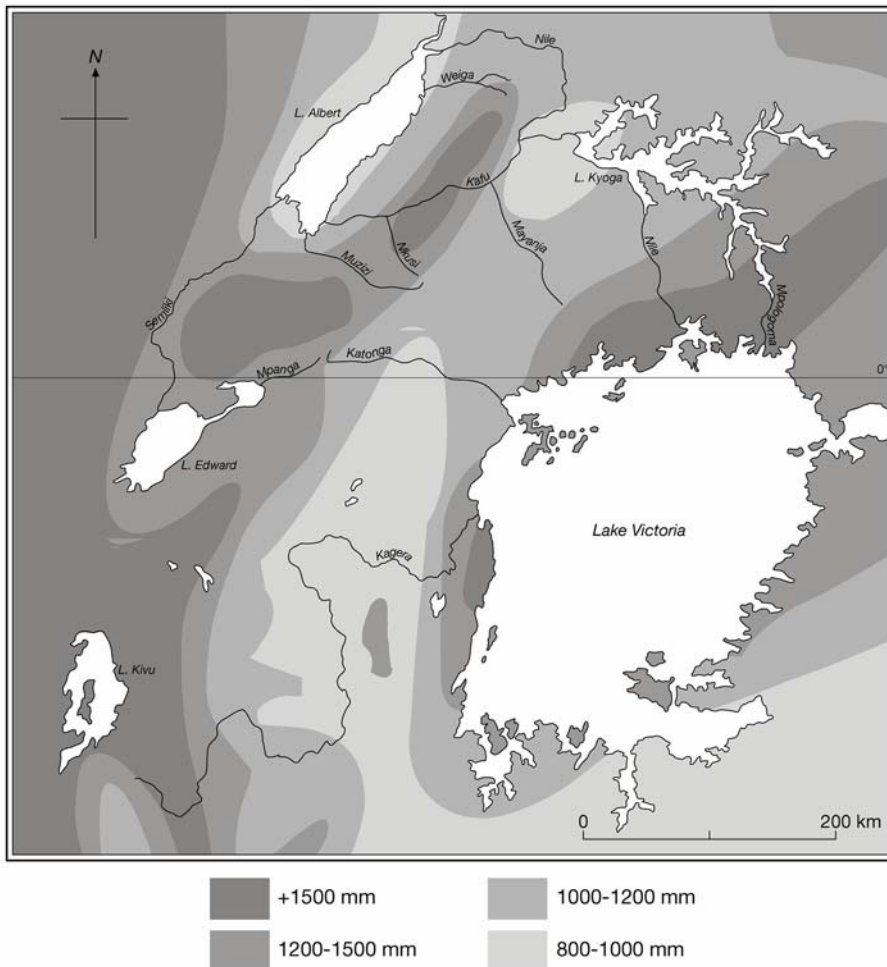
¹ This means the colonial boundaries introduced by the British. The colonial boundary between Buganda and Bunyoro became fixed in 1900. See D.W. Cohen, 'Peoples and States of the Great Lakes Region', in J.F. Ade Ajayi (ed.), *UNESCO General History of Africa, Vol. VI. Africa in the Nineteenth Century until the 1880's*. Berkeley: Heinemann; UNESCO; University of California 1989, 270-293.

² Geographically, the Kitara cultural area comprised a large part of modern western Uganda, including Bunyoro, Ankole, Toro and much of Buganda, but shared cultural characteristics can also be found in Rwanda and Burundi, as also in Karagwe and Buzinza in northern Tanzania. Languages, traditions and patterns of social organization amongst the peoples of this region bear a remarkable resemblance to each other. See Mafeje 1998, 8-9; Iris Berger, *Religion and Resistance. East African Kingdoms in the Precolonial Period*. Tervuren, 1981; Carole A. Buchanan, 'Perceptions of Ethnic Interaction in the East African Interior: The Kitara Complex', *IJAHS* 11 (3) 1978, 410-28; B.A. Ogot, 'The Great Lakes Region', in D.T. Niane (ed.), *UNESCO General History of Africa, Vol. IV. Africa from the Twelfth to the Sixteenth Century*. Berkeley: Heinemann; UNESCO; University of California 1984, 500-18; J.E.G. Sutton, 'The Antecedents of Interlacustrine Kingdoms', *Journal of African History* 34 (1) 1993, 33-64, especially 40; Schoenbrun 1998, 22-3.

³ This paragraph and the two following ones are derived from E.M. Lind, 'The Natural Vegetation in Buganda', *Uganda Journal* 20 (1) 1956, 13-16; John Beattie, *The Nyoro State*. Oxford: Clarendon Press 1971, 9-12; B.W. Langlands, 'The Geographic Basis to the Pattern of Disease in Uganda', in S.A. Hall & B.W. Langlands (eds.), *Uganda Atlas of Disease Distribution*. Nairobi 1975, 1-6; Doyle 1998 22-5.

about 50 kilometres inland from the north-western lake shore - northwestwards along the narrow corridor around Lake Wamala to the Kafu River. Central Bunyoro around Hoima is also well watered. The western and northern parts of Buganda, comprising the area annexed from Bunyoro at the end of the nineteenth century, are significantly drier. Throughout the area two distinct rainy seasons appear in the course of the year, the "big rains" between April and June and the "small rains" from September-October to November-December. No specific dry months occur inside Buganda's fertile crescent, but in Bunyoro January, February and March are virtually rainless. As a rule, the farther away one travels from the shores of Lake Victoria, the clearer the distinction between the wet and dry seasons.

Map 1: Rainfall



Soils and vegetation vary according to the rainfall. The shores of Lake Victoria, like most of the well-watered areas, used to be covered with dense forests adjoining the Congo rain forests in the west, but persistent human activity had already reduced the forest cover significantly well before the nineteenth century. Much of Buganda's fertile crescent is covered with elephant grass, with relatively rich soils for

permanent cultivation. In the north and west the soils are more sandy, and the vegetation changes to wooded savanna. Here agriculture requires more effort, but these areas provide good pastures for cattle rearing. The wooded savanna stretches south from the Mubende area towards Toro, formerly under Bunyoro control, to the counties of Mwenge and Kitagwenda, and southeast towards Koki and Buddu (see Map 3 p. 152). Relatively large areas of dense, equatorial rainforest are found in Bugoma and Budonga east of Lake Albert. Swamps and small rivers are a prominent feature of the landscapes in both Buganda and Bunyoro, often with intensive papyrus growth.

Communities using iron tools established more permanent settlements in the area at the beginning of the second millennium A.D., through gradual expansion from the south and south-west. It seems that these were rather small communities, combining shifting cultivation and cattle herding. Finger millet and sorghum were cultivated in drier areas, while in the more moist areas yams and banana formed staple diet, supplemented by fish from the rivers and lakes. The expansion of settlement, probably sparked by growing population densities, led to more extensive use of the available natural resources. Deforestation followed on the heels of slash and burn cultivation and iron working. The wooded grasslands of western Uganda were created by burning and felling of the forest for new fields, pastures, charcoal, firewood and timber. As the forest retreated, the climate became more arid, and a period of low rainfall seems to have set in around the mid-sixteenth century, with a long drought lasting up to 1600. Pre-sixteenth century levels of rainfall were temporarily regained by the end of the eighteenth century, but it seems that the climate remained more arid even after 1800.⁴

The tropical humidity and temperature both contributed to the utilization of the environment by the early settlers and restricted it, offering favourable conditions for agriculture but also providing a good breeding ground for human and animal disease. The more sedentary agricultural way of life, combined with the age-old contacts with the wilderness, had for a long time created ideal conditions for the emergence of multiple zoonotic infections, i.e. human diseases derived from domestic and wild animals. From cattle came tuberculosis and smallpox, while rodents, dogs and poultry were sources of salmonella, measles (a variant of the rinderpest virus that circulated between cattle, dogs and men), plague and influenza. On the fringes of the rainforest, humans came into contact with primates - the reservoir of the *treponema* bacteria that causes syphilis and yaws - while leprosy came from the buffalo. Higher population densities and declining sanitary levels created ideal conditions for hookworm and for bacterial water-borne infections such as polio, hepatitis, typhoid, whooping cough, diphtheria and later cholera. The clearance of forest cover may have created more suitable environments for malaria-carrying mosquitoes, and will thus have increased the incidence of disease.⁵

⁴ Peter Robertshaw and David Taylor, 'Climate Change and the Rise of Political Complexity in Western Uganda', *Journal of African History* 41 2000, 1-28, especially 21-5; David L. Schoenbrun, 'Cattle herds and banana gardens: the historical geography of the western Great Lakes region, ca AD 800-1500', *The African Archeological Review* 11 1993b, 39-72, especially 46-9; Sharon E. Nicholson, 'The Methodology of Historical Climate Reconstruction and its Application to Africa', *Journal of African History* 20 (1) 1979, 31-49, especially 42-44.

⁵ T. Aidan Cockburn, 'Infectious Diseases in Ancient Populations', *Current Anthropology* 12

Cattle were afflicted with trypanosomes, theileriosis or East Coast Fever, Corridor Disease, and Foot and Mouth Disease. Of these four, trypanosomiasis also posed a threat to man in the form of sleeping sickness. It inhibited herds near wooded river valleys and lake shores, which were the principal feeding and breeding grounds of its vector, the tsetse fly. Four types of trypanosome protozoa, *T. congolense*, *T. vivax*, *T. evansi* and *T. brucei*, caused disease in cattle, which was often fatal. East Coast Fever and Corridor Disease, caused by the morphologically identical protozoa *Theileria parva parva* and *Theileria parva lawrencei*, respectively, were probably great killers of cattle. They were transmitted from their natural host, the buffalo, by infected ticks, and were especially fatal to calves. However, some African cattle possess a certain degree of immunity to trypanosomes and some are highly resistant to ticks, and these may survive modest exposure and infections, but usually at the expense of reduced vitality and productivity. Foot and Mouth Disease differs from the other bovine infections mentioned above in that it is the only one caused by a virus, so that it is communicable within a herd without a vector. Acquired from the buffalo, it is highly virulent and often lethal. Some African cattle today possess a high level of immunity to the disease, probably acquired through age-old contacts with the virus.⁶

Agriculture combined with cattle herding provided a relatively abundant source of subsistence for the early communities. The accumulation of an agricultural surplus enabled the development of exchange relations within and between communities, contributing to political stability and social cohesion. Population growth led to the settlement of previously uninhabited areas and increased social, political and economic complexity. Political leadership arose from the rights to distribute and re-distribute land to new settlers and community members, and from the ability of the leaders to safeguard the fertility of their land and people.⁷ This was probably the most challenging task for the early community leaders. The tropical environment, which harboured endemic infections such as malaria, placed a great strain on human health and fertility. Although the adult population in endemic malaria regions developed a degree of immunity to the disease, it took its toll of infants and children and likewise contributed to the prevalence of severe anaemia, especially among women. As the population grew, malaria became chronic, as it

(1) 1971, 45-62; Roy Porter, *The Greatest Benefit to Mankind. A Medical History of Humanity from Antiquity to the Present*. London: Harper Collins Publishers 1997, 17-9; Andrew Learmonth, *Disease Ecology. An Introduction*. Basil London & New York: Blackwell 1988, 2-3; Peter Haggett, *The Geographical Structure of Epidemics*. Oxford University Press 2000, 70, 81, 90; A.O. Coker, R.D. Isokpehi, B.N. Thosmas, A.F. Fagbenro-Beniyoku, & S.A. Ominalbu, 'Zoonotic infections in Nigeria: overview from a medical perspective', *Acta Tropica* 76 2000, 59-63.

⁶ Gifford-Gonzalez 2000, 95-139 *passim*; James L. Giblin, 'East Coast Fever in Socio-Historical Context: A Case Study from Tanzania', *IJAHS* 23 (3) 1990, 401-21; David Bruce, 'Amakedde: A Disease of Calves in Uganda,' in Sir David Bruce et. al., *Collected Papers on Trypanosomiasis, 1909-1911*. Wellcome Library Collections, 257-71; David Schoenbrun, 'Social Aspects of Agricultural Change between the Great Lakes, AD 500 to 1000', *Azania* 29-30, 1994-95, 270-82, especially 272-3; Giblin 1992, 30-1.

⁷ Schoenbrun 1998, 102-9.

found its necessary human reservoir in the more densely inhabited wetter regions.⁸ The dense population also favoured parasites such as hookworm. This intestinal nematode can infect humans in two ways through contaminated food or water, or most commonly by penetrating through the skin from infested and dirty surroundings. Adequate iron intake helps people to resist hookworm disease, but children and pregnant women with increased iron requirements usually suffer from symptoms of the disease even at lower levels of infection. Hookworm anaemia frequently develops, easily leading to malnutrition in children and severe anaemia in women, with a risk of foetal morbidity or even miscarriage. Although hookworm disease is not lethal in itself, it paves the way for other infections by weakening the human immune response.⁹

While disease constituted one formidable barrier to further population growth and the expansion of settlement, another challenge came in the form of climatic change. In the Equatorial tropics, where the evaporation of ground surface moisture is three times higher than in temperate regions,¹⁰ the diminishing rainfall that resulted from deforestation was not without consequences. It contributed to more frequent droughts and famines and to less reliable water supplies, all of which had negative effects on the fertility of both the land and the people. In order to understand the consequences of climate change and the responses generated by these, it is vital to understand how environmental control, preservation of health, and political power converged in northern interlacustrine Africa.

FERTILITY, RITUAL AND POLITICAL POWER

The fertility and productivity of the people and land were tightly interwoven. Human health depended primarily on an adequate food supply, which could be secured and increased only if there were healthy cultivators and herds residing in the area and grazing on the land.¹¹ The productivity of land was in turn dependent on moisture, and adequate rainfall was of primary importance for the welfare of the early communities. To ensure rain for the crops and cattle people would put their hope in rainmakers. Early community leadership apparently rose out of the ability of successful rainmakers to ensure the fertility of the land by claiming control over natural forces, thereby attracting followers and claiming leadership. It seems that the heads of lineages and clans, besides possessing the firstcomer's right to distribute land, also enjoyed the status of rainmakers and ritual leaders, the positions of which eventually, either through inheritance or rivalry, became foci of political authority,

⁸ R.W. Snow and K. Marsh, 'The epidemiology of clinical malaria among African children', *Bulletin de l'Institut Pasteur* 96 1998, 15-23; Meade and Earickson 2000, 77-79.

⁹ Cockburn 1971, 49-51; G.C. Cook, *Communicable and Tropical Diseases*. London: Heinemann Medical Books 1988, 85-6; Patrick Manson-Bahr (ed.), *Manson's Tropical Diseases: A Manual of the Diseases of Warm Climates*. London: Cassell 1960, 790-96; Kenneth F. Kiple (ed.), *Cambridge World History of Human Disease*. Cambridge University Press 1993, 784-6.

¹⁰ Lamb 1988, 198.

¹¹ Feierman 1990, 48; Feierman 1974, 121.

with greater political weight assigned to the lineages with the most successful ritual leaders.¹² Apart from their secular leadership, leaders and chiefs, referred to as *bami* (sing. *mwami*), also acted as mediators between the homestead and the bush, i.e. between domesticated and undomesticated nature. To quote Packard: 'This mediation permits the domestication and incorporation into the homestead of certain spirits, medicines, and elements of nature, which are essential to the productivity of the homestead but are associated in their natural state with the chaotic world of the bush.'¹³ Thus chiefs were needed to protect homesteads from the undomesticated forces of nature and to tame some of those forces for the benefit of community. Because of their combined ritual and political authority, and their control over the land, they were the guarantors of welfare, responsible for the maintenance and reproduction of social order. Any failure to deal with the powers of nature would bring about famine and disease, social unrest and a waning of their ritual and political power.¹⁴

Famine and disease would challenge the legitimacy of a chief's power by posing a threat to the health and prosperity of the community and leading to a renegotiation of its power relations. At some point in history ritual and political leadership became separated, paving the way for the growth of royal power over ritual leaders and the headmen of clans and lineages. As Beattie has noted, the king in Bunyoro had his ritual experts under him, and although his office was highly ritualized, he was not a priest or a person with magical powers himself.¹⁵ On the other hand, Casati reported in the late nineteenth century that the ultimate rainmaker in Bunyoro was the king, who divided and distributed his power to be used everywhere in his kingdom. Indeed, Nyakatura, in explaining the origins of rainmaking in Bunyoro, tells how a *muchwezi* king by the name of Wamara taught one of his subjects the art of rainmaking and told him to use it whenever rain was needed.¹⁶ To associate rainmaking with Wamara, who is treated in the traditions as a

¹² Packard 1981, 130-2; Schoenbrun 1998, 102-104,180-2; J.W. Nyakatura, *Anatomy of an African Kingdom. A History of Bunyoro-Kitara*. Translated by Teopista Muganwa. Edited with Introduction and notes by G.N. Uzoigwe. New York: Anchor Books 1973, 32; Kopytoff 1989, 16-22. Roscoe tells how rainmakers in Bunyoro were highly respected and collected tribute from the people in exchange for their services. See Roscoe 1923, 28-9.

¹³ Packard 1981, 3-4.

¹⁴ Packard 1981, 30-1; Feierman 1990, 46. In nineteenth-century Bunyoro the king and his principal chiefs acted as mediators between men and *mahano*, a magnificent but potentially dangerous power. Though the king was not a priestly figure himself, he and his chiefs were said to possess a certain amount of *mahano*, which meant that they were to be feared and respected. It was the duty of the king to tap this power and to use it for the benefit of his kingdom. The ritual ability to control *mahano* that was associated with the royal office was also the basis for his political power. See Beattie 1971, 117-22; Pierre Bonte, "'To Increase Cows, God Created the King": The Function of Cattle in Interlacustrine Societies', in John G. Galaty and Pierre Bonte (eds.), *Herders, Warriors, and Traders. Pastoralism in Africa*. Boulder: Westview Press 1991, 66-8.

¹⁵ John Beattie, 'Rainmaking in Bunyoro', *Man* 64 1964a, 140-1.

¹⁶ Gaetano Casati, *Ten Years in Eutoria and the Return with Emin Pasha*, Vol. II. London & New York: Frederick Warne & Co. 1891, 57; Nyakatura 1973, 31-2.

mythical demi-god and king, indicates that it was associated with the supernatural powers of early rulers but later came to be separated from political power, becoming a specialized profession, although obviously under royal protection and surveillance.

The clearer division between ritual and political leadership probably emerged between the sixteenth and eighteenth centuries, or even earlier, associated with widespread drought and famine, which may have favoured the existence of strong military leaders capable of providing protection as well as nourishment for their followers by force of arms. According to the oral traditions of northern Uganda, the period of successive droughts and famines covered several decades approximately between 1580 and 1620, ending with the Great Famine and cattle disease around 1620s. Archaeological evidence seems to support the occurrence of severe droughts from the late sixteenth century onwards, although the specific years derived from the traditions should be approached with caution. Famines with widespread starvation generated mass migrations towards the main lakes and rivers, and the routes of the refugees from Bunyoro and northern Uganda led south towards Lake Victoria and the smaller lakes in the south-west. The period of drought and famines at the turn of the sixteenth and seventeenth centuries, also known as Nyarubanga, has been seen as one major point of bifurcation in the histories of the Great Lakes societies. By wiping out and relocating masses of human populations, it also wiped out traditions and old forms of political and religious leadership, thus paving the way for strong leaders of migrations and military forces and new political formations and ideologies.¹⁷

Forms of old ritual and political leadership nevertheless survived at the local level, where clan heads controlled ancestral lands and placated the spirits of the ancestors, thus securing the welfare of their community.¹⁸ Alongside the old ritual and political leaders, a group of professional spirit mediums, called *kubandwa*, emerged. The origins of the *kubandwa*, whose mediums were mainly women, is unclear, but it seems that the custom had become common by the seventeenth century, when the old localized patrilineal clans were broken up into geographically dispersed lineages, a situation in which the old localised family and clan spirits were losing their meaning. It can also be seen as a counterbalance to the increasingly centralized, oppressive and class-based rule, which was manifested in Bunyoro in the rise of the Babito royal lineage.¹⁹ The *kubandwa* was preoccupied with the

¹⁷ J.B. Webster, 'Noi! Noi! Famines as an aid to Interlacustrine Chronology', in J.B. Webster (ed.), *Chronology, Migration and Drought in Interlacustrine Africa*. London: Longman & Dalhousie University Press 1979, 10-15; Jean-Pierre Chrétien, *The Great Lakes of Africa. Two Thousand Years of History*. Translated by Scott Straus. New York: Zone Books 2003, 69, 142-143; Robertshaw and Taylor 2000, 19; Peter Robertshaw, 'Archeological survey, ceramic analysis, and state formation in western Uganda', *The African Archeological Review* 12 1994, 105-131, especially 126-8; Webster et al. 1992, 781-3; Ogot 1984, 510. The rise of a centralized state in Buganda coincided with the mass migrations and raids generated by the Nyarubanga. Ability to resist invasions, together with control over trade and the spoils of war, led to the growth of royal power. See Kiwanuka 1971, 96-7; Webster et al. 1992, 799-801; Conrad P. Kottak, 'Ecological Variables in the Origin and Evolution of African States: the Buganda Example', *Comparative Studies in Society and History* 14 (3) 1972, 351-380.

¹⁸ Doyle 1998, 33.

¹⁹ Iris Berger, 'The Kubandwa Religious Complex of Interlacustrine East Africa: An Historical Study, c. 1500-1900', Ph.D. thesis, University of Wisconsin 1973, 30, 58-59, 80-81, 159; Berger 1981, 3. There is no agreement about the exact date of the arrival by the Luo-speaking Babito and their

fertility of the land and the people, offering relief and instruction to people outside the old clan-based rituals, and thus becoming popular among women as a means of escaping the male spiritual hegemony over issues such as female fertility. The rise of the *kubandwa* may also reflect the growing difficulties faced by women in biological reproduction, for according to Schoenbrun, the *kubandwa* offered childless, heirless and kinless women (and men) an opportunity of belonging to a social institution, and for mediums the opportunity to treat their initiates as their children and heirs.²⁰

In Buganda the division between the ritual and political leadership became a clear-cut one; by the end of the eighteenth century the original ritual and political leaders, with limited coercive powers over their subjects, were overshadowed by secular chiefs and kings. According to Wrigley, the rulers of Buganda in the nineteenth century did not pretend to control the forces of nature, and their power was based solely on their ability to use violence to control their subjects.²¹ While this may be an exaggeration, it is true that the growth of royal power in Buganda eclipsed the traditional clan-based authority, paving the way for the creation of appointed chiefs, and for a clearer division of the people into two classes: the rulers, i.e. royalty and bureaucrats, and the rest of the population as subordinate producers.²² But secular leadership did not permit the kings and chiefs to escape the fact that their rule was fundamentally based on the welfare of their people. The excessive use of violence and coercion would only undermine the productive and military base of society, as became evident in the second half of the nineteenth century.²³ Rather, the legitimacy for their rule was derived from their ability to offer their subjects protection and land, and to redistribute wealth to them. This would

takeover of the Kitara monarchy. It is agreed, however, that the 'takeover' and the rise of the Babito royal lineage was a long process, probably completed only in the eighteenth century. See Edward Steinhart, 'Herders and Farmers: The Tributary Mode of Production in Western Uganda', in Donald Crummey and C.C. Stewart (eds.), *Modes of Production in Africa. The Precolonial Era*. Beverly Hills & London: Sage 1981, 121-123; Edward Steinhart, 'The emergence of Bunyoro: the tributary mode of production and the formation of the state, 1400-1900', in Ahmed Idha Salim (ed.), *State Formation in East Africa*. Nairobi, London; Ibadan: Heinemann 1984, 76-79; Ogot 1984, 504-508; Carol Buchanan, 'The Kitara Complex: The Historical Tradition of Western Uganda to the 16th Century', Ph.D. thesis, Indiana University 1974, 209-10; Robertshaw and Taylor 2000, 19; Berger 1973, 44-45.

²⁰ Berger 1995, 67-70; Schoenbrun 1998, 238.

²¹ Wrigley 1996, 13, 242-8. See also N. Thomas Håkansson, 'Rulers and rainmakers in Precolonial South Pare, Tanzania: Exchange and Ritual Experts in Political Centralization', *Ethnology* 37 (3) 1998b, 263-283, especially 276-277. Médard, however, concludes that religion played an important role in the politics of the kingdom Buganda in the nineteenth century, uniting and dividing the people and serving as a means of political control. See Médard 2001, 639-691 *passim*.

²² Nakanyike B. Musisi, 'Women, "Elite Polygyny," and Buganda State Formation', *Signs: Journal of Women in Culture and Society* 16(4) 1991, 757-786, especially 770.

²³ Reid 1996, 268-269. Médard emphasizes the disruptive effects of the royal succession practices and wars as one cause of famine in Buganda. After a king's death there was a mourning period of five or six months during which cultivation was banned. See Médard 2001, 69; Benjamin C. Ray, *Myth, Ritual, and Kingship in Buganda*. New York: Oxford University Press 1991, 109-110.

mean the enhancement of clientship ties and reciprocity, as well as the use of the kingdom's military capacity to loot its neighbours to meet its own domestic needs.²⁴

ENVIRONMENTAL CHANGE AND ECONOMIC, POLITICAL AND SOCIAL RESPONSE, C. 1500-1800

It is impossible in the framework of this study to go in any greater detail into the growth of political complexity in the northern Great Lakes region before the nineteenth century, an issue which is currently under much debate and is not yet completely understood.²⁵ It would be safe to say, however, that major economic, social and political changes were taking place in the interlacustrine region between 1500 and 1700, leading to a clearer distinction between agricultural and pastoral communities. This development was sparked off by increased insecurity caused by climatic change. The eighteenth century saw a continuation of drought, famine and cattle disease, and of violent confrontations and military invasions. The drier climate brought a decline in agricultural production, which augmented the importance of cattle and pastures in the central parts of the region. Agricultural practices intensified as cereals were supplemented with tubers and legumes, allowing two harvests instead of one. The population generally moved towards reliable water sources, so that areas of higher rainfall, such as Buganda on the northern shore of Lake Victoria and the forested high rainfall areas in the western Rift, received population from the drier areas in the centre. Population growth in well-watered regions around Lake Victoria was fostered not only by migration but also by the higher productivity of agriculture, based on the intensive cultivation of bananas from the sixteenth century onwards.²⁶

Agriculture was based on a knowledge of the local ecological conditions and on access to different ecological environments, which were used to grow a variety of crops to ensure adequate food all year around. The communities were rarely, if ever, entirely self-sufficient in terms of foodstuffs, tools, etc., but the agricultural surplus in good years encouraged part-time specialization in pottery, iron working, fishing and salt making, and generated the small-scale exchange of foodstuffs, utensils and agricultural tools at the local and regional levels. An agricultural surplus on the local and regional markets could be transformed into a different form, e.g. into cattle, which enabled some of the accumulated wealth to be used for marriage payments, for example.²⁷

²⁴ Médard 2001, 68.

²⁵ See Susan Keech McIntosh (ed.), *Beyond Chiefdoms. Pathways to Complexity in Africa*. Cambridge University Press 1999.

²⁶ Robertshaw and Taylor, 2000, 24-7; Peter Robertshaw, 'Seeking and keeping power in Bunyoro-Kitara, Uganda', in McIntosh 1999, 124-35; Webster 1979, 16-18; Chrétien 2003, 142; Schoenbrun 1998, 167-8, 171-5; Schoenbrun 1993b, 51-53; David L. Schoenbrun, 'Gendered Histories Between the Great Lakes: Varieties and Limits', *IJAHS* 29(3) 1996, 461-492; Sutton 1993, 33-64; Steinhart 1984, 70-90; Steinhart 1981, 122-33.

²⁷ Isaria N. Kimambo, 'Environmental Control & Hunger in the Mountains & Plains of Nineteenth-Century Northeastern Tanzania', in Gregory Maddox, James L. Giblin & Isaria N. Kimambo (eds.), *Custodians of the Land. Ecology & Culture in the History of Tanzania*. London:

Utilization of the environment was restricted by disease and the distribution of rainfall. The tsetse followed game animals such as wild pigs and bushbuck, which inhabited the bush on the fringes of homesteads and gardens, and the brown ear tick, the vector of East Coast Fever, was found on the pastures and grasslands inhabited by buffalo. Fire was used to burn the undergrowth and thickets in order to destroy the habitats of host animals and vectors,²⁸ but the creation of safe pastures was limited to the areas with lower rainfall. The ample vegetation of Buganda, especially the tick-harboring elephant grass, made large-scale cattle-rearing impossible, since eradication and control of the vegetation to make the area suitable for cattle would have required enormous efforts to be effective. Whatever the level of control, both cattle and men were probably periodically exposed to these diseases in the vicinity of waterholes, rivers and lakes, where the cattle were driven to drink and from where people fetched their drinking and cooking water. It has been argued that deliberately acquired temporary exposure to tsetse would bring the cattle a certain degree of immunity to trypanosomiasis,²⁹ but it is questionable whether this exposure really generates any immunity, and whether the local herders at that time were actually aware of this or not. In any case, they had other means of controlling disease. The hunting of wild animals protected the gardens and fields from marauding elephants, pigs and monkeys,³⁰ and provided some meat to supplement the diet, and perhaps more importantly, enabled disease to be controlled by eradicating or driving away wild pigs and buffalos from the vicinity of pastures and gardens.

The epidemiological environment was also subject to change. The period between 1500 and 1850 appears to have been a time of forest regeneration, probably because of the disruption caused by famines and population loss and displacement, and more dispersed patterns of settlement.³¹ The expanding bush harboured tsetse and ticks, while in the higher rainfall areas the influx of migrants and refugees made the population denser and more susceptible to malaria epidemics during the rainy seasons. Therefore, in order to ensure the successful reproduction of society, specialized healers and medicine men were increasingly needed.³²

Even in lush environments with relatively abundant rainfall, droughts and famines were not unknown, and times of plenty and famine could follow one another in quick succession.³³ It was not only the lack of rain, but also prolonged or

James Currey 1996, 74; Feierman 1974, 18-19, 133; Rusch 1975, 24-5, 46-7; Schoenbrun 1994-95, 276; John Tosh, 'The Northern Interlacustrine region', in Richard Gray and David Birmingham (eds.), *Pre-Colonial African Trade. Essays on Trade in Central and Eastern Africa before 1900*. London: Oxford University Press 1970, 104-106; Doyle 1998, 79.

²⁸ Schoenbrun 1994-95, 272-3.

²⁹ Schoenbrun 1994-95, 272; Giblin 1992, 30; Ford 1971, 89-90.

³⁰ Doyle 1998, 67.

³¹ Robertshaw and Taylor 2000, 25.

³² Schoenbrun 1998, 108-113; Zeller 1971, 21-23.

³³ Packard 1981, 26.

excessively heavy rain which could bring about famine, for if rains continued for too long the crops would rot in the fields. Heavy rain, storms, wind and hail could destroy millet fields and banana plantations in a matter of minutes. Thus, it was not only rainmaking but also rainstopping that was needed. It was the duty of the ritual officials and chiefs to tame the untamed rain and to make sure that it fell softly and at the right time. The traditional ritual leaders presumably faced increased competition from other ritual and political leaders as the region's climate became more unpredictable and drought-prone from the sixteenth century onwards.³⁴

The utilization and management of the different ecological environments may also have been difficult, if not sometimes impossible, because of the limited access to labour.³⁵ The high demand for labour favoured polygamous marriage, slavery, voluntary and involuntary servitude, and clientship, which all can be seen as responses to a challenging environment, scarcity and threatening destitution. Some of these institutions, such as slavery and servitude, were probably very old, but there is reason to suspect that they gained in importance from the early seventeenth century onwards.³⁶ Little is known about early marriage patterns, but it seems that the decreasing rainfall and declining agricultural production favoured polygynous marriage. The only way open for lineages and families to increase production was to increase the number of their members. Women were needed as mothers as well as cultivators to maintain the level of agricultural production and population,³⁷ and this was not only the case in the drier regions in the west, where agriculture was based on labour-intensive finger millet, but also in the wetter or previously uninhabited regions - now receiving migrants - where the clearing of dense vegetation and weeding of established gardens required constant labour.³⁸ The growing demand for females as producers and reproducers increased slavery and enhanced the formation

³⁴Packard 1981, 26-7; Roscoe 1923, 32-3; Roscoe 1965, 315; Efuraimu Rwumva Kamuhangire, 'The Pre-Colonial History of South-Western Uganda Salt Lakes Region', Ph.D. thesis, Makerere University 1980, 93-95.

³⁵ See Ford 1971, 117; Giblin 1992, 31.

³⁶ This assumption is based on the socio-political changes occurring at the turn of the sixteenth and seventeenth centuries, which might have increased the incidence of voluntary servitude because of the greater need for physical and economic security. Hartwig associates the growth of servitude among the Kerebe with the mid-seventeenth century. Gerald W. Hartwig, 'Changing Forms of Servitude among the Kerebe of Tanzania', in Kopytoff and Miers 1977, 265.

³⁷ Schoenbrun 1994-95, 275. It seems that the *bahima* herders in the late nineteenth century were polygamous, which, according to Roscoe and Oberg, had not always been the case. According to Kagwa, polygyny became more common from the seventeenth century onwards, and thus coincided with the rise of the *kiganda* monarchy. Roscoe is also of the opinion that polygyny had not always been common in Buganda, and that the number of wives a man could have had been restricted. A good analysis of the development of elite polygyny and social stratification is given by Musisi. See Musisi 1991; 767-773; John Roscoe, 'Further Notes on the Manners and Customs of the Baganda', *Journal of the Anthropological Institute of Great Britain and Ireland* 32 1902, 25-80, especially 35-6; Roscoe 1923, 264-265; Kalervo Oberg, 'Kingship Organization of the Banyankole', *Africa* 11 (2) 1938, 129-59, especially 136; Apolo Kagwa, *The Customs of the Baganda*. Translated by E. Kalibala. New York: Columbia University Press 1934, 67-68; Kiwanuka 1971, 99-100.

³⁸ Robertshaw and Taylor 2000, 16.

of clientship ties, in which young unmarried men sought patronage under powerful chiefs and elders in order to obtain women and slaves or the livestock and prestige goods required for marriage payments. In this way the chiefs and elders tied young men to themselves to increase their own political and economic power. The emergence of clearer social divisions based on differences in age and wealth increased indebtedness and the incidence of debt bondage and human pawnship.³⁹

As raiding for cattle and women became more common, a vital need emerged for powerful chiefs to lead military campaigns and provide protection in an increasingly violent environment. Slavery and cattle raiding boosted the growth of the chiefs' herds and harems which strengthened their control over the younger males through the medium of marriage. The prices of slave wives were lower, since no bridewealth had to be paid to their families, making marriage or concubinage affordable even for the poorer young males. Those chiefs who could supply their subjects with cattle or women attracted more followers, i.e. manpower, and were hence able to provide better protection as well as carry on raiding their neighbours.⁴⁰

Consequently, increased slavery led to the overall commoditization of women. The emergence of *kubandwa* spirit mediums in Bunyoro and Buganda has been seen as a reaction against the increased marginalization and inequality experienced by women.⁴¹ It can also be seen, as mentioned above, as a response to the growing pressures and emphasis placed on female fertility. In communities where successful human reproduction was the key to greater wealth, female infecundity came to be regarded as destructive, something akin to poverty and destitution. Given the difficult epidemiological environment, it seems that women experienced difficulties in meeting the high expectations imposed on them as cultivators and mothers, and female subfecundity was probably becoming more common.⁴² The lot of barren women became embittered⁴³ and their social status deteriorated, many of them ending up as slaves.

Thus it would seem that slavery in Africa has ancient origins. Its basis lies in economic differences within and between communities. Although largely involuntary, it has features that sets it apart from the Western concept of slavery. In the West slavery is considered the antithesis of freedom, while the African concept of freedom is almost the antithesis of the Western one: 'In most African societies, 'freedom' lay not in a withdrawal into meaningless and dangerous autonomy but in attachment to a kin group, to a patron, to power - an attachment that occurred within

³⁹ See Musisi 1991, 770-773; Debt bondage and pawnship are discussed further below.

⁴⁰ Wrigley 1996, 177, 201; Michael Twaddle, *Kakungulu & the creation of Uganda, 1868 - 1928*. London: James Currey 1993, 34-5; Musisi 1991, 772-773.

⁴¹ Wrigley 1996, 177; Berger 1973, 80-81. Women belonging to the royal clan or royal family enjoyed a different status, some of them with significant rights and powers over male and female subjects. See Laurence Schiller, 'The Royal Women of Buganda', *IJAHS* 23 (3) 1990, 455-73; Apolo Kagwa, *The Kings of Buganda*. Translated by M.S.M. Kiwanuka. Nairobi: East African Publishing House 1971, 187-188; Musisi 1991, 773-782; Roscoe 1902, 36.

⁴² See Roscoe 1923, 248-50; Schoenbrun 1998, 238.

⁴³ Roscoe 1902, 38, 56; Roscoe 1923, 239; Reid 1996, 281.

a well defined hierarchical framework... .. the antithesis of 'slavery' is not freedom qua autonomy but rather "belonging."; hence a slave in Africa would be an '...outsider who has involuntarily crossed the boundary of the society and is forcibly retained within it, or within a single society, one who has lost his own kin ties and has come to be under the full authority of another kin group, in which he is a kind of resident alien."⁴⁴ In African societies there were, and still are, 'rights over persons', meaning that some persons have certain rights over others, and that these rights were rarely reciprocal or equal. For example, by paying bridewealth a husband acquired certain rights over his wife from her kin, including rights over the children born from wedlock, although a wife's kin could later claim rights over some of them. In situations where a family or kin needed certain goods, services or money, they might give up these rights over their family members to another family or kin either temporarily or permanently in return for what they desired. A man wishing to improve his food security, for example, could give a chief one of his daughters in exchange for a larger garden. African lineages owned their persons, and transactions in rights over persons lay at the very core of the social and economic organization.⁴⁵

The difference between involuntary servitude and slavery should be emphasized. The oldest forms of the former in Africa were pawnship and debt bondage, often seen - correctly or incorrectly - as forms of slavery. The difference between pawnship and debt bondage is not a clear-cut one, however, and they have been treated as a single entity. The difference between pawns and slaves was that pawns could be redeemed by their kin, i.e. their kin had some rights over them, while slaves usually had no kin to redeem them and they became the property of their masters. Pawnship acted primarily as a buffer against poverty and insecurity. People - usually children and women, sometimes freeborn members of community, or sometimes slaves - were pawned in times of food shortages and political upheavals in order to secure access to food and cattle or to receive protection. Pawns were also given to pay debts or as compensation for some harm done. The receiving lineage usually obtained the right over the pawn's labour, but otherwise he or she still enjoyed the protection of his or her own kin group. As slaves became valuable articles in long-distance trade in late nineteenth-century Buganda, however, pawning in general seems to have increased, and pawns were sold on to slavers.⁴⁶ The acceptance of female pawns also provided an opportunity for the creditor to increase

⁴⁴ Kopytoff and Miers 1977, 17-18. See also Wrigley 1996, 236. On slavery in pre-colonial western and central Africa, see Claude Meillassoux, *L'esclavage en Afrique précoloniale*. Paris: François Maspero 1975.

⁴⁵ Kopytoff and Miers 1977, 7-8, 11-12; Audrey I. Richards, 'Authority Patterns in Traditional Buganda', in Fallers 1964, 258-61; Thornton 1992, 74-79; W.G.S. Innes, 7 Nov. 1901. C.M.S. Annual Letters 1901, p. 247, CMS.

⁴⁶ Toyin Falola and Paul E. Lovejoy, 'Pawnship in Historical Perspective', in Toyin Falola and Paul E. Lovejoy (eds.), *Pawnship In Africa. Debt Bondage in Historical Perspective*. Boulder & Oxford: Westview Press 1994, 2-3; Michael Twaddle, 'Slaves and Peasants in Buganda', in Léonie J. Archer (ed.), *Slavery and other forms of unfree labour*. London & New York: Routledge 1988a, 122; Barbara Isaacman and Allen Isaacman, 'Slavery and Social Stratification among the Sena of Mozambique', in Miers and Kopytoff 1977, 108-9; Reid 2002, 118-119; Reid 1996, 289-290.

the number of his wives, and some debtors gave away their daughters in the hope that they would be married and the debt cancelled.⁴⁷

Voluntary enslavement also took place. This seems to have been especially common at times of famine, when people, after their lineage ties had been broken down or as they were wandering around in search of food, gave themselves up to anyone willing and able to provide them with food and protection. Hence voluntary slavery appears to have acted as a last resort against utter destitution and death.⁴⁸

The treatment of slaves varied, being largely dependent on the social and political position of the master and on the sex and age of the slave, but notwithstanding the psychological trauma, they were mostly well treated. Slaves existed at all levels of society, from manual labourers and domestic servants to soldiers and political and military aides. It appears from Roscoe that domestic slaves in Bunyoro were well treated, while the manual labourers were the most despised class of slaves.⁴⁹ A slave of an important chief would have some power in fulfilling his master's orders, and he might have slaves under his command, or even 'own' some himself.⁵⁰ To many young men, as noted above, slave girls would probably be the only women they could afford to marry, and although the legal status the slave wife would remain unchanged, their children would be considered free, albeit enjoying a somewhat inferior social status and probably excluded from any inheritance. If bridewealth was paid for a slave woman, however, her status and that of her children would improve.⁵¹ It is likely that many female slaves became assimilated into society through marriage, concubinage and inheritance, although in the absence of protection from their kin, they were liable to abuse and ill-treatment

⁴⁷ Falola and Lovejoy 1994, 11-12. The practice of giving children to chiefs' households was reported to be common in Buganda, and has been associated with the political ambitions of lineages. Reid (1996, 291) suggests that this 'privileged enslavement' provided great opportunities for boys, but somewhat less for girls, who usually became concubines and domestic servants. It is also possible that some of these children were simply human pawns, or used as payment. Young girls could be given away to be married in order to pay a debt. Yet another explanation, offered by Meillassoux, is that domestic communities balanced the ratios of producers and non-producers by giving away children to kinsmen. See Roscoe 1902, 39; Christine Obbo, 'Village Strangers in Buganda Society', in William A. Shack and Elliott P. Skinner (eds.), *Strangers in African Societies*. Berkeley: University of California Press 1979; 231-2; Lucy P. Mair, *An African People in the Twentieth Century*. Reissued, London: Routledge & Kegan 1965, 31-2; Julien Gorju, *Entre le Victoria, L'Albert et l'Edouard. Ethnographie de la Partie Anglaise du Vicariat de l'Uganda*. Rennes 1920, 299; Richards 1964, 258-61; Meillassoux 1981, 58-60.

⁴⁸ Hartwig 1977, 269; Isaacman and Isaacman 1977, 109.

⁴⁹ Roscoe 1923, 11.

⁵⁰ Jan Vansina, *The Children of the Woot. A History of the Kuba Peoples*. Madison: The University of Wisconsin Press 1978, 167; Twaddle 1988a, 122; Kopytoff and Miers 1977, 28; Hartwig 1977, 268-9; Reid 2002, 124-130.

⁵¹ Kopytoff and Miers 1977, 30-3; Wrigley 1996, 240; Gorju 1920, 299. Bridewealth made marriage legitimate, while marriages taking place without proper bridewealth would be considered immoral, something akin to concubinage, and children born out of such marriages would be of inferior status in society. See Joshua W. Sempebwa, *African Traditional Moral Norms and Their Implication for Christianity. A Case Study of Ganda Ethics*. St. Augustin 1983, 161.

more frequently than wives obtained through proper marriage arrangements. Their position would be seriously weakened when their productive and reproductive capacities declined with age.

Slaves had been acquired in wars since times immemorial, but there is evidence that wars were waged increasingly often on account of this human resource. The growth of harems in the households of kings and chiefs reflected the increased economic and political power of these men.⁵² By controlling access to women and cattle, they could manipulate production and reproduction to attract supporters in order to triumph in power struggles.⁵³ In Bunyoro, where cattle were plentiful compared with Buganda, the chiefs' control over access to marriage was probably concentrated more on the possession of cattle, while in Buganda, where the unsuitable land made herding difficult, the emphasis was on direct control over female slaves.⁵⁴ The growth of the chiefs' herds and harems, dating back at least to the mid-seventeenth century, has been seen as a part of the process of state formation.⁵⁵

The chiefs' economic and political control over their subjects was manifested in clientship, an institution related to state formation and increased inequality.⁵⁶ The need for economic and physical security made young men and poor families seek the patronage of a powerful chief. A good characterization of the nature of clientship is given by Cohen:

'The follower or client was prepared to exchange his courage or talent or loyalty for protection, recognition, cattle, land, a new life, access to upwardly mobile paths. For his part, the king or councillor or prince or priest had his own panoply of qualities that could draw people into his following and thereby enlarge his influence and enhance his prestige. Each had his own set of instruments that preserved and extended these qualities, binding individuals to him through land grants, appointments, service duties, and marriage.'⁵⁷

Although Karugire emphasizes the personal nature of patron-client ties,⁵⁸ it seems that clientship was not solely based on friendliness and reciprocity but rose from

⁵² Kopytoff and Miers 1977, 13; Twaddle 1988a, 123; Twaddle 1993, 34-5.

⁵³ Håkanson 1998, 277-279.

⁵⁴ According to Roscoe, women did not attract such envy as large herds of cattle, and they could easily be hidden from the eyes of superiors. See Roscoe 1902, 36.

⁵⁵ Musisi 1991, 770-773.

⁵⁶ David Newbury, 'Precolonial Burundi and Rwanda: Local Loyalties, Regional Royalties', *IJAHS* 34 (2) 2001, 255-314, especially 304-306.

⁵⁷ David William Cohen, *Womunafu's Bunafu. A Study of Authority in a Nineteenth-Century African Community*. Princeton University Press 1977, 80.

⁵⁸ Karugire 1980, 15-16.

inequalities within communities. What may have begun as a reciprocal exchange of goods and services was liable to develop into a practice contributing to further erosion of kinship ties, over-exploitation, class formation and increased social segmentation. Those controlling access to resources such as salt, iron, cattle, pastures and later long distance trade would be able to manipulate these resources for their own economic and political ends. In the case of famine or war, the survival of their clients was increasingly dependent on their management and distribution of these resources. Patrons benefited from the vulnerability of their subjects, in that successful relief and protection offered to those in need would be repaid in the form of increased command over their client's labour and produce. Labour provided by clients enabled patrons to utilize and control the environment more effectively by creating safe pastures, for example, and thus enhancing the growth of their herds.⁵⁹

Thus it would appear from the above discussion that the climatic change since the sixteenth century - whether triggered by human action or for some other reason - gradually challenged the old forms of ritual and political authority and the system of environmental control, making the environment in general more insecure.⁶⁰ The more frequent droughts, famines and raids meant that cattle and people became more mobile. This in turn resulted in a further collapse of environmental control and food security, fragile as they had been, and favoured the spread of epidemics and epizootics. Increased social and economic inequality was manifested in clearer occupational divisions between herders and farmers, pervasive clientship, increased slavery and the subjugation of women. As the old ritual authority diminished, the emerging secular leaders preserved their power by other means, such as military force. The increased use of violence favoured strong military leaders whose ability to secure wealth in the form of cattle and slaves attracted a large following. The role of military leadership is therefore crucial in the growth of monarchies in the Great Lakes region, as kingdoms were won by the most competent warrior in wars of succession.⁶¹ Warfare, the ability to provide protection and the distribution of booty in the form of cattle and women enabled the monarchs to consolidate and expand their power. The prestige related to victories, as well as their economic benefits, enabled kings to create a group of commanders and chiefs who were loyal to them. Successful service, especially in military terms, was often rewarded with political office attached to the administration of a certain territory for the king. Eventually these political offices, and also some duties at the king's court, became the privileges of certain clans, sometimes inheritable ones. Thus control over the land came to be increasingly related to political office, in which a chief held land for the king. The subjugation of clans by the royal authority and the rise of a centralized state

⁵⁹ Mafeje 1998, 118-22; Cohen 1977, 79; Catherine Newbury, *The Cohesion of Oppression. Clientship and Ethnicity in Rwanda 1860-1960*. New York: Columbia University Press 1988, 17-18; Wrigley 1996, 63; Giblin 1992, 39-40; Feierman 1990, 51.

⁶⁰ Miller (1982, 31), in the context of Angola, writes of a special 'climate of hunger' which is produced when climatic stress exceeds the limits of human response mechanisms, causing them to fail, bringing political instability and violent confrontations. See also Robert Dirks, 'Social Responses During Severe Food Shortages and Famine', *Current Anthropology* 21 (1) 1980, 21-44.

⁶¹ See G.N. Uzoigwe, 'Succession and Civil War in Bunyoro-Kitara', *IJAHS* 5 (1) 1973, 49-71; Ray 1991, 82.

amplified social divisions based on sex, age and descent. An 'ethos of subordination'⁶² developed between the rulers and the ruled, elderly and young, men and women, free and unfree, kinsmen and aliens. The growth of royal power nevertheless depended on the loyalty of the chiefs, who in turn expected favours from the king as well as from their clients. Many traditional clan leaders and hereditary chiefs probably became office holders for the king, thus serving the interests of the monarchy as well as the local community.⁶³

'WANING' OF BUNYORO AND WAXING OF BUGANDA, C. 1700-1850

The empire of Bunyoro-Kitara began to lose its dominance in the northern interlacustrine region in the eighteenth century. This waning of power has been attributed to poor leadership, lack of internal cohesion and the growth and expansion of Buganda.⁶⁴ Geographical size aside, one may ask whether there ever existed such a formidable empire of Kitara as has been described in the court traditions and the historical works based on them.⁶⁵ On the contrary, it seems that dynastic and political rivalry made royal authority in Bunyoro weak and dependent on the cooperation of chiefs whose private interests and ambitions were not always in accordance with those of the monarchy.⁶⁶ Yet the influence of Bunyoro was felt as far east as Busoga and as far south as Kiziba, Koki, Buddu, Busongora and Katwe, the last-mentioned being situated on the shores of Lake Edward in the southwest.⁶⁷ But it should be emphasized that the nature of this influence was primarily cultural and commercial, not political. Because of the long distances, sparse population, poor communications and the dependence of royal power on the cooperation of chiefs, Bunyoro was far from being under direct control of the king, or *omukama*. It is perhaps safe to treat Bunyoro before the latter part of the nineteenth century as a heterogeneous and loosely organized state comprised of small polities

⁶² Musisi 1991, 770.

⁶³ David L. Schoenbrun, 'A Past Whose Time Has Come: Historical Context and History in Eastern Africa's Great Lakes', *History & Theory* 32 (4) 1993c, 32-56; Schoenbrun 1998, 51; John Beattie, 'Bunyoro: An African Feudality?', *Journal of African History* 5 (1) 1964b, 25-35, especially 28-9; Steinhart 1984, 79-80; Mafeje 1998, 57-9; Wrigley 1996, 235.

⁶⁴ Uzoigwe 1973, 49-52; S.M.S. Kiwanuka, 'Bunyoro and the British: A Reappraisal of the Causes for the Decline and Fall of an African Kingdom', *Journal of African History* 9 (4) 1968 603-619, especially, 603-605; Dunbar 1965, 38-39; John Beattie, *Bunyoro. An African Kingdom*. New York: Holt, Rinehart & Winston 1960, 16-17; Doyle 1998, 29-30.

⁶⁵ See, for example, Nyakatura 1973, 1-2. Doyle seems to be sceptical about the existence of a vast empire. See Doyle 1998, 25-29.

⁶⁶ See Viera Pawlikowa-Vilhanova, *History of Anti-Colonial Resistance and Protest in the Kingdoms of Buganda and Bunyoro 1862-1899*. Dissertationes Orientales 45. Prague: Oriental Institute of the Czechoslovak Academy of Sciences 1988, 74; Chretien 2003, 148.

⁶⁷ David William Cohen, *The Historical Tradition of Busoga. Mukama and Kintu*. Oxford: Clarendon Press 1972, 124; Ogot 1984, 512; Webster, Ogot and Chretien 1992, 796-799.

acknowledging royal authority and Babito dynastic dominance but being in reality largely autonomous at the local level.⁶⁸

Map 2: The late nineteenth century



The influence of Bunyoro was based on its ability to control the production of iron and salt and trade in these commodities and the access to good pastures. The main foci of salt production were Kibiro and Katwe, by Lakes Albert and Edward, respectively, and the main sources of iron seem to have been Bugerere, Koki and Kiziba, together with smaller deposits found by Lake Albert.⁶⁹ Cattle were an

⁶⁸ Doyle, following Steinhart, emphasizes the opposition encountered by the emergence of a centralized state as a primary source of weakness in Bunyoro. See Doyle 1998, 30; E.I. Steinhart, 'The kingdoms of the march: Speculations on social and political change', in J.B. Webster (ed.), *Chronology, Migration and Drought in Interlacustrine Africa*. Longman & Dalhousie University Press, 1979, 197-199. According to Médard (2001, 127), however, this opposition did not necessarily contain or inhibit royal power, but marked a change in its nature.

⁶⁹ Graham Connah, Ephraim Kamuhangire and Andrew Piper, 'Salt-production at Kibiro', *Azania* 25 1990, 27-39; Ephraim R. Kamuhangire, 'The Pre-colonial Economic and Social History of East Africa with special reference to South-Western Uganda Salt Lakes Region', in Bethwell A. Ogot (ed.), *Economic and Social History of East Africa*. Reprinted. Nairobi: Kenya Literature Bureau 1979, 71-80; G.N. Uzoigwe, 'Precolonial Markets in Bunyoro-Kitara', in Ogot 1979, 24-66; Charles M. Good, 'Salt, Trade, and Disease: Aspects of Development in Africa's Northern Great Lakes Region', *IJAHS* 4

important source of wealth, necessary not only for subsistence but also for the maintenance of political power and social cohesion and for ensuring social reproduction. Although a lot of prestige was attached to cattle, there was no such class division based on cattle ownership as in Nkore, or forms of cattle clientship similar to that which was evolving in Rwanda.⁷⁰

The major weaknesses of Bunyoro seem to have been the nature of its agricultural economy, its large geographical size and its political and military system. Shifting cultivation and cattle herding made society more mobile, and as the people tended to move around, they were more difficult to control. The labour-intensive agriculture based on millet cultivation meant that it was impossible to draft large numbers of men into military service without endangering food production. Since the kingdom's valuable resources - pastures, salt and iron - were geographically scattered, they could not be easily defended. The military system before the late nineteenth century, the *obwesengeze*, was based on provincial peasant armies recruited and commanded by provincial chiefs. The *obwesengeze* were often only capable of defending the immediate interests of their commanders and were difficult to rally for collective defence.⁷¹ The political system, which concentrated power in the hands of one ruling lineage, was a constant breeding ground for dynastic struggle and rivalry, preventing the growth of a more centralized state, a national military ethos and a unified defence against external threats.⁷²

The fragility of Bunyoro's domination was revealed by the emergence of a single competitor, Buganda, which was in many ways the exact opposite of Bunyoro. Eighteenth-century Buganda was territorially more compact, had a relatively large, more homogeneous population, a more centralized political system, and above all, a more effective military establishment.⁷³ The rise of Buganda has been often explained in terms of the 'banana theory', according to which Buganda's

1972, 543-586; G. Schweinfurt, F. Ratzel, R.W. Felkin & G. Hartlaub (eds.) *Emin Pasha in Central Africa, being a Collection of His Letters and Journals*. Translated by Mrs. R.W. Felkin. London: George Philip & Son 1888, 121-122; Schoenbrun 1998, 20, 26-27, 169; Packard 1981, 135-136; Médard 2001, 111-112.

⁷⁰ Uzoigwe 1979, 33-34; Kamuhangire 1979, 69-70. The present understanding of the nature of cattle clientship in Rwanda presents the institution as a rather recent innovation, and only as one form of clientship among others, where the transfer of cattle was a symbol of a social relationship rather than its actual cause. See Newbury 2001, 304-306.

⁷¹ G.N. Uzoigwe *Revolution and Revolt in Bunyoro-Kitara. Two Studies*. Makerere History Papers. Kampala: Longman 1970, 2-4.

⁷² Kottak and Reid have emphasized the creation and importance of the military ethos behind the growth of a centralized state and a strong military in Buganda. See Kottak 1972, 351-380; Reid 2002, 179-185.

⁷³ Reid (2002, 90) emphasizes, however, that Buganda in the nineteenth century was not a homogeneous, centralized kingdom where state control applied to all walks of life. According to him, it was 'a loose and flexible alliance of economic and social contributions, distantly managed by a central political authority.' Hanson (1997, 37-41) emphasises the overlapping networks of authority loosely connected to the centre. Nevertheless, it appears that Buganda was more homogeneous, more centralized and militarily more effective than Bunyoro at that time.

banana-based economy required much less agricultural labour, so that men were freed from cultivation for other tasks, especially military service.⁷⁴ Were, and later Médard, have nevertheless pointed out that many other societies around Lake Victoria and elsewhere were also based on banana cultivation but did not accomplish the same as Buganda.⁷⁵ The banana theory, as Reid has noted, presents the Baganda as somewhat passive recipients of the benefits of nature, and claims that the position they achieved was solely a product of their abundant environment.⁷⁶

A more convincing explanation for the growth of Buganda comes from the political arrangements undertaken by the Baganda from the seventeenth century onwards. During that period the Baganda were struggling to survive under constant attacks from the west, as the drought-afflicted, aggressive Banyoro sought to consolidate their power and control on the northern shores of Lake Victoria. Probably after a devastating military defeat, the Baganda were forced to reorganize their political and military system, eventually leading to the growth of royal power over the clans. An important undertaking in this process of centralization was the establishment of *batongole* chiefships, or royal client chiefs, from the eighteenth century onwards. These *batongole* were directly appointed by the king, or *kabaka*, and, usually being warriors who had distinguished themselves in battle, they assumed a crucial role in improving the kingdom's military performance. As a reward for their services to the king, the *batongole* were given non-hereditary estates to administer, often situated on or in the neighbourhood of the land belonging to a traditional chief, whom they probably served as aides, although at the same time acting as royal 'watchdogs'. As 'king's men' in the periphery, the *batongole* contributed to greater internal stability by reducing the risk of plotting against the king. During a war a *mutongole* chief would not surrender his troops - recruited from amongst the peasants living on the territory administered by him - to the command of a local territorial *bakungu* chief, but would hurry them to the capital to be commanded by the senior one of the *batongole*. In this way the king had an effective army under his direct control, reducing his dependence on territorial *bakungu* chiefs. Later, as the kingdom achieved military success and gained new territory, the number of *batongole* was increased and they acted as administrators of conquered territories.⁷⁷ Besides the creation of *batongole*, the Baganda improved

⁷⁴ See, for example, Twaddle 1993, 8; C.C. Wrigley, 'Bananas in Buganda', *Azania* 24 1989, 64-70; D.A. Low, *Buganda in Modern History*. London: Weinfeld & Nicholson 1971, 13.

⁷⁵ Gideon S. Were, 'The Western Bantu Peoples from A.D. 1300 to 1800', in B.A. Ogot (ed.), *Zamani. A Survey of East African History*. Reprinted. Nairobi: Longman 1975, 178; Médard 2001, 69-71.

⁷⁶ Reid 1996, 54.

⁷⁷ Reid 2002, 185-194; Kottak 1972, 372; Médard 2001, 126, 428-431; Martin Southwold, *Bureaucracy and Chiefship in Buganda. The Development of Appointive Office in the History of Buganda*. Kampala; E.A.I.S.R., s.a., 12-14. According to Fallers et al., *-tongole* literally means 'a responsibility carried out on behalf of a superior'. A *mutongole* chief also called his aides *batongole*, giving them names and duties according to the hierarchy of the official *batongole* appointed by the king. Besides military duties, *batongole* chiefs could be made responsible for productive tasks, e.g. the production of barkcloth. See L.A. Fallers, F.K. Kamoga and S.B.K. Musoke, 'Social Stratification in Traditional Buganda', in L.A. Fallers (ed.), *The King's Men. Leadership and Status in Buganda on the Eve of Independence*. London: Oxford University Press 1964, 94; Audrey I. Richards, *The Changing* 72

their military performance by developing new weaponry, i.e. a short spear for stabbing with, and perhaps more importantly, by creating a road system which allowed swift movement of troops and messengers within the kingdom.⁷⁸

It seems that war was the father of all things in Buganda. The improved military performance was not only successful in defending the kingdom, but it also made territorial expansion possible. During the eighteenth century Buganda expanded to the east and southwest, gaining access to vital sources of iron and timber, both of which were required to maintain the kingdom's military and agricultural base. War was no longer waged for defence but increasingly for the gaining of economic advantages, as it yielded not only iron, but also pastures, cattle and slaves, thus enhancing material welfare, agricultural production and the exchange of produce. War was also essential for the growth of royal power, for as new *batongole* were created to administer the conquered territories, areas of vital economic importance - whether pastures, iron deposits, or trading routes - came under the control of the *kabaka*, strengthening the material and political basis of the monarchy. Excessive reliance on force did not favour the development of productive forces in Buganda itself, however, for though it was more sophisticated in military and administrative terms, its economy was no more advanced than any other economy in the region.⁷⁹

Buganda's growth and expansion took place at the expense of Bunyoro's. In the eighteenth and early nineteenth centuries Buganda gained control and dominance over Kyagwe, parts of Bugerere, Buddu, Koki and Kiziba, all territories previously under Bunyoro's influence. Some form of control may also have been established over the Sese Islands in the eighteenth century. By the 1850s the kingdom was at the height of its military power, and warfare had become a means of quick enrichment for the *kabaka* and his chiefs. But Buganda was overreaching its strength, for as had been the case with Bunyoro before, territorial expansion had made the central administration less effective, encouraged the individual ambitions of powerful chiefs and made the kingdom less adjustable. The armies had grown in size so that they had become difficult to supply and difficult to control in battle. In the long run, the introduction of firearms onto the war scene from the mid-19th century onwards contributed to the decline in Baganda military power, since they were becoming increasingly dependent on imports of powder and bullets, as well as spare parts, for the maintenance of these weapons.⁸⁰

Structure of a Ganda Village. Nairobi: East African Publishing House 1966, 54-55; Hanson 1997, 51-52, 126.

⁷⁸ Reid 2002, 195-198; Reid 1996, 264-268; C.C. Wrigley, 'Buganda: An Outline Economic History', *The Economic History Review*, New series, 10 (1) 1957, 69-80, especially 72. It is also possible that the road system was extensively developed only in the 1840s, with the growth of long-distance trade. See Reid, 2001, 107-111.

⁷⁹ Wrigley 1957, 72; Reid 2002, 177-179, 185; Mafeje 1998, 69.

⁸⁰ Médard 2001, 123; Reid 1996, 245-246, 257-258; Richard Reid, 'The Ganda on Lake Victoria: A Nineteenth-Century East African Imperialism', *Journal of African History* 39 1998, 349-363, especially 349-350, 358.

The growth of Buganda brought decline to Bunyoro as the kingdom's connections with Lake Victoria were either severed or seriously disturbed. Access to iron-rich areas such as Koki and Bugerere became restricted, and the westward expansion of Buganda meant that pastures in the Singo and Mubende area became threatened. Losing Buddu to Buganda in the early nineteenth century severed the links to Kiziba and cut Bunyoro off from Lake Victoria in the south.⁸¹ Vital participation in the lake trade in the north continued, however, along the Nile-Lake Kyoga route, and Bunyoro still had the resources to carry on trade in the north, and also in the west, across Lake Albert.⁸²

AGRICULTURE, SOCIETY AND REPRODUCTION IN THE PRE-COLONIAL PERIOD

PRE-COLONIAL FOOD SYSTEMS

The banana-based agricultural economy of Buganda has been regarded as superior in productivity to the surrounding millet and cattle-based economies of Bunyoro and areas north of the Nile. Since its initial introduction into Equatorial East Africa from Asia, probably as much as two thousand years ago, the banana provided a relatively staple food supply for many communities. Its yields exceeded those of yams many times over, nor did it require a distinct dry period to ripen, and it could be grown on forested fields, thus reducing the task of clearing and helping to free the environment of malaria-carrying mosquitos. Its overall labour requirements were less than for yams, and it was easier to manage after planting and easier to prepare for food.⁸³ The banana alone could not provide an adequate diet for subsistence, however. In fact, as has been argued earlier and will be seen below, local food production was rarely sufficient to satisfy the people's nutritional needs. Local and regional trade in foodstuffs, and especially in salt and dried fish, evolved in order to supplement local production and to improve food security before the harvest season. Hunting and gathering were likewise important in this respect. There is also evidence that the food supply became more secure during the nineteenth century, with the introduction of American crops.⁸⁴

Despite occasionally severe droughts, the nineteenth century was a period of more abundant rainfall, favouring productivity in agriculture. During the century new crops were added to the local food systems. Maize, sweet potatoes, beans,

⁸¹ Médard 2001, 123.

⁸² Speke, while sailing towards Bunyoro along the Nile in 1862, encountered a group of Banyoro traders with canoes full of barkcloth, dried fish, banana, beer and other things bartered from the Basoga. See John Hanning Speke, *Journal of the Discovery of the Source of the Nile*. Edinburgh and London: William Blackwood & Sons 1863, 476.

⁸³ E. De Langhe, R. Swennen and D. Vuylsteke, 'Plantain in the Early Bantu World', *Azania* 29-30, 1994-95, 147-160; Jan Vansina, *Paths in the Rainforests: toward a history of political tradition in equatorial Africa*. London: James Currey 1990, 61; David McMaster, 'Speculations on the Coming of the Banana to Uganda', *Uganda Journal* 27 (2) 1963, 163-175.

⁸⁴ On the impact of American crops in western and central Africa, see Miller 1988, 19-21; Vansina 1990, 211-216.

groundnuts and cassava, all introduced to Africa from the Americas, seem to have reached the Great Lakes region just before or after the turn of the century. Maize, cassava, beans and groundnuts may have arrived via the Congo Basin, although a more likely route was from the East African coast, via either the south or the north-east.⁸⁵ Of these new crops, the sweet potato and beans were firmly established in the food systems of the region by the end of the century, which may suggest an earlier date of introduction.⁸⁶ Their low labour requirement and relative ease of preparation compared with cassava and maize may also have favoured their adoption. There is evidence that the sweet potato was already being widely cultivated in Buganda in the 1860s. Though perennial, it was cultivated as an annual crop, and it thrived very well both in the high altitude conditions of Buganda and in the drier conditions found in Bunyoro. It was relatively tolerant of drought and could also manage under high rainfall conditions provided that the soil was adequately drained. It grew well even in poor soils, producing good yields in relation to the work input.⁸⁷ There is little evidence regarding groundnuts, but maize had certainly reached Buganda by the early 1860s.⁸⁸ According to Stanley, it was found in gardens together with cassava, which was probably introduced only between the early 1860s and 1875, by Swahili traders. Maize and cassava were of minimal significance as food before the colonial era, however.⁸⁹

The Swahili traders established in Buganda brought with them onions, tomatoes, apples, guavas, papaws, mangoes, wheat and rice, and the use of these, especially of vegetables and fruits, increased during the nineteenth century.⁹⁰ The

⁸⁵ Vansina 1990, 213-215; Marvin P. Miracle, 'The Introduction and Spread of Maize in Africa', in Z.A. Konczacki & J.M. Konczacki (eds.), *An Economic History of Tropical Africa, Vol. I*. London: Frank Cass 1977, 45, 48; B.W. Langlands, 'Maize in Uganda', *Uganda Journal* 29 (2) 1965 215-221; David N. McMaster, 'A Subsistence Crop Geography of Uganda', Ph.D. thesis, University of London 1960, 129; Wrigley 1996, 61; Reid 2002, 26-27.

⁸⁶ Wilson and Felkin. 1882, Vol. 1, 158-159, Vol. 2, 50; Schweinfurt et al. 1888, 74; Robert W. Felkin, 'Notes on the Wanyoro Tribe of Central Africa', *Proceedings of the Royal Society of Edinburgh* 19, 1891-92, 136-192, especially 147.

⁸⁷ Clifton Hiebsch and Stephen K. O'Hair, 'Major Domesticated Food Crops', in Art Hansen & Della E. McMillan (eds.), *Food in Sub-Saharan Africa*. Boulder: Lynne Rienner 1986, 194-5; McMaster 1960, 8. See also Speke 1863, 266; James Augustus Grant, *A Walk Across Africa or Domestic Scenes from My Nile Journal*. Edinburgh and London: William Blackwood and Sons 1864, 178, 237, 252. The sweet potato took about five months to mature. It was harvested piecemeal because of quick spoiling. According to Tosh, it reached Lango in the mid-nineteenth century from Bunyoro. See John Tosh, 'Lango Agriculture during the Early Colonial Period: Land and Labour in a Cash Crop Economy', *Journal of African History* 19(3) 1978, 415-439, especially 418; J.D. Ackland, *East African Crops*. Third impression. London: FAO & Longman 1975, 114-6, 204-7.

⁸⁸ Grant 1864, 237; Langlands 1965, 217-218; Roscoe 1965, 433-434; Chrétien 2003, 64-65.

⁸⁹ Henry M. Stanley, *Through the Dark Continent*, Vols. 1 & 2. London: Sampson Low, Marston, Searle & Rivington, 1878, Vol. 1, 190, 383; B.W. Langlands, 'Cassava in Uganda 1860-1920', *Uganda Journal* 30 (2) 1966, 211-218.

⁹⁰ Robert W. Felkin, 'Notes on the Waganda Tribe of Central Africa', *Proceedings of the Royal Society of Edinburgh* 13 1885-86, 699-770, especially 715-716; Alfred R. Tucker, *Eighteen Years in Uganda & East Africa*. Vols. 1 & 2. London: Edward Arnold 1908, Vol. 1, 87-88.

role of the Swahili traders in the diffusion of the new crops, mainly sweet potatoes, maize and cassava, to the interior of East Africa is not clear and requires further research. Besides food, the traders also brought Islam, with its culinary culture, food preferences and taboos. The first religious martyrs to die in Buganda were Muslim court pages, who refused to eat improperly slaughtered meat and were therefore ordered to be killed by the *kabaka* Mutesa.⁹¹

As in Europe, the introduction of American crops in Africa increased the productivity of agriculture because of their greater yields per land unit and their faster maturation relative to grains. But unlike the situation in Europe, they did not necessarily replace the indigenous crops in Africa, but acted as supplements. They enabled greater diversity, thus reducing the risk of crop loss on account of drought, locusts or disease. Diversity and intercropping were also effective in terms of soil conservation.⁹² Although the new crops improved food security, trade, herding, fishing, hunting and gathering were still practised to ensure a richer and more varied diets.⁹³ Thus food systems in nineteenth-century Buganda and Bunyoro depended on the ability of the communities to ensure their access to land, forest and marine and mineral resources that were directly or indirectly related to food production, and their ability to exchange their products at the local and regional markets.

LAND, HOUSEHOLDS AND PRODUCTION IN BUGANDA

Control over the land in pre-colonial Buganda was in the hands of the clan heads, or *bataka*, and the king. The *bataka* claims over clan lands, or *butaka*, were of ancient origin, derived from their once unique position as independent political units. As the clans divided into lineages in the course of time, and became geographically more scattered, the traditional clan control over distribution of land weakened. The gradual dispersal of the clans enabled the monarch to extend his control over people migrating to new territories outside the old clan lands. Thus by the nineteenth century royal power was posing a serious challenge to the old forms of control over the land, and the *bataka* were, at least nominally, acknowledging the king's supreme claims. The king controlled his land through the *batongole*, who acted as royal clients. *Butongole* land was given to members of the royal family, the king's servants and the highest ranking administrative chiefs (*bakungu*) for their personal use while they were in office. The *batongole* included chiefs of different ranks who, acting as the king's watchdogs, formed the basis of the royal power. Besides *butongole* land, the *kabaka* could grant individual hereditary rights, *obwesengeze*, to any distinguished servant, whether a chief or a peasant. *Obwesengeze* seems to have served as a means of compensating people for their often permanent displacement from their clan lands by offering them some security with regard to access to land. It also appears that *obwesengeze* provided chiefs with greater personal security within

⁹¹ Robert Pickering Ashe, *Chronicles of Uganda*. Second edition. London: Frank Cass 1971, 64-65.

⁹² Alfred W. Crosby, *Germs, Seeds & Animals. Studies in Ecological History*. New York: M.E. Sharpe, 1994, 148-156; McMaster 1960, 158-159; Mafeje 1998, 66.

⁹³ Wrigley 1996, 61-62.

the system, in that land otherwise went with their office and transfer or dismissal would endanger their livelihood. Likewise, those princes who were excluded from the royal succession eagerly sought *obwesengeze*.⁹⁴

The old and new systems of land control overlapped in the nineteenth century, as many clan heads, or *bataka*, who were usually village headmen (*mwami w'ekyalo*), came under the jurisdiction of a territorial chief appointed by the king. Although all the land in Buganda was ultimately under the control of the *kabaka*, individual access was negotiated at the local level and was no longer solely determined by clan membership. If a peasant, or *mukopi*, (pl. *bakopi*) lived or wished to live on the land of his clan ancestors, his membership of the kin group guaranteed him the right to occupy and cultivate this land.⁹⁵ But access to land was frequently gained outside sphere of influence of the clan, within the clientship system, in which clan affiliation was of little significance. Under this system the *bakopi* were integrated into the village (*kyalo*) community, the smallest but most fundamental political unit in pre-colonial Buganda.⁹⁶

Some villages in the nineteenth century acted as clan (*kiga*) centres, or centres of major lineages (*ssiga*), or minor lineages (*mutuba*), thus having a fairly large proportion of male inhabitants claiming joint patrilineal descent and chiefs who had hereditary rights to the positions they held. The majority of the villages were led by non-hereditary chiefs, however, who were appointed by the superior chief, usually a *batongole*, although it seems that differences in social background between the chiefs were becoming irrelevant in the nineteenth century. The internal cohesion of a village community was determined by its chief's leadership ability and not by his descent. Every *mukopi* was a client, or *musenze*, of the village chief, and it was the chief's social and political skills in maintaining cohesion that made or failed to make a successful village organisation. An unpopular chief would lose his *basenze* to another, and an unpopular non-hereditary chief would face the risk of being transferred, or even losing his status, whereas an unpopular *mutaka* chief would face a decline in his influence, popular support and material welfare.⁹⁷

At the core of the social and economic organization of Baganda society was the household, comprising a male head, his wife or wives, and their children. Occasionally a household might include children of the same kin or lineage who had been sent there for their upbringing or who had lost their parents. Sometimes elderly female widows or divorced sisters of the husband, all belonging to his kin, also lived in the compound, and slaves and domestic servants were similarly a general feature

⁹⁴ A.B. Mukwaya, *Land Tenure in Buganda*. Kampala: E.A.I.S.R. 1953, 7-14; H. W. West, *Land Policy in Buganda*. Cambridge University Press, 1972, 11-15; L.P. Mair, 'Baganda Land Tenure', *Africa* 6 (2) 1933, 187-205; Southwold, s.a., 5-13; J.A. Rowe, 'Land and Politics in Buganda, 1875-1955', *Makerere Journal* No. 10, 1964, 1-13, especially 1-2.

⁹⁵ Mukwaya 1953, 7-14.

⁹⁶ Martin Southwold, 'Leadership, Authority and the Village Community', in Fallers 1964, 212-214. A Luganda word for clientship, *okusenga*, literally means 'to join a chief's village'. See Mukwaya 1953, 7 fn. 3. *Kyalo* does not indicate a tight, densely populated formation, but a hill, on the slopes of which the dwellings and gardens of the village would be scattered.

⁹⁷ Richards 1966, 15-20; Southwold 1964, 212-214.

of pre-colonial households.⁹⁸ The size and shape of the household was determined by the values and ideals held by the Baganda. The ideals of proper social conduct pushed young men towards marriage and established households of their own. Young males were encouraged to marry by their elders for it was seen that the final step to manhood, or to womanhood, for that matter, was marriage. Unmarried men and women were despised, and their lot in Baganda society can be described as unfortunate. Moreover, it was considered improper for adult men to live with their parents, and a taboo known as *obuke* prevented more than two generations from living permanently in the same household. For this reason the Baganda households were not "extended", for it was only in the later stages of development of a single households that there might be something that could be referred to as an "extended family". This would soon dissolve, however, through either death or marriage. When the head of the household passed away, he was usually succeeded by his son or brother, who took his position and most of his property, including his wives and children.⁹⁹

The division of labour within the *kiganda* household, as elsewhere in Africa, was extremely gendered, at least in theory.¹⁰⁰ It was customary for the husband to provide his wife with a garden, tools for cultivation and a hut to live in. A poorer peasant with only one wife did not provide a separate hut for her but lived under the same roof. If a man had several wives, he was obliged to provide each of them with their own hut to live in within his compound. He was also responsible for providing clothing, as it was the men's work to prepare or acquire the almost universally worn barkcloth, made of fig tree bark. Other male household duties included the initial clearing of the fields and gardens, building and repairing the dwellings and fences, pottery and the brewing of beer. In addition, the men would have obligations to their chief or headman, which included supplying a proportion of their produce such as beer and bananas, and providing labour for repairing the chief's houses, building fences, clearing roads and the chief's fields, herding his cattle, building bridges and occasionally taking part in military activities. Other communal activities included hunting and fishing, and occasionally helping neighbours in such tasks as building or the clearing of fields. Cultivation itself was considered unsuitable for persons of any status, and therefore left mainly to the women and slaves. Moreover, it was unacceptable for men to undertake cultivation or any other activities considered to be the women's domain. Doing woman's work was seen as bad and unwise, and as a risk to one's manhood. However, some men might secretly grow crops such as tobacco on concealed plots for their own use.¹⁰¹

⁹⁸ A.F. Robertson, *Beyond the Family. The Social Organization of Human Reproduction*. Berkeley: University of California Press 1991, 19-20; Robert Pickering Ashe, *Two Kings of Uganda*. Second edition. London: Frank Cass 1970, 303.

⁹⁹ Robertson 1991, 20-2; Roscoe 1965, 270.

¹⁰⁰ See, for example, Moore and Vaughan 1994, 40-1; Megan Vaughan, 'Food Production and Family Labour in Southern Malawi: The Shire Highlands and Upper Shire Valley in the Early Colonial Period', *Journal of African History* 23 (3) 1982, 351-364.

¹⁰¹ Roscoe 1902, 38, 77-8; Roscoe 1965, 93-5, 268; C.T. Wilson and R.W. Felkin, *Uganda and Egyptian Soudan*. Vols. 1 & 2. London: Sampson Low, Marston Searle & Rivington 1882, Vol. 1, 186; M.B. Nsimbi, 'Village Life and Customs in Buganda', *Uganda Journal* 20 (1) 1956, 27-36, especially 78

While these tasks kept the men occupied, the rest of the household work was left for the women. They cultivated the gardens and plots, fetched water and firewood and took care of the children. They prepared and served meals for the whole family. As if this was not enough, they also performed many additional duties often considered to be male domains: '...frequently they [the women] assisted their husbands in preparing the building materials for the work demanded of them by their chiefs. The women cut and cleaned the reeds; they also cut the grass for thatching; they weeded the roads; and they carried the food into the capital for their husbands' chief.'¹⁰² There is evidence that women in the late nineteenth century carried out hard and physically demanding tasks such as road making, which were also regarded by the early ethnographers as work belonging to the male domain.¹⁰³

The two most important tasks performed by women were cultivation and cooking. The staple food of the people in Buganda, regardless of their rank or social standing, was a variety of banana (*Musa acuminata*) locally known as *matooke*. In the well-watered parts of Buganda it yielded abundant harvests twice a year and the labour requirements were limited to planting and weeding, although the latter had to be done quite frequently, with a little manuring after the garden had been established. With good care, which was essential to keep out diseases and locusts, one garden could produce for several years in succession. Sweet potatoes, groundnuts, legumes, sorghum and millet were also grown. These crops provided the nutrients, especially protein, which were short in bananas, and some of them, mainly sorghum and millet, were used as ingredients for banana beer. Meat of goats, poultry and game was sometimes added to a relish made of vegetables and groundnuts to be consumed with *matooke*. Fish, dried or fresh, was an important part of the diet of the lakeside people.¹⁰⁴ Cattle produce such as milk and beef was only of limited importance in the diet of the common people.¹⁰⁵

Cultivation took place on the slopes of the hills, in small gardens surrounding the dwellings. The establishing of a new farm, for a newly married couple, for example, followed a certain special procedure. After the land had been acquired, it was cleared by felling the trees, usually done by the men, or by burning the bush or remnants of previous crops. The wife hoed the land to remove the roots, and planted sweet potatoes, beans and peas, and maybe some maize, all relatively fast-growing crops. Then she would plant bananas, which would provide their first harvest after about twelve or eighteen months. In an established garden crops such as groundnuts,

27-9. The male head of a polygynous household would take turns with his wives, the wife with whom he decided to eat and sleep providing him and their children with food while the other wives only cooked for themselves and their children. For similar practises elsewhere in Africa, see Jack Goody, *Cooking, Cuisine and Class. A Study in Comparative Sociology*. Cambridge University Press 1982, 88.

¹⁰² Roscoe 1965, 95.

¹⁰³ Sir Gerald Portal, *The British Mission to Uganda in 1893*. London: Edward Arnold 1894, 338.

¹⁰⁴ De Langhe et.al. 1994-95, 148-149; McMaster 1960, 86-90; Hiebsch and O'Hair 1986, 193-5; Ashe 1970, 302, 304; Roscoe 1965, 391, 429-34;

¹⁰⁵ Roscoe 1965, 415.

sweet potatoes and legumes were grown together, to be harvested at different times of the year. Yams, pumpkins and coffee were frequently planted among the plantain growths. This kind of intercropping was complex and required considerable knowledge not only of the plants and their properties, but also of soils and their suitability for cultivation. It was also beneficial in terms of greater food security, as the failure of one crop because of drought, rain, pests or disease would not destroy the whole harvest.¹⁰⁶

The beans and sweet potatoes would be harvested first in the newly established garden, and the wife would cook a meal of great symbolic significance for her husband. The sweet potato played a significant role as the first major crop to be planted and harvested, forming the basis of the couple's subsistence until the first yield of bananas was obtained. Also, being a more drought-resistant crop than bananas or yams, it provided nutrition during the dry seasons and small-scale droughts, when the bananas were not bearing fruit. It may be because of this that the sweet potato was referred as a poor man's crop in Buganda, something to be eaten when there was nothing else, although this did not undermine its significance, especially in alleviating seasonal shortages.¹⁰⁷

Cultivation itself was a simple matter, carried out with an iron hoe, or *jembe*. No other technical innovations were employed, and in this respect farming was quite simple and modest. Weed control was essential for good crop growth, and frequent weeding required more work than planting or harvesting.¹⁰⁸ Hence cultivation was labour-intensive, and children were enlisted to ease the women's work load. In wealthier households the husband would provide his wife with a slave to help her in the household tasks, and if a man had more than one wife, they could take turns in cultivation and other work.¹⁰⁹

Methods of food storage and preservation were limited, which prevented the stockpiling of surplus food for greater security. The Baganda, like the neighbouring Basoga, were frequently criticised by the missionaries and colonial officers for relying extensively on bananas and not storing any food beyond their immediate needs.¹¹⁰ Though bananas were a perishable commodity, they could be kept for some time after the crop had ripened. Harvests were obtained around December and in

¹⁰⁶ Hiebsch and O'Hair 1986, 194; Schoenbrun 1998, 72-3; Paul Richards, 'Ecological Change and the Politics of African Land Use', *African Studies Review* 26 (2) 1983, 1-72, especially 26-7; Wrigley 1959, 7-9; Roscoe 1965, 428-33; G.B. Masefield, *The Uganda Farmer*. London: Longmans 1949, 34.

¹⁰⁷ Roscoe 1965, 428-33; Wrigley 1959, 9; Hiebsch and O'Hair 1986, 195-6. Beans and peas were quicker to mature than sweet potatoes, taking only about six to eight weeks, while the latter might take as long as five months. See Ruth Fisher, *Twilight Tales of the Black Baganda. The Traditional History of Bunyoro-Kitara, A Former Uganda Kingdom*. Second edition. London: Frank Cass 1970, 41.

¹⁰⁸ Richards 1983, 26; Masefield 1949, 33.

¹⁰⁹ Roscoe 1965, 79, 93-5.

¹¹⁰ See, for example, Ternan to Salisbury, 7 Oct 1899. FO 2/204, PRO; Preliminary Report on the Protectorate of Uganda, by H.H. Johnston, undated 1900. FO 2/298, PRO; Albert Cook to his mother, 26 March 1899. A77/Box 1/PP/COO/Wellcome Trust Library (WTL).

June-July, and could be spread over a long period of time simply by leaving bunches of bananas in the trees waiting to be cut off and consumed. Sweet potatoes could be "stored" underground, and only the amount to be used at any one time was dug up.¹¹¹ These methods of storage naturally had their limitations and could not be relied on over longer periods of time without a risk of crop loss.

The household food supply was dependent on the labour input in cultivation, on hunting and fishing and on the amount of tribute to paid to the chiefs. It is difficult to estimate the volume of production per household, but households including only one wife did not cultivate plots much larger than few acres (one acre is equal to 0.4 hectares). Banana yields per acre were relatively high in bulk, and could easily support the needs of a small household. According to Roscoe, one woman could supply food for three or four persons, provided that she kept her garden well.¹¹² Some other crops also provided relatively good yields, creating a picture of abundance, or a 'vegetarian paradise', as described by a missionary in the 1880s. But in view of the storage difficulties and the seasonality of the crops, this abundance was limited to certain periods of the year.¹¹³ Also, the tribute collected must have occasionally reduced the supply to the degree that there was no surplus.¹¹⁴ Production could only be increased by adding to the household's labour force. In this respect it seems that the chiefs' households, with several wives and domestic slaves and an inflow of tribute payments, must have rarely suffered from a shortage of food. On the other hand, even within large households the distribution of food between members of different status may not have been equal.

It seems that the labour requirements for banana cultivation have frequently been underestimated in the literature. It has been argued that famine 'in the strict sense' was unknown to Buganda because of the 'unfailing and well-distributed' rainfall and rich soils, which made bananas flourish to the extent that little labour was required to secure high yields and cultivation could be left entirely to the

¹¹¹ Masefield 1949, 33; Ackland 1975, 114-6, 204-7.

¹¹² B.W. Langlands, 'Manpower and Nutritional Energy Resources in Uganda', in R.J. Hyde & B.W. Langlands (eds.), *Patterns of Food Crop Production and Nutrition in Uganda*. Department of Geography Occasional Paper No. 58. Kampala: Makerere University 1974, 84; Roscoe 1965, 431. The average yields of *matooke* and sweet potatoes per hectare are about 6250 and 6500 kilogrammes respectively (see Appendix 8). According to Masefield, one person consumed about two kilogrammes of peeled *matooke* per day. Thus a household including five persons would consume 10 kilogrammes of *matooke* daily. Thus less than one hectare of bananas could easily satisfy the needs of a small peasant household. Yields were very sensitive to rainfall, soils, weed growth and pests, however, so that a well cultivated garden in the most fertile part of Buganda would ensure an abundant supply, but with poorer soils and less rainfall the size of the fruit would decrease, making average yields much smaller. Weed growth and pests, such as the banana weevil, which often plagued untended gardens, could reduce the garden to a non-productive state. See Masefield 1949, 34-5.

¹¹³ Ashe 1970, 305; McMaster 1960, 160. Seasonal fluctuations in food supply were alleviated by hunting and fishing, which thus played a very important part in the pre-colonial food system. Hunting was also essential for protecting the gardens and fields from damage caused by wild animals, especially elephants and wild pigs. See John M. MacKenzie, *The Empire of Nature. Conservation and British Imperialism*. Manchester University Press 1988, 55-6.

¹¹⁴ The impact of tribute payments on production will be discussed below.

women.¹¹⁵ The benefits of the banana appear to have somewhat overshadowed its weaknesses, namely vulnerability to drought, weeds and pests, its lack of nutrients other than carbohydrates and vitamins, and its seasonality and poor storage.¹¹⁶ Only recently have the pros and cons of the banana been critically re-examined in terms of production and labour. It appears, for example, that the labour requirements were far greater than was often believed, as the gardens required constant weeding, hoeing and re-planting in order to remain productive.¹¹⁷ Moreover, earlier commentators disregarded the labour required by other crops which were necessary to supplement the diet. Cultivation was therefore a far from easy task and required constant effort, especially during the wet season, when the crop was ripening.

Uncertainties in food supply meant that famines were not unknown in Buganda. Although there is no evidence of any mass starvation, food shortages appeared when the rains were erratic. Fluctuations were frequent, and missionaries and some early colonial administrators clearly recognized this.¹¹⁸ It is plausible that the food supply became more secure during the nineteenth century because of the new crops, although, on the other hand, frequent droughts and increased warfare contributed to a higher incidence of famine. Special foods were eaten at times of famine and food shortage. Beer bananas, or *mbide*, were dried and made into a flour called *ebigomba*, and these bananas also served as additional food for soldiers on a campaign. The ground stem of the banana tree, *enkolo*, was also consumed. Wild yams and other wild tubers and fruits that were often disregarded in normal times were gathered and eaten,¹¹⁹ and hunting, gathering and fishing in general remained important means of subsistence during food shortages.

FOOD, SOCIETY AND CULTURE IN BUGANDA

Bananas, the main source of food and drink, were of great symbolic value for the Baganda. The cultivation of cooking bananas was the domain of the women, who considered it their privilege. *Matooke* was a female crop which the men would not interfere with other than by eating the produce, whereas another variety of banana,

¹¹⁵ Wrigley 1989 64-70; See also Wrigley 1996, 60; Twaddle 1993, 8. Considering the manpower needs of the emerging Baganda state, it appears that the absence of male labour on the farms was compensated for with a large number of imported slaves and domestic servants.

¹¹⁶ Wrigley acknowledges some of these negative qualities, namely poor storage, lack of nutrients and vulnerability to drought, but claims that they should not be overestimated. See Wrigley 1989, 64-65; Wrigley 1996, 62.

¹¹⁷ Reid 2002, 25, fn. 26; Sir Harry Johnston, who visited Uganda in 1899 and 1900, understood the demanding nature of banana-based agriculture. See Sir Harry Johnston, *The Uganda Protectorate*. Vol. 1. London: Hutchinson & Co. 1902, 98.

¹¹⁸ Roscoe 1965, 432; Ternan to Salisbury, 7 Oct 1899. FO 2/204, PRO; H.B. Thomas and Robert Scott, *Uganda*. Second impression. London: Oxford University Press 1945, 50. According to Dr. Albert Cook, the Baganda were '...absolutely dependent on the rain for food [and] if the rainy season fails there is immediate famine [and] death to thousands...', which is nevertheless hard to prove. See Albert Cook to his mother, 26 March 1899. A77/Box1/PP/COO/Wellcome Trust Library (WTL).

¹¹⁹ Roscoe 1965, 439; Bennett et al. 1965, 46, 49; Felkin 1885-86, 717, 737; Reid 2002, 32-33.

mbide, used for making beer, was the men's domain, although it was grown and tended by the women. A woman's banana garden and her skill as a cultivator and cook were indicators on which she was valued and appreciated, surpassed only by her performance as a bearer of children. There also existed a symbolic connection between cooking and sexual intercourse, in that when a wife in a polygynous marriage was invited to cook for her husband it also meant that she would sleep with him that night. Fecund women were thus believed, or expected, to be good cultivators. Conversely, the greatest female misfortune, barrenness, was believed to be injurious to the garden, and that the garden of an infertile woman would not bear fruit properly.¹²⁰

Other crops cultivated were not so strongly gendered as the banana, but they also had some symbolism attached to them. As noted above, the sweet potato was regarded as food for the poor and the slaves, which no chief would touch. Foods regarded as luxuries included meat, milk and salt, all used by the chiefs and royal family, but, with the exception of the meat of wild animals, rarely seen in peasant households. Grasshoppers and white ants were seasonal delicacies consumed by both rich and poor.¹²¹ The basic meal itself was almost entirely made up of bananas and sweet potatoes, with some relish of beans, mushrooms or groundnuts. Goat's meat, chicken, or eggs were only infrequently consumed by the *bakopi*. Beside the lake, the diet was supplemented with fish, and game - such as antelopes - were occasionally eaten, but usually in parties arranged after a successful hunt. The Baganda rejected hippopotamus and crocodile meat as food, whereas the Basese considered them delicacies. The Baganda also rejected animals, even cattle, which had died a natural death.¹²²

The preparation of meals required several hours of work per day.¹²³ Although it was often considered solely a female task, Felkin suggests that the men also participated in it occasionally, probably by helping to cut down the bunches of bananas, etc. The Baganda generally had three main meals a day, but poorer peasant families might be content with two. Dining practices reflected the social organization within the household and its inner hierarchies. The male head was served first, and the women and children after him. The chiefs usually dined alone or with their guests, but not with their wives, who had their meals after him, together with the children. According to Felkin, however, chiefs might occasionally dine

¹²⁰ Roscoe 1902, 56-7, 80; Robertson 1991, 83, 182 (endnote 20); Goody 1982, 88.

¹²¹ Roscoe 1965, 429, 438-40.

¹²² F.J. Bennett, A.A. Mugalula-Mukiibi, J.S.W. Lkutwama and G. Nansubuga, 'An Inventory of Kiganda Foods', *Uganda Journal* 29 (1) 1965, 45-53; Felkin 1885-86, 716-718; Roscoe 1965, 94-5, 438; John Roscoe, 'Notes on the Manners and Customs of the Baganda', *Journal of the Anthropological Institute of Great Britain and Ireland* 31 1901, 117-130, especially 119; Kagwa 1934, 105; Ashe 1970, 302-3.

¹²³ This paragraph is derived from Felkin 1885-86, 716-718; Roscoe 1965, 94-5, 438; Mair 1934, 21-3, 105, 107, 123-4; Richards 1948, 45, 61-3; C.V. Hattersley; *The Baganda at Home*. Second impression. Frank Cass, London 1968, 101-2; Roscoe 1901, 119; I.H.E. Rutishauer, *The Food of the Baganda*. Uganda Museum Sessional Paper 6, Kampala 1962, 14; Kagwa 1934, 105; Ashe 1970, 302-3; Goody 1982, 87-8.

together with some of their favourite wives. The principal slaves also had their meals separately from the other servants. In peasant households the husband might dine together with his wife in privacy, but if there were guests in the house, the women and children were served separately. There is very little information on cooking and food sharing practices within the households, especially polygynous ones, but it seems that the husband chose the wife whose turn it was to cook for him, an act which was considered to be a sign of preference, since cooking itself was a prestigious task for the woman. There was considerable rivalry between the wives in this respect, and although each wife in a large household had to cook for herself and her children, the first wife, who occupied a dominant position relative to the others, was usually the one who secured adequate food for this purpose.¹²⁴

The ordinary peasant's diet may seem monotonous, but given the frequent use of seasonal crops, together with fruits, grasshoppers, white ants and other delicacies such as mushrooms which were collected in the wild according to the season, there was some variation. Although no class-specific cuisine as such existed, with elaborate foods and delicacies,¹²⁵ a person's diet was largely determined by his economic and social standing, the most diverse diets being enjoyed by those who formed the upper strata in society:

'... every morning there may be seen coming into the capital long strings of women and slaves, carrying bunches of plantains and bundles of other vegetables upon their heads. These they are bringing in from the country places, which every person of rank or importance possesses. This food is for the maintenance of the vast gathering of people who are always in attendance at or near the royal enclosure.... ... The King and Katikiro [prime minister] have quite an elaborate *ménu*, including fish and the large edible rat, "musu", and vegetables and fruits of various kinds, beef and goats' flesh as a matter of course. But the ordinary food for all classes is the banana or plantain.'¹²⁶

Food was an essential part of social practices and customs such as marriage, the naming of children and funerals.¹²⁷ Marriage in pre-colonial Buganda was mainly an

¹²⁴ According to Nsimbi, a woman had no right to complain to her husband about hunger, but had to suffer quietly together with her children. These patterns of proper conduct were challenged within individual households at times of food shortage or famine, however, and sometimes priority was given to feeding the children. See Nsimbi 1956, 28; Brabin 1984, 33.

¹²⁵ See Goody 1982, 96-7.

¹²⁶ Ashe 1970, 292-3, 302. According to Kagwa, the royal capital was frequently moved from one location to another, not only for political and strategic reasons but also for nutritional and sanitary ones, as no region in Buganda was able to supply adequate food, water, firewood, cloth or the other items required in the capital over a long period of time. It is plausible that areas surrounding the capital experienced a decline in their standards of nutrition, hygiene and probably also common security, as drinking, socializing and crime, i.e. features of urban living, probably became more common in the surrounding countryside as well. See Kagwa 1971, 190-191.

¹²⁷ See Roscoe 1901, 119-120, 122, 127.

economic affair, reflecting the social standing of the male head of the household in the patriarchal society. A wealthy man had several wives to 'cook for him', which was a sign of wealth in itself. In the Luganda language the verb *kufumbira*, to cook for someone, also has the meaning of being married to that person.¹²⁸ Communal work obligations were usually rewarded with beer parties, and general hospitality involved the offering of food to guests. The exchange of gifts of food was an important part of maintaining good relations with one's relatives, neighbours, superiors and friends.¹²⁹

Besides its importance for the maintenance of social cohesion, food also played a role in preventing sickness and death. During famines people took offerings to the goddess of the harvest and hunger, Nagawonyi, asking her to end the drought and save their dying children. People presented withered crops and fruit to the goddess as a proof of their pitiful condition.¹³⁰ Sickness in general was believed to be caused by malevolent spirits or witchcraft, and the help of a medicine man was usually needed. Traditional healers practised their profession by means of sacrifices. An animal sacrifice, usually a goat or fowl, was often required to free a sick person from the evil spirit. These animals were kept mainly for this and other ritual purposes, and only secondarily for food. On some ritual occasions, such as marriages and baptisms, the meat of a dead animal would be eaten, but in rituals related to sickness and witchcraft the animal was killed and its blood spilled, but the carcass was not used for food. The sickness itself could be caused by many actions committed either by the person himself or by an outsider. One action believed to cause sickness was breaking the taboo of one's clan. Each clan in Buganda had a totem, *muziro*, which was usually a wild animal. This meant that a person belonging to a bushbuck clan, for example, was not allowed to kill or eat the meat of that animal, or he would fall seriously ill and even die. Since the totems were usually wild animals, the taboos and prohibitions related to them were of no significance in terms of available food. Some foods - like mushrooms - were considered important by healers and medicine men, and others, like meat, were considered bad if one was suffering from chicken pox or measles. Eggs were believed to be good for a cough, and meat and milk were considered beneficial for most illnesses. There were probably numerous such beliefs, but it is not always easy to assess their originality, and they must be treated with care.¹³¹

¹²⁸ Ashe 1970, 303. *Kufumbira*, or *okufumbirwa*, was the verb used only in association with women getting married. When men married (*okuwasa*), they literally found someone to 'peel the bananas' for them. See Hanson 1996, 15.

¹²⁹ Mair 1934, 123-27; Richards 1948, 81-3, 190; Nsimbi 1956, 30; I.H.E. Rutishauer, 'Custom and Child Health in Buganda IV. Food and Nutrition', *Tropical and Geographical Medicine* 15 1963, 138-147. The sharing of food was an important feature of friendship and union, enhancing social cohesion. A shortage of food would therefore shatter the social cohesion between individuals as well as in the society as a whole. In Bunyoro, if the head of a household could not provide a visitor with any food he expressed this by saying that 'friendship is dead'. See A.L. Kitching, *On the Backwaters of the Nile. Studies of Some Child Races of Central Africa*. London: Fisher Unwin 1912, 107-8.

¹³⁰ Roscoe 1965, 315; Kagwa 1934, 122. Roscoe refers to Nagawonyi as the goddess of hunger, while Kagwa sees her as the goddess of the harvest.

¹³¹ Roscoe 1901, 118-9, 125-8; Wrigley 1996, 61; Bennett et al. 1965, 47; Richards and

Food consumption was not only regulated by social status but also gender. There were foods considered as men's and children's food. Typical men's food included chicken, eggs, mutton, meat and fish (unsalted). Sweet foods, mostly fruits, were considered suitable for children.¹³² A number of taboos existed regarding food for women. They were not allowed to eat poultry, mutton, eggs or grasshoppers, which confined them almost completely to a vegetarian diet. These foods were allowed for men, however, and also for women belonging to the royal family or who were otherwise of noble origin. Further restrictions applied to women during pregnancy, when they were not allowed to eat fish, salt or hot food. Hard foods were considered to be injurious to the unborn child, and hot food was believed to cause scalding. Yams were avoided by pregnant mothers because they would make the child stupid.¹³³ A woman collecting grasshoppers - a forbidden food - was not allowed to take them home in the absence of a man, otherwise sickness or something unfortunate would occur. It was believed that if a woman broke any food taboo during pregnancy, the child would be born with a peculiar skin disease, or with swellings on his side.¹³⁴ A taboo related to poultry seems to have been especially important, for according to the creation myth of the Baganda, death came to the world because Nsambi, the disobedient wife of Kintu, the mythical founder of the kingdom, returned to heaven to fetch millet for her poultry, which she had left behind, and on her return, death followed her into the world. At funerals the women were made to eat poultry as a symbolic punishment for bringing death into the world to kill Kintu's children.¹³⁵

The taboos were aimed at protecting people, especially children, from misfortune and disease. They were followed for people's welfare, and they were perfectly coherent within the *kiganda* system of beliefs. Those imposed on women might, however, have caused some of the illnesses they were intended to prevent, for they restricted women to a very narrow, monotonous diet, especially during pregnancy, and it was sometimes said that, in their craving for meat, they might 'bite the ears of their own children.'¹³⁶

Widdowson 1936, 174; Rutishauer 1963, 144; A.B.T. Byaruhanga-Akiiki, 'The Theology of Medicine', *Journal of African Religion and Philosophy* 2 (1) 1991, 23-33, especially 25-7. I am grateful to Leuben Njinya-Mujinja for this reference.

¹³² Rutishauer 1963, 142.

¹³³ Felkin 1885-86, 716-718; Roscoe 1965, 94-5, 438; Mair 1934, 21-3, 105, 107, 123-4; Hattersley; 101-2; Roscoe 1901, 119; Rutishauer 1963, 142; Rutishauer 1962, 14; Kagwa 1934, 105; Ashe 1970, 302-3; Bennett et al. 1965, 47-48.

¹³⁴ Roscoe 1965, 101-2. The prohibition of salt for pregnant women to prevent skin disease in their children seems to be related to the additional meaning attached to word *munyo*, or salt. It seems that this word referred to either endemic or venereal syphilis, or yaws, all capable of producing such a skin condition in infants and children, sometimes resulting in death. See E.S. Haydon, *Law and Justice in Buganda*. London: Butterworth 1960, 123 (again, I am grateful to Leuben Njinya-Mujinja for this reference).

¹³⁵ Roscoe 1902, 26-7, 48.

¹³⁶ Roscoe 1965, 439.

HOUSEHOLD AND SOCIETY IN BUNYORO

The characteristics which set Bunyoro apart from Buganda, as described above, stem from the difference in the ecological environment, contributing to a greater role for cattle in the economy. The distribution of annual rainfall, with two marked dry periods, did not favour the extensive cultivation of bananas, and a grain-based agriculture provided a more reliable source of food, although it was more labour-intensive and involved the men more closely in food production, as the work input of all household members was required to ensure a good harvest.¹³⁷

As in Buganda, a munyoro peasant (*muiru*, pl. *bairu*) would negotiate access to land within his clientship relation with the village chief. In return for a piece of land, the peasant would provide the chief with his own labour and that of his family and products from his farm. Occasionally he would receive a goat, milk, or butter from his chief as a gesture of goodwill.¹³⁸ The house of the village chief was in a way a miniature model of the royal court, the main location for the exchange of goods and services in the kingdom. Every clan, whether *bairu* or *bahuma* (cattle herders), sent craftsmen to the royal court to supply the *omukama* with the its specialities. The *bahuma*, as professional herdsmen tended the royal cattle and supplied the king with milk, beef and hides, while blacksmiths, potters, brewers and salt makers, all from the agricultural clans, supplied him with iron tools and weapons, milking pots, beer, salt, grain, etc. In this way the *omukama* associated himself with the society, presenting himself as an integrating authority and placing his court at the hub of the entire society.¹³⁹

As in Buganda, clientship appears to have been more for a peasant than just a means of acquiring land in exchange of labour, as it connected him to a wider network for the exchange of produce and services that were essential for his well-being. For a chief, gestures of generosity were a means of securing a greater number of clients, which in turn would boost his wealth:

'...each serf [peasant] meant another labourer and an addition to his wealth, for besides doing building for him and perhaps herding his goats and sheep, each serf paid him a yearly tribute of grain and beer; this was not a compulsory tax but was regarded as a voluntary return to the chief for the land he [the peasant] occupied.'¹⁴⁰

¹³⁷ Kottak 1972, 357-358; Tosh, 1980, 88. Doyle (1998, 69) has suggested that the rainfall in parts of Bunyoro was adequate for bananas, but that millet was preferred because of the vulnerability of the banana crop at times of conflict. It must be remembered, however, that the banana yield depended on a well distributed and adequate rainfall, and it is likely that in most parts of Bunyoro the rainfall was not enough for the banana to yield an adequate supply of food.

¹³⁸ Roscoe 1923, 200-201.

¹³⁹ Roscoe 1923, 10-11; Beattie 1971, 137, 140-142.

¹⁴⁰ Roscoe 1923, 10.

The *kinyoro* society itself was not strictly divided into independent groups of farmers and herders. These groups were interdependent in economic terms, and none of them was excluded from political office. The early European misconceptions about the *bairu* as serfs of the *bahuma* was based on the assumption that the *bahuma* owned all the cattle they were herding. In reality, however, most of the *bahuma* were clients of the major chiefs and herded their cattle. This clientship also allowed them to replenish their own herds. The special status of the *bahuma*, like their specific lifestyle, stemmed from the fact that the king and the major chiefs trusted their most valuable possessions into the hands of these people, and this great responsibility gave them a very dignified status. By the nineteenth century an intermediate social group had emerged between the agricultural *bairu* and the cattle herding *bahuma*. These were mainly agricultural people who had managed to acquire some cattle as a reward for their services to the king or his chiefs. Since there was no prohibition of intermarriage between *bairu* and *bahuma*, a wealthy man could marry into one of the *bahuma* clans, a practice which blurred social boundaries in the course of time. Many major chiefs in Bunyoro actually came from the agricultural clans, for the *bahuma* seldom held territorial chieftainships for the king. Roscoe reports that the Banyoro kings had a way of rewarding some distinguished *bairu* by giving them a title of *munyoro*, 'free man' or 'chief'. The possibility for social mobility and access to political office outside the clans implies that Bunyoro was not a tyrannical or rigid serf-state as it is sometimes seen by commentators, but a dynamic society where success depended on individual talent as much as on the goodwill of the king and chiefs.¹⁴¹

The agricultural basis for the economy rested on millet, which formed the staple food for the majority of the population. Other crops grown were sweet potatoes, sorghum, beans and legumes. Sweet potatoes and beans were usually the first to be planted when a new farm was established. Bananas were mostly used for beer.¹⁴² Millet was sown just before the onset of the rains, often intercropped with sorghum. It could be harvested after four to six months, depending on the condition of the soil and the amount of rainfall. The basic method of cultivation was a shifting system. The preparation of the soil for millet during the dry season was hard work, involving clearing and burning of the undergrowth and hoeing the drought-hardened ground, and the men would till the soil together with the women to prepare the ground for sowing, as the task was simply too heavy to be done by the women alone. After the seed had been sown, the family would guard the crop against wild animals such as wild pigs. If the fields were located some distance away from the homestead, a temporary hut would be erected so that the crop could be guarded day and night.

¹⁴¹ John Roscoe, *The Soul of Central Africa. A General Account of the Mackie Ethnological Expedition*. London: Cassell & Co. 1922, 141-2; Beattie 1971, 131-135; Yitzchak Elam, *The Social and Sexual Roles of Hima Women. A Study of Nomadic Cattle Breeders in Nyabushozi County, Ankole, Uganda*. Manchester University Press 1973, 6. It seems that the title of *munyoro* is of ancient origin, and that it usually meant chief. See Schoenbrun 1998, 188.

¹⁴² Hiebsch and O'Hair 1986, 188-9; Jack R. Harlan, 'The Tropical African Cereals', in Thurstan Shaw et al. (eds.), *The Archeology of Africa. Food, Metals and Towns*. London & New York: Routledge 1993, 57-8; McMaster 1960, 96-105; Roscoe 1923, 201-3; Schweinfurt et al. 1888, 74; Fisher 1970, 41.

This task was often left to the women alone, as the men would also have to work for their chief. Thinning and weeding of the millet were essential, as weeds grew extremely rapidly and could easily outpace the crop. As the crop began to ripen, it was necessary to guard it against birds, a task which was usually entrusted to the children. Harvesting took place during the dry season, and it was extremely busy time. The men and women would cut the heads of the millet with knives and take it to special threshing floors. Part of the crop could be stored for many years without threshing if necessary. Threshing itself was slow and hard work, and was followed by winnowing. The clean grain was then carried to granaries or grain pits. The granaries were large baskets erected on a wooden frame, water resistant if not entirely waterproof, and covered with a heavy lid. They were often placed near the wife's hut, where she could easily obtain grain for grinding. Part of the grain was placed in deep underground pits, often dug in secret locations to be safe from raiders in troubled times. These additional underground stores helped the people survive civil wars and other insurgencies, during which cultivation was impossible. They might also serve as deposits of seed for the next crop.¹⁴³

The millet yield per acre was around 300 kilogrammes, of which about 9 to 14 kilogrammes was needed for the next season's seed, depending on the spacing. Millet therefore provided a reasonably reliable and abundant staple crop with a nutritive value superior to that of bananas. As a storable crop, it was an important source of nutrition all the year round, but it required much more work and careful tending from sowing to harvesting, which made it extremely laborious compared with banana cultivation in Buganda.¹⁴⁴

Within a household it was usual to have three meals a day. The staple dish of the *bairu* was a porridge made of millet flour, together with sesame seeds, roasted or cooked sweet potatoes and roasted bananas. Large amounts of banana and millet beer were also consumed. The consumption of meat was limited, as goat's meat and beef were luxuries, as were grasshoppers, white ants and mushrooms. It seems that goats, sheep and poultry were only eaten on special occasions, as in Buganda, and that most meat for food was acquired by hunting small game, or received as rewards from the chiefs. Fishing was the main occupation of the *bairu* living on the shores of Lake Albert or beside the Nile or other smaller rivers, but in general fish did not play such an important role in the diet as it did in Buganda. Cattle were rarely killed for food, and if the peasants had any, they would use them for bridewealth payments and for milk. Bulls were more frequently killed for meat, as they did not possess the same reproductive value in the eyes of the herders and peasants as cows did.¹⁴⁵

The volume of production was determined by the availability of labour. An additional pair of hands, whether a second wife or a domestic slave, would yield a

¹⁴³ John Roscoe, *The Northern Bantu. An account of some Central African Tribes of the Uganda Protectorate*. New impression. London: Frank Cass 1966, 68-9; Roscoe 1923, 202-3; Doyle 1998, 66-67; *Traditional Food Plants*. Food and Nutrition Paper 42. Rome: FAO 1988, 266-8; Schoenbrun 1998, 72-3; A.B. Fisher, *Bunyoro Notes*, 14 Dec. 1899. Acc. 84/F1/CMS.

¹⁴⁴ Langlands 1974, 84; *Traditional Food Plants* 1988, 268; Roscoe 1966, 70.

¹⁴⁵ Roscoe 1966, 13, 67-68, 87, 95; Schweinfurt et al. 1888, 74-80; Roscoe 1923, 205-206; Oberg 1938, 137.

greater amount of food. Collective work parties were also a feature of agriculture in Bunyoro, but by far the best insurance against scarcity was a large household,¹⁴⁶ a fact that favoured polygyny and the creation of large families.

The main source of food for the *bahuma* was their cattle, which provided them with milk, blood and beef. Since cattle were not artificially fed by the herders in kraals, they were dependent on the grass of the pastures for their existence. It seems that they were mostly in poor nutritional condition and produced very little milk, which was available in abundance only if of the household owned a very large herd. Beef was also in short supply, for only the wealthy cattle owners were able to kill animals for meat. Bulls were occasionally killed for meat, to be consumed by the men but only rarely by the women and children (they were often killed and eaten further away from the kraals, so that the women and children, who mainly stayed at the camp or homestead, were left without any meat). The barter trade in foodstuffs with the *bairu* was therefore an important undertaking for the *bahuma*.¹⁴⁷ Butter and hides were bartered for grain, while vegetables were grown by the *bahuma* women themselves. In the wealthier families, subsisting principally on cattle products, the women did very little, if any, agricultural work. They were strictly prohibited from herding or milking the cows, and they were not allowed to enter the cattle kraal in any circumstances. This was to prevent any harm being done to the herd, for it was believed that since the women produced children who consumed milk, their access to the milk supply had to be restricted, or otherwise there would be not enough for the calves and the future of the herd would be threatened. This restriction reduced the workload of the women, of course, so that they mainly churned the milk and made butter, and may have done some basketry, but these tasks may in some cases have been left to the young girls. In general the role of the women among the *bahuma* differed significantly from that among the *bairu*. Since cattle rearing was not dependent on female labour, there was less emphasis on the reproductive capacity of the women, either, and polygynous marriage was not as common as among the *bairu*. Although the women were not allowed any contact with the cattle, they were free to consume milk without any objections from their husbands. This was because a man's wealth was reflected in his wife; a rich man was able to support his wife with plenty of milk to keep her healthy and beautiful. Because of the rich diet and little physical exercise, some *bahuma* women were physically distinguishable by their obesity, and their physical features were frequently commented on by the early Europeans in the region.¹⁴⁸

¹⁴⁶ Doyle 1998, 65. To what extent men actually participated in agricultural production is uncertain. According to Felkin, the women did all cultivation, while Roscoe, writing some decades later, emphasized the role of men in agricultural production. It is likely that marriage conditions and the availability of labour determined the men's participation. In polygynous unions the women were likely to do most of the work. See Felkin 1891-92, 153; Roscoe 1922, 202-203; Doyle 1998, 64-65.

¹⁴⁷ Roscoe 1923, 177-8; Roscoe 1966, 66; Ronald E. Seavoy, *Famine in East Africa. Food Production and Food Policies*. New York: Greenwood Press 1989, 52.

¹⁴⁸ Roscoe 1923, 178; Roscoe 1966, 71; Wilson and Felkin 1882, Vol I, 163-4; Speke 1863, 410-1; Elam 1973, 4, 13-4, 48, 82 (endnote 34); Schoenbrun 1996, 472-473; Oberg 1938, 136-9; Ashe 1970, 339; Stanley 1890, Vol. II, 402.

The *bairu* had no strict food taboos such as were found in Buganda. Pregnant women might avoid some foods considered harmful for the child, but none appears to have been strictly forbidden. Some foods, mainly hippopotamus meat, were generally avoided because they were believed to cause skin disease, and pepper was avoided because it was thought to cause sterility.¹⁴⁹ The *bahuma* had more food taboos, mostly related to the welfare of the cattle. They did not practise hunting or fishing, for there were strict taboos preventing the use of fish and wild game for food, and also poultry, goats and eggs. Some of these animals, especially goats, were believed to cause misfortune. There were many rules governing the use of milk in the diet, and some *bahuma* also had taboos concerning vegetable food, but according to Roscoe, these restrictions were not strictly adhered to by the poorer *bahuma*, who could not afford to subsist on cattle produce alone. Moreover, it seems that vegetable foods could be eaten if milk was not consumed at the same time.¹⁵⁰ The food taboos were most fervently followed in the king's court, for the king could not risk the welfare of his kingdom by breaking the taboos protecting cattle. Therefore the preparation, serving and consumption of food in the court were highly ritualized practices. All this reflected the dignity and power of the king as the supreme authority and herdsman in his kingdom:

'He [the king] was required to observe certain food restrictions; he was supposed to eat no meat except beef, and certain low-status vegetable foods (sweet potatoes, cassava, and some kind of peas and beans) were forbidden to him. The large number of servants and retainers who surrounded him... also had to keep themselves ritually pure.'¹⁵¹

While the king and his closest advisers and ritual personnel were obliged to follow the royal ritual and food habits strictly, the majority of the chiefs had no such obligations. Many of them belonged to agricultural clans not concerned with *bahuma* cattle rituals. They were wealthy men, for they enjoyed the benefits of both the pastoral and agricultural ways of life and their wives were not involved in cultivation, which was left to slaves and servants.¹⁵² In practise the chiefs could enjoy a similar standard of living to their king, but with less restrictions.

Food shortages due to erratic rainfall and drought were common in pre-colonial Bunyoro, and there is reason to believe that they occasionally escalated into major famines in low rainfall areas. Local famines were frequently caused by political unrest and war, but it seems that the central administration, at least in the second half of the nineteenth century, attempted to alleviate food shortages by collecting food from prosperous areas and redistributing it to areas of shortage.¹⁵³

¹⁴⁹ Roscoe 1966, 45; Schweinfurt et al. 1888, 74-75.

¹⁵⁰ Stanley 1890, Vol. II, 396; Ashe 1970, 302-3; Roscoe 1966, 72; Roscoe 1923, 176, 179.

¹⁵¹ Beattie 1971, 106.

¹⁵² Beattie 1971 120; Roscoe 1966, 67, 72; Roscoe 1922, 142-3; Schweinfurt et al. 1888, 77.

¹⁵³ Doyle 1998, 77-80; Nyangabyaki Bazaara, 'The Food Question in Colonial Bunyoro-Kitara: Capital Penetration and Peasant Response', M.A. thesis, Makerere University 1988, 54-55; Roscoe

But considering the limits of human transportation and poor communications, as well as the political intrigue that occurred in times of famine, the food relief must have been quite modest, if not cosmetic.¹⁵⁴

This system which incorporated farming and herding provided an adequate - and in good years abundant - source of food which may be said to have been nutritionally superior to that of Buganda. Since differences in nutrition tend to manifest themselves in physical features, occasional remarks about the physical inferiority of the agricultural and mainly vegetarian Baganda relative to their grain-consuming, pastoral neighbours were made by European observers. Similarly, the agrarian and mainly vegetarian *bairu* were seen by the Europeans as physically inferior to the *bahuma*, who were regarded as 'the noble herders' with superior physical features.¹⁵⁵ As Roscoe put it:

'The pastoral people are a tall, well-built race of men and women with finely cut features, many of them being over six feet in height. The men are athletic with little spare flesh, but the women are frequently very fat and corpulent: indeed their ideal of beauty is obesity, and their milk diet together with their careful avoidance of exercise tends to increase their size.'¹⁵⁶

The racial stereotypes of the early Europeans may be blamed for the categorization of many Great Lakes peoples into masters and servants along the lines of occupational difference and physical features.¹⁵⁷ Certainly not all the *bahuma* were tall, slim and light-skinned, and in fact the Baganda were occasionally seen as physically superior to the Banyoro.¹⁵⁸ But it would be misleading to assume that the nutritional differences existing between the mainly vegetarian populations and the populations consuming more animal proteins would not show physically at all.¹⁵⁹ It is likely that they did, a fact that gave a boost to the European racial misconceptions.

1966, 95.

¹⁵⁴ Doyle 1998, 80.

¹⁵⁵ Ashe 1970, 321; Stanley 1890, Vol. II, 385, 387-8; Roscoe 1922, 57.

¹⁵⁶ Roscoe 1966, 4.

¹⁵⁷ A good, brief discussion of the origins of European racial ideas and the 'Hamitic theory' in the context of eastern and central Africa can be found in Mahmood Mamdani, *When Victims Become Killers. Colonialism, Nativism, and Genocide in Rwanda*. Kampala: Fountain Publishers 2002, 43-50, 79-87.

¹⁵⁸ Grant 1864, 253.

¹⁵⁹ See Curtin et.al. 1978, 169-170.

PRODUCTION, RE-DISTRIBUTION AND POWER: SOCIAL REPRODUCTION OF WEALTH AND POVERTY

MARRIAGE, INHERITANCE AND POWER

The transactions of wealth related to marriage, especially bridewealth payments, carried considerable meaning in terms of social reproduction. Quite simply, the aim of bridewealth was to re-create or reproduce the social conditions which had made its payment possible. A family giving away its daughter for marriage experienced a loss in production capacity, and the bridewealth received may be seen as economic compensation - although inadequate - for this loss. But more importantly, bridewealth promoted future marriages by the male members of the recipient family. In this way the 'balance' of labour and production, and of social reproduction, within and between kin groups was maintained.¹⁶⁰ Bridewealth was not essentially a transfer of wealth to a single family but to a whole kinship, for one part of the payment belonged to the father and the rest was claimed by relatives, who in turn would have contributed, or would contribute later, to raising bridewealth for one of the family's sons. By paying bridewealth, the husband's family and clan gained rights over the production and reproduction capacity of the new wife, so that she would produce the food for the household and bear children for her husband's clan. Bridewealth also gave the marriage social respectability, as children born from unions where bridewealth had not been paid enjoyed inferior social status in the eyes of the community, and it also established a bond between the two families, and, being exogamous, between clans, contributing to greater social stability. If the daughter of a family married a chief it also brought the family a certain respect and status. In the case of divorce the bridewealth could be demanded back, a fact that has been seen to contribute to the stability of marriages, but this cannot be assessed properly.¹⁶¹

Marriages in Buganda and Bunyoro were pre-arranged by the fathers of the two families involved, not always in accordance with the wishes of their sons and daughters. In general, marriage was an agreement between the senior male members of two families, and, when properly done according to the custom, included transactions of people, goods and rights-over-persons. Wives could also be obtained by purchase, gift, plundering, kidnapping or inheritance, but if obtained by these means, with the exception of inheritance, they enjoyed inferior status to those acquired by customary marriage with a bridewealth payment and proper ceremonies.¹⁶²

Proper marriage involved a transfer of prestige goods from the suitor's family to the bride's family, so that the price made a prospective husband dependent on his father and kin for raising the amount required. Bridewealth usually consisted of

¹⁶⁰ See Janzen 1992, 157-158; Meillassoux 1981, 61-64; Peter R. Atekyereza, 'Bridewealth in Uganda: A Reality of Contradictions', *Uganda Journal* 47 2001, 49-66, especially 49-50; Beattie 1960, 52, 56.

¹⁶¹ John Beattie, 'Nyoro Marriage and Affinity', *Africa* 28 (1) 1958, 1-22, especially 3; Atekyereza 2001, 49-50; Oberg 1938, 149; Martin Southwold, 'The Ganda of Uganda', in James L. Gibbs (ed.), *Peoples of Africa*. New York: Holt, Rinehart and Winston 1965, 105. It appears that marriages in pre-colonial Buganda were quite unstable. See Kagwa 1934, 132; Richards 1964, 258.

¹⁶² Gorju 1920, 287-281, 299-300; Beattie 1958, 3-6; Beattie 1960, 52-53, Roscoe 1965, 92-93.

goats, poultry, beer, barkcloth, cowries etc., all arranged by the suitor's family and kin, who expected them to be paid back in the future. According to Roscoe, collection of the goods required might take a very long time and considerable effort, even with the help of relatives.¹⁶³ It seems that marriage payments in Buganda only concerned ordinary people and not chiefs of higher ranks. According to Ashe, wealthy chiefs usually did not pay bridewealth themselves, for they were constantly being offered young women as wives and servants by sub-chiefs and peasants in the hope of gaining their favour.¹⁶⁴ When a *bahuma* man wished to marry, his father arranged the marriage, providing his son with the bridewealth and having his say about the bride. The price in this culture was paid in cows, usually two or more, depending on the case. It seems to have been a custom among cattle herders that the father paid the bride price for the eldest son of each of his wives, or sometimes only the eldest son of his first wife, and that he might himself refrain from taking any additional wives until his son was successfully married. Sons were obliged to pay the bridewealth back to their fathers when they received corresponding payments for their first daughters to marry.¹⁶⁵

The acquisition of bridewealth enhanced the power of the heads of the clans and powerful patrons over the younger males, so that wealth and control over social reproduction concentrated at the top, among the senior patriarchs in the society.¹⁶⁶ Marriage as an institution was not only a means of social reproduction, or a means by which young men entered proper manhood, but also an opportunity for the wealthy chiefs to maintain social and political control over their subjects. Marriage tied wives to their husbands, and husbands to their fathers and chiefs. It was in the interests of patrons and clan elders to encourage marriage, for by controlling the social reproduction of the peasantry they ensured the social reproduction of their own power.¹⁶⁷

Inheritance played no significant role in the sharing of wealth in pre-colonial Buganda and Bunyoro, since initially people did not inherit property but position, in which all property was included. The heirs were successors, and inheritance did not involve sharing the property, or power, of the deceased between his offspring or

¹⁶³ Roscoe 1966, 40-41; Roscoe 1965, 88-89; Mair 1934, 89. Richards (1964, 258), however, has argued that bridewealth was lower in Buganda than in many other societies, perhaps because cattle were rarely involved, and that raising sufficient bridewealth did not constitute a barrier to marriage. Her interpretation nevertheless contrasts with the amounts of goods and livestock reported by Roscoe as being given as bridewealth, involving several goats, and is also in contradiction with the view accepted by more recent research. See Roscoe 1965, 88; Musisi 1991, 483-485; Twaddle 1988a, 126.

¹⁶⁴ Ashe 1970, 286; Portal 1894, 194, 196. It seems, however, that chiefs in Bunyoro were paying bridewealth in the early twentieth century. See Fisher 1970, 44.

¹⁶⁵ Roscoe 1966, 38-9; Adam Kuper, *Wives for Cattle. Bridewealth and Marriage in Southern Africa*. London: Routledge & Kegan Paul 1982, 26-7; Lucy Mair, *African Marriage and Social Change*. London: Frank Cass 1959, 53; Oberg 1938, 148.

¹⁶⁶ Kopytoff 1989, 18; Roscoe 1901, 122; Roscoe 1965, 14, 88-9; Roscoe 1966, 40-1; Mair 1934, 89; Doyle 1998, 96.

¹⁶⁷ See Janzen 1992, 157-158, 161; Doyle 1998, 45.

kinsmen.¹⁶⁸ In Buganda inheritance was a matter of the clan. Even though the deceased, whether a chief or a peasant, might have had his own favourite candidate for heir or successor, the person had to be accepted by the clan, or otherwise someone else would be chosen. Until the second half of the nineteenth century the successor in Buganda was usually a brother of the deceased, but *kabaka* Mutesa changed this custom in favour of the sons. As a rule, whether the heir was a son of the deceased, his brother, or his brother's son, he would usually inherit and marry some of the deceased's wives and inherit his children. Goats, poultry and other small possessions would also revert to him, but most importantly, if he succeeded to the position of clan head, he came to control its ancestral lands. In practice, therefore, the heir was successor to the position held by the deceased. Needless to say, women rarely inherited any property or position in pre-colonial Buganda.¹⁶⁹

In Bunyoro, inheritance among the *bairu* followed similar lines as in Buganda. Each man was allowed to appoint an heir, usually his son. According to Roscoe, the will of the departed was usually followed. The heir took the position and office held by his predecessor unless the king himself, perhaps provoked by the clans, had something against the successor. Likewise, the *bahuma* settled the inheritance within the clan, the elders deciding whether the dead man's last will was to be respected or not. The common practice seems to have been to divide the cattle between the sons, which may have taken place even while the person was still alive, if he was sick or wounded, for example. If the deceased had not named an heir and had not divided his property before death, it was the clan's duty to arrange the inheritance. Usually the eldest son became the inheritor. Women were excluded from inheritance among both the *bairu* and *bahuma*, although *bahuma* girls were sometimes given some cows by their father when they married.¹⁷⁰

It was the case in both Bunyoro and Buganda that when the successor accepted his new position or office he sent a present to the king as an expression of gratitude. This usually meant some cows and slaves, but the king might, at least in Buganda, request one of the widows or their daughters for himself. In Buganda the king usually levied a tenth of the value of the estate.¹⁷¹ There is no evidence of any continuation of this tradition in the colonial period, but it might well be that the clans continued to receive rewards or shares of some kind.

¹⁶⁸ According to Kopytoff, the inheritance of an office or position ensured that African social groups and political systems - families, clans, chiefdoms, or kingdoms - frequently sent out 'offshoots', usually young, ambitious men who had failed to secure an established position by inheritance, to establish a new formation on their own. See Kopytoff 1989, 22.

¹⁶⁹ Roscoe 1965, 3, 121-2, 125, 270; Ray 1991, 75-6; Haydon 1960, 81; L.A. Fallers, F.K. Kamoga and S.B.K. Musoke, 'Social Stratification in Traditional Buganda', in Fallers 1964, 89-90; Martin Southwold, 'The Inheritance of Land in Buganda', *Uganda Journal* 20 (1) 1956, 88-95, especially 94; Nsimbi 1956, 33; Gorju 1920, 301.

¹⁷⁰ Roscoe 1966, 56-7; Schoenbrun 1996, 471; Beattie 1960, 52.

¹⁷¹ Roscoe 1966, 57; Roscoe 1965, 270.

CLIENTSHIP, AGRICULTURAL SURPLUSES AND THE PRE-COLONIAL STATE

As Wrigley has noted, everyone in nineteenth century Buganda except the king himself was someone's client.¹⁷² The institution of clientship in Buganda and Bunyoro predates centralized states, but it seems to have become more common with the rise of state structures. Political clientship, or in the case of Buganda the creation of *batongole* chiefdoms, was a means by which the king could challenge the much older clan-based control over the land and people. As the clans grew in size their members became scattered outside the traditional clan lands and were in need of both land and protection, which they found under the chief ruling over the area of their destination. Clientship thus came to predominate over kinship ties, which remained important but were not always enough to guarantee access to land, physical security and food, or access to marriage.¹⁷³

As royal power grew, the king emerged as the supreme patron in his kingdom. Royal power in Buganda, as in Bunyoro, was dependent on the existence of a class of chiefs loyal to the king. In Buganda the *batongole* were the 'king's men', and the rights of the *kabaka* to appoint chiefs of additional ranks increased in the eighteenth and nineteenth centuries. In Bunyoro the authority of the clan heads remained stronger, many of them being powerful and in direct contact with the king, and royal clientship was not as predominant as in Buganda until the second half of the nineteenth century.¹⁷⁴ The states were maintained by regular collections of tribute payments and labour service from the peasantry by the king's officers, and therefore the creation of new administrative chiefs undoubtedly had some economic repercussions for the peasantry in terms of production and tribute payments as well as labour. This was especially the case in Buganda, where the growth of royal power was dependent on the creation and maintenance of an effective military. In order to protect and maintain the state and all that went with it, the *kabaka* had to rely on his subordinates for material resources and manpower. Clientship under powerful patrons was therefore also a means by which the peasantry could seek political and economic protection against the increasingly oppressive and extractive power of the king. Economically and politically, the expansion and enhancement of clientship as a vertical system for the exchange of goods and services between the wealthy and less wealthy, or powerful and less powerful, can be seen to reflect the growing differences in wealth between the social groups within society.¹⁷⁵

There is some contradiction about the nature of clientship in the pre-colonial period. On one hand, it has been presented as a mutually beneficial system for both patrons and clients, in which the patrons received loyalty, political support, labour service and material goods from their clients in exchange for land, protection,

¹⁷² Wrigley 1996, 63.

¹⁷³ See John Roscoe and Apolo Kagwa, *Enquiry into Native Land Tenure in the Uganda Protectorate*. Unpublished manuscript. Mss. Afr. s. 17, RH, 112-113; Schoenbrun 1998, 104-105, 188-189; Mafeje 1998, 118-120; Médard 2001, 427-433; Southwold 1964, 213; Doyle 1998, 33.

¹⁷⁴ Fallers et al. 1964, 92-93; Doyle 1998, 31-36.

¹⁷⁵ Schoenbrun 1998, 188-189; Southwold 1964, 212-214; Mafeje 1998, 119-120; Jan Vansina, 'A Comparison of African Kingdoms', *Africa* 32 (4) 1962, 324-335.

judicial services and hospitality.¹⁷⁶ The redistributive functions of clientship have been emphasized, as has their importance for the functioning of society in general in Buganda.¹⁷⁷ On the other hand, it is held that, although it was a voluntary relationship between patron and client, it was essentially exploitative and non-redistributive, i.e. the people seeking clientship were in need of something, and the exchange of services and goods within the relationship was unequal and benefited the patron, who could exploit the clients' vulnerability, having no legal obligations or responsibilities whatsoever towards them.¹⁷⁸ It has been noted, however, that patrons needed their clients for political and economic reasons, so that the need for support would have made it unwise for a patron to over-exploit his clients and make them seek refuge under a less abusive master.¹⁷⁹ Moreover, the villages, the basic political units in both Buganda and Bunyoro, were of small size, which emphasized personal relationships between a patron and his clients.¹⁸⁰ In order to understand the nature of clientship in the pre-colonial period, one has to look more closely at the political and economic changes that took place in the two kingdoms, especially with regard to the production of agricultural surpluses, their amount and their distribution.

Agricultural surplus had been essential to the maintenance of such specialists as potters, ironworkers and saltmakers, on whose work the agrarian society was just as dependent as on the cultivators themselves. Their contribution, especially that of the ironworkers,¹⁸¹ made agriculture more productive and encouraged exchange, allowing a higher degree of specialization. The creation of a centralized state in Buganda, and to a lesser degree in Bunyoro, would have been impossible without productive agriculture and specialization.¹⁸² The growing number of chiefs, officials and ritual and court personnel further stimulated economic activity, and, as the demand for food, cloth, utensils, tools and arms increased, part-time specialists became permanent. States could not do without skilled artisans and other specialists.

The growing number of specialists in society put pressure on agricultural production, of course. The volume of agricultural production in peasant households

¹⁷⁶ Southwold 1964, 213-214.

¹⁷⁷ Médard 2001, 176-181, 430-433.

¹⁷⁸ Mafeje 1998, 119-121.

¹⁷⁹ Though peasants were not serfs tied to the soil, it is questionable whether clients could just walk away from their patrons. According to Ashe, this opportunity existed, but, at least in the nineteenth century, it was considered unwise and even dangerous for the client, since patrons would not allow their former supporters to join a rival camp. See Ashe 1970, 95.

¹⁸⁰ Southwold 1964, 214; Doyle 1998, 34.

¹⁸¹ According to Reid (2002, 85), the ironworker was the linchpin of the Baganda material culture in the nineteenth century - fishermen, carpenters, cultivators, warriors and traders all depended on iron and iron products.

¹⁸² According to Schoenbrun, the more intensive period of banana cultivation around Lake Victoria began in the fifteenth century or even later. This coincides with the rise of the northern Great Lakes kingdoms. See Schoenbrun 1998, 81-2.

was adequate for subsistence and for the maintenance of social cohesion in normal times, and the 'normal surplus' of agriculture was adequate to fulfil clientship and other social obligations after the immediate subsistence needs had been met.¹⁸³ This was enough to ensure the social reproduction of society and required little extra effort on the part of the peasants or their masters.

It has been suggested by Cohen that food production in the late nineteenth century was administered by rulers in order to ensure adequate tributes, not only for the maintenance of the court and chiefs of different ranks, but for exchange as well. Cohen argues that peasants in the tribute collecting areas outside the royal estates had to produce 'defensive surpluses' because of the high demands of the state, and that these surpluses gave the early European travellers a false idea of the food producing capacities of the communities.¹⁸⁴ Although one cannot deny that increased trading and the foreign presence in East Africa in the nineteenth century favoured specialization in food production in some places such as Bukerebe,¹⁸⁵ and that the royal demand for a large range of dietary items fostered creation of royal herds and gardens in vicinity of the capitals, it seems that no production aimed at increasing the surplus beyond the community's immediate needs was undertaken on a large scale.¹⁸⁶ There were three reasons for this. First, the primary aim of peasant production was to minimize the risk of a local food shortage. People were essentially producing for themselves, and the demands of clientship and the state took second place and were determined by the outcome of each harvest. A surplus, when stored, was essentially intended for food, or to provide seed for the next crop.¹⁸⁷ Secondly, there was no sense in producing easily perishable foods and goods in large quantities for the sake of achieving a surplus, for the markets were limited and local trade did not involve the transfer of large quantities of goods over long distances. Few means existed for transforming an agricultural surplus into some other, perhaps less

¹⁸³ See Allan 1965, 38, 44-45. The beer parties and customary gifts to superiors are to be seen as normal practices ensuring social cohesion within a society rather than exceptional means of enjoying oneself and spending the agricultural surplus. In cases of crop failure the practices were suspended temporarily or carried out by other means. Since an individual attained his personal rights through membership of a community, failure to maintain the essential social relationships by neglecting social obligations would be a serious handicap for the individual and his status in the eyes of community. See Mafeje 1998, 112; Schoenbrun 1998, 170-171; Webster 1986, 451.

¹⁸⁴ Cohen 1983, 2-3; Cohen 1989, 277-278. Tosh has similarly argued that the Langi produced 'planned surpluses', mainly of sesame, as export items for trading with the Banyoro. See Tosh 1978, 421-422.

¹⁸⁵ Cohen 1983, 9.

¹⁸⁶ This does not mean, however, that the production of other things besides food could not have been 'administered'. According to Hanson (1997, 52-53), the *kabaka* controlled the production of such items as pottery, ivory and some foodstuffs such as sesame by placing them directly under certain *batongole* chiefs.

¹⁸⁷ Mamdani 1976, 25. Cohen mentions that the most common article extracted by the Baganda in Busoga was dried banana, or *mutere*, used as famine food or during military campaigns. It is questionable whether this kind of 'surplus' was much coveted by the Baganda elites. See Cohen 1989, 279.

perishable form of wealth, and the economic returns for selling food to locals, and later to foreigners, would probably have been quite modest. A surplus was nevertheless needed to secure access to prestige items required for bridewealth, and this was probably the primary motive leading families and kinships to increase production. It might be speculated that the increased extraction of tributes by the state made the accumulation of bridewealth goods difficult, hence limiting the frequency of marriages, which in time would be reflected in production volumes.¹⁸⁸

This brings us to the third and most decisive factor - labour. It was not only produce that was required by patrons but labour, the control of which was the cornerstone of the chiefs' economic and political power. In his discussion of tribute, Cohen does not consider the availability of labour and its effects on food production at all. Yet the volume of agricultural production was determined by the households' access to female labour. Any increase in production would have required the use of additional labour, which was theoretically available but in practice difficult for peasant households to obtain. Additional wives could be taken if the household could find the bridewealth payments, and domestic slaves could be obtained or purchased, but majority of the slaves went to the king and chiefs. The increase in the value of slaves towards the end of the nineteenth century made them expensive for peasants, and trade in slaves provided better economic returns for chiefs in terms of wealth and prestige goods than the investment of slave labour in peasant production.¹⁸⁹

It is therefore questionable whether the agricultural system was actually capable of producing large defensive surpluses of food at short notice as argued by Cohen. At least in Bunyoro, the surplus may not have been large. Tosh sees that Langi agriculture, again based on millet, was capable of producing a 'significant surplus' only in exceptionally good years.¹⁹⁰ In Buganda conditions were different, and the surplus of food after each harvest was probably greater than in Bunyoro, but problems existed as far as storage and preservation were concerned.

Large amounts of tribute were collected in Buganda, however, regardless of the volume of production and seasonal fluctuations in yields, since the extraction regime was characterized by seasonality and 'pragmatic hedonism'.¹⁹¹ Tribute was collected immediately after the harvest, when there was an abundance of produce, allowing immediate sizeable extraction - and also consumption - but leaving the peasantry vulnerable in terms of food for the rest of the agricultural cycle. The producing of a defensive surplus would have been of little use, since a greater amount would have been extracted and the producers would have experienced no real improvement in their food supplies. The seasonality of agriculture alone places limits on production, as also on consumption, and the seasonality of extraction levelled out the consumption pattern in peasant households even at harvest times.

¹⁸⁸ Mamdani 1976, 25. Accumulation existed in the form of cattle and women, both of which have only a limited lifespan and have to be made reproductive.

¹⁸⁹ On the increased cost of slaves, see Felkin 1885-86, 75; Reid 1996, 147.

¹⁹⁰ Tosh 1978, 421-422. See also Tosh 1980, 90; Webster 1986, 451.

¹⁹¹ See John Iliffe, *The Emergence of African Capitalism*. London; Macmillan 1983, 20-22.

Thus it would seem that there are some objections to the notion of a 'defensive surplus' being produced throughout the kingdom outside the royal estates. Cohen is apparently right in arguing that increased tribute taking, especially in outlying regions and outside the administered royal farms, caused serious hardship,¹⁹² and it is thus probably safe to say that the peasant households aimed at all times at maximum production and output for maximum security within the limits of the available resources. The yields depended much on weather conditions, pests, plant diseases and proper cultivation, so that the gardens and fields produced more in some years and less in others. In good years there was a greater surplus which, among other things, encouraged local trade.

It nevertheless seems that production by the peasants was controlled by the rulers and chiefs not with a view to greater productivity but for other reasons. By controlling the availability of women - and therefore access to marriage - the chiefs were able to regulate production through control of the peasants' access to labour. Women from the harems of the king and chiefs were redistributed as wives or domestic slaves and servants in return for labour and produce in a similar manner to cattle in the clientship relations in Rwanda.¹⁹³ In Buganda, and probably to lesser extent in Bunyoro, this could not be done extensively without risking the balance of power within society. Control of the women and their labour represented a paradox inherent in the system. Productive labour - capable of generating more wealth and allowing a greater surplus and greater tributes - was withheld by the chiefs for economic and political reasons. In order to maintain control over their subjects, upon whom their political power and material welfare rested, the chiefs had to reduce the peasants to economic and social dependence and not allow them to prosper beyond the level required for their immediate necessities.¹⁹⁴

It seems that the engagement of African rulers in long-distance trade increased the demand for basic agricultural produce in the capitals, which acted as the major places of operation for Swahili traders.¹⁹⁵ To maintain the growing urban population, more tribute had to be collected, which put extra strain on the producers, who now had to struggle to maintain their level of subsistence. Therefore, any increase in production, if it occurred, was a reaction to the increased demand for tribute rather than an action taken because of the opportunity offered by the growing markets.¹⁹⁶

Tribute collection provided an opportunity for chiefs of different ranks to improve their own material welfare by extracting some extra for themselves besides

¹⁹² Cohen 1989, 280.

¹⁹³ See Vansina 1962, 327-328; Mamdani 1976, 25.

¹⁹⁴ For a theoretical discussion of power and social reproduction, see Meillassoux 1981, 72-74, 78-81.

¹⁹⁵ See Richard Reid & Henri Médard, 'Merchants, Missions & the Remaking of the Urban Environment in Buganda c. 1840-90', in David M. Anderson & Richard Rathbone (eds.), *Africa's Urban Past*. Oxford: James Currey & Heinemann, 2000, 102-103.

¹⁹⁶ Mafeje 1998, 127-8.

what was required by the central power.¹⁹⁷ Portal gives a good description of how this worked in the late nineteenth century:

'On arrival in his district he [the tax collecting chief] summons before him all the most important local chiefs, and to each one assigns the amount of contribution for the production of which he will be held responsible. In this partition the governor [i.e. the chief] is particularly careful to see that the aggregate amount, when brought in, will be more than double of what he has to pay over to the king; the rest will remain in his hands. Away go the sub-chiefs; the whole proceeding is repeated again and again in endless subdivision and gradation, and thus the hard-working peasantry, beaten and persecuted until the very last drop is wrung out of them, have to pay in the end five times, and even ten times, the amount which their province was assessed.'¹⁹⁸

The hierarchy of chiefs in nineteenth-century Buganda included four levels and three categories. The main administrative unit was the county, or *saza*, headed by an appointed *saza* chief and divided into sub-counties, or *gombololas*. These were further divided into districts headed by chiefs appointed by the *saza* chief, and below them were villages with their own headsmen. Overlapping these territorial administrative chiefdoms were the two other categories, namely the local clans and clan heads, or *bataka*, and the royal clients, the *batongole*. Some *bataka* also served as territorial chiefs under the king, a practice which seems to have been fairly common. *Batongole* officials sometimes served as territorial chiefs as well, but more frequently they performed other duties for the king and lived off the people residing on their official estate.¹⁹⁹

The number of chiefs within one *saza* could be considerable, and they often had their personal subordinates or aides who lived on the estates and acted as sub-governors. The districts may also have been divided into sub-districts, adding another layer to the territorial administration. The densely populated *saza* of Kyagwe, for example, there were one *saza* chief and his personal aides, four *gombolola* chiefs, 18 district chiefs and 23 sub-district chiefs in the 1890s, with numerous village headmen under them.²⁰⁰ To this one would probably have had to add some *batongole* chiefs, and perhaps some members of the royal family who had estates in the area.

¹⁹⁷ Reid 2002, 101.

¹⁹⁸ Portal 1894, 193.

¹⁹⁹ Fallers et al. 1964, 85-98, 109-110; A.I. Richards (ed.), *East African Chiefs. A Study of Political Development in Some Uganda and Tanganyika Tribes*. London: Faber and Faber 1960, 46-50, 56-7. There was no uniform territorial administrative structure in nineteenth-century Bunyoro comparable to that found in Buganda, which reflected a greater degree of decentralization and the predominance of local kinship and clientship ties over central royal authority. See Doyle 1998, 32-34.

²⁰⁰ Richards 1960, 49-51; Médard 2001, 409 fn. 1.

According to Kagwa, tribute, or the king's tax, was collected from a number of items and occupations. There was a cattle tax of one head in every twenty, and same measure was applied to goats. There was also a tax on barkcloth, which could be converted to other produce or cowrie shells, which served as currency in the late nineteenth century. Those importing salt from Bunyoro were taxed, and the people living on the Sese Islands paid their tribute in fish, canoes and by serving as boatmen. Every peasant family was taxed to the extent of a vessel of eggs and sesame, and the same of bananas. Besides food, the king obtained a continuous supply of items such as pottery, mats and baskets. Besides the tribute collected from the peasants, the king was entitled to the lion's share of the spoils of war, i.e. cattle, women, ivory, etc., of which the members of the royal family also received their share and the rest was distributed to the generals, captains and other military officers, and if the spoils had been abundant, even to the ordinary soldiers. The members of the royal family themselves had their private estates for their own personal use, although they were still expected to pay minor levies or provide gifts for the king. The chiefs with their semi-private estates were obliged to pay part of the tribute they collected from their peasants to the king.²⁰¹

Considering the heavy bureaucratic administration, it is no wonder that only a small part of the tribute collected, probably about one tenth, reached the royal court. In 1895 a colonial official reported on a present of 700 goats sent to *kabaka* Mwanga from Busoga, of which only 40 animals were eventually received by the king,²⁰² the majority remaining 'in the hands of those drones and curses of the country, the chiefs and petty chieftains of Uganda.'²⁰³

The *bakopi* also had a communal labour obligation to their chiefs and to the king, referred as *bulungi bwa nsi*, for 'the good of the country'. This included the maintenance of buildings in the chief's court and in the capital, a frequent and arduous task under the conditions prevailing in Buganda, and the laborious work of maintaining the road network, and other task such as portage. Also, the military required a constant flow of fighting men,²⁰⁴ which meant that the menfolk were absent from their farms, which hampered the production of such items as barkcloth and beer, regularly required as tribute.²⁰⁵ Considering the amount of work expected from the *bakopi*, it is quite evident that the women had to be employed in tasks previously undertaken by men. This would endanger cultivation and probably increase vulnerability to famines.

²⁰¹ Kagwa 1934, 91-2, 94-5; Wilson to Berkeley, 4 Sept. 1898. A4/12/Uganda National Archives (UNA).

²⁰² Grant to Jackson, 17 June 1895. A4/1/UNA.

²⁰³ Portal 1894, 193.

²⁰⁴ Fallers et. al. 1964, 82-85; Reid 2002, 103-107. Reid erratically calls the pre-colonial labour system '*kasanvu*', a term which actually refers to a forced labour system introduced by the British in 1909. *Kasanvu* labour was done for the colonial state in addition to the traditional labour duty, or state labour, to the chiefs and king. See chapter 4 for a further discussion of *kasanvu*.

²⁰⁵ Beer could naturally be made by women, but the production of barkcloth seems to have been in the hands of regional specialists, the best quality cloth coming from Buddu. See Reid 2002, 70-76.

The administrative structure in Bunyoro was less centralised, less uniform and less oppressive than that in Buganda. Below the king were his territorial *bakungu* chiefs, governing large provinces or districts. They were probably, at least in the late nineteenth century, mostly appointed by the king, while some of the positions may have become hereditary long before that. Under the *bakungu* were the *batongole* chiefs, governing sub-districts and being mostly holders of hereditary offices or privileges in certain clans.²⁰⁶ Below the *batongole* chiefs there were village headmen or elders, though there is no reference to these in the nineteenth century written sources. Many of these were probably also clan or lineage headmen.²⁰⁷ The tribute payments in Bunyoro included mainly agricultural produce collected after each harvest in a similar manner to that in Buganda. State labour requirements, however, seem to have been less demanding, in that the peasants were required to maintain the royal court and enclosures and the chiefs' courts regularly, in addition to military service, portage, and other services for their chiefs. There was no well kept road system in Bunyoro similar to that in Buganda, however, and road clearing was limited to occasions when the king was touring the districts.²⁰⁸ According to Felkin, the collection of tribute was accompanied by coercion and extortion, as each chief in the administrative hierarchy tried to gain as much benefit as possible for himself. It must be remembered, however, that at the time of Felkin's visit Bunyoro was in a state of rapid transformation, and that the coercion, as argued by Doyle, resulted from the fact that the king and his chiefs were trying to extract maximum benefit from the long-distance trade,²⁰⁹ as also happened in Buganda.

Any conclusions regarding the impact of the increased demand for tribute and labour on the peasantry in the nineteenth century can be only tentative ones. It seems that as long as the chiefs' political power and material welfare depended on their clients, abuses of clientship were less frequent and the system was beneficial to patrons and clients alike. It cannot be denied, however, that the chiefs, at least above the level of village headmen, enjoyed considerably greater access to means of production and social reproduction than the peasantry. The material abundance was greatest in the royal court, which in a way reflected the prosperity of its immediate vicinity.²¹⁰ But this wealth at the top of society was manipulated in a way which did

²⁰⁶ Scheweinfurt et al. 1888, 89; Felkin 1891-92, 159-160; Doyle 1998, 31-32; Schoenbrun 1998, 188.

²⁰⁷ The title may have been *mukuru w'omugongo*, literally 'leader of the ridge', i.e. leader of a populated area, or village, who acted as an intermediary between the people and the chiefs. The clans were at one time localised, usually occupying one ridge, and the term *mukuru w'oruganda* refers to the head of a clan or lineage. See S.R. Charsley, 'Mobility and Village Composition in Bunyoro', *Uganda Journal* 34 (1) 1970, 15-27, especially 16; Beattie 1971, 166-167; Schoenbrun 1998, 175.

²⁰⁸ Roscoe 1966, 19.

²⁰⁹ Felkin 1891-92, 160; Doyle 1998, 110.

²¹⁰ According to Reid (1996, 59-60), deprivation during droughts and famines was reflected in the royal court in Buganda, since it was dependent on supplies produced in the surrounding countryside. A different interpretation of this causality relation is provided by Doyle (1998, 223), who sees that the impoverishment of the royal court in Bunyoro during the colonial period destroyed the redistribution system and led to impoverishment of society as a whole. One may ask, however, what there would be to redistribute unless society was able to generate a surplus and enough wealth to

not encourage greater productive efforts. Differences in wealth were mostly quantitative: the higher the rank, the greater the access to the same principal products. The lack of a means to convert perishable forms of wealth to more permanent forms, with the exception of women and cattle, made surplus production irrational until the growth of long distance trade and new market opportunities.²¹¹

HEALTH, DEMOGRAPHY AND SOCIAL REPRODUCTION

With few exceptions, sickness in pre-colonial Buganda and Bunyoro was attributed primarily to malevolent spirits and witchcraft, and as such it was considered as socially produced. Human agency was central to the prevention of sickness and misfortune; one had to respect one's totems, taboos and the spirits of one's ancestors. When, despite all precautions, sickness struck, specialized medicine men were called for. According to Roscoe, the Baganda medicine men, the *basawo*, had great power over the people. Each clan had its own medicine men, who not only diagnosed illnesses but also prescribed medicines and practised surgery and bone setting.²¹² Banyoro medicine men, *bafumu*, were said to possess spectacular surgical skills.²¹³ The services of these specialists were paid for, and they were wealthy and respected members of the community.

Indigenous medicine was both preventive and curative. Inoculation of children against endemic syphilis and yaws was known to the Banyoro, and was said to be widely practised by elderly women.²¹⁴ Variolation against smallpox was known and practised in Bunyoro in the late nineteenth century.²¹⁵ Common illnesses, such as common colds, would not require the help of a medicine man but could be treated by domestic means, but if a trivial ailment became prolonged, the services of specialists were needed.²¹⁶ While one cannot deny the capability of indigenous medicine to soothe the acute symptoms of illness, pain, nausea, etc., there were a great number of diseases before which it appeared powerless. According to Zeller, impotence, sterility and complications associated with pregnancy were the most

maintain and support the court and feed the redistribution system from below. In a material sense, it was the court which depended on the local communities and not the other way around, while the welfare of society was dependent on the ritual power of the king in a symbolic sense.

²¹¹ See Mafeje 1998, 115.

²¹² Roscoe 1966, 53-55; Roscoe 1965, 277-279; Zeller 1971, 20-25, 37-40.

²¹³ Byaruhanga-Akiiki 1982, 73-74; R.W. Felkin, 'Notes on labour in Central Africa', *Proceedings of Edinburgh Medical Society* 29 1884, 922; J.N.P. Davies, 'The Development of 'Scientific' Medicine in the African Kingdom of Bunyoro-Kitara', *Medical History* 3 1959, 47-57.

²¹⁴ Davies, 47-57; Felkin 1891-92, 144; Roscoe 1923, 290.

²¹⁵ Felkin 1891-92, 143; Felkin 1885-86, 704; Roscoe 1923, 290.

²¹⁶ Martin Southwold, 'Ganda Conceptions of Health and Disease', in *Attitudes to Health and Disease among Some East African Tribes*. E.A.I.S.R., Makerere College, Kampala, 1959, 43; Whyte 1973, 48.

common reasons for people to seek relief from a *basawo*.²¹⁷ There is evidence that indigenous medicine was already facing difficulties in securing reproductive health well before the end of the nineteenth century.

The historical reconstruction of demographic and health conditions is made difficult by the lack of reliable evidence from the first half of the nineteenth century, that is, before the 'opening up' of the interior of East Africa. The evidence surviving from the second half is corrupted by the abnormal conditions prevailing at that time: the ivory and slave trade, warfare, famine and the high incidence of epidemics. Even when the evidence becomes more abundant towards the end of the nineteenth century, its reliability is often questionable, especially when dealing with such issues as the size of the population, mortality or fertility.

The reproduction of producers and reproducers in any society, although a demographic phenomenon, is nevertheless subordinate to ecological, socio-economic and political conditions. One precondition for successful reproduction and population growth is an adequate food supply.²¹⁸ The agricultural revolution brought about by the gradual introduction of American crops undoubtedly had some long-term effects on population in East and Central Africa, and it seems that, as in Europe, the population expanded in response to the greater food security brought by the new crops. General trends in continental populations between 1600 and 1900 - indicating that Africa's population decreased between 1650 and 1800, after which there was a rapid increase - do not give an entirely correct picture of the impact of the new crops, however. At least since 1800, if not earlier, population growth can be attributed to the spread of American crops across the continent.²¹⁹ There is little reason to suspect that the new crops would not have enhanced food security, and thus population growth, in eastern and central Africa.²²⁰

Most scholars, however, see that population growth in East Africa in the nineteenth century was fairly slow. The wetter regions around Lake Victoria were capable of sustaining larger populations, but it appears that even there the rate of growth was low. According to Kjekshus, pre-colonial African societies had reached a population equilibrium, or state of low population growth, which was in accordance with their prevailing ideas and practices of environmental control. He rules out famines and internecine warfare as major limiting factors for population growth, and holds that population growth was checked by rational choice.²²¹ Others

²¹⁷ Zeller 1971, 25.

²¹⁸ Meillassoux 1981, 51-52; Blaikie et. al. 1994, 34.

²¹⁹ Alfred W. Crosby, *The Columbian Exchange. Biological and Cultural Consequences of 1492*. Westport: Greenwood Press 1972, 166, 185-188; Crosby 1994, 159-163; Massimo Livi-Bacci, *A Concise History of World Population*. Translated by Carl Ipsen. Cambridge (Mass.); Blackwell 1992, 31; Vansina 1990, 211-215.

²²⁰ See Juhani Koponen, 'Population. A dependent Variable', in Gregory Maddox, James L. Giblin & Isaria N. Kimambo (eds.), *Custodians of the Land. Ecology & Culture in the History of Tanzania*. London: James Currey 1996, 20. Hartwig is sceptical about the positive impact of the new crops in Eastern Africa. See Gerald W. Hartwig, 'Demographic considerations in East Africa during the nineteenth century', *IJAHS* 12(4) 1979, 653-672, especially 655-656.

²²¹ Kjekshus 1977, 9-25, 46-47. See also Kuczynski 1949, Vol. II, 116-119.

have argued that it was primarily checked by high mortality, because of disease and chronic malnutrition. Some authors emphasize internecine violence and famines as limiting factors, while others have been more sceptical of their significance before the late nineteenth century.²²²

It became commonplace in the twentieth century to depict Africa as a continent of high fertility and rapid population growth. In the pre-colonial period, it was explained, population growth was checked by high mortality, and the population growth recorded during the colonial period was thus explained by a decline in mortality, colonial rule removing the constraints by eradicating famine, war and disease.²²³ This view is a colonial creation based on a comparison of fertility levels in Western Europe and Africa in the late nineteenth and early twentieth centuries. Fertility in African societies appeared high in the eyes of the European colonists, but it has been argued more recently that, although high by Western European standards, it was actually quite low in parts of East and Central Africa and had already been low or moderate in the pre-colonial period.²²⁴ A common explanation for this low fertility was subfecundity among women, mainly because of venereal disease. This was especially the case in Buganda, and to lesser extent in Bunyoro.²²⁵ It has likewise been suggested that polygyny, together with prolonged breastfeeding and post-partum abstinence, contributed not only to lower infant and child mortality but also to lower fertility in the pre-colonial period.²²⁶

The general fertility rate, i.e. the mean number of live births per woman of reproductive age, is in any case a poor measure of female fecundity, since it is affected by other factors besides biological ones. Pregnancy loss caused by diseases such as malaria, hookworm, trypanosomiasis, smallpox, or other serious infections, were probably very common in pre-colonial times. Maternal malnutrition, often seasonal if not chronic, may have temporarily impaired female ovarian function and caused complications during pregnancy, reducing the number of live births because

²²² van Zwanenberg and King 1975, 6-7; Hartwig 1979, 653-672; Iliffe 1979, 13-14.

²²³ See Hartwig 1979, 653-654; Caldwell 1985a, 476-482; van Zwanenberg and King, 1975, 12-18.

²²⁴ Kuczynski 1949, 118; Juhani Koponen, 'Population Growth in Historical Perspective. The key role of changing fertility', in Jannik Boesen, Kjell Havnevik, Juhani Koponen and Rie Odgaard (eds.), *Tanzania - crisis and struggle for survival*. Uppsala: Scandinavian Institute of African Studies 1986, 42-43.

²²⁵ See Roscoe 1965, 97; Médard 2001, 95. Sir Harry Johnston, after talking to missionaries in Uganda, was convinced that Baganda women were 'poor breeders'. According to Emin, the average number of children born to a Munyoro woman was two or three, which was, in his view, less than in Buganda. Felkin reported that Baganda women in poorer families were more prolific, many having as many as six or seven children. In 1905, a British officer claimed that Sudanese soldiers preferred Baganda and Banyoro women as wives since they were considered fertile. See Johnston 1902, Vol. II, 642; Schweinfurt et al. 1888, 84-5; Felkin 1885-86, 705, 745; Uganda Protectorate. Intelligence Report No. 26, 31 Oct 1905. CO 534/2/42528/PRO.

²²⁶ Ron Lesthaeghe, 'Production and Reproduction in Sub-Saharan Africa: An Overview of Organizing Principles', in Ron J. Lesthaeghe (ed.), *Reproduction and Social Organization in Sub-Saharan Africa*. Berkeley: University of California Press 1989, 16-22; Koponen 1984, 42.

of stillbirth, spontaneous abortion and miscarriage. In such instances fertility would decline without any permanent reduction in female fecundity, i.e. the capacity for successful conception. A small number of live births per woman therefore does not necessarily mean that the women were infecund.

It may be that the slow population growth was not a result of low fertility and female subfecundity, but of high infant and child mortality. There is little evidence regarding infant mortality in the nineteenth century, but the existence of rituals connected with an infant's death suggest that it was a fairly frequent event.²²⁷ European travellers in the 1860s and 1870s often reported high infant and child mortality.²²⁸ According to Roscoe, infant mortality had been increasing since the mid-1800. Some estimates from mid-1890s put infant mortality as high as 90 percent, which would appear to be an exaggeration even under crisis conditions.²²⁹ The nineteenth century travellers and ethnographers associated high infant mortality with the arrival of the Swahili traders and the acclaimed introduction of venereal syphilis, which was said to have had a devastating effect on infant lives.²³⁰ It was also common for missionaries to blame traditional medicine for the deaths of infants, though nursing practices in general were reported to be good.²³¹ Whether infant mortality was lower in the early nineteenth century is not assessable, but the evidence cited indicates very high infant mortality in the second half of the century.

A number of customs had evolved for the preservation of precious infant lives. The food taboos described above were mostly aimed at this, and other cultural habits had a similar function. It was believed that if a woman became pregnant while breastfeeding, the unborn baby would poison the milk and kill the breastfed child. In such a case the infant was to be weaned as soon as possible, which meant that it had to be fed on the same kind of food as the older children and adults.²³² To avoid recurrent pregnancies at short intervals the practise of post-partum seclusion was followed among both the Banyoro and Baganda. Ideally, after a woman had given birth to a live infant she went to live in seclusion from her husband for a long time, usually for as long as 18 months or more, during which time she constantly breastfed her child.²³³ The practise of seclusion, like other taboos, however, was

²²⁷ See Roscoe 1902, 49; Roscoe 1965, 126-127; Roscoe 1923, 248-9; Kagwa 1934, 103-104.

²²⁸ Grant 1864, 292, 298; Samuel W. Baker, *Ismailia. A Narrative of the Expedition to Central Africa for The Suppression of the Slave Trade*. Vol. II. London: MacMillan & Co. 1874, 150-151

²²⁹ Roscoe 1965, 97; Hanlon to Casartelli, 5 Dec. 1896. UGA/4/II, MHM; Hanlon to Casartelli 21 Oct. 1896. UGA/4/II, MHM.

²³⁰ See Roscoe 1965, 97; Roscoe 1966, 57 fn. 1; Schweinfurt et al. 1888, 95; Doyle 2000, 434. The impact of venereal disease on infant mortality is discussed in more detail in the following chapters.

²³¹ Roscoe 1966, 44-5, 48-9; Fisher 1970, 50; *Church Missionary Intelligencer & Record*, May 1900, 345.

²³² Roscoe 1923, 246-7; Schweinfurt et al. 1888, 84; Wilson and Felkin 1882, Vol.I, 187; Richards 1948, 39.

²³³ Roscoe 1923, 246-7. Seclusion is still widely practised in the Great Lakes region, and the motives have remained same. See Karin Tylleskär & Thorkild Tylleskär, *Cassava and Child Health among the Sakata - A Nutritional Study of an Ethnic Group in Northern Bandundu Region in Zaire*.

mainly limited to the wealthier people, i.e. to chiefs and their wives, and it has been looked on, together with the alleged low fecundity of women, as one motivation for polygyny.²³⁴ Since the peasants usually had only one wife, they did not follow the practise of seclusion strictly, the wife returning to her husband as soon as possible after giving birth, so that the seclusion might only last a few days. She began to work immediately, nursed her infant, and provided her husband with food and company, thus making herself susceptible to a new pregnancy earlier than a wife living in seclusion.²³⁵

The apparently long breastfeeding periods found in Africa have been seen as means of regulating population growth, but actually the primary aim was to enhance the survival of infants.²³⁶ One probably quite significant yet not easily assessable reason behind the high infant and child mortality was the short period of seclusion and early weaning because of a recurrent pregnancy.²³⁷ Mothers may have had problems in breastfeeding their infants because of the physical strain caused by pregnancy and heavy agricultural work,²³⁸ while the early cessation of breastfeeding made children more susceptible to malaria and other diseases such as smallpox, which was especially dangerous to infants and children.

Besides infant mortality, it also seems that maternal mortality was high. According to Felkin, post-partum haemorrhage and other complications associated with pregnancy killed many women.²³⁹ Some of these complications were probably related to the loss of energy and nutrients because of heavy manual work undertaken during pregnancy, and it is quite plausible that maternal malnutrition contributed to pregnancy loss and high infant mortality. There is evidence that nutritional deprivation was common in women. Emin noted that a peculiar habit of earth eating existed in Bunyoro, which was said to prevent a disease liable to affect both men and women. People ate earth from termite mounds, and were therefore, according to Emin, in serious danger: 'This practise, if long continued, is said to cause discoloration of the skin and hair, as well as general emaciation, and finally death.'²⁴⁰

Minor Field Study Report No. 16. International Child Health Unit, Dept. of Pediatrics, Uppsala University 1988, 26-7.

²³⁴ Wilson and Felkin 1882, Vol. I, 187; Doyle 1998, 46. The practise of seclusion was not followed among the *bahuma*, whose wives returned to their husbands on request after giving birth and the infant was nursed by a specially chosen nursing woman. In practise this meant that the children were fed on cow's milk until they were fully grown. See Roscoe 1923, 246, 264-5.

²³⁵ Roscoe 1965, 95-6; Roscoe 1902, 37.

²³⁶ Koponen 1984, 44-45; Lesthaeghe 1989, 16.

²³⁷ Lesthaeghe 1989, 16.

²³⁸ According to Fisher, women in Bunyoro were exhausted by the heavy agricultural work. Even young wives lost their 'vivacity' soon after marriage. See Fisher 1970, 41, 48.

²³⁹ Felkin 1891-92, 144.

²⁴⁰ Schweinfurt et al. 1888, 75; see also Wilson & Felkin 1882 Vol. I, 183-185.

However, it seems that Emin misunderstood the practise; the consequences he described as resulting from excessive earth eating in fact refer to the physical conditions evident in cases of protein-energy malnutrition. It is likely that by eating extremely mineral rich earth from termite mounds the people, particularly pregnant women, were trying to alleviate the symptoms of malnutrition, probably anaemia and deficiencies in other micronutrients such as calcium.²⁴¹ This 'mineral hunger' might be a manifestation of nutritional deprivation similar to the 'meat hunger' witnessed in Bunyoro and in Buganda.²⁴²

To summarize, if it is accepted that health is socially produced and reproduced, a society failing to produce enough new members for reproduction, or failing to create conditions which make the production of new members possible, would therefore be labelled as socially and politically "unhealthy". Even if new members were produced in sufficient numbers, reproduction of the society would be threatened unless the survival of its new members could be ensured. This would indicate a political failure to generate the social capital necessary for the re-creation of conditions favourable for biological and social reproduction. Social capital, springing from the collective dependence of community members on each other, would guarantee access to land, labour and healers. It would enable access to marriage, which in turn would ensure further reproduction of the society and its members. The erosion of social capital, or reduction of interdependence, would endanger the health and even the survival of social groups by eroding the social as well as the material base of wealth and welfare. As will be seen below, by the second half of the nineteenth century both Buganda and Bunyoro were faced with a tremendous problem of biological and social reproduction. In Buganda, the shortcomings in production and reproduction had to be amended by warfare and raiding. This is a strong signal of a failure of the political system to generate secure conditions for indigenous social reproduction. One reason for this was the over-exploitation of the productive segment of society by the ruling elites for the sake of greater material welfare and greater political and economic power.

²⁴¹ Andrea S. Wiley and Solomon H. Katz, 'Geophagy in Pregnancy: A Test of a Hypothesis', *Current Anthropology* 39 1998, 532-545.

²⁴² Kitching 1912, 113. It has also been suggested that earth eating was a symptom of sleeping sickness. See Rijpma 1994, 51-2.

III The late nineteenth century

THE PRE-COLONIAL STATE AND THE CRISIS OF THE LATE NINETEENTH CENTURY

ESCALATION OF THE POLITICAL AND MILITARY CRISIS

In the second half of the nineteenth century political insecurity in Buganda was increased by the ever more frequent external contacts.¹ From 1844 onwards the Swahili traders had established themselves - and their Muslim religion - in the kingdom's capital, and the desire for foreign goods, such as cloth and firearms, made the Baganda more aggressive, since the new goods had to be paid for in ivory at first and later in slaves. The situation became more complex after the first European contacts in the early 1860s and the growing threat of Egyptian expansion in the north. Internally, the most significant factor was the arrival and settlement of the European missionaries in the late 1870s, eventually leading to the division of Baganda society into four politico-religious sects: the Protestants (supported by the Church Missionary Society), Catholics (supported by the missionaries from the French-speaking White Fathers), Muslims (supported by the Swahili community) and traditionalists.

The death of *kabaka* Mutesa in 1884, who had managed during his reign to maintain a balance between the rival sects, intensified the political struggle over the soul of the new *kabaka* Mwanga, so that the religious divisions and parties presented a concrete threat to his authority. To reclaim and preserve his status as the ruler of Buganda, he launched a purge of Christians, both Catholic and Protestants, from his court in 1886, backed by the traditionalists. This sparked mistrust of the *kabaka* among the supporters of the new religions, which was manifested in protests and eventually led to Mwanga's exile in 1888, and to the short-lived reigns of two 'puppet' kings, during which a power struggle and overt fighting ensued between the Muslims and Christians, with the latter eventually emerging victorious. In this chaotic situation, Mwanga was reestablished on the throne at the end of 1889 by the Christian party, and was ruling his shattered kingdom in December 1890 when Captain Lugard arrived to consolidate the position of the Imperial British East Africa Company (IBEAC) in the region.

After the defeat of the Muslim party in 1889, the rivalry over supreme power between the Christian parties intensified flavoured with the imperial ambitions of Britain and Germany, both of whom were approached by Mwanga, in need of support for his fragile rule. Finally, the situation escalated into fighting in 1892 when Mwanga and his Catholic supporters, who had lately been brushing with the Germans instead of the British, were defeated by the IBEAC-backed Protestants. The Protestant *bakungu* chiefs, some of whom owed their positions to Mwanga, now became the new rulers of the kingdom. To enhance their flagging support among the

¹ The description of events in this paragraph and in the following four is derived from several standard works on Buganda's political history. See Kiwanuka 1971, 192-270 *passim.*; Low 1971, 13-83; D.A. Low & R.C. Pratt, *Buganda and British Overrule 1900-1955. Two Studies*. London: Oxford University Press 1960, 3-18; D.A. Low, 'Uganda, The Establishment of the Protectorate 1894-1919', in Vincent Harlow & E.M. Chilver & Alison Smith (eds.), *History of East Africa*, Vol II. Oxford: Clarendon 1965, 57-120; D.A. Low, *Religion and Society in Buganda 1875-1900*. Kampala: E.A.I.S.R. s.a.; Kabwagyere 1974, 55-106; Jørgensen 1981, 39-76; Karugire 1980, 49-98.

people, they allowed Mwanga, now accepting British protection, to remain on the throne. As a puppet leader, Mwanga was humiliated by the British as well as his Protestant countrymen, and finally, in 1897, he fled from the capital to Buddu to wage a war against the Protestants and the British. His campaign, which enjoyed fairly large popular support, was defeated by the British-led Sudanese troops and Protestant Baganda forces, however, and the king fled north to join Kabalega, the king of Bunyoro, who was himself waging a bitter war against the British and their Baganda allies.

The defeat of Mwanga did not mean the end of unrest. Soon after the rebellion had been put down, another one broke out among the Sudanese troops which formed the core of British military power in Uganda. These troops, actually the remnants of Emin Pasha's Egyptian force, had been extensively engaged in battles and skirmishes since 1890, when Captain Lugard took over their command. The rebellion, the cause of which was the poor pay and ruthless service to which the Sudanese had been subjected, took the British by surprise and seriously threatened their fragile rule in Uganda. The rebellion was finally put down with help of loyal Sudanese and the large Baganda army.²

Bunyoro was similarly seized by political strife and violence in the second half of the nineteenth century. The kingdom was harassed not only by the Baganda in the southeast, but also by Sudanese ivory hunters and slavers from the north. By 1850s the slavers, based in Khartoum, had established themselves in Gondokoro, Acholiland and Lango, north of Bunyoro, and as a part of their tactics of slave raiding, they allied themselves with local rulers and usurpers, thus becoming involved in local power struggles. This also happened in Bunyoro, where *omukama* Kamurasi pinned his hopes on the Sudanese slavers and their superior weaponry to put down the rebellion in his kingdom. The following civil strife was witnessed by the first Europeans to arrive in Bunyoro, in the early 1860s, namely Speke and Grant, coming from the direction of Buganda, and shortly afterwards by Baker, who approached the country from the north.

The existence of strong, violent political opposition and dynastic rivalry in Bunyoro in the second half of the nineteenth century can be explained by the inherent instability of the dynastic system in the absence of rules of succession,³ the lure of kingship and power itself, and also increasingly by the enormous opportunities provided by the new long-distance trade. Firearms, cloth and beads, all items of power, prestige and wealth, could be obtained in exchange for ivory and

² The C.M.S. doctor Albert Cook wrote to his mother about Mwanga's uprising, and referred to an estimate by a fellow missionary, Pilkington, that 90 percent of the Baganda were against the Europeans and their new customs. Many Europeans feared for their lives during Mwanga's war and the Sudanese rebellion. In fact, the missionary Pilkington was later killed by the Sudanese while attempting to cut down their banana trees near Luba's fort in Busoga in order to starve the mutineers. See Albert Cook to his mother, July 7 1897. A44/Box 1/PP/COO/WTL; Albert Cook to his mother, 24 Oct. 1897. A49/Box 1/PP/COO/WTL; Hanlon to Casartelli, 10 March 1898. UGA/4/III/MHM.

³ The practice of killing rival princes after enthronement, which greatly reduced internal strife, was adopted in Buganda in the eighteenth century. *Kabaka* Mutesa is also said to have cut the mourning period for a deceased king - during which all activity, including cultivation, was banned - from several months to virtually nil. These practises made the transfer of power much less disruptive. See Webster et al. 1992, 801. Ray 1991, 109-113.

slaves. Tapping of this resource was essential for keeping political and economic power, thus providing a means for an even greater growth in power locally and regionally. This was realized by both the *omukama* and his rivals.

Thus, in the early 1870s Bunyoro was oppressed from the outside at the same time as it was recovering from another bloody successional war between the new *omukama*, Kabalega, and the rival Babito princes. Kabalega had won against all the odds, and his rivals were either dead or licking their wounds and looking for an opportunity to challenge the new king.⁴ Besides internal dissidence, the fresh *omukama* had to face increasing pressure from Egypt, for he was not convinced by Baker, now an officer under the Khedive of Egypt, about the necessity for Egyptian protection for his kingdom. Instead, Kabalega downplayed Baker, who apparently took his diplomatic defeat as a personal insult. Baker blamed his failure solely on Kabalega, and thus laid the foundation for the British mistrust of the Banyoro, which was later eagerly fed by the Baganda.⁵ Finally, the attempts of Egypt to join Bunyoro to its Equatorial Province ended in disaster, with the Mahdist rebellion in 1881 and subsequent events which cut Egypt's Equatorial Province off from Khartoum.

By exploiting the opportunities provided by long-distance trade, Kabalega organized a new standing army, the *abarusura*, acting under his direct orders, in order to extend his power throughout his kingdom. The *abarusura* were mainly recruited from the peasantry, but there were also foreign "mercenaries" and slaves, all of whom were lured by the apparently dangerous but economically rewarding conditions of service, swathed in prestige and a respect induced by fear. The creation of an effective military force boosted the centralization of political power in the hands of the king, in similar yet probably faster manner than had occurred in Buganda. As Doyle has argued, this process was fairly common in the Great Lakes region at that time and may be seen as a response of African societies to the growing insecurity and economic change brought by long-distance trade.⁶

The maintenance of the *abarusura* was paid for with ivory and slaves and by increasing the acquisition of tributes from the peasantry. Military campaigns were undertaken to gain control over trade routes and natural resources. Aided by the *abarusura*, Kabalega reconquered such rebellious areas as Paluo and Toro, raided Nkore in the south and reestablished control over northern Busoga, a vital trade route.⁷

By 1890 Kabalega's policies and the growth of his power put him on a collision course with the British, who were attempting to consolidate their position

⁴ Uzoigwe 1970, 6; Doyle 1998, 110-112.

⁵ A.R. Dunbar, 'Early Travellers in Bunyoro-Kitara, 1862 to 1877', *Uganda Journal* 21 1959, 101-107; Dunbar 1965, 51-60; Doyle 1998, 109-112, 201-216.

⁶ Uzoigwe, 1970, 6-9; Doyle 1998, 108-110. In Rwanda and Burundi, however, where the centralization of power took place around the same time, the increased exploitation of the peasantry, together with ecological and epidemiological catastrophes, eroded the popularity and legitimacy of the court, and the final triumph of royal authority was only possible under German rule. See Newbury 2001, 255-314; Newbury 1988, 40.

⁷ Doyle 1998, 111; Uzoigwe 1973, 66-67.

in Buganda. The upsurge of an African rival kingdom on the headwaters of the Nile was unacceptable to them, and it was even more so for the Baganda, who saw their old enemy growing progressively stronger. Although there is no evidence of any hostility shown by Kabalega towards the British - represented until 1894 by the IBEAC - the latter were under the direct influence of the leading Protestant Baganda chiefs, who managed to demonize Kabalega and his kingdom. In 1891 military action was taken by Captain Lugard to curb the southward expansion of Bunyoro, and in the following years, which witnessed the establishment of a British Protectorate over Buganda in 1894, the small-scale military manoeuvres transformed into a major war against Kabalega's forces. The war ravaged the northern parts of the kingdom in particular, and was waged ruthlessly by the British as well as by Kabalega. In 1897, after his own war of resistance had failed, *kabaka* Mwanga joined Kabalega, who was based on the northern bank of the Nile, from where he carried on his guerrilla war. In 1899, however, in the face of superior numbers and arms, Kabalega and Mwanga were finally captured and later expelled.⁸

The nineteenth century ended with the eclipse of monarchy in both Buganda and Bunyoro. In Buganda it meant that the Christian, mainly Protestant, *bakungu* chiefs were now the rulers of the kingdom under British protection. The country was torn apart internally, and famine and disease were rampant. Bunyoro was treated as a conquered territory, and parts of its heartland, namely the counties of Buruli, Bugerere, Rugonjo, Bugangadzi and Buyaga were annexed by Buganda.⁹ War, famine and disease had ravaged the kingdom, which was now without proper leadership, since Kabalega's centralization of power had removed many capable leaders, and the chiefs loyal to Kabalega were either killed, imprisoned or dismissed.¹⁰

In Buganda the British and their Protestant Baganda allies were at pains to seek justification for their rule, and it was the enthronement of the infant *kabaka* Daudi in 1897 that served to provide a claim for the legitimacy of the new order, which was not greatly appreciated by the majority of the people.¹¹ In Bunyoro, the capture of Kabalega and the perceived lack of legitimacy of the British rule resulted in passive resistance, indifference and hopelessness.¹² For the majority of the Baganda and Banyoro, the end of nineteenth century represented the escalation of their political predicament, and its effects were further deepened by the prevailing economic, social and epidemiological crises.

⁸ By far the best and most detailed analyses of the events of the 1890s have been produced by Shane Doyle, 'Population Decline and Delayed Recovery in Bunyoro, 1860-1960', *Journal of African History* 41 2000, 429-458, especially 437-441, and Doyle 1998, 152-199. See also Dunbar 1960, 81-98.

⁹ Bunyoro also lost good grazing land, including the counties of Mwenge and Kitagewnda, to Toro in the south. See Nyakatura 1973, 129.

¹⁰ Doyle 1998, 111-112, 185-192.

¹¹ According to Bishop Hanlon, head of the Mill Hill Mission, the Catholic population in particular were critical of the Protestant infant king who could not even talk to his people yet. Hanlon to Casartelli, 17 Aug. 1897. UGA/4/III/MHM.

¹² Uzoigwe 1970, 37.

ECONOMIC AND SOCIAL CRISIS IN THE NINETEENTH CENTURY

One underlying cause behind the economic and social crisis of the nineteenth century was the climate and its role in sparking political and social unrest. The nineteenth century appears to have been wetter than the previous century, the period of high rainfall taking place approximately between 1830 and 1895. Southern Africa was plagued by droughts and famines in 1800 and 1830, while rainfall was relatively high in southern and in eastern Africa between 1870 and 1895. The dramatic shift occurred after 1895, and the pre-1895 levels of rainfall in eastern Africa were only temporarily regained in the early 1960s.¹³ The 1890s was a decade of deadly famines in much of East Africa, though not solely caused by failure of the rains but also by epidemics, epizootics and warfare.¹⁴ It appears that rainfall was decreasing in the late nineteenth and early twentieth centuries, combining with the rapid political and economic changes to contribute to the insecurity of the region at that time. The general patterns and levels of rainfall, however, do not always correspond with the local reality. The rains may be delayed in one place while other locations enjoy normal rainfall. In some locations abnormally heavy rainfall could destroy the crops and cause famine. While there is very little evidence of famines in Bunyoro and Buganda in the early nineteenth century, they seem to have been fairly common and highly devastating later on in Bunyoro, where they were increasingly caused by war rather than by failure of the rains.¹⁵ In Buganda there seem to have been severe famines in the 1820s and 1880s at least, the latter of which - caused by prolonged drought - eventually afflicted even the royal court.¹⁶

In economic terms the major changes in the nineteenth century, and even earlier, were related to the rise and growth of centralized states, and to the growth of long-distance trade. In Buganda the rise of a centralized and militaristic state created a demand for manpower for both military and production purposes, leading to ever more frequent raids into neighbouring territories to capture slaves. It is uncertain how these slaves, most of whom were women and children, were distributed, but it is likely that until the external demand for slaves grew in the second half of the nineteenth century, they were extensively amassed at the courts of the king and chiefs.¹⁷

¹³ S.E. Nicholson, 'The historical climatology of Africa', in T.M.L. Wigley, M.J. Ingram, and G. Farmer (eds.), *Climate and History. Studies on past climates and their impact on Man*. Cambridge University Press 1981, 257-264; Hubert H. Lamb, *Weather, Climate & Human Affairs. A book of essays and other papers*. London & New York; Routledge 1988, 202-206.

¹⁴ Koponen 1988a, 126-139; Richard Pankhurst and Douglas H. Johnson, 'The great drought and famine of 1888-92 in northeast Africa', in Douglas A. Johnson and David M. Anderson (eds.), *The Ecology of Survival. Case Studies from Northeast African History*. London: Lester Crook & Westview Press 1988, 47-70.

¹⁵ Doyle 1998, 77-78. Depopulation and deserted and overgrown gardens and fields were reported in Bunyoro by Baker in the early 1870s. See Baker 1874, Vol. II, 136-137.

¹⁶ Reid 1996, 55-57.

¹⁷ Reid agrees with Gorju that the rise of harems in the chiefs's and king's courts resulted from

Following the country's territorial expansion and growth in influence, the economy of Buganda became more diverse. The rich agricultural area of Buddu, known for its good barkcloth, produced many items coveted not only by the Baganda but also by the neighbouring peoples. Barkcloth was bartered with neighbours for salt and iron. Some iron was obtained from Buddu and Kyagwe, but most of it - and also salt - was imported from Bunyoro, Buvuma and the eastern coast of Lake Victoria. Cattle were raised in the grasslands bordering Bunyoro, and their significance as a token of wealth was increasing. The royal court, and the courts of provincial chiefs - with their growing numbers of servants, slaves, ritualists, political aides and followers - offered good opportunities for trade in basic foodstuffs and other necessities. The chiefs' courts acted as centres of redistribution, where the wealth collected from the peasantry was transformed and redistributed in the form of cattle and slaves.¹⁸

Contrary to Buganda, the territorial losses experienced by Bunyoro meant loss of tributes from productive areas such as Buddu, Kiziba and Koki. The kingdom had rich resources in terms of salt, iron and cattle, however, and specialized groups of herders, salt makers, iron workers, potters and fishermen guaranteed that its material basis was probably more diverse and secure than that of Buganda.¹⁹ The core of Bunyoro's wealth was the eastern shore of the Lake Albert, where the main salt and iron producing sites were located. Around Kibiro, the salt production centre by the lake, constant trading in salt, foodstuffs, and other items took place, and there is some evidence of specialized distributors who acted as middlemen in the salt trade. Some exchange of basic foodstuffs and household items existed between the *bahuma* and *bairu*, in that milk vessels and other pottery were bartered for milk, butter and hides. Less is known about the trading connections across and around Lake Albert, but they appear to have been regular.²⁰

The political rivalry between the central and local authorities in Bunyoro brought about economic and political insecurity. Buddu and Kiziba had been among the most densely populated areas within the kingdom, and their loss under the influence of Buganda also meant the loss of access to a potential source of manpower in terms of slaves. Moreover, the populous Toro province - a vital gateway to the southern trade route and Katwe salt - and the fertile Paluo in the north, were often in rebellion against the royal authority.²¹ This probably limited the creation of a large redistribution network centred around the royal court before the second half of the nineteenth century, as the provincial chiefs controlled and

the military victories and is therefore related to the growth of the state. See Reid 2002, 120; Gorju 1920, 123; Musisi 1991, 771-773.

¹⁸ Tosh 1970, 104-106; Rusch 1975, 48-50; Médard 2001, 134-141; Reid 1996, 86, 92-93, 110-114.

¹⁹ See Felkin 1891-92, 155-157; Roscoe 1923, 217-232.

²⁰ Roscoe 1923, 234; Schweinfurt et al. 1888, 120-122; Kamuhangire 1976, 78-79; Good 1972, 553-568.

²¹ Uzoigwe 1973, 62-66.

administered the distribution and exchange of local produce for their own economic and political ends. As long as the kingdom's population and productive resources remained largely under local control, there was little chance for the growth of centralized state structures in the manner of Buganda.

Major economic changes took place in the second half of the nineteenth century as commercial ties with the Indian Ocean coast and with Khartoum in the north intensified. Imported items such as copper wire, cotton cloth, beads, firearms and gunpowder were exchanged for ivory, which was in great demand in Europe, America and India. Ivory hunting and trading became a royal monopoly in Buganda, so that the *kabaka* had his own troop for hunting elephants and the ivory trade was concentrated at the court. The Baganda were eager to benefit from the new trade and actively sought to control the trade routes across and around Lake Victoria. From the late 1870s onwards the land route west of the lake was becoming increasingly unpopular among the traders, many of whom were Banyamwezi, mainly because of the increased burden of *hongo* payments required by the local chiefs en route to Buganda. As the trade shifted to the lake, the Baganda sought to control the canoe traffic between Buganda and its southern end. The creation of a large fleet of canoes was necessary to protect the trade routes, and this was accomplished by forced labour extracted from the Basese, who became not only the major canoe builders but also the oarsmen for the Baganda fleet in their trading and military expeditions.²²

As ivory became scarce in Buganda and its immediate vicinity, it was obtained from Bunyoro in exchange for slaves, and from other neighbouring territories either by trading, as tributes, or by plundering.²³ Despite the attempts by Buganda to monopolize the ivory trade in the region and to prevent Swahili traders from entering Bunyoro, the first coastal traders reached the kingdom in 1872, shortly after Kabalega ascended to the throne, and by the 1880s Bunyoro had become the largest supplier of ivory in the northern interlacustrine region. The economic advantages brought by the long-distance trade helped the new king to establish stronger control over his subjects, and to increase his kingdom's economic might at the expense of Buganda.²⁴

When Buganda's attempts to secure the monopoly in ivory trade failed, other export items had to be developed. In order to ensure a supply of arms, ammunition and cloth, Buganda turned extensively to the slave trade. This had already been going on in the first half of the nineteenth century, but it had remained secondary to the trade in ivory. Meanwhile slaves obtained from the rest of eastern Africa had satisfied the coastal demand, but as the supply diminished, slaves were obtained from further inland. The transport of slaves from Buganda was increasing in the

²² Rusch 1975, 50-51; Tosh 112-115; Reid 2002, 60-63; Reid 1998, 351-355; R.W. Beachey, 'The East African Ivory Trade in the Nineteenth Century', *Journal of African History* 8 (2) 1967, 269-290; Gerald W. Hartwig, 'The Victoria Nyanza as a Trade Route in the Nineteenth Century', *Journal of African History* 11 (4) 1970, 535-552.

²³ Felkin 1885-86, 752; Schweinfurt et al. 1888, 117-118; Reid 2002, 168.

²⁴ Schweinfurt et al. 1888, 117-118; Doyle 1998, 129-130.

1860s and 1870s, and it reached a peak in the 1880s, when between one and two thousand slaves were exported annually.²⁵

Large-scale slave trading came to an end soon after 1890 with the growing civil unrest and nascent British colonialism, but its effects on the economies of Buganda and its neighbours were far reaching and destructive. Buganda used its military power to raid its neighbours, which contributed to instability in the region. As the supply of slaves from outside Buganda soon became limited, the king and chiefs began to sell their own slaves, and capture and sell their subjects into slavery. Internal slaving was a consequence of the fact that the Swahili traders and their merchandise had become an inseparable part of the economic structure of the kingdom. The luxury items were in constant demand in the court, and the military had become increasingly dependent on the flow of guns, gunpowder and ammunition. Therefore, the maintenance of Buganda's political and military position required continuous participation in long-distance trade, which also meant the continuation and intensification of slave raiding and the slave trade.²⁶

The slave trade soon eroded the economic basis of the kingdom. As female slaves were the chief articles of trade, their value increased, and the king and chiefs attempted to amass as many women in their harems as possible.²⁷ Consequently there were less women available as wives, since families were eager to sell their daughters to chiefs or Swahili traders for a good price. Bridewealth payments probably rose beyond the prosperity of most peasants, and there were also less slave women available for marriage or for domestic service. This probably had negative effects in terms of agricultural production, which had been growing in the vicinity of the capital because of the increased numbers of foreigners, which created conditions under which the peasants could produce food for sale.²⁸ It is probable that the production of food near the capital became concentrated mainly on the estates of the king and chiefs, while peasant households may have experienced greater food insecurity because of difficulties in obtaining adequate agricultural labour.

Slave raiding and subsequent depopulation undermined not only production but also reproduction, as marriage became a more expensive affair. Slave raiding likewise destroyed the redistribution system, as the king and chiefs attempted to amass as much wealth as possible to be exchanged for foreign goods in order to secure their position in the internal power struggle.²⁹ Long-distance trade in ivory

²⁵ Reid 2002, 160-164.

²⁶ *Church Missionary Intelligencer & Record* (new series) 13 1888, 236; Schweinfurt et al. 1888, 44; Reid 2002, 165-166; Rusch 1975, 52.

²⁷ Felkin (1885-86, 752) reported that the prices of slaves were 'rising enormously'. According to Reid (1996, 147), the price of a female slave increased fourfold between 1870 and 1880. The most coveted slaves were *bahuma* girls and women, and their price was higher than for the others. See Schweinfurt et al. 1888, 116-117; Twaddle 1993, 34-35; Reid 2002, 166-167.

²⁸ Felkin 1885-86, 746; Reid 2002, 36-38; Médard 2001, 171-172.

²⁹ There is little evidence to relate the food shortages of the 1880s directly to a loss of labour because of slave raiding, however, since Buganda was afflicted by drought and war. Still, contrary to Tosh (1970, 115-116), Reid (2002, 164-165) and Médard (2001, 176-178, 180, 202-205) see slave raiding as having caused significant depopulation and having destroyed the economy and the old

and slaves also made it impossible to maintain external and internal peace, as these goods increasingly needed to be obtained by violent means. On the other hand, the maintenance of trading connections and partners required peaceful conditions. Therefore, the nature of the ivory and slave trade corroded the basis for large-scale trading and economic development by preventing the growth of real markets. Nevertheless, there were small, well-functioning local markets in border areas and in the capital, under nominal royal control. These markets worked to the detriment of the old economic and political system, however. Royal attempts to control and regulate trading in the vicinity of the capital were frustrated as the number of foreigners grew, and the demand for local goods and services increased. On the other hand, it was precisely the control over the redistribution and exchange of produce and services that lay at the core of economic and political power in Buganda, for if the *kabaka* were to lose control over the markets and re-distribution, he would also lose control over his chiefs and his people.³⁰

Thus, Buganda's economy was in a state of severe crisis by the end of the 1880s, and its decline had become a source political unrest, rivalry and external and internal insecurity. The gap between the chiefs and the peasantry was growing wider, and the latter were increasingly being exploited for benefit of the elite. After 1890 Buganda's role in lake commerce collapsed, and the remnants of its economic and military power were destroyed in a bloody civil war. Though this war was fought under a religious guise, it was in reality, as noted by one missionary, a matter of rivalry over the remnants of economic and political power in the kingdom.³¹

Slave raiding was also a problem in Bunyoro. The Sudanese slavers had been draining the population from the northern parts of the kingdom since the mid-nineteenth century, and it was also frequently raided by the Baganda in the 1880s. The kingdom had been a source of slaves for Buganda at least from 1850s onwards, and the population losses may have been significant.³² There is little evidence of the Banyoro themselves trading in slaves, although this undoubtedly took place,³³ but it seems that the major participation in long-distance trade was through ivory, of which the kingdom possessed a large supply. Emin Pasha reported on the growing commercial activity in Bunyoro once connections had been established with the coastal traders.³⁴

redistribution system as peasants became mere objects of exploitation.

³⁰ Médard 2001, 174-175, 205. As Reid (2002, 158-159) has noted, although all trade in the kingdom was said to be in royal control, this 'control' was of little significance outside the capital.

³¹ *Church Missionary Intelligencer & Record* 17 1892, 682.

³² Tosh 1970, 115; Reid 2002, 204; Doyle 2000, 434-435.

³³ See Baker 1874, Vol. II, 298-209, 212, 214. Bunyoro apparently took advantage of the internal strife in Buganda in 1890 and raided its borderlands for slaves, thus contributing to the utter destruction of the prosperous Singo area. *Church Missionary Intelligencer & Record* (New series) 16 1891, 274.

³⁴ Schweinfurt et al. 1888, 116-118.

Despite widespread drought in the 1880s, there is no evidence of a famine in Bunyoro at that time. As Doyle has noted, the 1880s were seen as prosperous times compared with earlier decades. This prosperity resulted from increased trade and internal stability, and from the royal order to create and maintain food reserves.³⁵ Yet there existed sources of economic insecurity as well. The growth in royal power and the administrative and military changes meant that increased tribute payments were being demanded, trading was taxed, and it seems that clientship had become more exploitative. Bazaara has argued that 'over-taxation' in the pre-colonial period was impossible since it would have led to peasant revolts, which would have been difficult to suppress since the army was recruited from the peasantry.³⁶ The establishment of the *abarusura*, however, seems to have changed the situation radically in this respect, and participation in the slave trade probably likewise encouraged over-exploitation of the peasantry, thus eroding the trust between the chiefs and their subjects. Furthermore, Kabalega's reorganization of the administration meant that many Babito and *bahuma*, who had opposed him, migrated south to Nkore to seek refuge and probably took significant numbers of cattle with them,³⁷ which must have reduced the amount of tribute paid by wealthy cattle owners and increased the tribute burden on the peasantry. Moreover, the ill-behaving *abarusura* were a cause of unrest throughout the kingdom, with their licence to plunder the countryside.³⁸ The situation apparently became much worse in the early 1890s, when the British-led Baganda forces invaded the country and sought to improve their own poor economic situation by means of war.

HEALTH, DISEASE AND DEMOGRAPHY IN THE LATE NINETEENTH CENTURY

EPIDEMIC AND ENDEMIC DISEASE

It is well-established today that the penetration of coastal ivory hunters and traders into the East African interior and the consequent opening up of new areas for commerce was responsible for the spread of some new epidemics and epizootics. The impact of these diseases has often been described as catastrophic.³⁹ To assess their real impact, i.e. whether the spread of epidemics led to serious demographic decline in the late nineteenth century as is often claimed in the literature, the diseases and their consequences, as far as they are known, must be viewed against

³⁵ Doyle 1998, 110; G.N. Uzoigwe, *Kabalega and the making of the new Kitara*. Makerere University, Department of History, 1969(?), 6, 12-13.

³⁶ Bazaara 1988, 37-38. See also Doyle 1998, 110-113.

³⁷ See Doyle 1998, 146-147.

³⁸ Uzoigwe 1970, 14.

³⁹ Gerald W. Hartwig, 'Social Consequences of Epidemic Diseases: The Nineteenth Century in Eastern Africa', in Hartwig and Patterson (eds.) 1978, 23-43; Hartwig 1979, 653-672; Jean-Pierre Chrétien, 'Démographie et écologie en Afrique orientale à la fin du XIXe siècle: une crise exceptionnelle?', *Cahiers d'Études Africaines* 28 1987, 43-59; Koponen 1988b, 655-668; Médard 2001, 72.

the demographic and health conditions prevailing earlier in the century, on which, as seen earlier, there is very limited and unreliable information.

The most vicious killer epidemics in the second half of the nineteenth century were smallpox and cholera, the former having been known in Africa already before but apparently in a less virulent endemic form.⁴⁰ Some new strains may have been introduced into the interior by ivory hunters before 1800. Smallpox appears to have ravaged Koki and also Buganda at the end of the eighteenth and beginning of the nineteenth century. By spreading along the caravan routes, it had become well-established in Buganda by 1850.⁴¹ Cholera had been introduced on the East African coast probably before the nineteenth century by Arab traders, who conveyed the disease from India to Arabia and from there to East Africa. It was introduced into Central Africa via the Nile valley and Ethiopia by traders and slavers, possibly as early as the 1820s. Of the six cholera pandemics in the nineteenth century, the ones that occurred between 1817 and 1823 and between 1863 and 1869 also affected central equatorial Africa. Hirsch mentions that cholera reached the Maasailand from Ethiopia via the Galla around 1865, during the fourth pandemic.⁴²

The emphasis placed by scholars on the demographic effects of smallpox and cholera has varied. Hartwig claims that they caused significant mortality and depopulation and were one reason behind the eagerness of the Bakerebe and other peoples around Lake Victoria to acquire a servile population in the nineteenth century, in order to maintain their numbers and their productive and reproductive capacities.⁴³ While he actually presents very little evidence of extensive population losses on account of the disease, he also tends to overlook the importance of slaves in commerce at that time. In the context of Buganda there is no evidence to indicate that slaves were acquired to replenish population losses because of epidemics, although the severity of the epidemiological crisis in Buganda, according to Médard, bears similarities to that in Bukerebe.⁴⁴

⁴⁰ Although Hartwig (1979, 664) argues that there was no indigenous strain of smallpox in the interior of East Africa, an indigenous African strain has recently been identified. Apparently the disease has very long history on the continent. See August Hirsch, *Handbuch der Historisch-Geographischen Pathologie*. Stuttgart: Ferdinand Enke 1881, 92-94; Marc H. Dawson, 'Socioeconomic Change and Disease: Smallpox in Colonial Kenya, 1880-1920', in Feierman & Janzen 1992, 90-91; Marc H. Dawson, 'Smallpox in Kenya, 1880-1920', *Soc. Sci. & Med.* 13B 1979, 245-250; Koponen 1988b, 663.

⁴¹ Hartwig 1979, 664-665; Médard 2001, 77-79; It has been suggested by Iliffe that the destructive smallpox epidemics of the nineteenth century were caused by a recently introduced and more virulent Eurasian strain, *variola major*. It is possible, however, that the strain known in the Mediterranean spread to sub-Saharan Africa between the late fifteenth and late seventeenth centuries. *Variola major* apparently caused severe epidemics on the Indian Ocean Coast in the nineteenth century and earlier, but its diffusion inland has not been convincingly demonstrated. Dawson attributes the nineteenth-century epidemic outbreaks in the interior to an indigenous African strain capable of causing high mortality during droughts and famines. See John Iliffe, *Africans. The History of the Continent*. Cambridge University Press 1995, 67, 113; Kiple, 1993, 1009-1010; Dawson 1992, 92-93.

⁴² James Christie, *Cholera Epidemics in East Africa*. London: MacMillan and Co. 1876, 97-107; Haggett 2000, 70; Hirsch 1881, 280, 285, 290-292, 298-299.

⁴³ Gerald W. Hartwig, 'Economic Consequences of Long-distance Trade in East Africa: The Disease Factor', *African Studies Review* 8 (2) 1975, 63-73; Hartwig 1978, 37-41.

⁴⁴ Médard 2001, 94.

According to Koponen, the epidemics of smallpox and cholera contributed to the high increase in crisis mortality in Tanganyika. Growing insecurity because of slaving led to changes in settlement patterns, favouring fortified nucleated villages instead of more dispersed settlement, and thus creating suitable conditions for epidemics. These spread fast in the wake of wars and famine, leading to increases in mortality and, unlike the wars and famine themselves, killing the population indiscriminately. In other words, it was no longer the fighting men, infants and young children and the old and weak who died but able-bodied men and women.⁴⁵ While this argument seems quite reasonable, it raises further questions. First, how high was this crisis mortality compared with mortality in normal times, or in times of "normal" crisis mortality, secondly, were the epidemics actually such indiscriminate killers as is assumed, and thirdly, did the general deterioration in living conditions make people more susceptible to infections and contribute to lower rates of recovery and higher mortality?

The magnitudes of the population losses caused by epidemics, especially in normal times, are impossible to assess. There are no exact figures, and the descriptions of diseases and the resulting mortality vary from occasional insignificant remarks to blatant overestimations. Baker reported the prevalence of smallpox in the Nile valley north of Bunyoro in 1862, and Wilson and Felkin noted that smallpox killed thousands in Buganda, and afflicted 'great ravages' on Bunyoro.⁴⁶ Brierley and Spear, citing missionary sources, claim that ten thousand people in Buganda succumbed to smallpox in 1884 alone.⁴⁷ In 1899 the C.M.S. doctor Albert Cook reported a smallpox outbreak in Mengo, Buganda, and described mortality as 'terrible' as the disease attacked unprotected people. A colonial medical officer writing on the same outbreak, however, found only a few dozen people reportedly infected. Other government sources reported 24 confirmed cases of infection and one death.⁴⁸

Doyle has argued that the infrequent comments on smallpox scars by early travellers in the region refer to high virulence of the disease, in that few of those infected survived.⁴⁹ This argument is based on rather scanty evidence, however, and is in contradiction with the mortality rates recorded during epidemics at a later date. Estimates of the fatality of smallpox vary, but it seems that mortality among those infected lies between nil and 30 percent, although it is possible that mortality in

⁴⁵ Koponen 1988b, 669-673. See also Chrétien 1987, 46-47.

⁴⁶ Samuel White Baker, *Albert N'Yanza, Great Basin of the Nile, and Explorations of the Nile Sources*. Vol I-II. London: Macmillan and Co 1867, Vol. I, 326; Wilson and Felkin 1882, Vol. II, 48, 183.

⁴⁷ Jean Brierley and Thomas Spear, 'Mutesa, The Missionaries, and Christian Conversion in Buganda', *IJAHS* 21 (4) 1988, 601-618, especially 609.

⁴⁸ Albert Cook to his mother, 19 April 1899. A78/Box 1/PP/COO/WTL; A.D.P Hodges' Uganda diary, 20 - 22 April 1899. MSS. Afr. s. 1782; Wilson to Berkeley, 20 April 1899. A4/16/UNA.

⁴⁹ Doyle 2000, 436. Smallpox scars would appear as small spots or patches of dyspigmentation on African skin, however. Wilson and Felkin observed that many people had white patches on their faces, legs and arms but no specific skin disease. See Wilson and Felkin 1882, Vol. I, 184.

populations weakened by malnutrition and infections may have been as high as 50 percent.⁵⁰ In any case, it seems that neither the Banyoro nor the Baganda experienced such smallpox mortality as was found in the 'virgin soil epidemics' such as that among the Australian aborigines, where the first attack killed approximately one third of the population.⁵¹ According to Dawson, mortality from smallpox was higher among pastoral people whose population densities were not great enough to maintain the disease in endemic form, so that they had no immunity to the disease at all. Agricultural people, because of their higher population densities which supported the disease in endemic form, developed higher resistance to the infection.⁵² It is questionable, however, whether densities of the agricultural populations in East Africa were high enough to maintain the virus, the transmission of which required human-to-human contact, in endemic form. If they were, it would mean that the disease would attack mainly infants and children, and incoming foreigners who had no immunity.

While smallpox infection and outbreak, as noted by Dawson, are not dependent on the nutritional or health status of the individual or population, the outcome of the disease itself, i.e. whether it leads to death or recovery, is. Smallpox epidemics followed famines, not because of malnutrition but because of the social responses to famine and food shortage, and because of the characteristics of the virus. The smallpox virus does not tolerate humidity well, making it a disease of the dry season. Thus increased virulence during droughts and famines, combined with greater population mobility, favoured its spread. In this way the disease reached epidemic proportions as previously unaffected people, especially infants and children, contracted it and, weakened by malnutrition, died in greater numbers.⁵³ Thus it was the abnormal social conditions during famines that led to the infection of large numbers of people, but it was the poor nutritional status of the infected that contributed to the lower rates of recovery and higher rates of death among the infected. While it is true that smallpox infection did not discriminate, it seems that the weakest and those with no immunity had a greater risk of succumbing to it. In times of famine, then, it would most likely be the old people and infants and children- particularly those born after the previous epidemic and therefore having no immunity to the disease - who would die in greater numbers.

It is even more difficult to estimate the extent of mortality caused by cholera in Buganda, as it seems to have been confused with bubonic plague, which appeared annually between 1880 and 1900. Médard has argued that the luganda word for bubonic plague, *kawumpuli*, also referred to cholera, though it has been more

⁵⁰ Koponen 1988b, 664-665; Chrétien gives higher percentage, between 50 and 70, in unvaccinated populations, but does not present any evidence to back this assumption. See Chrétien 1987, 51.

⁵¹ Alfred W. Crosby, *Ecological Imperialism. The Biological Expansion of Europe, 900-1900*. Cambridge University Press 1986, 205-207.

⁵² Dawson 1979, 246.

⁵³ Dawson 1992, 96-97; Dawson 1979, 245-250.

frequently associated only with plague.⁵⁴ Cholera appears to have ravaged Buganda in the 1860s, the last serious epidemic occurring between 1869 and 1871.⁵⁵ After that there seems to be no reliable evidence of it.⁵⁶ There is no evidence of cholera in Bunyoro.⁵⁷ Indeed, the absence of cholera in the early colonial period suggests that the disease had already been a less frequent visitor prior to that time.⁵⁸

Thus it would seem that mortality from the 'newly' introduced epidemics in the case of Buganda was limited to the ravages of smallpox,⁵⁹ and the same can be said of Bunyoro.⁶⁰ Even then, there is no reliable evidence of mass mortality from smallpox in either Buganda or Bunyoro. Besides poor observation, this may be explained by the increase in natural immunity in the population. After the initial exposure to the disease, mortality would decline epidemic by epidemic since the number of people susceptible to it would be smaller as the survivors of the earlier epidemics would have protective immunity against the virus. New outbreaks would attack those not affected by the previous ones, such newborn infants and young children.⁶¹ Therefore, assuming that smallpox had already been introduced into

⁵⁴ Médard 2001, 73; M.A. Prentice, 'Plague', in Hall and Langlands 1975, 43. It seems, as Médard and Bennett have noted, that *kawumpuli* was a general word for pestilence, but especially associated with bubonic plague. According to Albert Cook, though plague was endemic, most cases of *kawumpuli* were actually quite ordinary fevers. See Médard 2001, 73; F.J. Bennett, 'Custom and Child Health in Buganda: V. Concepts of Disease', *Tropical and Geographical Medicine* 15 1963, 148-157, especially 150; Albert R. Cook, *A Medical Vocabulary and Phrase Book in Luganda*. Kampala & London [1903] 1921, 44; Kiwanuka 1971, 71.

⁵⁵ Speke 1863, 385; J.N.P. Davies, 'James Christie and the Cholera Epidemics of East Africa', *E. Afr. Med. J.* 36 (1) 1959b, 1-6; Médard 2001, 20.

⁵⁶ Brierley and Spear believe that cholera attacked Buganda in 1882, and Médard is also of the opinion that the disease that ravaged Buganda's capital was actually cholera and not plague. Regarding the symptoms given in his description, this is quite plausible. Other possibilities include dysentery. See Brierley and Spear 1988, 609; Henri Médard, 'La Peste et les missionnaires. Maladies et syncrétisme médical au royaume du Buganda à la fin du XIX siècle', in Karine Delaunay, Anne Hugon, Dominique Juhé-Beaulaton, Agnès Lainé, *Santé et maladie en Afrique. Histoire de la diffusion des savoirs* [forthcoming].

⁵⁷ Doyle gives controversial information, based on second-hand sources, regarding the incidence of cholera in Bunyoro, but no remarks regarding cholera in pre-colonial Bunyoro have been found in the documentary evidence. See Doyle 1998, 82; Doyle 2000, 435.

⁵⁸ *Hints as to the treatment of diarrhoea in Uganda*, C.M.S. Mengo Hospital, Sept. 1911. J.H. Cook's papers, Acc. 163/F1-2, CMS.

⁵⁹ According to Koponen, smallpox was more destructive than cholera in pre-colonial Tanzania. See Koponen 1988b, 663.

⁶⁰ See Doyle 1998, 80-83; Schweinfurt et al. 1888, 94.

⁶¹ See Crosby 1994, 65-57; Kiple 1993, 1010. The smallpox outbreak in the capital of Buganda in 1899 resulted in only about 20 reported cases. Though the real number was probably much higher, there is no evidence of exceptionally high mortality from smallpox in Buganda in the 1890s. According to Bishop Hanlon, however, infant and child mortality from the disease were high. See A.D.P Hodges' Uganda diary, 20 - 22 April 1899. MSS. Afr. s. 1782; RH.; Hanlon to Casartelli, 5 Dec. 1896. UGA/4/II/MHM.

Buganda and Bunyoro well before the 1860s, new outbreaks would affect only a limited population and cause no significant rise in long-term mortality trends. It should also be emphasized that both the Banyoro and the Baganda attempted to control the spread of smallpox. In Bunyoro sick people were isolated, and variolation against smallpox, learned from the Sudanese, was practised in the 1870s. Later the practice of inoculation was also adopted by the Baganda.⁶²

Other "new" but less fatal diseases and vermin in the nineteenth century included measles, tick-borne relapsing fever, and sand flea, or jigger. Measles had in fact been known in Africa for a long time, but like smallpox, it gained new virulence under conditions which favoured its spread.⁶³ Tick-borne relapsing fever, caused by the spiral bacteria *borrelia duttoni*, spread along the trade routes, where rest houses and other temporary dwellings used by travellers became excellent breeding grounds for blood-sucking ticks. The disease had become well-established in Uganda before 1900, and although it was rarely fatal, it caused great debility and suffering.⁶⁴ Jiggers, not spreading any disease, debilitated Africans and Europeans alike by laying their eggs under their toenails, often resulting in loss of the toes.⁶⁵

Besides the epidemics described above, health in late nineteenth-century Buganda and Bunyoro was endangered by endemic diseases such as bubonic plague, dysentery and malaria. Their severity was also enhanced by malnutrition and breakdown of the social order because of wars, refugeeism, drought and famine. In his analysis of the epidemics in Buganda, Médard names bubonic plague as one of the greatest killers in the pre-colonial period. This was probably the case, though we do not have any exact figures regarding its victims. The shores of Lake Victoria were the endemic foci of the plague, which, because of low population densities and dispersed settlement patterns, remained bubonic and less mobile, reaching the pneumatic stage only in the capital and other areas such as Buddu where the population was more dense.⁶⁶ According to Kiwanuka, the Baganda had long realized the connection between rats and the plague, and occasional rat hunts were

⁶² Felkin 1891-92, 143; Felkin 1885-86, 704; Roscoe 1923, 290; Médard 2001, 79; Dawson 1992, 97.

⁶³ K. David Patterson and Gerald W. Hartwig, 'The Disease Factor: An Introductory Overview', in Hartwig and Patterson 1978, 7-9; Dawson 1979, 245-250.

⁶⁴ See Charles M. Good, 'Man Milieu, and the Disease Factor: Tick-Borne Relapsing Fever in East Africa', in Hartwig and Patterson 1978, 47-60.

⁶⁵ European descriptions from the 1890s clearly show the high incidence of jiggers and the damage and affliction they caused. See Robert Moffat's diary 11 Dec. 1893. MSS. Afr. s. 1792/34/73, RH; Moffat to his mother, 9 April 1893. MSS. Afr. s. 1792/36/74, RH; Matthews to Rector, 5 Nov. 1895. UGA/1/A/3/MHM; Hanlon to Casartelli, 5 Dec. 1896. UGA/4/II/ MHM.

⁶⁶ Médard 2001, 73-76; Kiwanuka 1971, 150; Hanlon to Henry, 10 Oct. 1895. UGA/1/A/3/MHM Bishop Hanlon reported that there was a more virulent and lethal form of *kawumpuli* present in Buddu. See Hanlon to Casartelli, 5 Oct. 1898. UGA/4/III/MHM For the impact of settlement patterns on disease control, see Gordon Matzke, 'Settlement and sleeping sickness control - a dual threshold model of colonial and traditional methods in East Africa', *Soc. Sci. & Med.* 13D 1979, 209-214.

organized to control the disease.⁶⁷ Wars and migration from the late 1880s onwards probably made this control impossible, however. In 1889 plague broke out among some refugee Baganda Christians on an island in Lake Victoria, and the missionaries residing on the island associated it with the large congestion of people, which also favoured the spread of other epidemics.⁶⁸ Thus it seems plausible that, because of war, people frequently grouped together for refuge and greater security, and in doing so created the conditions for aerial transmission of the plague, which added to its destructiveness.

The incidence of plague and other endemic disease was highest during the rainy seasons, which were also the times of greatest food shortages. Most plague epidemics in Buganda seem to have appeared in April and September, during the peak of the rains.⁶⁹ Transmission of plague from infected wild rodents to domestic rats and eventually to people probably occurred when the wild rodents left their underground holes in order to avoid drowning and took shelter in people's granaries and huts, where they came into contact with the domestic rat population.⁷⁰ The rains also increased the incidence of malaria, as the disease-carrying mosquitoes bred when surface water became plentiful. Dysentery and diarrhoea became common as human and animal excrement was flushed into the rivers, springs and water holes. A caravan travelling from Buganda to Kikuyuland in 1899 with 5000 porters was struck by dysentery, which killed 30 percent of the porters, who had apparently been infected while drinking contaminated water. The bodies of some locals killed by a recent famine had been buried near the river where the porters drew their water, and when the rain fell, the water flushed over these bodies into the river, contaminating the supply.⁷¹

Bunyoro seems to have been largely spared from the plague. Writing in 1902, Wilson referred to epidemics of bubonic plague in Buruli and Choape in the 1890s, but the evidence is not very convincing.⁷² Instead, dysentery, diarrhoea and fevers

⁶⁷ Kiwanuka 1971, 150.

⁶⁸ *Church Missionary Intelligencer & Record* 15 1890, 618, 625.

⁶⁹ Médard 2001, 73; Hanlon to Casartelli, 21 April 1897. UGA/4/III, MHM. Soon after his arrival in Buganda, Hanlon wrote that 'The place is full of fever [and] a horrid plague is prevalent among the natives' (Hanlon to Henry, 26 Sept. 1895. UGA/1/a/2/MHM). In 1899 Albert Cook wrote about the outbreak of smallpox and plague during April though the rains had remained poor. See Albert Cook to his mother, 19 April 1899. A78/Box 1/PP/COO/WTL; Albert Cook to his mother, 11 April 1899. A78/Box 1/PP/COO/WTL

⁷⁰ C.B. Symes, 'Notes on the Epidemicity of Plague', *Kenya & E. Afr. Med. J.* 6 (12) 1930, 346-357.

⁷¹ Grant to Ternan, 16 June 1899. FO 2/202, PRO; Hanlon to Henry, 10 July 1899. UGA/2/E/1/MHM. The rainy season and bad water sometimes put even the colonial doctors' and officials' health at stake; in 1900, for instance, A.D.P. Hodges, a medical officer stationed in Busoga, became seriously ill with dysentery and diarrhoea during the rains. A.D.P Hodges' Uganda diary, 26 - 30 April 1900. MSS. Afr. s. 1782, RH.

⁷² Report on the Legends, History, and People of Unyoro, by Mr. G. Wilson, enclosed in Uganda Protectorate. Intelligence Report No. 12, April 1902. *British Documents on Foreign Affairs, Reports and Papers from the Foreign Office Confidential Print*, Part 1, Series G, Vol. 16 (hereafter

were reported to be common diseases, of which dysentery and diarrhoea can be related to the reportedly bad water supply. Malaria appears to have been common beside Lake Albert and along the Nile but less frequent in the higher parts of the country. Especially the Bugungu area in the north was considered to be highly malarious by Felkin.⁷³

The effects of famine and malnutrition on the incidence and severity of disease must have been considerable. Kiwanuka has argued that improved methods of food production brought about by the use of locally manufactured iron hoes, together with better clothing (barkcloth) and cleanliness, had reduced the incidence of epidemics in Buganda in the nineteenth century, and contributed to population growth.⁷⁴ While this may have been the case earlier in the century, it seems that the famines of the 1880s and 1890s made epidemic and endemic diseases more frequent and more lethal. People told one British official that *kawumpuli* was always worst after a period of famine, when the people were weakened by the lack of food, as in 1898 and 1899.⁷⁵ The African strain of smallpox, normally a disease of low mortality, became more frequent and severe in the wake of famines and food shortages,⁷⁶ and mortality from malaria could double during a famine, as Albert Cook at the C.M.S. Mengo Hospital found out: '...from May 1897 - April 1899 there have been 79 admissions for "fever" into our hospital with a death rate of 14%... Taking the admissions for this year only [1899], I find the death rate is 30%, a very decisive increase.'⁷⁷ Though Cook's statistics may have been inadequate for drawing broad conclusions, he nevertheless appears to have been convinced that hunger increased susceptibility to disease and heightened mortality.

CATTLE DISEASE

The late nineteenth century also witnessed an onslaught of enzootics and epizootics. Bunyoro and Buganda have frequently been labelled as cattle-rich and cattle-poor countries, respectively, mainly for ecological reasons, but there is remarkably little evidence of any significant number of cattle in Bunyoro in the second half of the nineteenth century.⁷⁸ Doyle sees this as symptomatic of increased cattle raiding by

BDFA/G). University Publications of America 1995, 228. Doyle (2000, 435) has suggested that Bunyoro was also ravaged by plague, but there is virtually no evidence of this. He also contradicts himself slightly, as in his earlier writings he was in the opinion that there were no references to plague and cholera as causing high mortality in pre-colonial and colonial Bunyoro. See Doyle 1998, 82.

⁷³ Grant 1864, 298; Moffat's diary 25 Dec. 1893. MSS. Afr. s. 1792/34/73, RH; A.B. Fisher, Bunyoro Notes, 19 March 1900. Acc. 84/F1/CMS; Felkin 1891-92, 142.

⁷⁴ Kiwanuka 1971, 150.

⁷⁵ Jackson to Salisbury, 9 Aug 1900. FO 2/299/PRO.

⁷⁶ Dawson 1994, 207-208.

⁷⁷ Albert Cook to his mother, 26 March 1899. A77/Box 1/PP/COO/WTL.

⁷⁸ Speke noted that there were few cattle to be seen in Bunyoro, while Grant, approaching Buganda via Karagwe in the south, noted that cattle were rarely seen, since people were afraid of raids.

the Sudanese slavers and by the Baganda, leading the herders to move their cattle to pastures further to the south-west, away from the insecure borderlands and the main routes used by the occasional European travellers.⁷⁹ In Buganda, because of territorial expansion and raiding, cattle were becoming more numerous in the nineteenth century, in association with the influx of *bahuma* herders. Cattle were kept on pastures in the western regions only, mainly in Singo, parts of Busiro, Mawokota, Busujju, Gomba and Buddu.⁸⁰

There is evidence that cattle numbers were checked because of the frequency of cattle disease.⁸¹ Doyle has argued convincingly that this was partly because effective pasture management was undermined by the political unrest and warfare, resulting in the spread of enzootics such as East Coast Fever and trypanosomiasis even by the 1860s.⁸² Little is known about the health of the cattle in Buganda, but there is reason to believe that the disease burden might have been considerable. Kagwa noted that among the cattle areas of Buganda, Busujju was known for its healthy pastures and absence of animal disease, although according to Reid, cattle disease, especially East Coast Fever, was already rife in Buganda in the 1870s, and the animals also suffered greatly from drought. It seems that cattle health and numbers in Buganda were declining in the 1880s adding to the prevailing economic and social crisis.⁸³

A further setback in terms of cattle health occurred in the late nineteenth century because of novel epizootics. Little is known about the incidence in Uganda of the bovine pleuropneumonia which ravaged Tanganyika, Maasailand and the Sahel region in the 1880s. It is likely that it reduced the size of the cattle herds in Buganda and Bunyoro in the early 1880s, but it did not decimate them.⁸⁴ The most devastating new epizootic, however, was rinderpest, which appears to have entered

See Speke 1863, 486; Grant 1864, 63.

⁷⁹ Doyle 1998, 70-72. See also Baker 1864, Vol. II, 221, 226.

⁸⁰ Médard 2001, 67; Roscoe 1965, 440; Baker 1874, Vol. II, 148-149; Ashe 1970, 338; Kagwa 1934, 162-166.

⁸¹ Speke 1863, 536; Baker 1864, Vol. II, 146; Baker 1874, Vol. II, 149.

⁸² Doyle 1998, 72-75. Koponen (1988a, 168-170) and Curtin et al. (1978, 138) report that cattle trypanosomiasis was known to the herders and was under control, but that ecological factors such as fluctuations in rainfall and the distribution of wild animals, which modified the habitats of the tsetse fly, could result in outbreaks of the disease in cattle. Stanley described the vicinities of Lake Albert in the late 1880s as unhealthy for cattle: 'The plains in the neighbourhood of the Lake are very fatal to the herds. In fifteen days a disease develops, with the running of nostrils; the milk dries up, the coats begin to stare, the animal refuses to eat, and dies.' Stanley 1890, Vol. II, 393-394.

⁸³ Reid 2001, 52-55; Kagwa 1934, 164-165; David Bruce noted in 1909 that East Coast Fever was highly prevalent and was killing large numbers of calves. See Bruce 1909-1911, 257-271.

⁸⁴ Koponen 1988b, 667-668; Doyle 1998, 74, fn. 90; Marcia Wright, 'East Africa 1870-1905', in Roland Oliver and G.N. Sanderson (eds.), *Cambridge History of Africa. Vol. 6, from 1870 to 1905*. Cambridge University Press 1985, 575-576; Roscoe 1923, 196-197. Waller dates the arrival of bovine pleuropneumonia in Maasailand to the second half of 1883. See Waller 1988, 75.

Uganda from the east via Kavirondo in 1890. Lugard witnessed the ravages of the disease on his way to Buganda in November and December 1890, and suspected that it might have been introduced into Kavirondo after June 1890 by an IBEAC caravan passing through the area at that time.⁸⁵ The evidence regarding the effects of rinderpest in Buganda and Bunyoro is scanty, but there is no reason to assume that it was anything less than severe. Estimates from other parts of Africa suggest that mortality among cattle tended to be as high as 95 percent.⁸⁶ According to the missionary Ashe, rinderpest swept across the whole of Buganda except for the Sese Islands, where the water seemed to have formed a natural barrier to its spread,⁸⁷ and Lugard testified in June and July 1891 to the misery, impoverishment and destitution caused by it in Toro and Nkore, in that half-starved *bahuma*, demoralized by the loss of their herds, were forced to hoe the ground in an attempt to grow food.⁸⁸

The rapid spread of rinderpest can be explained by the lack of immunity not only in cattle but also in many wild animals such as buffalo and other big game, which were likewise susceptible to the virus and quickly spread the disease. The second factor favouring its spread was drought. During the prolonged drought at the end of the 1880s, especially in 1889-90, cattle and game were forced to use the same water sources. While direct contact may otherwise have been limited, they came into contact with each other's secretions and excretions at drinking places, which effectively transmitted the disease. From the cattle, the virus spread to domestic sheep and goats, who only suffer mild symptoms with few visible signs of disease, thus forming an ideal source for further infections. Small livestock, together with surviving cattle with lifelong immunity, formed a reservoir of the disease, which was liable to break out during droughts, when the livestock and game were again forced to use the same water sources and pastures.⁸⁹

Médard has argued that the loss of cattle from rinderpest resulted in a decline in nutritional status in Buganda, which increased the incidence of disease in the 1890s.⁹⁰ There is clear evidence that the *bahuma* herders suffered considerably, and even the royalty and chiefs in Buganda and Bunyoro may have had less meat and milk in their diets. But it is unlike that the peasants of Buganda and Bunyoro suffered any serious decline in their nutritional status because of rinderpest, for meat and milk did not play an important role part in their diets.⁹¹ There is no doubt that

⁸⁵ Margery Perham (ed.), *The Diaries of Lord Lugard*, Vol. 1-3. Evanston: Northwestern University Press 1959, Vol. I, 377, 405; F.D. Lugard, *The Rise of Our East African Empire. Early Efforts in Nyasaland and Uganda*. Vol. I-II. Edinburgh and London: William Blackwood & Sons 1893, Vol. I, 356, 363. Waller is of the opinion that the disease Lugard encountered was 'almost certainly' rinderpest. See Waller 1988, 76, fn. 11.

⁸⁶ Wright 1985, 576.

⁸⁷ Ashe 1971, 27.

⁸⁸ Perham 1959, Vol. II, 222, 448.

⁸⁹ See Barrett and Rossiter 1999, 94, 100-101.

⁹⁰ Médard 2001, 67-68.

⁹¹ See Lugard 1893, Vol. I, 525-526.

rinderpest caused a great social and economic crisis among herders,⁹² but its role should be considered against the background of previous cattle epidemics and enzootics and of drought and warfare.⁹³ Cattle numbers and cattle health were already declining well before the arrival of rinderpest, which may partly explain its high virulence and destructiveness to both cattle and game. Moreover, the herds recovered quite rapidly after the initial disaster, so that cattle were numerous in Nkore in the late 1890s, whereas this was not the case in Buganda, and certainly not in Bunyoro, mainly because of the ongoing conflict and the associated cattle raiding.⁹⁴ Hunger and malnutrition undoubtedly became common during the 1890s, but not so much because of rinderpest as because of war, drought and migration, which disrupted normal food production and favoured the spread of epidemics and epizootics.

Rinderpest nevertheless led to temporary impoverishment of the wealthy sections of society. The loss of animals increased their value, placing such social institutions as marriage in danger.⁹⁵ The rise in cattle prices was undoubtedly reflected in the bridewealth payments, making marriage more expensive for the bulk of the population, a fact that may have been of some significance in terms of general fertility.⁹⁶ There is also contrasting evidence, however, as according to Koponen, bridewealth payments did not significantly increase in Tanganyika after the outbreak of rinderpest, but more likely decreased or remained at their previous level.⁹⁷ This may have reflected the importance of marriage for reproduction in society, i.e. the price of marriage was kept low in order to ensure successful reproduction even at times of crisis.

DEMOGRAPHY

The slow rate of population growth in both Buganda and Bunyoro in the second half of the nineteenth century and afterwards has been attributed to infecundity among the women as a consequence of a prolonged epidemiological crisis lasting since the early nineteenth century, and especially to the prevalence of venereal diseases.⁹⁸ While there is no rebuttal for the prevalence of a venereal infection such as gonorrhoea, and the increased prevalence of epidemics towards the end of the

⁹² Wright 1985, 576-577; Iliffe 1979, 124; Phoofolo 1993, 112-143; Waller 1988, 73-112.

⁹³ Reid 2001, 53-54.; Waller 1988, 76-77, 83-84.

⁹⁴ Richard D. Waller, 'Pastoral Poverty in Historical Perspective', in Anderson and Broch-Due 1999, 32-33; Doyle 1998, 196.

⁹⁵ Weiss 1997, 133-134; Phoofolo 1993, 118.

⁹⁶ Missionary sources tell of increasing bridewealth demands and poverty among the peasantry, so that these people were no longer able to afford wives. See Hanlon to Casartelli, 5 Dec. 1896. UGA/4/II/MHM; Letter from Hanlon, 3 Nov. 1896. UGA/1/B/4/MHM.

⁹⁷ Koponen 1988a, 314-315.

⁹⁸ Médard 2001, 95; Wrigley 1996, 237.

century, this view tends to neglect the role of endemic disease and malnutrition in causing low fertility and subfecundity, and similarly the role of economic, social and cultural determinants of fertility.

The detrimental effects of malaria and helminth infections on infant survival and female fecundity in general have already been referred to earlier.⁹⁹ Evidence suggests that infant mortality was high in Bunyoro in the 1860s, as the Banyoro told Grant that their children frequently died. Both Grant and Baker related this to poor nutrition among both infants and adults, for according to Baker, early weaning because of the short supply of mother's milk and the supplementary diet of sweet potatoes and plantains were 'detrimental' to children. Roscoe observed that, while mothers breastfed for a long time, the infant's diet was supplemented with bananas after a few months, which may have meant that the mothers were generally short of breast milk, probably because of their own poor nutritional condition. According to Baker, Banyoro men in general 'exhibited a want of muscle' and were afflicted by cutaneous diseases.¹⁰⁰ Felkin, on the other hand, reported that infant mortality was 'slight' in Buganda in the early 1880s, but miscarriages were common, being usually caused by syphilis. In his examination of 800 women the percentage of sterile individuals was less than two. Though Felkin was a qualified doctor, his results must be treated with care. Nevertheless, he made interesting observations about other factors which could inhibit female fertility and fecundity and contribute to frequency of miscarriages, for in his view the polygyny practised by the wealthy chiefs restricted the number of wives the peasants could have. Women with six or seven children were fairly common in poorer families, while the majority of women had only one or two. He also observed that the Baganda followed the taboo of post-partum abstinence, during which the husband and wife were separated until the child was weaned, usually around the age of two. The separation of spouses only took place in polygamous marriages, however, while among the 'lowest class', i.e. the peasants, who could only have one wife, the separation of husband and wife was limited to a few months. This would result in early weaning and shorter intervals between pregnancies, thus contributing to higher fertility.¹⁰¹

Polygyny has been related to rapid population growth, mainly because of its effective absorption of young females into marriage.¹⁰² This is also plausible in a historical context, as the reported influx of women and their integration into royal and chiefly households probably contributed to population growth. But there is also contradicting evidence. At least in Buganda and Bunyoro, women in polygynous

⁹⁹ See Chapters 1 and 2.

¹⁰⁰ Grant 1864, 292, 298; Baker 1873, Vol. II, 150-151; Roscoe 1966, 45.

¹⁰¹ Felkin 1885-86, 744-45. Wilson and Felkin 1882, Vol. I, 186-187. Roscoe's findings were in accordance with Felkin, though he does not comment on the number of children women usually had. See Roscoe 1965, 55-56, 59, 96; Roscoe 1922, 186; Emin Pasha was also of the opinion that Baganda women were fertile. See Schweinfurt et al. 1888, 85. For the effects of polygamy on fertility, see John C. Caldwell and Pat Caldwell, 'The Cultural Context of High Fertility in sub-Saharan Africa', *Population and Development Review* 13 (3) 1987, 409-437; Helen Chojnacka, 'Polygyny and the Rate of Population Growth', *Population Studies* 34 (1) 1980, 91-107.

¹⁰² See Chojnacka 1980, 93-97.

households seem to have had two roles: the recently married younger wives were preferred as sexual partners, their main duty being childbirth, while the older women, many of them still of reproductive age, were mostly engaged in agricultural labour. In 1862 Grant described a Muganda chief's return from a slave-hunting expedition: 'He had captured 130 women, chiefly old, and only fit for weeding the fields. Some few, fitted for wives, stood apart, to be given away to men thought deserving, or whose services were to be rewarded. Each woman of this class was worth of three cows.'¹⁰³ According to Emin, the reproductive life of women was between the ages of twelve and twenty-five. After this they were 'left fallow', and expected to work in the fields and gardens more than before.¹⁰⁴ In this way the reproductive capacity of polygyny became compromised. For peasant families with only one wife, the reproductive and productive burdens of women coincided, contributing to a tendency to 'grow old' quickly.¹⁰⁵ This together with the low age at first marriage probably contributed to the high incidence of miscarriages, prematurity, low birth weights and high infant mortality, since many women were physically either too exhausted for successful pregnancies or not mature enough.¹⁰⁶

One factor frequently overlooked in discussing fertility should be briefly addressed here, namely male fecundity. It is well-established today that malaria and trypanosomiasis, which contribute to foetal loss and abortion in women, also undermine male fecundity. The high fevers experienced in endemic malaria areas undermine sperm production, and trypanosomiasis and smallpox affect males in the same way. Likewise filariasis, involving a common parasite transmitted by mosquitoes, causes swellings of the scrotum, or elephantiasis, and infecundity. Little is known about the impact of venereal infections such as gonorrhoea on male fecundity, but it seems that it may have negative effects. On the other hand, a relation between tuberculosis and infecundity has been well established, affecting both men and women.¹⁰⁷

Many questions about the nature of the alleged subfecundity of women remain unanswered. It would be interesting, for example, to know about the relation between primary and secondary infertility¹⁰⁸, i.e. between inability to give birth to

¹⁰³ Grant 1864, 230.

¹⁰⁴ Schweinfurt et al. 1888, 84-85.

¹⁰⁵ Felkin 1885-86, 744-745; Ashe 1970, 288.

¹⁰⁶ See Meillassoux 1981, 38; Ellison 2001, 225-226.

¹⁰⁷ See *Family Planning Methods and Practice: Africa*. U.S. Department of Health and Human Services. Center for Disease Control and Prevention. Second edition, Atlanta 1999, 162-163; Abate Mammo & S. Philip Morgan, 'Childlessness in Rural Ethiopia', *Population and Development Review* 12 (3) 1986, 533-546; Alice Rhoton-Vlasak, 'Infections and Infertility', *Primary Care Update for OB/GYNs* 7 (5) 2000, 200-206; Roberta B. Ness, Nina Markovic, Catherine L. Carlson and Michael T. Coughlin, 'Do men become infertile after having sexually transmitted urethritis? An epidemiologic examination', *Fertility and Sterility* 68 (2) 1997, 205-213; Kiple 1993, 1009. *Filaria perstans* infections were extremely common on the northern shores of Lake Victoria. See A.D.P Hodges' diary, 25 Feb 1902. MSS. Afr. s. 1782, RH.

¹⁰⁸ By infertility we mean the inability of a woman to give birth to a live child. See Odile Frank, 'Infertility in sub-Saharan Africa: Estimates and Implications', *Population and Development Review* 9

any children and infertility or sterility occurring after one or more births. It may be speculated that if primary infertility was more common, the role of venereal disease as a cause of infertility could largely be ruled out. In cases of secondary infertility, other factors besides venereal infections might be at work, some of them social, economic and cultural.¹⁰⁹ Doyle has argued that infertility itself was behind the increase in polygamous marriage. He refers to Roscoe, who saw that the cattle herding *bahuma*, known to be largely monogamous, were acquiring additional wives in the second half of the nineteenth century. A more probable reason for this, however, may have been their impoverishment, for as they were increasingly losing their cattle to drought, disease and raiding, their livelihood became threatened and they were forced to settle down and cultivate the land. This would have required more labour, and would thus have favoured a polygynous marriage pattern.¹¹⁰ Moreover, as already referred to in the context of slavery and servitude, it was common for families to redistribute their offspring within the kin group in order to balance the ratio of producers and non-producers in individual households. This practice tended to draw children away from the smaller households to the larger ones, which had a greater capacity for food production. The Europeans may have misinterpreted the small number of children in peasant households as a sign of low fertility, which was not necessarily the case.

THE AGGREGATE DEMOGRAPHIC IMPACT OF WAR, FAMINE AND DISEASE

Estimates of population losses on account of slave raiding, famine, disease and warfare in eastern Africa from the 1890s onwards vary. Dawson claims that the Kikuyu suffered a 25 percent loss of population in the late 1890s because of famine and disease, which is close to Kuczynski's estimate of 30 percent for the same period.¹¹¹ In general, mortality in various parts of Kenya, as analysed by Kuczynski from information supplied by his informants, varied between 25 and 50 percent and was mainly due to famine and disease, especially smallpox.¹¹² On the other hand, it should be noted that crisis mortality, especially during famines, was highest among the weakest, i.e. the youngest children, the elderly and the poor,¹¹³ so that the productive and reproductive capacity of communities was not necessarily undermined by population loss of this kind.

(1) 1983, 137-144, especially 143 en. 1.

¹⁰⁹ Médard (2001, 85) claims that Baganda women were discouraged from having children because they fancied and imitated the lifestyle and the rather free sexual morals of royal women. This appears to be unlikely, however, in a culture where female dignity in general was dependent on the ability to reproduce.

¹¹⁰ Roscoe 1923, 7, 12, 178; Ashe 1970, 339; See also Oberg 1938, 129-159.

¹¹¹ Dawson 1994, 210-211; Kuczynski 1977, Vol. II, 198.

¹¹² Kuczynski 1977, Vol. II, 196-197.

¹¹³ Turshen 1994, 188; Hartwig 1979, 669.

As far as Buganda and Bunyoro before the extension of the Protectorate over Bunyoro, Busoga, Nkore and Toro in 1896 are concerned, there is no convincing evidence of any serious population loss on account of external or internal warfare, famine, or epidemics. According to Kuczynski and Médard, contemporaries in Buganda frequently overestimated the mortality caused by external and internal warfare.¹¹⁴ Before the 1890s population losses through external warfare were probably insignificant in both Buganda and Bunyoro, though the increased use of firearms probably yielded higher number of casualties. Internal warfare in the 1890s increased mortality relative to previous wars, but not significantly.¹¹⁵ The civil war proved much more destructive, however, not only because of the great number of casualties in the battles, but because of the collapse of the social order, the refugee problem and the resulting food shortages and epidemics. This was especially true between 1897 and 1900, when the colonial wars combined with recurrent droughts and famines to increase mortality and emigration.¹¹⁶ The colonial conquest in Bunyoro between 1894 and 1899 caused even worse disruption in this respect.¹¹⁷

It is difficult to estimate the balance between imports and exports of slaves, but there is some evidence that the slave trade reduced the servile population in Buganda.¹¹⁸ Bunyoro also suffered from increased slave raiding by the Baganda in the 1880s, and by the Sudanese until about 1883, but it is impossible to assess the population losses involved.

In terms of disease, if it had not been for war, the collapse of social order and the resulting migration and famine, the new epidemics and epizootics would probably have had less severe consequences. As it is, their role in the population losses suffered before the late 1890s should not be overestimated. Cholera killed mainly the poor, and smallpox was most destructive in the wake of famines. Considering disease mortality, the evidence cited does not permit us to conclude that the epidemics of smallpox and cholera had catastrophic impact in this sense. Contemporary estimates may be misleading, and the depopulation related to war and disease may have largely been caused by migration and the seeking of refuge.¹¹⁹

Despite the political, economic and social crisis that resulted in increased morbidity and mortality, Buganda still remained one of the most densely populated regions of interlacustrine Africa. Bunyoro lost population in 1894, when a large area of its heartlands was transferred to Buganda and Toro was made an "independent" kingdom under British protection.¹²⁰ According to Kuczynski, the population of

¹¹⁴ Kuczynski 1977, Vol. II, 314-319; Médard 2001, 87, 92.

¹¹⁵ Médard 2001, 87-90.

¹¹⁶ Médard 2001, 90-91; Kuczynski 1977, Vol. II, 315.

¹¹⁷ See Doyle 1998, 189-199.

¹¹⁸ See Felkin 1885-86, 746. Accepting the estimate presented by both Reid and Médard, based on missionary accounts, that 2000 slaves were exported annually during the 1880s, this would place the total number during the given decade at 20 000. See Reid 2002, 164; Médard 2001, 92.

¹¹⁹ See Médard 2001, 91; Doyle 1998, 191-192; Kuczynski 1977, Vol. II, 318-319.

¹²⁰ Médard 2001, 96; Doyle 1998 179-180.

Buganda in the late 1890s was between 400 000 and 1 500 000. Estimates regarding Bunyoro are, if possible, based on even more unreliable data, but it seems that the population at that time was less than that of Buganda.¹²¹

To conclude, it appears that the role of new epidemic diseases in the increase in mortality was limited, while the role of endemic disease may have been greater than has previously been assumed. Internal warfare paved the way for disease, which preyed especially on infant and children. It may be argued that the concurrent famines made epidemics more destructive in terms of mortality, and vice versa. Cattle disease contributed to the prevalence of malnutrition and led to serious impoverishment especially among the *bahuma*. In the chaotic conditions of war, famine and disease, people did the only rational thing there was to do - they escaped. Thus migration probably played a substantial role in the depopulation witnessed by contemporaries. Although the increased mobility may have favoured the spread of epidemics, isolation of the sick might have effectively curbed epidemics among the migrants. On the other hand, migration often exposed people to hunger and unhealthy environments, and both refugees and other people at times of drought are likely to draw their water from contaminated springs and waterholes, causing dysentery and diarrhoea. It seems, therefore, that the greatest and most far reaching demographic effect of slave raiding, war, famine and disease in the late nineteenth century was the decline in fertility on account of prolonged nutritional deprivation, refugeeism, impoverishment, disruptions in social and family life and increased infant and child mortality because of malnutrition and endemic and epidemic disease.

THE CRISIS OF SOCIAL REPRODUCTION

CLIENTAGE, TRIBUTE AND SLAVERY

It seems that the institution of clientship was caught up in a crisis in the second half of the nineteenth century. In the midst of the struggle over economic and political spoils, the solidarity of patrons may have been limited to their kinsmen and other people of vital importance. There are numerous descriptions of how peasants in Buganda were ripped off by their superiors, including the king's officials, i.e. *batongole*, and how people occasionally attempted to resist the forced confiscation of their property.¹²² The abuse of the tax and labour system by *kabaka* Mwangwa was one reason behind his growing unpopularity among the chiefs and the *bakopi* in the late 1880s, eventually contributing to his dethronement,¹²³ and there is evidence of 'mischievous' overtaxing of the peasantry by their chiefs at the end of the nineteenth century.¹²⁴ According to Portal, the chiefs did not act as benefactors with respect to their people:

¹²¹ Kuczynski 1977, vol. II 235-237.

¹²² Grant 1864, 241; Schweinfurt et al. 1888, 41, 44; Wilson and Felkin 1882, Vol. II, 28-29.

¹²³ *Church Missionary Intelligencer & Record* (new series) 14 1889, 150; Ashe 1971, 90-91; Kiwanuka 1971, 198-201; Reid 1996, 268-269. The fact that Mwangwa humiliated and mistreated some respectful chiefs nevertheless contributed more to his downfall than his abuse of the peasants.

¹²⁴ Wilson to Berkeley, 18 Jan. 1899. A4/15/UNA; Portal 1894, 192-194.

'[After appointment to an office] ... two qualities are simultaneously developed in the new chief, which are universal among his colleagues, and common equally to the highest and to the lowest of the fraternity. The first of these is that from the moment of his appointment he ceases to do a single stroke of work of any sort or kind himself, and the second is that he forthwith lays himself out to beat, rob, maltreat, and oppress the wretched peasantry or *bakopi* by every means in his power.'¹²⁵

Portal made his observation at a time when the politico-religious differences in Buganda were most pronounced, and undoubtedly some of the maltreatment witnessed by him was because of changes in administrative structures in the kingdom (see the discussion below about land). In general, as Reid has argued, the absence of peasant revolts in pre-colonial Buganda seems to indicate that the tribute system was not too oppressive before the late 1880s.¹²⁶ However, as Mafeje has noted, clientage by its very nature was - or was liable to become - exploitative and non-redistributive, and labour as a form of tribute was actually forced labour.¹²⁷ It likewise appears that the lot of the peasants in Buganda grew worse during the nineteenth century with the growth and intensification of long-distance trade, which deprived them of their additional source of labour, namely domestic slaves, while at the same time increasing the demand for agricultural produce to support the increased numbers of chiefs, military, artisans, traders, missionaries and unskilled labourers. It also seems that the centralisation of the administration in Bunyoro and the creation of the *abarusura* altered the nature of clientship from reciprocity towards exploitation.¹²⁸

The increased western religious and political influence in Buganda worked to undermine the old system of social reproduction. Slavery, the abolition of which had for a long time been at the top of the westerners' political and religious agenda, was in many ways a cornerstone of economic and social life in many African societies, including those of Buganda and Bunyoro. The nature of slavery in Buganda and Bunyoro was not easily understood by contemporary observers who tended to regard clientship and pawnship as forms of slavery as well.¹²⁹ The difference between a slave and a free man, however, lay in the fact that the former had no ties with his or her kin, or that his or her kin had voluntarily given up all the rights over the person to the new master's kin, as a means of settling a debts, for example. Sometimes whole families ended up in servitude and slavery this way. Any peasant, if indebted, was liable to lose his children and wives as pawns, or even slaves, and if they were

¹²⁵ Portal 1894, 192.

¹²⁶ Reid 2002, 99.

¹²⁷ Mafeje 1998, 118-122. Gerald Portal also described the labour system as forced labour. See Portal 1894, 192-193.

¹²⁸ Doyle 1998, 111-112.

¹²⁹ Berkeley to Salisbury, 27 March 1896. FO 2/112/PRO.

not enough, he could lose his own freedom, too. Most of the slaves in Buganda and Bunyoro were foreigners, however, captured from the neighbouring peoples in wars. Thus the slave population in Buganda mostly consisted of Banyoro, Basoga and Bakoki, who gradually became assimilated into the Baganda society.¹³⁰

Twaddle has pointed out how past historians have tended to treat the civil wars in Buganda as religiously motivated, disregarding their wider sociological and economic motives.¹³¹ These wars, as noted earlier, were mainly fought over the ownership of the crucial resources of land and people, and therefore their impact in terms of social reproduction should be considered. The internal taking of slaves appears to have been a feature of political and economic life in Buganda for a long time, often passing as the forcible collection of tributes, or as a punishment for disobedience. Evidence suggests that with the erosion of Buganda's military and economic power in the late nineteenth century, internal slaving became more common. In 1887 and 1888 *kabaka* Mwanga's collecting of tributes had reached proportions of outright robbery and direct enslavement, in that cattle, women and children were carried off forcefully to be redistributed to pay the king's loyal followers.¹³² Internal slave raiding was similarly common during the fighting between Protestants, Catholics and Muslims between 1888 and 1892, so that members of a defeated party - especially the women and children - were taken into slavery. After the 1892 Battle of Mengo and the defeat of the Catholic party, for instance, the triumphant Protestants were quick to enslave their Catholic war captives.¹³³

The persistent enslaving was naturally contradictory to the ideals of the missionaries as well as to the official policy of the British. After the proclamation of the Protectorate over Buganda in 1893-94, the British did not allow the Christian chiefs to acquire any more slaves, although they were allowed to keep the slaves they already had in their possession, and the Protestant chiefs, under pressure from the C.M.S. missionaries, abolished slavery among themselves in 1893. The Catholics were opposed to abolition, however, and it seems that the prohibition was not very effective on the Protestant side either. Thus when slaving inside Buganda decreased with the cessation of open hostilities between the religious parties and because of the growing British influence, slaves were imported from Bunyoro, where the British-led Sudanese and Baganda forces were fighting against Kabalega. These imports of Banyoro slaves were allowed to continue unchecked at first, but they soon allegedly reached such proportions that the British had to consider sanctions against the leading Baganda chiefs to put an end to the practice.¹³⁴

¹³⁰ Twaddle 1988a, 121; Michael Twaddle 'The Ending of Slavery in Buganda', in Suzanne Miers and Richard Roberts (eds.), *The End of Slavery in Africa*. Madison: University of Wisconsin Press 1988b, 121-124; Nyakatura 1970, 37-38; Lugard 1893, Vol. 1, 172-173; Ashe 1970, 96-97.

¹³¹ Twaddle 1988a, 121.

¹³² Ashe 1971, 90-93; Reid 2002, 111, 118-119.

¹³³ Captain Macdonald's Report on Uganda Disturbances of 1892, s.d. 1893. A1/1/UNA; Pulteney to Acting Commissioner, 21 June 1895. A4/1/UNA; Kiwanuka 1971, 233.

¹³⁴ Twaddle 1988a, 125; Twaddle 1988b, 129-131; Treaty between H.E. Colonel Colville and Mwanga, King of Uganda, 27 Aug. 1894. FO 2/72/PRO; Letters from Cunningham to the

The British, including colonial officials as well as missionaries, understood that slavery and servitude could not be terminated overnight. The functioning of the military and general administration was dependent on the existence of servile labour, and the missionary societies themselves, both Catholic and Protestant, had acquired slaves in effect, for it was common for the missions to 'redeem' slaves by buying them or accepting them as gifts in order to make them into converts and use them as a viable work force. Captain Lugard, commanding the IBEAC forces in Buganda between 1890 and 1892, strongly criticized this purchase and acceptance of children - mainly boys - by the missions.¹³⁵

The ambiguity shown by the Europeans towards slavery in nineteenth century Buganda is well represented in the writings of Lugard. In principle, slavery was unacceptable, but Lugard clearly made the difference between slave raiding and slave exports on the one hand and what he called 'domestic slavery' on the other. By 1890 the Christian Baganda chiefs were well aware that slavery was against the principles of the Christian faith. Yet they had convinced Lugard that abolition of the system would be catastrophic for the country.¹³⁶ Therefore, the efforts of the British were directed towards abolition of the slave trade, which, according to Lugard, meant 'forcible exportation of human beings, male or female, from their own country for sale or forced labour.'¹³⁷ This, in Lugard's opinion, was different from forced labour undertaken by the *bakopi* under their chiefs, for example, or the buying of women as wives, according to the customs of the country. In explaining the purchase of a Muganda girl by one of his soldiers, he outlined the difference between the slave trade and domestic slavery:

If they are to have women it is better that they should get them by a fair arrangement than that they should violate them by force... I look on the hire or *purchase* (if it must be so called) of a woman for a certain purpose as a question of morals... Slavery is a different matter, and in the case of women doubtless the two come very near together, and one must look with [a] clear eye to distinguish [them]. No-one would say that the sale of slaves took place in London and Paris, yet women are literally bought in the same way for a certain purpose... The procuring of a woman as a concubine in her own country (even tho' for payment), and with her own or her parents' consent, may be better or worse than the slave trade, *but it is a different thing.*¹³⁸

Commissioner, 17 May 1895. A4/1/UNA; Letter from Cunningham, 25 June 1895. A4/1/UNA.

¹³⁵ Lugard 1893, Vol. 2, 55-59; Ashe 1970, 98-99.

¹³⁶ Lugard 1893, Vol. 1, 171. The Germans encountered similar problems in Tanganyika, where it was argued that the abolition of domestic slavery would bring agricultural production to a halt and undermine the economy. See Juhani Koponen, *Development for Exploitation. German colonial policies in Mainland Tanzania, 1884-1914*. Helsinki/Hamburg: Finnish Historical Society/Lit Verlag 1994, 331.

¹³⁷ Perham 1959, Vol. 2, 59.

¹³⁸ Perham 1959, Vol. 2, 59-60.

Control over slave trafficking outside Buganda proved difficult. Slaves from northern Busoga were exported to Bunyoro and Lango, and there were said to be a large number of Basoga women and children in Bunyoro.¹³⁹ This trade was probably of ancient origin, allowing the more populous but iron-poor chiefdoms of Busoga to trade with the iron-rich but sparsely populated kingdom of Bunyoro. Also, the Baganda chiefs kept importing slaves from Busoga. It seems that since the chiefs were allowed to continue their collection of tribute in Busoga until as late as 1899, Basoga women and children continued to flow into Buganda as slaves, probably in secrecy, in addition to the war captives imported from Bunyoro.¹⁴⁰ It appears, however, that attempts to check the external slave trade were more successful than the attempts to prevent domestic slavery.¹⁴¹

Internal slaving in Buganda erupted again during Mwanga's uprising and the Sudanese rebellion of 1897 and 1898. Bishop Hanlon described conditions in the country during the unrest as follows:

'Great numbers of natives abandon a place when the chiefs, their natural protectors, are called away to fight [and] the province being left without sufficient protection becomes the prey of the nearest neighbours who pillage the village, burn the huts [and] carry off the women [and] children... Doubtless many of [those] who have migrated will return when the peace is restored; but how many are already in slavery... The matter will simply be let pass as a series of those events "that happen, don't you know".'¹⁴²

Although internal slaving on a large scale ended with the cessation of violence, domestic slavery itself prevailed. There was no mass emancipation of domestic slaves and servants in Buganda, for many freed slaves - especially elderly people - were reluctant to leave their masters, and it appears that many were taken as wives, either voluntarily or involuntarily. Similarly, those who were emancipated by the Christian and Muslim chiefs still enjoyed inferior status in society, and slaves freed by the Government or by the missionaries, referred to as '*mateka*', were looked down on by freemen and other emancipated slaves alike.¹⁴³ Generally, it appears that much

¹³⁹ Grant to Jackson, 17 June 1895. A4/1/UNA. The price of a Musoga woman in the mid-1890s varied between 30 and 60 iron hoes.

¹⁴⁰ Grant to Colville, 16 Dec. 1894. A2/3/UNA; Wilson to Acting Commissioner, 5 Jan. 1895. A4/1/UNA; Grant to Jackson, 17 June 1895. A4/1/UNA; Ternan to Salisbury, 16 Sept. 1899. FO 2/204/PRO.

¹⁴¹ For similar developments in Tanganyika, see Koponen 1994, 198-201.

¹⁴² Hanlon to Casartelli, 16 May 1898. UGA/4/III/MHM.

¹⁴³ Berkeley to Salisbury, 27 March 1896. FO 2/462/PRO; Johnston to Salisbury, 17 Feb 1900. FO 2/298/PRO; Koponen 1994, 333. Many women involved in the court cases taken to the *Lukiko* (a legislative council established in 1900) were referred to as 'slave women'. This indicates that they had either stayed voluntarily with their former masters after emancipation, or had been made to stay by force. See, for example, Nsambya Diary, I Sept. 1902. UGA/5/A/11/MHM; Nsambya Diary, 7 Nov. 1902. UGA/5/A/12/MHM.

of the work done for the sake of abolition was political in nature, a sort of a public relations campaign. In practise the system of slavery continued well into the colonial period, underlining its importance for the internal dynamics of the societies concerned, and for the nascent colonial administration.¹⁴⁴

POLYGYNY

Another factor working to undermine the productive and reproductive core of society was the Christian denial of polygynous marriage. Together with the attempts to abolish slavery, the demonizing of polygamy threatened the economic and political power of the chiefs in Buganda. The continuation of domestic slavery, with a reduced but still continuing inflow of women from Bunyoro and Busoga, enabled the chiefs in Buganda to replenish their harems and to adhere to the ideal of polygynous marriage. It is probable, however, that the restrictions on slavery and the Christian demand for monogamous marriage disturbed the circulation of women from elder to younger men. As the external supply of women became limited, and as the slave trade and the benefits received from it came to an end, excessive women could either be divorced, set free according to Christian principles, or kept in stock as concubines with a reduced exchange value. It seems that most of the Baganda chiefs chose the latter option regardless of their religious orientation. At any rate, monogamy was not welcomed, since it would have meant losing control over the women and thus a weakening in the chiefs' political, social and economic control over their subjects.¹⁴⁵ Monogamous marriage was not only objected to by the chiefs, but it was disliked because it hampered the production capacity of households. The burden of work for women in monogamous marriages became extremely heavy, making marriage undesirable for the women, since they were reduced to the capacity of 'slaves' and prisoners of their husbands even more than before.¹⁴⁶ Considering the abolition of slavery and the reduced number of people in domestic service, especially women, this argument appears quite valid. It therefore seems that, as there was no mass emancipation of domestic slaves, neither was there any mass divorce or emancipation of additional wives. Instead, in order to keep their female slaves, many chiefs were likely to take them as wives or concubines.

Many young men were apparently prevented from marrying because of the increased price. Seniors and elders, obtaining rights over their daughters, concubines and servants, realized that the demand for women would decrease because of the end of the slave trade and the propagation of monogamy, and that prospective bridewealth payments might decline. Therefore they began requesting a higher

¹⁴⁴ Twaddle 1988b, 134-137; Berkeley to Salisbury, 27 March 1896. FO 2/112/PRO; Ormsby to Sub-Commissioner, Central Province, 2 Feb. 1905. A8/6/UNA; van Tern to Rector, 26 Jan. 1901. UGA/2/1901/MHM; van Tern to Rector, 12 April 1901. UGA/2/1901/MHM; Echo from Africa: Material Famine - Spiritual Harvest by Fr. Willemen, undated 1918. PER 1912/345/1/Willemen/MHM.

¹⁴⁵ *Kabaka* Mutesa in his time, despite frequent appeals by the missionaries, refused to give up his numerous wives, since it would have undermined the 'political, social and economic order' of the kingdom. See Low 1971, 27.

¹⁴⁶ Bazaara 1988, 149; Twaddle 1988b, 139-140.

payment for each woman to be given away for marriage. By 1896, according to missionary sources, demands for bridewealth payments had risen from about 2500 to 10 000 cowrie shells, making it hard for the young men to marry unless they were willing to work for the Government as labourers to earn money, an option apparently much disliked by the men. Thus in 1901 the Buganda *Lukiko*, or legislative council, saw it necessary to limit bridewealth for the *bakopi* to 10 000 cowries in order to check any further increase in prices and to encourage marriages.¹⁴⁷

Thus the propagation of monogamy went against the interests of the chiefs, the peasants and the women, since, given the time and the circumstances, it was politically, socially and economically irrational. It is no wonder that the missionary campaign to eliminate polygyny in the early colonial period was unsuccessful. The Protestant missionaries in particular frequently lamented that their trusted people had gone back to a 'low spiritual life' by taking up polygyny again.¹⁴⁸ It is more likely, however, that instead of taking it up again, they never really forsook it in the first place.

LAND

Finally, changes in the appropriation and distribution of land in Buganda from early in 1889 onwards worked to the detriment of the old forms of social reproduction. An often cited kiganda proverb says that the chief does not rule over the land; he rules over the people.¹⁴⁹ It seems, however, that the best way to rule over people was by controlling their access to land, i.e. their means of making a livelihood. As pointed out by Médard, the authority of the chiefs, whether *bataka*, *bakungu* or *batongole*, was derived from their control over land.¹⁵⁰ Likewise, the *kabaka's* supreme authority in the kingdom was derived from his ownership of all the land, which his chiefs controlled.

The civil war between the religious parties in Buganda shuffled the control over land. When a chief, whether pagan, Muslim, Protestant or Catholic, was transferred to some other part of the country, or had to take refuge there, a large number of his followers, especially his clansmen, followed him. Those staying behind were liable to become slaves, or if they were lucky, clients of their new masters. When Mwanga had to take temporary refuge in Tanganyika in 1888, he no longer controlled the land. As royal power waned, there was insecurity about where the real political power lay, i.e. who would control the land after the king. For the

¹⁴⁷ Letter from Hanlon, 3 Nov. 1896. UGA/1/B/4/MHM; Nsambya Diary, 10 June 1901. UGA/5/A/1/MHM; Buddu District Report for Oct. 1900. A8/4/UNA.

¹⁴⁸ Roscoe to Baylis, 12 Dec. 1905. G3/A7/O/1906/20/CMS; Roscoe to Baylis, 20 April 1907. G3/A7/O/1907/103/CMS.

¹⁴⁹ 'Omwami tafuga ttaka, afuga bantu.'

¹⁵⁰ Médard 2001, 432.

chiefs, then, wars provided an opportunity to extend their lands and their political control over the people.¹⁵¹

After the defeat of the Muslim party in 1889, the Protestants and Catholics decided to share the land, political offices and proprietary estates equally among themselves. In practice, this meant that a Catholic owner of a farm, or *kibanja*, was to be under a Protestant chief, whose superior would in turn be a Catholic, and so on and vice versa. Thus, the religion of the *saza* chiefs determined to which camp each belonged. Needless to say, this principle of division spelled disaster, as the relations between the Christian parties soon deteriorated. It appears that evictions and violent seizures of land from the rival group were already commonplace by 1890.¹⁵² After the triumph of the British allied Protestants over the Catholics, land and political offices were redistributed twice, first in 1892 and again in 1893. *Kabaka* Mwanga's treaties of 1890 and 1892 with the IBEAC had already given the British virtual control over the land in Buganda, although the later official agreements, including that declaring the Protectorate in 1894, said nothing about land.¹⁵³ The British, mainly Lugard, Portal and Colville, attempted to give equal shares of land and political offices to the Protestants and the Catholics, the latter taking refuge mainly in the southern parts of the kingdom, but in their attempt to restore unity and peace in the country and ease the tension between the Christian parties, they disregarded the Muslims, who lost their shares of the fertile lands mostly to the Catholics in 1893.¹⁵⁴ By 1894, much of the most populous and fertile land was under Protestant *saza* chiefs, while the Catholics were given the *sazas* of Busujju, Mawokota, Buwekula and Buddu. The Catholics and the Muslims, comprising the largest part of the population, were subjected to the rule of the Protestant minority. This division of land and power had long-term consequences when the land was later re-distributed for private ownership according to the Buganda Agreement of 1900. The Protestants had won the power struggle, but their power was achieved and maintained only with the support of British arms.¹⁵⁵

The early colonial administrators in Uganda were also concerned about securing and allocating adequate land for Europeans for the future development of the Protectorate. The idea was to give the leading chiefs in Buganda large personal estates to make them concede the European land claims. It was felt that European settlers and planters would bring about rapid development and make the Protectorate financially self-sustaining in no time. The chiefs, after hearing from the British officials that the proposed 'joint proprietorship' would guarantee them absolute security of tenure, were seemingly cooperative. The leading Catholic and Protestant

¹⁵¹ Lucy Mair, 'Baganda Land Tenure', *Africa* 6(2) 1933, 187-205, especially 198.

¹⁵² L.L. Kato, 'Government Land Policy in Uganda: 1889 to 1900', *Uganda Journal* 35 (2) 1971, 153-160, especially, 153-154; Jørgensen 1981, 48.

¹⁵³ H.W. West, *Land Policy in Buganda*. Cambridge University Press 1972, 15.

¹⁵⁴ Low and Pratt 1960, 6-12; Low 1970, 36-38; Mukwaya 1953, 5-6; Médard 2001, 412-417; West 1972, 15.

¹⁵⁵ West 1972, 15; Rowe 1964, 1-13, especially 1-5; Médard 2001, 412-415, 507-538.

chiefs, realizing that private proprietorship would secure their power, welcomed the British ideas, and were already acquiring large estates for their personal use by 1899.¹⁵⁶

The European ideological influence before 1900 was insignificant in Bunyoro by comparison with that in Buganda. The kingdom was not subjected to the western ideas of monogamy and the abolition of slavery, since the first missionaries entered the kingdom only at the end of the 1890s. For this reason an analysis of the above kind would be impossible. We do not have the necessary sources telling about the clash of indigenous ideas and culture with Christianity and Western values. This is because Bunyoro was treated as a hostile nation by the British, and subjected to a ruthless military campaign by the British and the Baganda for several years. This led to the eclipse of the monarchy, erosion of the authority of the *banyoro* chiefs and dismemberment of the kingdom, bringing famine, disease, enslavement, loss of property, impoverishment and demoralization to the whole nation. The amount of violence experienced by the Banyoro in the hands of the British and the Baganda goes unsurpassed in the history of late nineteenth century East Africa.¹⁵⁷

THE LATE NINETEENTH CENTURY: RECAPITULATION

Before the mid-1800 the differences in wealth between the elite and the peasants in Buganda and Bunyoro were quantitative more than qualitative. Differences in quantity nevertheless tend to produce differences in quality, and when the opportunities for greater enrichment appeared with long-distance trade, the elites did not hesitate to seize the opportunity to indulge in the 'pragmatic hedonism' which their material and political status permitted. It is evident that the economic effects of long-distance trade were more disastrous to Buganda than to Bunyoro. The slave trade caused an economic and social crisis which culminated in a decline in food production and frequent famines in the 1880s, followed by the civil war, which naturally made the situation worse. The corrosion of the moral economy shattered the systems of re-distribution and social reproduction. In Bunyoro, the reign of Kabalega brought more peaceful times internally as dynastic struggles became less frequent, although the centralisation of power placed unavoidable restraints on the peasantry. Although the kingdom was growing more prosperous because of its material resources, increased commerce and territorial expansion, the Baganda aggression remained a source of insecurity.

The evidence for discussing health conditions in the late nineteenth century is fragmented and impressionistic, although when considered against the wider ecological, political, social and epidemiological background, it appears that the

¹⁵⁶ Kato 1971, 156-159; Rowe 1964, 5.

¹⁵⁷ Doyle 1998, chapter 4; A.B. Fisher, Bunyoro Notes, 4 Dec. 1899. Acc. 84/F1/CMS. While the colonial war of conquest was still raging, the British had made a deal with the Baganda to give some of the best pasture lands in Bunyoro proper, south of the river Kafu, including royal burial grounds, to Buganda. This decision, undertaken in 1894, created the "lost counties" controversy and led to strained relations between the Baganda and the Banyoro for a long time to come. Needless to say, the chiefs in Buganda struggled amongst themselves over the control of the new territory in 1894. See Berkeley to Salisbury, 14 May 1896. FO 2/112/ PRO.

benefits of the greater year-round food security brought by the newly introduced crops were partly compromised by the lack of agricultural labour, which arose partly for political reasons and later because of the economics of the slave trade. Although the numbers of slaves exported may have been insignificant, the increase in their value made them attractive items, leading to growth in the royal and chiefs' harems. Bridewealth payments rose accordingly, and, together with the disruptive effect of the slave trade on redistribution, this caused a stagnation if not a decline in overall agricultural production, as there were less women available to cultivate the peasants' gardens. At the same time, at least in the vicinity of the royal capitals, the demand for food was growing. The collapse of the redistribution system meant that peasants had fewer means of converting their primary produce to prestige goods such as the livestock required for bridewealth payments, thus presumably leading to a decline in marriages.

The attempts to abolish slavery and polygyny in the late nineteenth century, the reorganization of the land and political offices on a religious basis, the waning of royal power and the collaboration of the Protestant and Catholic elite with the British were not unconditionally accepted by the majority of the Baganda. Many felt that the foreigners had disturbed the order that had prevailed in the country by dividing the people into rival camps and inciting them to fight each other, creating unrest, suspicion and mistrust. For the whole decade of the 1890s it was not clear where the supreme authority lay. Mwangi's uprising in 1897 and the wide support he received from the Catholics and the 'pagans', showed that the Protestant party was seen as a puppet of the British, and it was therefore denounced by the majority of the people. The British and their Protestant allies used Mwangi's uprising to enthrone an infant as the new king, secure supreme power in the Protectorate and claim legitimacy for their rule. In this way they guaranteed the defeat of the monarchy without having to destroy the institution.¹⁵⁸ A distaste for Europeans prevailed, however, which focused on the Catholics and Protestants alike: 'The King [Mwangi] hates the Europeans because they stopped his gross immorality, the chiefs hate us because a Christian is expected only to have one wife [and] because no slaves are allowed, [and] the people hate us because they say they are obliged to carry loads [and] to make roads... [and] because the heathen customs are dying away.'¹⁵⁹

¹⁵⁸ Berkeley to Salisbury, 26 Jan 1897. FO 2/133, PRO; Ternan to Salisbury, 13 July 1897. FO 2/133/PRO; Ternan to Salisbury, 29 July 1897. FO 2/133/PRO; Ternan to Salisbury, 14 Aug 1897. FO 2/133/PRO; Albert Cook to his mother. 7 July 1897. A44/Box 1/PP/COO/WTL.

¹⁵⁹ Albert Cook to his mother, 12 July 1897. A44/Box 1/PP/COO/WTL.

IV Early colonial Uganda, 1900-1939

ESTABLISHMENT OF A COLONIAL ECONOMY, 1900-1918

BRITISH COLONIAL POLICY AND LAND IN BUGANDA

Britain's policy in her tropical African colonies in the late nineteenth century was characterized by economic optimism. The idea was to develop the African part of the 'great estate' for the benefit of the rulers as well as the ruled. Though many enthusiastic advocates of imperialism and colonialism saw the tropical colonies as sources of endless riches, others, particularly private investors in Britain, found the unknown and undeveloped areas quite unattractive. Contrary to West Africa, the British East African territories lacked economic potential and had been mainly annexed for strategic reasons. Developing such area as Uganda, a landlocked country with a relatively sparse population, poor communications and hostile disease environment, required enormous investments. The Mombasa - Kisumu railway, completed in 1902, reduced transportation costs, making development prospects more promising, but there was still the fear within political circles in Britain that European-propelled capitalistic development would destroy, or at least greatly transform, the indigenous cultures and ways of life, and bring about similar misery to that found among the poorest classes in industrialized Europe. Formulations of colonial policy were therefore subject to incoherent and controversial objectives stated by the advocates of British enterprise on the one hand, and by those who believed in trusteeships on the other, the latter maintaining that the colonies should be developed for the benefit of the indigenous peoples as well as the colonial power, in a way that would ensure that traditional society would largely be preserved. This ambiguity over policy aims in the early twentieth century resulted in a lack of consistency and an absence of long-term development planning. This was particularly evident in early colonial Uganda, where aims shifted with the frequent changes of Commissioners and Governors. Even the Colonial Office, though drawing general guidelines, had no means or political will to implement any long-term development strategies until the 1930s.¹

Officially, the British colonial presence started in Uganda in 1894 with the establishment of a Protectorate over Buganda, later to be extended to cover adjacent territories. The establishment of a colonial economic and administrative system, however, only began in 1900, with the Buganda Agreement, which regulated the power balance between the local rulers and the British according to the principles of indirect rule. Buganda received the status of a province inside the Protectorate, and its territorial expansion to the west was officially confirmed. Three regents, one from each religious party, were nominated to lead the Buganda government under the British during the minority of the king, Daudi. The Buganda *Lukiko*, or legislative council, was formed and manned with the *saza* chiefs and regents, thus representing mainly the chiefs and not the people.² The old forms of hierarchy

¹ Havinden and Meredith 1993, 15-18, 20-3, 71-5; M.P. Cowen & R.W. Shenton, *Doctrines of development*. London: Routledge 1996, 56; P.G. Powesland, *Economic Policy and Labour. A Study in Uganda's Economic History*. Kampala: E.A.I.S.R. 1957, 16-17; Rowe 1964, 10-11.

² See The Uganda Agreement, 1900. Memorandum on the Constitution of the Native Government of Buganda Kingdom. Makerere University Library Collections, AF 342.6761 BUG; Low 144

among the chiefs were also shuffled, reflecting the revolutionary transfer of power from the *kabaka* to the chiefs. The *batongole*, the former royal clients, suffered a serious decline in their authority, becoming the lowest class of chiefs to be officially recognized under colonial rule. They acted under village headmen, usually being responsible for parts of the *kyalo*, undertaking such unrewarding tasks as tax collecting. Their titles were often cancelled after their death, a fate that apparently also befell many holders of *obwesengeze*.³

The most striking feature of the Buganda Agreement was the establishment of a private land tenure system, or *mailo* as it came to be known, orchestrated by H.M. Special Commissioner Sir Harry Johnston and the powerful and mainly Protestant Baganda chiefs. The concept of private, inheritable land was not entirely new to the Baganda, as the creation of *obwesengeze* has shown.⁴ In the aftermath of the religious wars of 1880s and 1890s, land was reallocated according to the religious divisions, but this was done without any claim of private ownership. During the late 1890s, however, the idea of land as inheritable private property struck some of the powerful Protestant and Catholic chiefs who had been closely cooperating with the British. They started to acquire private land by direct purchases from the *kabaka* Mwanga, and by 1900 some of them were in possession of large estates. In 1900 the *bakungu* chiefs managed to convince the British to accept their individual claims over land, and the British agreed to do so in order to pacify the country and consolidate their own position, which, especially after the events of the Sudanese rebellion, was virtually dependent on the co-operation of the chiefs. The original idea of the British was to give large personal estates to a few senior chiefs in Buganda and make the rest of the land Crown Land, thus making the peasants Crown tenants. This proposal caused a serious row among the lower-ranking chiefs, who now saw that their authority over the people would be undermined if land was not also allocated to them. Furthermore, as they were expected to act as unpaid tax collectors and administrators for the colonial state, they naturally wanted compensation for their services. Thus Johnston had to give in, and the number of chiefs receiving private land was increased to include the *batongole* chiefs as well.⁵

The Buganda Agreement of 1900 distributed large personal estates to the *kabaka* and the royal family, the regents and the twenty *saza* chiefs. The three regents received 16 square miles of private land and 16 attached to their office, while the *saza* chiefs received eight square miles of personal estates each and eight square miles of official land. These official holdings were later referred to as official *mailo*. The agreement likewise gave one thousand chiefs property rights over the estates and lands they were occupying at that moment, each eight square miles in size. Because of the different interpretations of the agreement arrived at by the Baganda and the British and the fervent and ruthless land grabbing practised by the

and Pratt 1960, appendix II.

³ Southwold 1964, 215; Fallers et al. 1964, 94; Richards 1966, 63; Hanson 1997, 126-127.

⁴ See chapter 2.

⁵ See Mukwaya 1953, pp. 15-16; West 1972, 15-17; Low & Pratt 1960, 106-117; Jørgensen 1981, 49-50; Low 1965, 77-81; Rowe 1964, 4-6.

chiefs, the number of private landowners eventually rose to almost four thousand, which meant that all the best and most populous agricultural land was seized by the regents and *saza* chiefs. In many cases the sizes of their private holdings were much in excess of the area granted under the agreement, but the British were unable to limit this land grabbing and eventually had to condone it. The remaining land left over from the chiefs, the less fertile and uninhabited areas, mainly swamps, hilltops and wasteland unsuitable for cultivation, was reserved as Crown Land for the use of the colonial administration.⁶

Johnston had been afraid to contradict the claims of the Baganda chiefs, including Apolo Kagwa, the Protestant regent and *katikiro* (prime minister) of Buganda, mainly for political reasons. This and the British ignorance of *kiganda* land tenure practices enabled the powerful chiefs to seize the land they wanted. While Johnston merely believed in 1900 that he had consolidated something which had been an ancient custom of the country, it soon became evident that this was not the case. The *bataka* in particular saw that they had been ignored and by-passed in the process of allocation, and claimed that the chiefs had been stealing the traditional clan lands for their own private estates. Some of the *bataka*, mainly the senior heads of the clans, become private owners of the clan lands, while the heads of secondary and tertiary lineages saw their land seized by higher-ranking chiefs. By 1907 the British had become aware of this, and saw that the agreement had '...paid little regard to the ancient native tenures. Lands were allocated to persons in some instances which were Butaka lands belonging to others, and... .. that among the natives it was looked upon as a new order of things brought in by the British Government.'⁷ For the Baganda, then, *mailo* meant a merging of the traditional forms of land holding into single private *mailo* proprietorships, the nature of which was confirmed in the Buganda Land Law of 1908.⁸

Other groups left outside the land arrangements were the minor chiefs and *the bakopi*. In 1900, as previously, land was distributed according to religious and political divisions, with the result that 'pagan' chiefs received virtually no land. Many minor chiefs in particular experienced a decline in status relative to those who had now become landowners, and may have found that they had become tenants on another chief's estate. It also appears from Rowe that many of the chiefs who had been allocated land did not even understand the meaning of private tenure, but either refused the land offered to them or were lured into selling it cheaply to those who had a better understanding of the benefits of private proprietorship. Under the new system the *bakopi* still held their traditional occupational and cultivation rights over the new proprietors' land, and those peasants living on what were now proclaimed to be Crown Lands had similar rights to those living on private lands, with restrictions concerning the use of such produce as wood and minerals. The *bakopi* and the minor

⁶ The Uganda Agreement 1900; Mukwaya, 1953, 23; Low & Pratt 1960, 140-141; Rowe 1964, 7.

⁷ Memorandum on Land, 23 July 1907. CO 536/14/PRO. See also Hanson 1997, 118-122. For the early disputes over *butaka* lands, see C.W. Fowler to Acting Commissioner & Consul General, 16 Nov. 1904. A8/5/UNA, with enclosures.

⁸ West 1972, 42-43; Low & Pratt 1960, 127-128; Mukwaya 1953, 15-16.

chiefs had the right to purchase *mailo* land on the open market, but in practise this was not easy, for few of them had the necessary capital. Furthermore, tenants were liable to *mpalo*, traditionally labour performed for a chief, but commutable to a monetary payment (rent or tribute) called *busulu* since 1902, payable at the rate of two rupees per annum to their landlords and to hand over a certain amount of their produce as tithes (*envujjo*) for the maintenance of the chief. *Busulu*, which had originated with the landowning chiefs, was approved by the British in order to win the minor chiefs' acceptance of the land settlement and to secure their future cooperation in the colonial administration.⁹

The injustices of the *mailo* system became evident as the development of commercial agriculture proceeded. The early colonial agricultural efforts were primarily concerned with the cultivation of commercial products such as cotton, cocoa, coffee, tobacco, sugar cane and rubber. Of these, only cotton was permanently introduced into the African agricultural calendar in the early twentieth century, while the other crops were to be produced by the European and Asian planters. The encouragement of the plantation economy side by side with local producers led to an increased demand for agricultural land. The Land Law of 1908 was passed to clarify the principles of land alienation with respect to non-Africans. It prohibited selling of *mailo* land to buyers originating from outside Uganda without the permission of the *Lukiko* and the Governor. In practise, this meant that when a European or Asian planter wanted to buy land from an African landowner he first needed approval from the *Lukiko*. After this, if the Governor accepted the *Lukiko*'s decision, the Crown purchased the land and rented it to the buyer on the basis of the Crown Lands Ordinance of 1903, which granted the owner of the land full timber and mineral rights.¹⁰ The planters, whom the colonial administration trusted to make the colony economically productive, were eager to acquire land, and between 1911 and 1913 the price of land rose from 4 rupees (Rs.) to 20 rupees per acre.¹¹ The wealthier Baganda chiefs and other landowners benefited from these higher land prices, while at the same time it became virtually impossible for an ordinary peasant to purchase his own plot of *mailo*, for the money he received from his cotton and in wages mostly went in taxes.

A peasant's or tenant's legal relation to his land was not defined either in the Buganda Agreement or in the Land Law of 1908, but was left to be negotiated between landowners and tenants on the basis of traditional occupation practices. The

⁹ Jørgensen 1981, 49-50; West 1972, 69; Rowe 1964, 6-7, 13 endnote 24; Low 1965, 80; J.A. Atanda, 'The Bakopi in the Kingdom of Buganda, 1900-1912. An Analysis of the Condition of the Peasant Class in the Early Colonial Period', *Uganda Journal* 33 (2) 1969, 151-162, especially 152. Likewise, *kubandwa* spirit mediums and priests were ignored in the allocation, thus leading to a complete eclipse of their authority in state matters under colonial rule. Their services were still required by the ordinary people, however. See Hanson 1997, 124.

¹⁰ Mukwaya 1953, 15-16; Uganda Protectorate. *Annual Report of the Land and Surveys Department 1912-13*. Entebbe: Government Printer 1913, 13; Thomas Taylor, 'The Establishment of a European Plantation sector within the Emerging Colonial Economy of Uganda, 1902-1919', *IJAHS* 19 (1) 1986, 35-58.

¹¹ Uganda Protectorate. *Annual Report for the Department of Agriculture 1912-13*. Entebbe: Government Printer 1913 [hereafter Department of Agriculture], 3.

customary rights and duties of the peasants prevailed in their tenancy, and a tenant was relatively safe on his farm provided that he fulfilled his obligations to his landlord. As the economic ambitions of landlords increased in the course of time, however, tenants became increasingly subject to abuse. World War I increased the world market price of cotton, and cotton cultivation in Uganda increased significantly in the years immediately following the war. In the first place this benefited the tenants, for they received better prices for their cotton plots, but as soon as the large-scale farmers and landowners realized the improved earning possibilities offered by cotton, they started to demand higher rents from their tenants in the form of cotton produce and direct labour in their own cotton fields instead of public works as they were supposed to.¹²

Thus it was the differential access to privatised land that lay at the core of the growing economic inequality between the peasants and low-ranking chiefs and the greater chiefs in early colonial Buganda. As an owner of land one was entitled to extract rent as well as labour. Private land also brought power and status, and meant that a landlord had a means of controlling both production and reproduction on his estate for his own benefit. As the chiefs' authority over the peasantry strengthened, the peasants had few, if any, means of escaping increased oppression from their superiors.¹³

The land question and the inequalities it fostered remained a heated issue inside Buganda for a long time, dividing the Baganda into two camps, those with and those without *mailo* land. The grievances of the *bataka*, and of the *bakopi*, concerning land, rents, etc., were blocked by the senior chiefs in the Buganda *Lukiko* and only rarely reached the British officials. In 1918 the rural protest found a channel in the Bataka Association, which was established to advocate the land claims of clan heads, demanding correction of the wrongs suffered by the *bataka* in the 1900 allocation. In 1921 the regency of the *kabaka* Daudi ended, and the Bataka Association appealed to the young king, and to the Governor. The *kabaka* gave them cautious support, proposing that the *Lukiko* should grant all rightful *bataka mailo* land, which they could then possibly exchange for their *butaka* land. The *Lukiko*, however, opposed the proposition strongly. The *bataka* took their matter to the Government, and though there was some sympathy for their cause among the British administration, the whole issue was eventually passed back to the *Lukiko* for final burial. In 1926 the Colonial Office decided that though the regents had wrongly used their powers to seize the land, it was too late to reverse the 1900 settlement.¹⁴ Moreover, by the 1920s the British were becoming increasingly tired with the whole issue of private land tenure in Uganda. One officer at the Colonial Office referred to the Buganda Agreement as 'a colossal ethnological plunder.'¹⁵

¹² Mukwaya 1953, 20-21, 54-55; Wrigley 1959, 47.

¹³ Ingham 1958, 166; Low 1965, 80-81.

¹⁴ Eliot to the Secretary of State for the Colonies, 12 Sept 1922. Co 536/120/524/PRO; Archer to the Secretary of State for the Colonies, 20 April 1923. CO 536/125/245/PRO; R.C. Pratt, 'Administration and Politics in Uganda', in Harlow et.al. 1965, 499; Low and Pratt 1960, 233-236; Mamdani 1976, 123-124.

¹⁵ Minutes on Land Policy, 12 Sept. 1922. CO 536/120/524/PRO.

The 1900 Buganda Agreement had one major consequence in terms of trade which was to limit genuine economic development in the years to come. The chiefs, who had been major traders in the nineteenth century, were lured out of business by the *mailo* land, for since rents and sales of land guaranteed them a permanent income, not many of them were willing to continue trading in a fluctuating market situation. Small traders were put out of business by taxation, and eventually in 1901, by the policy of trade licences, the prices of which were kept high to encourage large businesses. Trade, therefore, became almost exclusively the province of a few wealthy Indian and European businessmen resident in Uganda.¹⁶

The *mailo* system consolidated British rule in Buganda and guaranteed the support of the leading Baganda chiefs for the colonial rule. The first decades of the twentieth century were characterised by internal political stability in which the British trusted the Baganda chiefs with considerable powers in administering the kingdom. The administrative system of Buganda was imported into Busoga and the western areas, Toro, Bunyoro and Ankole (Nkore), with the Baganda chiefs acting as chiefs and supervisors for the local administrators on behalf of the colonial state.¹⁷ The Baganda chiefs were trusted by the British, mainly because many of them had become close personal friends of the missionaries and officials, and because the officials, and the British public in England, had a somewhat idealized picture of them based on their alleged willingness to accept Christianity and western values, an image which was kept alive by the writings of missionaries and by such influential persons as Harry Johnston. It is true that the Baganda appeared as loyal and submissive to the British authority, something which reflected the correct *kiganda* political culture and social customs, and this obedience flattered the British and further enhanced their idealized picture of the Baganda, particularly of the Christian chiefs.¹⁸

Within Buganda, however, the senior chiefs did not hesitate to exploit this personal friendship and the British ignorance of local matters and customs to manipulate the officials according to their wishes. And they were quite successful in this. Eventually, however, when they tried to push things too far, they provoked suspicion among their British benefactors. Small fractures in the relationships emerged in 1912 and 1913, for example. In 1912 the *bakungu* tried to lure the

¹⁶ Mamdani 1976, 72.

¹⁷ A. D. Roberts, 'Sub-Imperialism of the Baganda', *Journal of African History* 3(3) 1962, 435-450; Low 1965, 89-91. The Buganda model of administration had already been adopted in Toro in 1891, with the restoration of the kingdom by the IBEAC forces.

¹⁸ Michael Twaddle, 'The Bakungu Chiefs of Buganda under British Colonial Rule, 1900-1930', *Journal of African Studies* 10 (2) 1969, 309-322. Some missionaries, however, realized that the picture given to the outside world of the situation in Buganda and rest of the Protectorate was unrealistic. A C.M.S. missionary complained in 1902 about the custom of writing annual letters, since all the criticism and unpleasant things were censored from them, and the Catholic Bishop Hanlon, after a year in Uganda, was already of the opinion in 1896 that '[t]here has been so much exaggeration about the country [and] its people.' He was criticising some C.M.S. missionaries for giving the British public a false picture of political developments in the late 1890s. See Crabtree and Baylis, 24 Nov. 1902. G3/A7/O/1903/2/CMS; Hanlon to Casartelli, 15 April 1896. UGA/4/II/MHM; Hanlon to Casartelli, 29 Jan. 1897. UGA/4/III/MHM.

British to establish an additional *Lukiko bwa Butaka*, or council of clan heads, in which the powerful landowner chiefs would hold permanent positions. They argued that this would be in accordance with the customs of the country, where the *bakungu* were the original holders of the land. This attempt, which involved some serious swindling of the British, might have been successful had there not been an outcry and protest by the real *bataka*, who eventually managed to convince the British about the false nature of the *bakungu* claims. This attempt was not solely an expression of an individual's greed or a desire for power on the part of the regents and senior chiefs, however, but also a demonstration of their concern over the alienation of land in Buganda to non-Africans. The growth of the European plantation sector and increased leases and purchases of agricultural land by Europeans and Asians had provoked anxiety among the chiefs about the fate of their precious *mailos*. On the other hand, it is also quite plausible that the chiefs used this alleged fear of losing their land as a means to extend their power.¹⁹ Another cause for friction between the *bakungu* and the British rose from the double chieftaincies held by virtually all senior *bakungu*, including the regents. It was common for a *saza* chief to hold the second highest chiefship in the neighbouring *saza*, deriving economic and political benefits from both offices. This practice was discovered in 1910, and was again claimed by the chiefs to be an old custom. Nevertheless, double chieftaincies were terminated in 1913. These two examples, the additional *lukiko* proposal and the double chieftaincies, show the readiness of the major chiefs in Buganda to use their unique and privileged position as landowners, legislators and judges for their own personal gain.²⁰

LAND POLICY OUTSIDE BUGANDA

A land commission led by Judge W. Morris-Carter was established in 1906 to consider land settlement outside Buganda. The aim was to achieve some uniformity regarding land holdings in the Protectorate, a task which would prove quite challenging. All land outside Buganda had been proclaimed Crown Land in 1900, but its allocation and distribution had remained in the hands of the local governments. On the basis of agreements between the colonial government and the kingdoms of Toro and Ankole (Nkore), in 1900 and 1901, respectively, the local chiefs were left in anticipation of a similar kind of land tenure system as was in force in Buganda. In Bunyoro no agreement between the British and the Banyoro was entered into before 1933, leaving not only land but administrative matters unsettled. In Busoga, land distribution was in the hands of the local chiefs, who could locate people according to their own wishes. By 1906 a Buganda style of

¹⁹ Twaddle 1969, 316-322; Taylor 1986, 51-53.

²⁰ Twaddle 1969, 316-322. By 1911 there was a growing awareness among the British of what 'being a chief' really constituted in Buganda. Yet they held an optimistic and even naive view of their collaborators and their motives: 'It is hoped that these Chiefs will in time realize that their Chiefships are not given them for the sole purposes of enriching themselves but are an honour to be sought for, which entails a certain amount of self-sacrifice [and] hard work for the welfare of their people and country.' See, Buganda Annual Report, 1910-11. Secretariat Minute Papers, A46/422/UNA.

administration was in operation in Ankole, Toro, Bunyoro and Busoga, with Baganda chiefs acting as advisers to the local chiefs. Large, fertile estates were coveted everywhere, and it was obvious that every chief would try to seize as much fertile and populated land as possible ahead of the expected *mailo* system.²¹

The first land commission, which completed its work in 1907, did not accomplish much in the way of concrete results, and another commission, also led by Morris-Carter, was appointed in 1911. By 1914 this had come up with a proposal offering small private estates to leading chiefs and royal families in Ankole, Bunyoro, Busoga and Toro, while minor chiefs would receive only non-private official estates, known in Bunyoro as *obwesengeze*. The bulk of the land would remain Crown Land, assignable to people originating from outside the respective districts, thus including the Baganda as well as Europeans and Asians. Governor Jackson favoured the commission's proposals, but was sceptical of the official estates, which he saw merely as a temporary solution to the lack of funds in local administration. He maintained that the land should be made private in the future, and that the rents paid by the peasants should be paid to local treasuries instead of the chiefs, which would promote the creation of salaried chiefships.²²

Jackson's ideas were agreed upon in principle in London, but not without precautions. It was felt that an extension of the Buganda model to other provinces should not be regarded as desirable for its own sake, since it left the peasants at the mercy of the landowners. One proposed way of making the chiefs less dependent on their subjects, as planned by Jackson, was salaried chiefships. This had already been proposed by Governor Bell in 1909, when it became clear that many chiefs were seeking remuneration by rather questionable methods. Bell's proposal was to review the annual salaries of £200 rupees granted to each *saza* chief, and use some of the proceeds to pay minor chiefs.²³ So far only a few sub-chiefs had been paid actual salaries instead of merely being allowed a certain percentage of the taxes they collected. Otherwise, the official estates of the minor chiefs remained their primary source of income.²⁴ In its fourth report, in 1917, the land commission came down in favour of salaried chiefships, since they were seen as beneficial to general development. They were opposed in London and in Uganda, however, on the grounds that they would erode the authority of the chiefs, making the administration and development of the Protectorate more difficult. It was therefore resolved by

²¹ Toaker to Ternan, 25 July 1899. A4/19/UNA; W. Morris Carter to Acting Commissioner on Land Tenure, 16 Sept. 1907. CO 536/14/PRO; Low 1965, 91, 94.

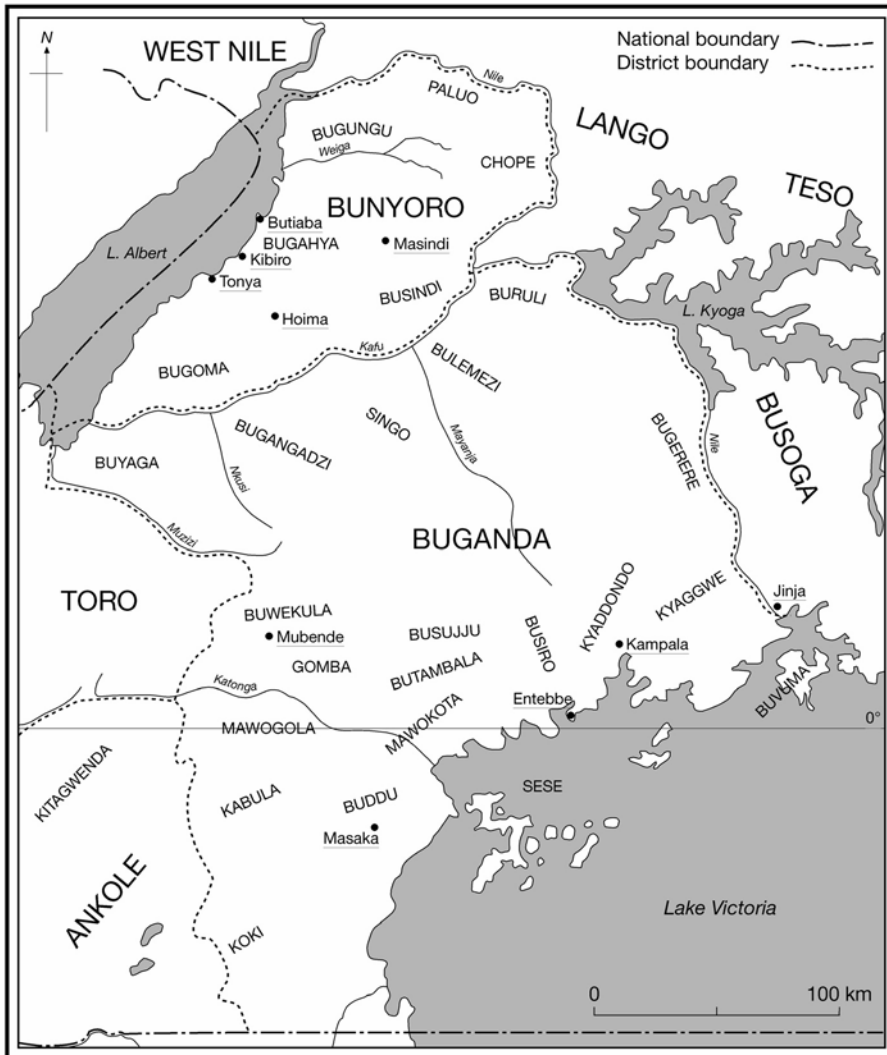
²² Uganda Protectorate. *Reports of the Committee appointed to consider the question of Native Land Settlement in Ankole, Bunyoro, Busoga, and Toro*. Entebbe: Government Printer 1914; Jackson to the Secretary of State for the Colonies, 17 Aug. 1915. CO 536/77/238/PRO; Low 1965, 94-95.

²³ Bell to Crewe, 1 June 1908. CO 536/20/134/PRO; Confidential: Bell to Crewe, 27 April 1909. CO 536/26/PRO.

²⁴ Wallis to the Secretary of State for the Colonies, 28 Dec 1912. CO 536/53/532/PRO; Jackson to the Secretary of State for the Colonies, 17 Aug. 1915. CO 536/77/238/PRO.

1918 that no salaries were to be paid beyond the tax rebates and annual allowances received by the senior chiefs and members of the royal families.²⁵

Map 3: Colonial Buganda and Bunyoro



A serious controversy rose from the 1914 land commission's proposal to make land outside Buganda available to foreigners, including Africans (mainly Baganda). Jackson, though favouring private estates for chiefs, felt that land should be made available to foreigners for agricultural purposes, for it was believed that this would bring about faster development. There was some opposition inside the Uganda colonial administration to the plans put forward by the land commission and by

²⁵ Minutes on Native Land Settlement 20 & 21 Dec. 1915. CO 536/77/238/PRO; Spire to the Chief Secretary, 15 April 1916. CO 536/86/211/PRO; Minutes on Land Settlement in Ankole, Bunyoro, Toro and Busoga, 26 Jan. 1917. CO 536/86/211/PRO.

Jackson, but the general feeling was that the policy was acceptable. While over 50 percent of the land in Buganda was in the hands of African landowners, the percentage in other districts was around 15 percent, making the rest practically all allocatable to foreigners. The opposition, mainly the Director of Agriculture, Simpson, felt that the assignment of considerable tracts of land to non-Africans in the cotton-growing areas of the Eastern Province would undermine the already established and highly productive cotton industry based on peasant cultivation, and thus threaten the finances of the Protectorate. Simpson's ideas were labelled as hostile to development, however, and to the progress of European enterprise. Ironically, the same conclusion about the nature of the land commission's plans was reached in London, for in 1916 the proposal was turned down by the Secretary of State for the Colonies, Bonar Law, who saw at that time that it would hamper the development of the Protectorate. His decision outraged the planters in Uganda and was in conflict with the previous line of thought within the Colonial Office, but it did mean that the attempt to clarify the land question outside Buganda had failed for the time being, and that local systems of land tenure could be allowed to take shape according to the conditions prevailing in each district.²⁶

EVOLUTION OF THE *KIBANJA* SYSTEM IN BUNYORO

In 1900 the conquered kingdom of Bunyoro was reduced to the status of a district within the Uganda Protectorate. The traditional kingdom was not torn down completely, however, as the kingship was preserved and the newly chosen young *omukama* retained his position as a symbolic leader of the people. The British opinion was that no agreement comparable to that with Buganda was required, or even a protection agreement of the kind concluded with Ankole and Toro, since Bunyoro was a conquered territory. The new district therefore remained partly under military rule. For administrative purposes, it was divided into *sazas* according to the Buganda model, and most of the *saza* chiefs before 1914 were actually Baganda. Those *bakungu* and *batongole* chiefs who had not been deposed, killed or imprisoned were reduced to the status of village headmen.²⁷

British colonial policy in Bunyoro before 1914 lacked consistency and continuity. Bunyoro was an unpopular place for officers, a post from which one wished to be released as soon as possible. The climate was considered most unhealthy, and the poor water supply, the undeveloped state of the infrastructure and the distance from Entebbe and Kampala made access, control and supplies very

²⁶ Jackson to the Secretary of State for the Colonies, 17 Aug. 1915. CO 536/77/238/PRO; Uganda Protectorate. *Reports of the Committee appointed to consider the question of Native Land Settlement in Ankole, Bunyoro, Busoga, and Toro*. Entebbe: Government Printer 1914; Wallis to the Secretary of State for the Colonies, 12 Feb. 1917. CO 536/84/42/PRO; Jackson to the Secretary of State for the Colonies, 12 March 1917. CO 536/84/75/PRO; Christopher P. Youé, 'Peasants, Planters and Cotton Capitalists: The "Dual Economy" in Colonial Uganda', *Canadian Journal of African Studies* 12 (2) 1978, 163-185, especially 165; Thomas F. Taylor, 'The Struggle for Economic Control of Uganda, 1919-1922: Formulation of an Economic Policy', *IJAHS* 11 (1) 1978, 1-31, especially 3-4; Low 1965, 94-95; Pratt 1965, 480.

²⁷ Sadler to the Marquess of Lansdowne, 4 Aug. 1904. BDF/A/G, Vol. 16, 368-70; Roberts 1962, 444-445; Beattie 1971, 191 fn. 1.

difficult.²⁸ The officers stationed in the district were often unable, and sometimes also unwilling, to tour it to collect information for the administration,²⁹ and this lack of reliable first-hand knowledge on local matters and conditions presumably made the British assume that conditions there did not in general differ much from those in Buganda, and that policies and methods that had been applied and were working in Buganda would also work in Bunyoro. Further problems rose from the British conception and attitude towards the Banyoro. Since the days of Samuel Baker, the Banyoro had been demonized, and after the colonial war of conquest these defeated and demoralized people were labelled as an 'inferior race' compared with the Baganda, since they seemed to lack enthusiasm for the Anglo-Bagandan colonial project. Open suspicion and mistrust of the Banyoro in matters of administration and economic development led the British to rely heavily on Baganda agents, which was to cause further trouble in the coming years.³⁰ Because of the unwillingness of the Banyoro to subject themselves to the rule of the Baganda and the consequent passive resistance, especially by lower ranking chiefs, and because of the colonial state's unwillingness to develop communications and transportation network connecting Bunyoro to Kampala and Entebbe, both agricultural and other forms of development in the district remained limited³¹

The new administration in Bunyoro increased the obligations on the peasantry. While the *saza* chiefs and members of the royal family were receiving allowances from the colonial state, the traditional tributes, *obusuru*, remained the primary means of income for the majority of the chiefs. With the introduction of a monetary economy, the *obusuru* was commuted to money payment, first to four shillings and later, in 1914, to seven shillings per adult male.³² From 1900 onwards the British put pressure on the local administration to increase revenues from the hut tax, but these revenues from Bunyoro continued to decline despite the increased pressure.³³ It appears that the peasants were simply unable to pay the taxes required because of the undeveloped state of the economy, and because of the excessive amounts of tribute and labour demanded by the chiefs. The Collector at Hoima described the conditions that the peasants were facing:

²⁸ Wilson to H.M. Special Commissioner, 1 Oct. 1900. A12/1/UNA; A.B. Lloyd, sd, 1901. C.M.S. annual letters 1901, p. 243, CMS; Unyoro. Falling of revenue from Native Taxes, 9 July 1908. Secretariat Minute Paper, A44/244/UNA.

²⁹ Tomkins to H.M. Commissioner & Consul General, 17 Sept. 1902. A12/2/UNA; Report on the District of Bunyoro for November-December 1905. A12/7/UNA.

³⁰ See, for example, Bagge to Commissioner & Consul General, 16 April 1902. A12/2/UNA; Hoima District Monthly Reports 1907. Secretariat Minute Papers, A43/74/UNA; Doyle 1998, 224-234.

³¹ Unyoro District Annual Report 1908-9, 12 May 1909. Secretariat Minute Paper, A45/177/UNA; Doyle 1998, 276-281. In fact it was felt that cotton cultivation should not be pushed in Bunyoro, since it would make the recruitment of porters and workers for government labour projects difficult. See Cotton in Unyoro, 23 April 1908. Secretariat Minute Paper, A44/160/UNA.

³² Beattie 1971, 168-9; Richards 1960, 108.

³³ Commissioner's Office to the Sub-Commissioner of Western Province, 27 Nov. 1903. A13/1/UNA.

'... the people were so downtrodden by their Chiefs that in many cases it was absolutely impossible for them to pay their Hut-Tax. Complaint after complaint reached me that the people after having worked off their tax at this station or Masindi then had to do a period of two months labour for the King or to pay a forfeit in rupees, again on the completion of this, they had to work for their Chiefs of Sazas, subsequently for the Mwami and finally for the Bakungu or the Leadman of their Shambas, this left them no time for the cultivation of produce and indeed very little for themselves.'³⁴

It was observed that the people worked for their chiefs from three to six or even eight months per year: 'While the latter state of affairs continues we do not obtain fifty percent of the resources of the country and it allows no room for agriculture and trade...'³⁵

Alarmed by the problems in tax collection and accusations of exploitation, and by the counter-arguments from the *omukama* and his chiefs about their alleged traditional rights over peasant labour,³⁶ it was felt that the matter required closer scrutiny. An investigation was launched that revealed that there had been abuses but that these had not been as grave as indicated in the Collector's report. The greatest distress was found around Masindi, in the northern part of the district, where people were said to have been subject to excessive labour duties. It was calculated, however, that the average labour obligation of peasants to provide food for their masters was not excessive: '... I fail to see that this levy of food is a severe tax upon the natives any more than it should have been before the Uganda agreement was entered into, upon the Baganda, among whom the same custom obtained and from whom we had no complaints.'³⁷ Thus, the British again assumed that what was working in Buganda would also work in Bunyoro, despite the differences in the agricultural economy.

As a solution, it was proposed that the chiefs should reserve some land for their own cultivation, which would make them less dependent on peasant labour for their food supply.³⁸ This meant that in Bunyoro, where there was no private land tenure similar to that in Buganda, the chiefs could now have their own personal *kibanja* (pl. *bibanja*) estates for their own needs. Peasants on these estates would pay their *obusuru* only in food, with no further obligations. Furthermore, their labour obligation to their chiefs was limited to one month, presupposing that they

³⁴ Prendergast to H.M. Commissioner & Consul General, 2 Jan. 1904. A12/5/UNA.

³⁵ Prendergast to H.M. Commissioner & Consul General, 10 Jan. 1904. A12/5/UNA. See also Uganda Protectorate. *Enquiry into Land Tenure and the Kibanja System in Bunyoro, 1931. Report of the Committee*. Entebbe: Government Printer 1932, 10. CO/536/171/22057/PRO.

³⁶ Telegram from Commissioner to Collector-Hoima, 30 Jan. 1904. A13/2/UNA; Prendergast to H.M. Commissioner & Consul General, 8 Feb. 1904. A12/5/UNA; Commissioner's Office to H.M. Deputy Commissioner, 22 Feb. 1904. A13/2/UNA.

³⁷ Wilson to H.M. Commissioner & Consul General, 10 March 1904. A12/5/UNA.

³⁸ Wilson to H.M. Commissioner & Consul General, 10 March 1904. A12/5/UNA.

had fulfilled their tax obligation.³⁹ This proposal by Wilson actually created a semi-private land tenure system in Bunyoro, which was left to develop during the following decades without any control from the Protectorate Government, with disastrous consequences for the economic development of the district.

The *bibanja* were not intended to be private but official, merely a temporary solution to reward the chiefs before the introduction of salaried chiefships. The first steps towards the latter were taken in 1905, when the *omukama* and the leading chiefs in Bunyoro agreed to give 20 percent of their tax rebate for the salaries of minor chiefs in the local administration. Most of the lower-ranking chiefs received no regular fixed salaries, however, or no salaries at all, so that they were dependent economically on the peasants under their jurisdiction.⁴⁰

Although no special agreement was made with Bunyoro, the Banyoro chiefs nurtured hopes of receiving private land. These were reinforced in 1906 by the Morris-Carter Commission investigating the traditional modes of land tenure in the Protectorate, for it appears that when the missionaries and Protectorate officials were suddenly seen to be going around the country asking questions relating to land, and especially to the existence of private land, the Banyoro chiefs interpreted this as a sign of an approaching private land tenure system similar to that in Buganda.⁴¹

As their hunger for private land grew, the Banyoro became increasingly concerned about the recent political developments in their country. The number of Baganda chiefs in Bunyoro had been growing since the turn of the century, and Baganda were also becoming more numerous among the minor chiefs, on account of the desire of the leading Baganda chiefs there to hire their own countrymen as their subordinates. The British saw nothing wrong in this practice; on the contrary, it made administration more effective, since there were less language problems and there was less antipathy between chiefs at different levels. It was claimed that people quite willingly chose to live under Baganda chiefs in view of their greater competence, though it was admitted that this created some bitterness among the Banyoro chiefs. Nevertheless, the increased number of Baganda chiefs created a fear

³⁹ Wilson to H.M. Commissioner & Consul General, 10 March 1904. A12/5/UNA; Uganda Protectorate. *Enquiry into Land Tenure and the Kibanja System in Bunyoro, 1931. Report of the Committee*, 1932, 10. CO/536/171/22057/PRO. In Buganda *kibanja* meant a peasant holding, while in Bunyoro it was regarded as a chief's private estate as distinct from *obwesengeze*, his official estate.

⁴⁰ Uganda Protectorate. *Enquiry into Land Tenure and the Kibanja System in Bunyoro, 1931. Report of the Committee*, 1932, 10-11. CO/536/171/22057/PRO. As will be seen later on, salaried chiefs were regarded as part of the solution to the labour shortages in the Protectorate. Once the chiefs were economically independent of the peasantry, the freed peasant labour would be available for the colonial government and planters. There were believed to be negative 'side-effects' related to these salaries, however, for as noted above, it was seen that salaries would reduce the chiefs' authority over the peasants, which would make not only the recruitment of labour more difficult but also administration. See Minutes on Land Settlement in Ankole, Bunyoro, Toro and Busoga, 26 Jan. 1917. CO 536/86/211/PRO; Spire to the Chief Secretary, 15 April 1916. CO 536/86/211/PRO.

⁴¹ See W. Morris Carter, Report on the Native Land Tenure in the Kingdom of Uganda, 2 Oct. 1906. CO 536/14/PRO; W. Morris Carter to Acting Commissioner, 16 Sept. 1907. Land Tenure, CO 536/14/PRO; Answers to the questions on land tenure in the Kingdom of Bunyoro, 20 March 1907. A.B. Fisher's papers, Acc. 84/F2/3, CMS; Uganda Protectorate. *Enquiry into Land Tenure and the Kibanja System in Bunyoro, 1931. Report of the Committee*, 1932, 10-11. CO/536/171/22057/PRO.

in the minds of Banyoro that when the private lands were allocated, the Baganda would be the ones who seized them, as they had done with the 'lost counties' at the end of the nineteenth century. This fear was probably one of the main factors behind the Nyangire rebellion of 1907, an act of resistance against the British, and particularly the Baganda, during which the Baganda chiefs were chased out of their estates by the angry Banyoro sub-chiefs, who refused to subject themselves to Baganda rule.⁴²

The rebellion, which was put down peacefully by a mere show of force by the British, resulted in a reshuffle of chiefships in Bunyoro. Many Banyoro sub-chiefs, among them some former *bakungu* and *batongole*, were imprisoned or deposed. It appears that after the events of 1907, the *omukama* allocated *kibanja* estates to some of the deposed chiefs and other persons he considered important, including his family and circle of friends, for the maintenance of their status in society. Gradually, the number of people receiving the *omukama*'s favour in this manner grew larger. It seems that either the British were totally ignorant of what was taking place in front of their eyes, or they simply allowed it to happen. The latter option appears to be more credible. The settlement of the land question outside Buganda was progressing slowly, and in 1910 the *omukama* and his chiefs appealed to the Governor to give them private estates so that they would be able to undertake commercial agriculture. Their request is to be seen against the background of the expansion of European and Asian plantations in Uganda, which aroused a fear of losing the land to foreigners. The Banyoro maintained that Governor Bell had promised them private land, and that since there was some sympathy in the colonial government, and in the Colonial Office, for favouring the African peasantry against the planters' claims for private land, the British did not see any reason to stop the allocation of *kibanja* holdings. Many chiefs had already selected estates for themselves before 1914 in order to ensure that the planters would not seize the best lands,⁴³ and these *bibanja* were regarded as private, so that their holders were able to collect tributes for their personal use. The holders were referred as chiefs, although they did not officially hold their land for the local administration but in a personal capacity, and in many cases the private *kibanja* holders were considered to have greater authority than the *obwesengeze* chiefs, since they held their land as a gift from the *omukama* and would pass it on to their heirs, unlike *obwesengeze*, whose land was related to their office.⁴⁴ Thus a distinction between the official and private estates of the chiefs had

⁴² Uganda Protectorate. *Enquiry into Land Tenure and the Kibanja System in Bunyoro, 1931. Report of the Committee*, 1932, 11. CO/536/171/22057/PRO; Fisher to Tucker, 20 & 25 May 1907. G3/A7/O1907/155/CMS; Wilson to Elgin 25 June 1907. Affairs in Unyoro, CO 536/13/PRO; Low 1965, 86-87; Uzoigwe 1970, 30-56. The Nyangire rebellion will be discussed further below.

⁴³ Uganda Protectorate. *Enquiry into Land Tenure and the Kibanja System in Bunyoro, 1931. Report of the Committee*, 1932, 12-14. CO/536/171/22057/PRO; Wallis to the Secretary of State for the Colonies, 12 Feb. 1917. CO 536/84/42, PRO; Jackson to the Secretary of State for the Colonies, 12 March 1917. CO 536/84/75/PRO.

⁴⁴ Richards (ed.) 1960, 109; Beattie 1971, 191. For most chiefs, personal gain was paramount. The colonial officers complained in 1915 about the bad 'moral tone' of the chiefs in Bunyoro: 'They seem to think that it is the prerogative of chiefs of all grades to commence drinking in excess as soon as they become chiefs.' See, Northern Province Annual Report 1914-15. Secretariat Minute Papers, A46/808/UNA.

emerged by the early twentieth century, the latter having come to be regarded by their proprietors as inheritable personal property.⁴⁵

Considering the number of Baganda chiefs in Bunyoro and Governor Jackson's idea that the Buganda model should be applied elsewhere in the Protectorate, together with the fact that some colonial officers felt that the Baganda should also receive estates in Bunyoro,⁴⁶ the Banyoro's fear of losing land to foreigners appears genuine and justified. The emergence and expansion of the *kibanja* system acted as means of ensuring control over land. For the Baganda, the establishment of private land tenure in Bunyoro would have been beneficial politically as well as economically, as they would have been able use their authority and special relationship with the British to acquire additional land. The most powerful chiefs in Buganda had already seized the best lands and acquired estates in areas where they wanted to increase their political influence, while the rest of those entitled to private land were often forced to select outlying lands far away from their places of origin, lands with which they felt totally unconnected. The second Morris-Carter commission felt that this should be avoided elsewhere in the Protectorate by imposing restrictions on how one could select land. The commission also proposed that land should be vested in Native Governments instead of private persons, meaning the creation of official estates, which contradicted the view held by Jackson,⁴⁷ according to whom, '... the Natives should be generously dealt with the settlement, in order to provide for future expansion and possible developments in their social organization and agricultural methods, and to secure for them the share in the fruits of future economic progress to which their rights as original owners of the soil give them a just claim.'⁴⁸ In Jackson's opinion, official estates were merely a temporary solution to the lack of money in the local administration, a necessary evil that had to be put up with for the time being before the establishment of private land tenure and salaried chiefships.⁴⁹

In London opinions regarding the land policy in Bunyoro and western Uganda were divided between the two proposals. While Jackson's views gained some support, there was an opposition which argued that there was no need to extend the Buganda model based on the 'vicious agreement' of 1900 elsewhere in the Protectorate. The reason behind this reluctance was said to be the fact that the private land tenure system left the peasants to the mercy of the landlords, as had happened in Buganda. Instead, it was proposed that all land should be made Crown

⁴⁵ Beattie 1971, 169-170.

⁴⁶ See Uganda Protectorate. *Reports of the Committee appointed to consider the question of Native Land Settlement in Ankole, Bunyoro, Busoga and Toro*. Entebbe, Government Printer, 1914.

⁴⁷ Jackson to the Secretary of State for the Colonies, 17 Aug. 1915, CO 536/77/238/PRO; Uganda Protectorate. *Reports of the Committee appointed to consider the question of Native Land Settlement in Ankole, Bunyoro, Busoga, and Toro*. Entebbe: Government Printer 1914.

⁴⁸ Jackson to the Secretary of State for the Colonies, 17 Aug. 1915, CO 536/77/238/PRO.

⁴⁹ Jackson to the Secretary of State for the Colonies, 17 Aug. 1915, CO 536/77/238/PRO; Uganda Protectorate. *Reports of the Committee appointed to consider the question of Native Land Settlement in Ankole, Bunyoro, Busoga, and Toro*. Entebbe; Government Printer 1914.

Land, giving ultimate control to the colonial government. No land should be permanently allocated to foreigners, and the leasing of land from the Crown would be the way to deal with the land claims of the planters. Furthermore, according to the Colonial Office proposal, chiefs should be paid salaries, to make them Crown tenants along with the peasants. This was rejected in Uganda, however, on the grounds that it would destroy the authority of the chiefs, on which the governance of the Protectorate depended.⁵⁰ Thus, because of opposition to the *mailo* type of private land tenure in the Colonial Office, Jackson's policy was reversed.

The damage had already been done, however, for before any agreement on the form of land tenure had been reached in London, the chiefs in Bunyoro had already seized land under the silent acceptance of Jackson. They were in possession of estates which they considered private and inheritable, and were in fact exercising a similar authority over the land and people to that of the *mailo* owners in Buganda. It was the control over people and their labour that made *kibanja*, like the *mailo* system in Buganda, so attractive: 'The *kibanja* [sic] system as a spontaneous creation of the native mind is a good indication of what, to that mind, constitutes the essence of landownership and the real attraction of the coveted *mailo*[sic] - the power to exact tribute or rent from others.'⁵¹

TAXATION

The maintenance of the administration in Uganda and the development of the colonial economy required money. Before 1915 the Protectorate's economy was dependent on grants from the Imperial Treasury, since local revenues were insufficient to cover the high expenditure. The policy promulgated by the Colonial Office was nevertheless that each dependency should be made financially self-sufficient as soon as possible, to reduce the cost to British taxpayers. Thus, the economic policies of the early Commissioners and Governors in Uganda were dictated by the urgent need for more funds, and were therefore highly pragmatic. Rapid economic development was needed to make the country sufficiently productive to pay the costs of administration.⁵² This was to be done by means of taxation, the introduction of cash crops and a policy of compulsory labour.

Taxation of the African population, based on the Buganda Agreement, commenced in 1900, when a hut tax of three rupees, payable by every male owner or occupier of a house, hut or other dwelling used as a habitation, was established. At first the tax was collected only in Buganda, Busoga and Bunyoro, but it was later extended to Toro and Ankole. In the absence of cash, payment could be made in kind, i.e. agricultural produce, livestock, wild animals etc., could be accepted, and cowrie shells, the "universal" currency at that time, were also welcomed, at a rate of

⁵⁰ Minutes on Native Land Settlement, 20 & 21 Dec. 1915, CO 536/77/238/PRO; Minutes on Land Settlement in Ankole, Bunyoro, Toro and Busoga, 26 Jan. 1917, CO 536/86/211/PRO.

⁵¹ Uganda Protectorate. *Enquiry into Land Tenure and the Kibanja System in Bunyoro, 1931. Report of the Committee*, 1932, 19. CO/536/171/22057/PRO.

⁵² Ehrlich 1965, 396-413.

800 cowries for one rupee. In the absence of cash or suitable products, the tax could be paid in labour, by working for the government for one month.

Understandably the heterogeneous system of payment was not very practical for the colonial state. After March 1901 cowries were no longer accepted as payment, and many people had no other possibility than to pay their tax in labour, by working for the government for 30 days, thus providing the labour that was much needed for developing a basic infrastructure for the administration and economy.⁵³ The taxes collected were used to cover some of the administrative costs of the central government and local governments, i.e. the 'native administration'. The chiefs who were responsible for tax collecting were granted a ten percent rebate on the amount they collected as a 'salary' for their services.⁵⁴ Needless to say this concession was blatantly open to abuse.

The initial success of tax collecting, and particularly the Baganda chiefs' effectiveness in this, seems to have surprised the British:

'The almost too proper manner in which we have been met by the natives in large areas in the Uganda Protectorate shows that the tax is not an unpopular one... our stations have been crowded with livestock, grain, and other produce within a few weeks of the promulgation of the tax, and I have had to ask the chiefs to be more leisurely in their collection so that we may have time to dispose to the best advantage of such food products as are sent in in lieu of rupees.'⁵⁵

The early success of the hut tax in generating revenue for the government was attributable to the exceptional zeal of the Baganda chiefs in carrying out their duties. One reason for this 'almost too proper manner' can be found in the Buganda Agreement, article 20 of which said:

'Provisions for the invalidation of the terms of the Agreement should Buganda Kingdom fail to pay, during the first two years after the signing of the Agreement, an amount of native taxation equal to the half that which is due in proportion to the population of Buganda; or in the event of any disloyalty being pursued at any time by the Kabaka, Chiefs, or people of Buganda.'⁵⁶

This meant that, in addition to the demands for loyalty and obedience to the British, the chiefs had to collect a certain amount of revenue, or otherwise they would risk

⁵³ Johnson to Salisbury, 25 Aug. 1900. FO 2/299/PRO; Sadler to Lansdowne, 16 Nov. 1902. FO 2/594/PRO; Povesland 1957, 16.

⁵⁴ Johnson to Salisbury, 25 Aug. 1900. FO 2/299/PRO. A similar right was given to chiefs in Bunyoro in 1903 to 'keep up their status as chiefs.' See Sadler to Lansdowne, 9 July 1903. FO 2/734/PRO. The tax rebate, applied in Buganda and later also in other areas, was only used to pay the upper stratum of the chiefs, however.

⁵⁵ Johnson to Salisbury, 25 Aug. 1900. FO 2/299/PRO.

⁵⁶ The Uganda Agreement 1900, 11.

losing their benefits. The exact amount required is impossible to determine, for the size of the population in Buganda was a mere guess. Thus article 20 served more as a moral reminder to the chiefs of their duties. It also stated that if the revenue collected during the first two years were to exceed £45 000 a year, the *kabaka* and the chiefs could appeal to the Government for an increase in their allowance.⁵⁷ This must have led them to put extra vigour into their tax collecting.

The alleged success in tax collection did not come easily, however. It appears that the lower-ranking chiefs were reluctant to carry out their duties, and consequently the British put more pressure on the chiefs in the *Lukiko*. In December 1903 Commissioner Sadler himself visited the *Lukiko* and urged the chiefs to 'stir up their people to take advantage of the work and trade' so that they could extract the hut tax from their peasants. To fight apathy and ineffective administration, the British did not hesitate to punish even the higher ranking chiefs, so that Pokino, the *saza* chief of Buddu, experienced a reduction in his salary in 1904 because of a lack of diligence in his work, and many others were threatened with salary reductions.⁵⁸

Another reason for the early success in tax collecting, derived from the above, was that some chiefs were beginning to see it as means for effective social control and personal enrichment. Soon after the prohibition of cowries as currency, tax collection became difficult since people had little or nothing to pay with except for their personal labour. It turned out that some chiefs were paying taxes for their tenants and then putting them to work on their own estates. In some cases, it appears, the chiefs kept the produce collected as tax for themselves and rounded up the elderly, the sick and otherwise disabled people to be sent to work as tax payment, while they employed the able-bodied men themselves, not just for one month, but sometimes even for five months. The system referred as 'sweating' emerged, under which chiefs employed peasants on their estates for somewhat obscure reasons, usually connected with the payment of 'rent'.⁵⁹

Soon after the establishment of private land tenure and taxation, the greater chiefs in Buganda evidently experienced a considerable improvement in their standard of living: 'The Chiefs mostly bank their salaries or spent them on European goods, there being nothing in the country they want which they cannot procure without purchase.'⁶⁰ The 1900 agreement gave the *saza* chiefs an annual income of £200 in addition to their tax rebate and goods and services derived from peasants, although the minor chiefs were not doing so well. Some of the *saza* chiefs used to pay their sub-chiefs from their own salaries, but many did not. This meant that the minor chiefs were not as eager to collect taxes as the high ranking ones, since the direct benefits for them in the form of cash were minimal. They depended on the *bakopi* for their own maintenance, and tax collecting further reduced their popularity

⁵⁷ The Uganda Agreement 1900, 11.

⁵⁸ Nsambya Diary, 11 Dec. 1903. UGA/9/16/MHM; Nsambya Diary, 15 April 1904. UGA/9/14/MHM; Nsambya Diary, 9 Dec. 1904. UGA/9/14/MHM.

⁵⁹ Jackson to Lansdowne, 13 July 1901. FO 2/462/PRO; Jackson to Lansdowne, 21 Oct. 1901. FO 2/464/PRO; Jackson to Lansdowne, 25 Jan. 1902. FO 2/589/PRO.

⁶⁰ Sadler to Lansdowne, 16 Nov. 1902. FO 2/594/PRO.

among the people. The British were aware of this, yet the system was seen as 'fairer' than a fixed salaries system, for now the higher ranking chiefs were paid according to their own effectiveness, i.e. how much pressure they could put on their subordinates.⁶¹

Soon the British began to suspect the functionality of the hut tax system and the reliability of the chiefs, for after the initial success, revenues were not coming in to the expected extent. Tax collecting practices were stealthily observed in order to reveal abuses, but little evidence could be produced against chiefs suspected of fraud.⁶² Yet it appears that the minor chiefs rigged the tax figures for their own benefit, an abuse which came to light in 1904 and led to serious criticism from Apolo Kagwa.⁶³

In order to increase the government's revenues, a poll tax of two rupees was introduced into Buganda, Bunyoro and Ankole in 1905 to supplement the hut tax. This was payable by all adult males not liable to pay hut tax, and was commutable to one month's work for the government. Those too old or unfit to work because of sickness or injury were exempted. This tax reform proved to be effective, as the revenue from the poll tax in Buganda alone soon exceeded the sum collected in hut tax by a factor of five.⁶⁴

By 1909 the prosperity of Buganda was seen to permit higher taxation without entailing 'great hardship on the natives'. The hut tax was abandoned and the poll tax was increased to five rupees and extended to every adult male, which was hoped to bring considerable extra revenue to the government. The aim was to use this revenue to pay salaries to the sub-chiefs who at that time were receiving no fixed payment beyond what they extracted from the peasants. While bringing more revenue to the colonial state, the poll tax also served to secure adequate labour for public works projects. As seen above, the colonial government assumed that salaried chiefs would not be dependent on peasant labour, which would ease the competition over labour between private landowners, traders, planters, local governments and the colonial state. Also, the tax was believed to make people engage in paid labour more eagerly in order to raise the five rupees needed. Moreover, under the poll tax regulations, those unable to pay in cash were obliged to work for the Government for a period of

⁶¹ Sadler to Lansdowne, 16 Nov. 1902. FO 2/594/PRO; Powesland 1957, 6; Bell to Crewe 1 June 1908. CO 536/20/134/PRO.

⁶² Sadler to Ormsby, 31. Aug. 1903. FO 2/736/PRO; Letter from Ormsby, 31 Aug. 1903. FO 2/736/PRO; Nsambya Diary, 17 July 1903. UGA/9/16/MHM It was also suspected that some chiefs in Buganda became rich by keeping the tax payments and tax tickets for themselves and claiming that the peasants had not paid. An example of the ineffectiveness of collection may be taken from Toro, where a chief with 800 huts in his area only received taxes from 47. See Tomkins to H.M. Commissioner and Consul General, 10 Feb. 1903. A12/3/UNA; Ormsby to Sub-Commissioner of Western Province, 12 March 1903. A12/3/UNA; Nsambya Diary, 23 Oct. UGA/9/16/MHM.

⁶³ Nsambya Diary, 17 July 1903. UGA/9/16/MHM; Nsambya Diary, 22 July 1903. UGA/9/16/MHM; Nsambya Diary, 18 April 1904. UGA/9/16/MHM.

⁶⁴ Uganda Protectorate. The Poll Tax Ordinance 1905. CO 684/1/PRO; Confidential: Bell to Crewe, 27 April 1909. CO 536/26/PRO.

six weeks.⁶⁵

The popular unrest and dissatisfaction that followed the introduction of the poll tax in Buganda forced the government to find ways to calm the situation. A law was passed which ruled that no further tax increases would be undertaken during the next seven years.⁶⁶ Partly because of this, and partly because of the alarm raised by the increasing out-migration for tax evasion purposers, as well as by the need to raise as much revenue as possible, the poll tax was also extended to Busoga in 1909. In order to curb tax evasion by migration and to respond to the pleas of local chiefs anxious to increase their own salaries and tax shares, the poll tax was extended to Ankole in 1910, to Bunyoro in 1911 and to the rest of the Protectorate between 1914 and 1917.⁶⁷

COTTON AND LABOUR

Taxation did not solve the financial problems of the Protectorate, since the peasantry in general was too poor to yield any significant revenue. The main items of export, ivory and skins, were wasting assets and yielded inadequate returns for the government in terms of customs duties.⁶⁸ An additional solution to the Protectorate's economic problems, however, was provided by the British policy of promoting cotton production in the Empire to support the Lancashire cotton trade, through the British Cotton Growing Association, established in 1902. The needs of the Lancashire manufacturers were communicated to the colonies through the Colonial Office, and experimental cotton cultivation was commenced in Uganda with great expectations in the same year, 1902.⁶⁹

The picking of the first cotton crop in 1904 was preceded by a vigorous campaign by the British to convince the *Lukiko* and the chiefs of the benefits of cash

⁶⁵ Uganda Protectorate. The Poll Tax Ordinance 1909. CO 684/1/PRO; Confidential: Bell to Crewe, 27 April 1909. CO 536/26/ PRO; Tomkins to Crewe, 11 June 1909. CO 536/26/141/PRO; Buganda Annual Report for 1909-10. Secretariat Minute Paper, A46/421/UNA. The poll tax also had a tertiary social aim. In order to propagate population growth, monogamy and good family life, those men with one wife and five or more children were exempted. This idea appears to have come from Governor Bell, who wished to combat the alleged high infant mortality and encourage good fostering of children.

⁶⁶ Confidential: Bell to Crewe, 27 April 1909. CO 536/26/PRO; Minutes on Poll Tax in Buganda, 8 July 1909. CO 536/26/PRO.

⁶⁷ Confidential: Boyle to Crewe, 15 Nov. 1909. CO 536/28/PRO; Confidential: Poll Tax Ordinance 1910, 8 April 1910. CO 536/32/PRO; Confidential: Boyle to Crewe, 28 Feb. 1910. CO 536/32/PRO; Coryndon to the Secretary of State for the Colonies, 1 June 1918. CO 536/90/125/PRO. When the Poll Tax was extended to the West Nile district in 1917 great numbers of young men migrated to Bunyoro and Buganda to seek tax work. This shows that taxation was used as a means of acquiring labour. See Powesland 1957, 36.

⁶⁸ Ehrlich 1965, 396; Havinden and Meredith 1993, 99-104. The chief exports in 1905 were goat skins. See *Uganda Notes*, August 1905, 115, G3/A7/O/1905/182/CMS.

⁶⁹ Ehrlich 1965, 399-400; van Zwanenberg and King 1975, 60-61; Sadler to Lansdowne, 4 Nov 1902. FO 2/593/PRO.

crop cultivation, especially that of cotton. Acting Commissioner Wilson had told the *Lukiko* in 1902 that they wanted the chiefs to plant cotton to give their people the capacity to pay taxes. He also informed the chiefs that if they would not take up this allegedly lucrative business, the colonial government would do it for them, which would be their loss economically. This threat was of course totally unrealistic, and did not succeed in convincing the chiefs, who were aware of the resistance to cotton growing among the peasants. In the following years the government had to order the higher ranking chiefs to push forward the cultivation of cotton and of other crops such as coffee, wheat and rice.⁷⁰

The British trusted that cotton growing would make the country productive in a commercial sense, offering the peasants at the same time an opportunity to earn money to pay their taxes in cash instead of in produce and labour. Actually, cotton cultivation itself seemed a fairly easy and promising way to earn money. Theoretically, a peasant in Bunyoro, for example, only had to clear a small plot of land and plant cotton to earn money at a rate of one rupee per 10 lbs of cotton, which meant that 30 lbs had to be harvested annually to pay the three rupee hut tax for one dwelling.⁷¹ In reality, however, the cultivation of an inedible crop just for the sake of paying taxes was not attractive because of the considerable additional work burden, low prices and difficulties in access to markets.⁷² Moreover, a dislike of tilling the soil - which was considered work for slaves and women - made many heads of households in Buganda reluctant to take up cultivation. Unlike the peasants, however, some chiefs - especially in Buganda and also to some degree in Bunyoro - were more eager to establish cotton cultivation on their own, as it appeared to be a potential source of income, and their need for peasant labour on their cotton plots in turn partly undermined the original notion of peasant enterprise.⁷³ Thus the highly optimistic views taken by the British officials on cotton soon changed as the reluctance of farmers became evident. The peasants had to be 'encouraged' to grow cotton by their chiefs - on their own as well as on the chiefs' plots - and this encouragement seems to have assumed rather coercive and even brutal forms.⁷⁴

⁷⁰ Nsambya Diary, 5 May 1902. UGA/5/A/9/MHM; Nsambya Diary, 11 May 1903. UGA/9/11/MHM; Nsambya Diary, 11 Dec. 1903. UGA/9/16/MHM.

⁷¹ Commissioner's Office to the Sub-Commissioner of Western Province, 21 Nov. 1902. A13/1/UNA; Jørgensen 1981, 50.

⁷² Tosh 1980, 85-86.

⁷³ Sadler to Lansdowne, 4 Nov 1902. FO 2/593/PRO; Tomkins to H.M. Commissioner & Consul General, 4 Nov. 1902. A12/2/UNA; Sadler to Lansdowne, 7 Sept 1903. FO 2/736/PRO; Torbjörn Engdahl, *The Exchange of Cotton. Ugandan Peasants, Colonial Market Regulations and the Organisation of International Cotton Trade, 1904 - 1918*. Uppsala Studies in Economic History 48. Uppsala 1999, 51-4; Jørgensen 1981, 52-53; P.G. Powesland, 'History of the Migration in Uganda', in A.I. Richards (ed.), *Economic Development and Tribal Change. A Study of Immigrant Labour in Buganda*. Cambridge: E.A.I.S.R. 1954, 17-9.

⁷⁴ Sadler to Lansdowne, 7 Sept 1903. FO 2/736/PRO; Ormsby to Sub-Commissioner, 30 Dec. 1904. A8/4/UNA. The coercion which took place in the introduction of commercial agriculture to Uganda was brought to light more than 25 years later by Archdeacon Owen, who claimed that floggings of men and women, and even imprisonment, had been a feature of the cotton economy in Uganda. The reason why the missionaries kept these abuses from the public - though they claimed to

By 1906, despite the 'encouragement' campaign, cotton and other commercial crops were failing to meet the high expectations. It was seen that the state of agriculture in the Protectorate was the same as ten years ago and that there had been no significant development. The Agricultural Department was too much engaged in purely scientific work and amateurish experiments, while it completely neglected all economic questions such as proper cropping methods, trade, etc. Another reason was that the expansion of cotton cultivation in Buganda and Bunyoro was checked by the shortage of agricultural labour. Because of the peasants' dislike of cotton, the chiefs began to direct *busulu* to their cotton fields to keep production going. Thus the peasants grew more disaffected with cotton than ever, and with the labour obligation, especially at times of planting and harvesting. In Bunyoro the planting of cotton coincided with the planting of millet, a fact that hampered the production of both items to some degree and posed a threat to food supplies.⁷⁵ Moreover, the ecological conditions in much of Bunyoro and western Buganda did not favour the development of cotton-based commercial agriculture.⁷⁶

Within Buganda, the relatively fertile and populous areas in the Entebbe and Mengo districts were the mainstay of agricultural and economic activity, and the area around Masaka in Buddu was also relatively wealthy in terms of cultivation and trading potential, but the western *sazas* of Buganda presented a completely different picture. The population on the dry lands of Kabula was sparse and little cultivation was undertaken, and Mawokota was much the same, so that in the absence of markets and communications the attempts at commercial agriculture were limited to small patches of groundnuts. As a touring officer reported in 1903: 'The people simply shudder at the idea of having to carry their produce all the way into Kampala for sale, and I must say it is a point on which I most strongly sympathize with them.'⁷⁷ These remote parts of Buganda were almost totally isolated from Kampala and Entebbe with regard to economic activity, and the collection of taxes seemed to

have witnessed them - was that they were themselves engaged in cotton growing and commercial agriculture in the early twentieth century and their business benefited from the system of coercion. Not all missionaries accepted the abuse, however, and Bishop Tucker was one of the early critics of the system. See Cotton Growing in Africa: Extracts from the Manchester Guardian, 22 Oct. 1929. CO536/157/20406/PRO; Taylor 1986, 43; van Zwanenberg and King 1975, 60; Ehrlich 1965, 403-404; Holger Bernt Hansen, 'Forced Labour in a Missionary Context: A Study of *Kasanvu* in Early Twentieth-Century Uganda', in Michael Twaddle (ed.), *The Wages of Slavery. From Chattel Slavery to Wage Labour in Africa, the Caribbean and England*. London: Frank Cass 1993, 186-206; Wrigley 1959, 18; Osumaka Likaka, 'Forced Cotton Cultivation and Social Control', in Allen Isaacman and Richard Roberts (eds.), *Cotton, Colonialism, and Social History in Africa*. Portsmouth: Heinemann; James Currey 1995, 200-220.

⁷⁵ Ehrlich 1965, 420-421; Sadler to Lansdowne, 4 Nov 1902. FO 2/593/PRO. For the role of cotton in creating insecurity in food supplies, see Allen Isaacman, *Cotton is the Mother of Poverty. Peasants, Work, and Rural Struggle in Colonial Mozambique, 1938-1961*. Portsmouth: Heinemann-James Currey-David Philip 1996, 150-170; Thaddeus Sunseri, 'Peasants and the Struggle for Labor in Cotton Regimes of the Rufiji Basin, Tanzania, 1885-1918', in Isaacman & Roberts (eds.) 1995, 183.

⁷⁶ Bazaara 1988, 83-84; Powesland 1957, 9.

⁷⁷ Report by Mr. Tomkins on a Tour through the Western and Southern Portions of the Kingdom of Uganda, enclosed in Sadler to Lansdowne, 30 Nov. 1903: BDF/A/G, Vol 16, 311-2.

be only factor connecting them with the central areas of the Province. It is therefore understandable that the colonial cotton scheme did not receive a wholeheartedly warm welcome, especially in the more marginal areas.⁷⁸

Cotton also required a significant amount of labour, which was often in short supply. In 1903 a touring officer reported from western Buganda:

'At present there is a good deal of discontent, owing to the amount of work they are called to do; the produce scheme is looked on by many as an extra taxation. They say they have to work for a month or produce 3 rupees every year for the Government; then they have to work for a month or provide 2 rupees for the Chiefs; then they have to cultivate a patch of ground for [the] Government, and all times they are called on to make roads, bridge swamps, build Chiefs' houses, kisakaties [sic] (fences), schools, churches, &c., and they really don't know what is going to happen next... [...] ...They complain they are called so often by the Chiefs to leave their plantations and go off elsewhere to work, that they get no time to attend to their own cultivation. There is a certain amount of truth in this, and I have come across cases where the complaint was justifiable and even their banana plantations had not been attended to.'⁷⁹

At the end of 1906 Governor Bell conceded that all the government experiments with commercial crops had been failures, and that the majority of the chiefs as well as the people showed little interest in cotton. The building of a planter economy according to the Kenyan model had been even less encouraging, for of the few Europeans who had tried agriculture in Uganda by 1906, only one remained, while the others had either died or departed. Apart from health hazards, the development of the plantation sector in the first decade of the twentieth century was restricted by the difficulty of access to land and labour. This led Governor Bell to declare that Uganda was a 'black man's country', and that the only way to develop agriculture further was to educate the local chiefs in matters of cultivation and use their control over the people to expand production.⁸⁰

But there were also other problems for the cotton industry in Uganda. Complaints were heard in 1907 from the British Cotton Growing Association about the poor quality of the Uganda cotton, which made the Uganda government react fairly promptly. The problem was that from 1902 onwards the distribution of seed cotton had been in the hands of the Uganda Company, an enterprise managed by a Danish C.M.S. missionary around which the cotton industry in Uganda had been formed, but the company had lost its monopoly over distribution of seed and

⁷⁸ See Wrigley 1959, 15-17.

⁷⁹ Report by Mr. Tomkins on a Tour through the Western and Southern Portions of the Kingdom of Uganda, enclosed in Sadler to Lansdowne, 30 Nov. 1903. BDF/A/G, Vol. 16, 313-4. By 1918 the land rent, or *busulu*, had risen to 5 Rs. per annum. The chiefs also kept at least 10 percent of peasant's cotton yield for themselves. See Engdahl 1999, 62.

⁸⁰ Bell to Elgin 23 Dec 1906, CO 536/8/ PRO; Bell to Elgin, 23 Dec. 1906. A42/283/UNA; Ehrlich 1965, 409-412; Taylor 1986, 37-38.

disposal of the cotton crop to two rivals in Kampala by 1907, whereupon the use of different varieties of seed and the intense competition between the companies had led to a situation in which the crop was not of a uniform quality, making it undesirable for the British cotton manufacturers. Legislative means were therefore employed in 1908 to ensure good quality cotton in the future. Only one variety of seed was to be distributed to the growers, and this was to be provided by the government, which also established a seed farm to ensure a supply of quality seed. Strict rules governing sowing, picking and uprooting were enforced to prevent crop losses and damage from rain, pests and disease. A Cotton Superintendent was appointed, an office around which the Department of Agriculture was formed a couple of years later.⁸¹ The imposition and surveillance of the new cotton rules was left to the chiefs, who carried out their duties effectively and apparently with some coercion.

The cotton industry in Buganda did not achieve rapid growth, however, despite the reforms. The increase in the output of cotton which took place from 1910 onwards resulted mainly from the expansion of the industry to the neighbouring territory of Busoga and elsewhere in the Eastern Province.⁸² Despite the difficulties experienced in promoting cotton cultivation in Uganda, its alleged benefits were eagerly reported to London:

'...owing to the general development of the trade of the country and especially to the establishment of the cotton industry, the peasantry have become so independent and prosperous that it is becoming, every day, more and more difficult to induce them to engage in any form of regular work. Their lands are so fertile and the means of existence so easily assured that they have little or no inducement to engage themselves for hire.'⁸³

The shortage of labour was indeed becoming a major obstacle to the advancement of the cotton industry, although not for the reasons reported to London. The colonial government had difficulties in recruiting an adequate number of porters and workers for supply caravans, public work projects and the construction of the roads and other infrastructure urgently required for economic development. It was already felt in 1895 that porters for the government should be recruited from the local population, since the professional Swahili porters were expensive and ill-behaved and were disliked by both the British and the locals. At the same time it was seen that road improvements should be hastened in order to secure an adequate flow of supplies. In the recruitment of porters the colonial state relied on the chiefs and their authority over the people. Porterage was disliked by the Baganda and Banyoro, however, since the work itself was hard, the food was poor and the pay, though subject to contract, was often meagre and unreliable. Despite the low salaries, the hiring of porters was extremely costly for the colonial state, and therefore hut tax labourers

⁸¹ Ehrlich 1965, 404-405; Wrigley 1959, 18-19.

⁸² Tucker to Boyle 23 Dec. 1909. G3/A7/O/1910/232/CMS; Wrigley 1959, 19-20.

⁸³ Confidential: Bell to Crewe, 27 April 1909. CO 536/26/PRO.

were also used as porters after 1900, in effect providing free transportation for the government caravans.⁸⁴

Hut tax labour, which had benefited not only the government but also the missionary societies and planters,⁸⁵ was nevertheless insufficient to meet the growing needs of the colonial economy, and it was felt in 1909 that the new poll tax would '... give the peasants some real necessity to work...'⁸⁶ More direct and coercive methods were also taken to secure labour. In 1908, for instance, the pressing need for porters in the cotton industry led Bell to turn to the chiefs to use their authority in securing an adequate labour supply. The outcome was the creation of the obligatory paid labour system known as *kasavvu*, under which every peasant not otherwise employed had to work for the government for one month - and from 1912 onwards two if this was felt necessary.⁸⁷

The establishment of *kasavvu* had many far-reaching consequences for the Protectorate. It was disliked by peasants from the very beginning and drove people to seek voluntary work in large numbers in order to avoid it. Suddenly there was plenty of labour available for the European and Asian plantations, some run by missionaries, which had emerged in Buganda and elsewhere in the Protectorate. This, accompanied by the shift in economic policy under the new Governor, Jackson, made business prospects more promising for the planters. *Kasavvu* led to a decrease in wages, actually keeping them below the tax rate, so that planters could easily compete in terms of remuneration. As the planters started acquiring more agricultural land, the prices of land increased, as did land rents, bringing money into the pockets of the Baganda landowners, who, because of their authority and increased affluence, could easily recruit more cheap labour for their farms to increase production and to compete with the planters. By 1913 the government realized that the competition between planters and chiefs in the private sector had pushed wages up, leaving the government itself with no chance of competing. Thus the labour shortages in the government's Public Works Department continued.⁸⁸

Besides *kasavvu*, salaried chieftainships were likewise looked on as one solution to the labour problems of the colonial government and planters in 1909. But

⁸⁴ Memorandum by Wilson, 6 July 1895. A4/2/UNA; Whyte to Wilson, 10 Jan. 1899. A4/15/UNA; Uganda Protectorate. Employment of Porters 1899. FO 881/7175/PRO; Tomkins to H.M. Commissioner and Consul General, 25 March 1903. A8/3/UNA.

⁸⁵ Letter from Jackson, 16 June 1901. FO 2/462/PRO; Johnson to Salisbury, 25 Aug. 1900. FO 2/299/PRO.

⁸⁶ Buganda Annual Report for 1909-10. Secretariat Minute Paper, A46/421/UNA.

⁸⁷ Powesland 1957, 18. Those who were partly or permanently employed for one or two months a year were exempted from *kasavvu*. This generated a vast market for false certificates and the emergence of a large group of professional 'skin buyers'. Indian businessmen sold false certificates stating that a person was employed as skin buyer for some Indian trader. See Simon Rutabajuka, 'Migrant Labour in Masaka District 1900-62: The Case of Coffee Shamba Labourers', in Mahmood Mamdani (ed.), *Uganda. Studies in Labour*. London: CODESRIA 1996, 22.

⁸⁸ Wrigley 1959, 34-35; Uganda Protectorate. *Department of Agriculture 1910-1911*, 2; Jørgensen 1981, 56-7; Hansen 1993, 191; Rutabajuka 1996, 21; Powesland, 1957, 18-20.

the plans, as seen above, came to nothing because of the undeveloped state of the economy and the consequent lack of money to pay the local governments. The scheme was also opposed by the chiefs themselves for political reasons. Thus, until the late 1920s, the bulk of the minor chiefs in Buganda and elsewhere continued to depend on the peasantry for their maintenance.⁸⁹

By 1914 the cotton economy in Uganda had increased the colony's exports many times over relative to the period before the establishment of *kasanvu*,⁹⁰ but the wealth derived from cotton was unevenly distributed. The Indian businessmen running the cotton industry benefited most, while some industrious Baganda landowners may also have derived a considerable income from cotton. For the most landowners in Buganda, however, the basis of their prosperity lay in the tenant farmers, from whom they extracted wealth in form of rents and produce. While the planters and landowners prospered, the bulk of the *bakopi* did not. In 1913 the monthly wage on a plantation was four rupees, and that in *kasanvu* service five, with a food allowance. Thus a man would have to work at least five weeks in order to meet his tax obligations, and it is likely that another five weeks, if not ten, would be required to cover the cost of food, rent and such necessary items as cloth for himself and his family. In 1915, by request of the *Lukiko*, land rents in Buganda were increased to 5 Rs. Lying behind this increase was a concern about the local government labour supply, as it had become common for the *bakopi* to pay rent to their chiefs in cash to avoid payment in labour or in kind. This left the local government without any labour, since it could not afford to hire labour on the free market. The government accepted the *Lukiko's* proposition without much consideration, with the consequence that the incomes of the landowners again increased while the *bakopi* tenants were pressed harder than ever. Many of them became desperate to acquire a piece of land of their own in order to escape the multiple obligations. The Baganda chiefs, on the other hand, became more convinced that the British were not really concerned about the manner in which the landowners treated their tenants, and in the coming years sporadic increases in the rates of *busulu* and *envujjo* became common.⁹¹

There was a rapid expansion of the plantation sector in Buganda from 1911 onwards, mainly because of the shift in economic and land policy, *kasanvu* labour service and the advancement of the cotton industry into the Eastern Province. The work of the Morris-Carter commission of 1911 was a clear sign for planters that it would be easier in future for non-Africans to acquire land in Buganda. Cheap labour was available since the *bakopi* preferred to seek employment within the private sector rather than accepting *kasanvu*. Also, the economic infrastructure was best developed in Buganda, providing relatively easy access to world markets for planter produce.⁹² As most of Uganda's cotton was already being grown in the Eastern Province, expansion of the plantation sector in Buganda would not pose a threat to the cotton industry.

⁸⁹ Confidential: Bell to Crewe, 27 April 1909. CO 536/26/PRO; Jørgensen 1981, 83.

⁹⁰ Havinden and Meredith 1993, 103-5; Ehrlich 1965, 406.

⁹¹ Powesland 1957, 21-22.

⁹² van Zwanenberg and King 1975, 62-63; Taylor 1986, 50; Powesland 1957, 19.

By 1914, with the improvement in the road network, planters were eagerly seeking land in the western parts of the Protectorate, especially Bunyoro, where there were no limits on land ownership by non-Africans as there were in Buganda. Nevertheless, despite its expansion, the plantation sector did not prove to be effective in competition with the peasant sector of the economy. The planters did not wish to grow cotton because of the low profits, but preferred more lucrative crops such as coffee, cocoa, sisal and rubber. Since many of these crops took a long time to reach maturity, many plantations were not yet in a fully productive state when the World War broke out in 1914. This increased shipping costs, which was detrimental to the planters. They likewise faced severe competition over labour, not only from the chiefs, but also from the colonial state as well. Some British officials were also opposed to planters for economic and political reasons. Many provincial commissioners resisted the creation of plantations since it would reduce their own labour supply for public works. Some of them were also concerned about social stability, for if the peasant population were to become too independent of the chiefs by accepting plantation work to earn cash, the authority of the chiefs and the colonial state over the people would be reduced. As with the pre-colonial chiefs and kings, the political power of the colonial rulers was dependent on the economic, political and social subjugation of the peasantry, who could not be allowed any degree of economic independence. Economic progress in Uganda was thus sacrificed for political and social stability.⁹³

LAND, TAX AND LABOUR, 1919 -1939

POST-WAR ECONOMIC POLICY

The World War hit the Ugandan economy hard. The shipping crisis increased the prices of imports and exports and created bottlenecks, since goods had to be stored in temporary warehouses for long periods of time. As men were recruited for military service, labour shortages on farms and plantations became severe. Government projects were halted not only by a shortage of African labour but by a lack of funding and a loss of staff on military duties. Consequently, setbacks were felt in infrastructure development, disease control and food supplies. Roads were left unrepaired, human and cattle diseases became rampant because of the increased movement of troops and the lack of medical and veterinary officers, and food crises became common when drought hit farms already suffering from labour shortages.⁹⁴

Colonial policy in Uganda entered a new phase after the World War. The pre-war years had been marked by a will to please the local elites and by cautious attempts to consolidate and extend the powers of the colonial government. After the initial establishment of a balance of power, the colonial society was 'frozen' to maintain stability and cohesion between the rulers and their subjects. The colonial state provided only a very limited framework for economic development, without much innovation in this respect. In general, the declining terms of trade, shortages of labour and famines testified to the vulnerability of the colonial economies in the face

⁹³ Youé 1978, 170; van Zwanenberg and King 1975, 62-63; Wrigley 1959, 29-32; Ehrlich 1965, 412-414, 422; Havinden and Meredith 1993, 116-117; Brett 1973, 261, 301.

⁹⁴ Havinden and Meredith 1993, 123; Ehrlich 1965, 422; Jørgensen 1981, 57.

of world market fluctuations. Yet it was not so much the economic crisis in the colonies as that in Britain that caused the shift in colonial policies, for it was hoped that by developing the colonial economies the British industries would gain new markets for their products, which would increase the prosperity of the mother country.⁹⁵

The new era began in Uganda with a new Governor, Coryndon. Soon after accepting office, he criticized strongly the way Uganda had been led in the past; there had been no plans made for the future development of the country regarding industry and agriculture and no one seemed to have had any idea or vision 'what the countryside should look like in 15 or in 50 years' time', or along what lines local governments should be developed in the future.⁹⁶

Coryndon's plan was to make Uganda financially self-supporting by increasing the revenue from trade licences and taxes. This policy involved the encouraging of plantation agriculture, especially in the western parts of the Protectorate. Bunyoro became one of the main areas of expansion for plantation agriculture between 1918 and 1920. Labour recruitment was organised from the West Nile district in the north to supplement the local labour supply. Cheap *kasanvu* labour was available, and tax revenues, mainly from the new cotton tax, were to be directed towards development of the transportation infrastructure in the district. In 1919 a newly appointed land commission, again headed by Morris-Carter, started working on settlement plans for Ankole, Bunyoro, Busoga and Toro, and its proposals for land appropriation for use by non-Africans were incorporated into the Land Registration and Transfer Act in 1920, which was accepted by the Colonial Office the following year. The future looked promising for the plantation sector in Uganda.⁹⁷

Morris-Carter's proposal made all land except private and official estates into Crown Land, and people living there became crown tenants, subject to the payment of rents to the colonial state. The arrangement made the lease and sale of crown land possible for Africans and non-Africans alike, with the promise of compensation for those living on acquired land. Africans could lease as much land as they wanted, with the approval of the Provincial Commissioner, provided that they could pay the required rent. The costs of surveying and other procedures were kept high, however, making the acquisition of land by purchase mainly open to European and Asian planters, with only a few exceptions.⁹⁸

The Land Registration and Transfer Act of 1920 was repealed in 1922, however, by request of the Governor. The main reasons for this were the planters'

⁹⁵ Havinden and Meredith 1993, 116-47.

⁹⁶ Extracts from Coryndon's private letter, 10 Nov 1918. CO 536/91/PRO.

⁹⁷ Watson to Coryndon, 4 Nov. 1918. Papers of Robert Coryndon, MSS. Afr. s. 633, RH; Land Settlement in Ankole, Bynuro, Busoga and Toro. Report of the Committee and the Provincial Commissioners of the Eastern and Western Provinces, 20 Sept. 1920. CO 536/104/520/PRO; Taylor 1978, 6-11; Youé 1978, 172-173; Pratt 1965, 480-481.

⁹⁸ Land Settlement in Ankole, Bynuro, Busoga and Toro. Report of the Committee and the Provincial Commissioners of the Eastern and Western Provinces, 20 Sept. 1920. CO 536/104/520/PRO.

attempt to control Uganda's cotton industry, the worldwide economic slump of 1920-1921 and the consequent reversal of the agricultural policy by the colonial state. The colonial state had been eager to promote plantation agriculture alongside peasant farming to ensure the best possible output of commercial crops. So far the most lucrative business had been peasant-grown cotton, however, as the planters had achieved only minor success with their principal crops, coffee and rubber, up to 1914. Thus the planters tried after the war to expand their activities to cotton growing as well. Eager to profit from the successful cotton industry and to increase their political influence in the Protectorate, they tried to persuade the government to give them a monopoly over cotton ginning there. In this they encountered resistance from the British Cotton Growing Association, which, although formerly eager to support plantation agriculture, now saw that planters could not compete with African producers because of the higher production costs. The final blow came with economic slump, which reduced the prices of planter crops and forced the planters to seek financial assistance from the colonial state. This was unwilling to commit itself, however, since the bulk of the estates were in severe financial troubles and not worth saving, and because there was no proof of the planters' capability to compete successfully with the African cotton producers. In its unwillingness to risk the productive African cotton sector for the sake of the uncertain plantation sector, the government was essentially reversing its policy towards the planters. Coryndon asked for the annulment of the 1920 Land Registration and Transfer Act, since he did not wish large tracts of good agricultural land to lie idle and turn to bush under European ownership. Thus, as a consequence of the pragmatic economic policy of the colonial state, Uganda became predominantly a country of African peasant agriculture from 1922 onwards. Some of the planters prevailed, but their economic and political influence was irrelevant after 1922.⁹⁹

Coryndon aimed at taxing the cotton industry and the non-African community, and at increasing the revenue from the poll tax. Regarding the latter, Coryndon's proposal meant an increase of 50 to 100 percent in Buganda and in the Eastern and Western Provinces, implying a tax burden of 7.5 Rs. for those engaged in *kasanvu* labour and 10 Rs. for those not. The rationale was that the peasants had become richer by growing cotton, so that they could bear heavier taxation.¹⁰⁰ This proposal was quite astonishing as far as the magnitude of the increase was concerned, especially at a time when commodity prices had risen sharply because of the war but wages were lagging behind. Coryndon was aware of this, but still considered that the people were wealthy enough to bear the burden. At first the Buganda *Lukiko* was in favour of the proposal, for it meant that they would receive 20 percent of the tax for local government purposes, but after closer consideration they reached the conclusion that it might not be possible to collect the higher tax. The chiefs in the *Lukiko*, together with the king, Daudi, argued that recent attacks of cattle disease had stripped many of the Baganda of their wealth, and that although cotton was a good source of income, it was the Europeans and the Asians who were becoming richer and not the Baganda peasants, who were struggling to cultivate

⁹⁹ Mamdani 1976, 53-61; Taylor 1978, 16-31; Youé 1978, 174-177.

¹⁰⁰ Coryndon to the Secretary of State for the Colonies, 1 June 1918. CO 536/90/125/PRO.

enough food for their survival.¹⁰¹ When Coryndon rejected these claims, the king and the chiefs then appealed to the Buganda Agreement, which banned the further introduction of taxes without the consent of the *kabaka* and the majority of the *Lukiko*. London signalled to Coryndon to give in, since it believed that the 'Sacred Document' of the Baganda should be respected.¹⁰²

Another cause of friction between the *Lukiko* and the new governor arose from Coryndon's plan to tax land rents and increase taxes on cotton.¹⁰³ His proposals reflected the urgent need for the colonial state to create new sources of revenue after the disastrous economic effects of the war.¹⁰⁴ Naturally these met with objections from the *Lukiko* and Baganda landowners, who derived a significant income from rents as well as from cotton. The cotton tax of 1919 was likewise resisted by colonial agricultural officials, the ginner and the British Cotton Growing Association on the grounds that it would undermine production.¹⁰⁵ Actually, the opposite happened; the tax meant that lower prices would be paid to growers, which would hit the peasantry hardest and, together with the increase in poll tax, meant a decline in their real incomes. Therefore, in order for them to maintain their level of income, more cotton had to be cultivated and sold.¹⁰⁶

The resistance of the *Lukiko* to a higher poll tax was broken in 1920 by the increase in salaries for the leading chiefs. A poll tax increase of 50 percent or 2.5 Rs. was approved in Buganda, where a special development tax was also established for landowners and landless tenants in 1921, to take effect from 1922, amounting to 20 shillings (Shs.), equal to 15 Rs., for those owning more than five acres, while those tenants liable to poll tax were to pay 2 Shs. Moreover, the landowners had to pay a ten percent tax to the government on their rent incomes. Despite the new taxes, it was the poll tax that brought the government the bulk of its revenue, accounting together with new cotton export tax for a half of its total revenue in the early 1920s.¹⁰⁷

¹⁰¹ Daudi Chwa, Apolo Kagwa, Stanislas Mugwanya, Yakobo Lule Musajalumbwa to the Provincial Commissioner, Buganda, 16 Jan. 1919. CO 536/93/30, PRO; Daudi Chwa, Apolo Kagwa, Stanislas Mugwanya, Y. L. Musajalumbwa to Milner, 8 May 1919, enclosed in Confidential: Coryndon to the Secretary of State for the Colonies, 30 June 1919. CO 536/94/PRO.

¹⁰² Coryndon to the Secretary of State for the Colonies, 28 Jan. 1919. CO 536/93/30/PRO; Confidential: Coryndon to the Secretary of State for the Colonies, 30 June 1919. CO 536/94/PRO; Confidential: Minutes on Increase of Poll Tax, 30 Sept. 1919. CO 536/94/PRO.

¹⁰³ Telegram from Carter to the Secretary of State for the Colonies, 15 April 1920. CO 536/100/PRO; Coryndon to the Secretary of State for the Colonies, 8 Nov. 1920. CO 536/104/527/PRO.

¹⁰⁴ Havinden and Meredith 1993, 123.

¹⁰⁵ Buganda Taxation Ordinance 1921. CO 536/112/371/PRO; Taylor 1978, 7.

¹⁰⁶ A major expansion in cotton cultivation occurred after each reform of the poll tax. See Jørgensen 1981, 54-55.

¹⁰⁷ Uganda Protectorate. The Poll Tax Ordinance 1920. CO 684/2/PRO; Uganda Protectorate. The Buganda Taxation Ordinance 1921. CO 684/2/PRO; Coryndon to the Secretary of State for the Colonies, 8 Nov. 1920. CO 536/104/527/PRO; The Uganda Agreement (Taxation of Natives) 1922.

The tax row marked the beginning of an intensifying confrontation between the Baganda elite and the British, in which the latter blamed the wealthy Baganda chiefs for the undeveloped state of country, in that, by clinging to their old ideals and privileges, they had failed to perceive openings for further development. The leading Baganda chiefs were told in a truly paternalistic manner about the great benefits that could be achieved if only they would break away from 'primitive' ideas and 'bear their fair share of the burdens of the community.'¹⁰⁸

Up to the 1920s taxation in the Protectorate had been uniform and unprogressive, i.e. everyone liable to the poll tax had to pay the same sum regardless of his actual income, economic situation, social standing or the place of residence. Now this was gradually changing; the wealth of the chiefs and the cotton industry were increasingly been taxed. Among the peasants, those in Buganda were taxed most heavily, while those of the relatively prosperous Eastern Province were taxed to the same extent as those in the more backward areas of Bunyoro and Ankole. Only in 1939 was the poll tax significantly reformed to match the prosperity of the different regions, so that Teso, Busoga and the most fertile parts of Buganda were required to pay higher taxes.¹⁰⁹ In 1931 the taxation of landed property was reformed to place the emphasis on taxing the large landowners. Thus everyone holding more than ten acres of land in Buganda was liable to pay 25 Shs. per annum, with the exceptions of few *gombololas*.¹¹⁰ On the other hand, the non-progressive taxation of the African population still served to increase the economic inequality between peasantry and chiefs. The Poll Tax Ordinance of 1920 allowed those who were unable to pay in cash to be employed by the government for a maximum period of two months, but this practice, which had been banned in Kenya in the early 1920s but introduced into Tanganyika, was not much liked in London, for it was seen as a form of forced labour. It was tolerated in Uganda, however, since people simply had no means of paying their taxes in cash.¹¹¹

CO 536/212/586/PRO; Jørgensen 1981, 63; Low and Pratt 1960, 243.

¹⁰⁸ Carter to the Secretary of State for the Colonies, 1 June 1920. CO 536/101/246/PRO; See also Jørgensen 1981, 83. The dismantling of the power of the *bakungu* chiefs had begun in 1913, with the termination of double chieftainships. In the 1920s the growing discontent of the colonial state for the *bakungu* and the way their managed affairs in Buganda led to the resignation of Apolo Kagwa, the *katikiro*, in 1926, who, among other things, opposed restrictions on chiefs' rights concerning the *busulu* and *envujjo* proposed by the colonial state. This accelerated the process of terminating the *bakungu* chiefs' semi-autonomy. The colonial state dismissed and retired the old elite in the course of the 1920s and 1930s, replacing them with educated African civil servants. Outside Buganda, mainly in areas north of the Nile, the Native Authority Ordinance of 1919 gave the colonial state the right to dismiss, appoint and transfer chiefs and to regulate their terms of service. Traditional chiefs were replaced by candidates chosen by the colonial officials, and who were to be stationed outside their traditional areas. After this, the traditional posts were made subject to appointment. In this way the chiefs were separated from their traditional political bases and replaced by salaried officials. See Jørgensen 1981, 82, 85-86; West 1972, 70; Twaddle 1969, 319-322.

¹⁰⁹ Uganda Protectorate. The Poll Tax Ordinance 1920. CO 684/2/PRO; Uganda Protectorate. The Poll Tax Ordinance 1939. CO 684/4/PRO.

¹¹⁰ Scott to the Secretary of State for the Colonies, 17 Aug. 1932. CO 536/173/22157/PRO.

¹¹¹ Coryndon to the Secretary of State for the Colonies, 26 May 1922. CO 536/119/307/PRO; Minutes on Native Labour, 26 May 1922. CO 536/119/307/PRO.

On the other hand, a lack of cash money was not taken as a sign of poverty: 'In Africa lack of currency is by no means synonymous with poverty. The fact that a man is unable to produce sufficient cash to discharge his obligations is not necessarily a proof that he is qualified for exemption on the score of poverty.'¹¹² People were seen to possess assets such as cattle and livestock which could have been sold to pay taxes. While this may be true, it was also the case that these assets were accumulated as customary forms of wealth to be used in social transactions such as bridewealth payments. To lose them for the sake of a tax obligation would push people into deeper poverty and hamper the social reproduction of society. There was no intention to alleviate the tax burden on the peasantry anywhere in the Protectorate, however. It was noted in 1938 that people in Uganda paid an average of six times more taxes than people in Northern Nigeria, for at that time the Poll and Native Administration taxes in the Eastern Province amounted over 30 Shs. per head.¹¹³

It seems, however, that there was a short period in the mid-1920s when prosperity among the peasantry in Buganda was increasing. The soaring price of seed cotton from 1922 onwards made cotton cultivation much more profitable, and prices remained high between 1922 and 1926, offering the peasants good returns on their cotton. The average yield per acre varied between 200 and 400 pounds of seed cotton, for which, according to prices in the 1922-1923 season, the grower received up to 30 Shs. per 100 pounds. The tax rate in the most fertile areas in Buganda at the same time was 15 Shs. per annum, so that by growing a couple of acres of cotton, a peasant household would receive a sufficient income to meet its tax and rent requirements, but not much else.¹¹⁴ Although the higher prices may have made abuse by landlords more frequent, which may have affected the return that the peasants received on their cotton, it seems that cotton growing brought in higher economic returns than paid unskilled labour. It was also in the interests of the landlords to limit their tenants' tax and labour obligations to the colonial state at times of a boom in the cotton trade.

THE LABOUR QUESTION

The competition between the colonial government, chiefs and the cotton industry over peasant labour intensified in the 1920s. The labour shortage was gravely felt during the war years, when extra manpower was needed to support the British war effort in the East African campaign. 5000 men with their chiefs were recruited into the carrier corps from Buganda alone, and several thousand were recruited from

¹¹² Mitchell to the Secretary of State for the Colonies, 15 March 1938. CO 536/197/40070/PRO.

¹¹³ Mitchell to the Secretary of State for the Colonies, 15 March 1938. CO 536/197/40070/PRO.

¹¹⁴ See Jørgensen 1981, 130 endnote 81. Uganda Protectorate. *Blue Book 1925*. Entebbe: Government Printer 1926, 49, 157; Tosh 1978, 429. Between 1922 and 1927, i.e. during the cotton boom, the area under cotton in Buganda increased from about 75 000 to about 200 000 acres. See appendices 3, 5-7.

Bunyoro and other territories. There were said to be 10 000 men employed in government labour projects in Bunyoro during the war, although the threatening food shortages and famine made the recruitment of labour difficult.¹¹⁵

After the war it became apparent that unpaid *luwalo* labour was one reason behind the labour shortages experienced by the government, and that this had been used for purposes for which it was not initially intended.¹¹⁶ There is hardly any mention of this communal labour obligation in the documents before the 1920s. Nevertheless, the 1900 Buganda Agreement confirmed the chief's right over peasant labour for 30 days a year for the maintenance of the road network, and this work was carried out under *luwalo* obligation, although the limit of 30 days was apparently not followed but greatly exceeded.¹¹⁷

The labour shortage immediately after the war was felt not only by the government but the local administrations as well. The ordinary people, who were suffering from widespread famine in 1918 – 1919, avoided the *luwalo* labour calls to the extent that eventually those who were too old or sick to escape the obligation had to do all the work. The *kasanvu* system was also in trouble at that time, as about 67 per cent of the taxpayers, i.e. adult males, were exempted, and one half of the remaining 33 per cent succeeded in evading their obligation, so that in the end only about 15 per cent of the taxpayers liable to *kasanvu* actually fulfilled their tasks.¹¹⁸ It seems that the poor payment did not attract workers to accept work on plantations or in government labour projects, since the little money earned was barely enough to buy food in times of scarcity. Also, the relatively high price of cotton immediately after the war made it a more attractive source of income, with a lower work input than that required by *kasanvu*,¹¹⁹ and many probably preferred to work on their gardens to assure themselves of future crops and incomes.

A special Labour Officer was appointed in 1918 to investigate the reasons behind the labour shortage, and the Uganda Development Commission, appointed in October 1919, also tackled the problem. In its report of 1920 it found that poor

¹¹⁵ Confidential: Jackson to the Secretary of State for the Colonies, 24 July 1916. CO536/81/PRO; Northern Province Annual Report for 1915-16. Secretariat Minute Paper, A46/809/UNA; Northern Province Annual Report for 1916-17. Secretariat Minute Paper, A46/810/UNA; Coryndon to the Secretary of State for the Colonies 10 May 1919. CO 536/94/178/PRO.

¹¹⁶ See Uganda Protectorate. *Report of the Uganda Development Commission, 1920*. Entebbe: Government Printer 1920.

¹¹⁷ See The Uganda Agreement 1900; Uganda Protectorate. *Report of the Uganda Development Commission 1920, passim*. In practice there existed two forms of unpaid labour under *luwalo*, *lufaya* and *luwala*, the former meaning work on the roads for four days every month during the rainy season and two days per month during dry season, and the latter, *luwala*, of which *luwalo* is a corruption, meant public work such as repairing bridges and chiefs' houses, to be done for 14 days per month without pay by persons not permanently employed. Together, *lufaya* and *luwala* contributed greatly to a household's labour burden. See Minutes on a Missionary Conference, 22 Jan. 1921. G3/A7/O/1921/33/CMS.

¹¹⁸ Buganda Annual Report for 1919-20. Secretariat Minute Paper, A46/440/UNA.

¹¹⁹ Van Zwanenberg and King 1975, 189-191.

working conditions made paid labour unattractive. The wages were small, food and housing were poor, working hours were long, no medical aid was available, and workers often had to travel a long way from their homes to work.¹²⁰ The commission proposed that *kasanvu* should be extended to two months for unmarried men and one for married ones, but these plans never materialised. Instead, the increasing competition for agricultural labour between the wealthy Baganda chiefs and foreign planters induced the *Lukiko* to plea for the abolition of the system, the significance which had already been undermined. The chiefs argued that the social stigma attached to *kasanvu* made it seem like slavery in the eyes of the locals. The decisive blow for *kasanvu* came from abroad, however. News about the maltreatment of forced labour in Kenya caused a public row in Britain, putting the Uganda system under closer scrutiny as well. The Colonial Office announced that the use of compulsory labour would no longer be tolerated without special permission.¹²¹

Kasanvu was abolished in 1922. Immediately afterwards wages rose and planters, already in trouble because of the economic slump, suffered a further setback as the cost of labour went up. In Buganda, where some sort of "working class" had already emerged, the abolition of *kasanvu* did not prove to be a problem at first, but in the remoter districts where population was sparse, the abolishment meant the cessation of public works. This left the government with two main options, either to encourage migrant labour, or to introduce compulsory labour by limiting the 'native production so that a certain proportion of the population will be obliged to earn their tax by working for wages.'¹²² The second option was undesirable as it would have halted economic development in the Protectorate, and the first was considered risky because immigrant labour meant the movement of people and an increased risk of epidemic diseases, of which the government had very traumatic experiences (see chapter 6). The government therefore came up with an additional, third strategy, and proposed that the much disliked *luwalo* labour system should be abolished or commuted to cash payment, because of the frequent abuses related to it. It was hoped that the restrictions on *luwalo* would bring the government the labour it desperately needed.¹²³ It is probable that commutation of *luwalo* would have increased the number of people offering themselves on the free labour market and would thus have eased the government's labour shortage, but the British soon learned that the abolition of *luwalo* was out of the question, since the local governments could not afford to hire labour on the free market. Moreover, the commutation of *luwalo* to a cash payment was regarded as problematical, since the

¹²⁰ Uganda Protectorate. *Report of the Uganda Development Commission 1920*; Coryndon to the Secretary of State for the Colonies, 13 July 1919. CO 536/94/185/PRO.

¹²¹ Uganda Protectorate. *Report of the Uganda Development Commission 1920*; Saza chiefs to Provincial Commissioner, 25 June 1918. Papers of Robert Coryndon, MSS. Afr. s. 633, RH; Powesland, 1957, 27, 32; Jørgensen 1981, 57, 80; Colonial Office. *Annual Reports of the Colonies. Uganda: Report for the year 1922* [hereafter *Colonial Reports*]. London: H.M.S.O. 1923, 6. The social repercussions of *kasanvu* will be discussed further in chapter 5.

¹²² Eliot to the Secretary of State for the Colonies, 9 Feb. 1922. CO 536/118/85/PRO. See also Rutabajuka 1996, 22-23, 30-31.

¹²³ Eliot to the Secretary of State for the Colonies, 9 Feb. 1922. CO 536/118/85/PRO.

low price of cotton in the early 1920s had made it difficult for the people to meet their obligatory payments but when better times ensued, most people would pay the *luwalo* in cash, leaving the local governments without the labour needed for public works.¹²⁴

Thus the *luwalo* system was allowed to continue, because of the economic weakness of the Protectorate, which could not afford to pay its subordinates for administrative work. The public benefits of *luwalo* are questionable, however; it was inefficient, subject to frequent abuses, and it tended to lose its public nature during the 1920s as the chiefs increasingly began to use it as a means of personal enrichment. Its ineffectiveness was clearly visible in the Eastern Province, where, after the abolition of *kasanvu*, the shortage of labour delayed construction of the proper road network desperately needed by the cotton industry. Although *luwalo* labour was directed to road construction, progress was so slow that the whole business was seen as a waste of energy. The absence of voluntary labour because of the poor wages, together with the ineffectiveness of *luwalo*, led the Government to conclude that the only way to foster economic development in the Protectorate, and especially in the Eastern Province, was to introduce another system of forced labour.¹²⁵

Because of the economic slump of the early 1920s there was no immediate shortage of labour in Buganda following the abolishment of *kasanvu*. The low price of cotton, the cessation of public works because of savings and the closing down of plantations made people seek work in order to earn money to cover their taxes. Voluntary workers were also streaming into Buganda from the economically less developed areas in the west and north. Even when the prices of cotton began to rise, cash cropping in such areas as Ankole, Bunyoro and West Nile was unprofitable because of the high transportation costs, so that these areas were gradually turning into labour reserves for Buganda and the Eastern Province. Despite the inflow of migrant workers, the Eastern Province was seized by a grave labour shortage when cotton prices went up in 1923. The construction of the road network - suitable for motor vehicles to increase the bulk and effectiveness of transport and to do away with ox drawn carts, caravans and the consequent threat of human and cattle epidemics - was in its infancy when the cotton boom began, and therefore, in order to provide improved transportation for the needs of the growing cotton industry, Governor Archer felt that the use of forced labour was necessary for the 'direct benefit' of the community, since it would free people from ineffective and wasteful *luwalo* obligations to work on their farms, to grow food and to help the cotton industry in the Eastern Province to make the best out of the improved economic situation.¹²⁶

¹²⁴ Coryndon to the Secretary of State for the Colonies, 21 July 1920. CO 536/101/323/PRO; Eliot to the Secretary of State for the Colonies, 9 Feb. 1922. CO 536/118/85/PRO; Coryndon to the Secretary of State for the Colonies, 30 May 1922. CO 536/119/316/PRO; Powesland 1957, 26-27.

¹²⁵ Archer to the Secretary of State for the Colonies, 30 July 1923. CO 536/126/424/PRO.

¹²⁶ Coryndon to the Secretary of State for the Colonies, 30 May 1922. CO 536/119/316/PRO; Archer to the Secretary of State for the Colonies, 30 July 1923. CO 536/126/424/PRO.

The use of coerced labour was not much liked in London, but since there seemed to be no alternative, its use in the Eastern Province was sanctioned. People would work under their own chiefs and supervised by government officials. Work was done five days a week for a maximum of six weeks. No workers would be employed at greater distance than five miles from their homes. Wages were paid, and medical aid was available for those in need. The new system was found to be far more effective than voluntary labour; there was no shortage of men, working efficiency was better since now not only the poorest had to work but also the well-to-do men of good physique, and it was fast, since workers were driven by the idea that the faster they worked, the sooner they would be able to return home. Under these conditions - whether they actually existed or not is questionable - the British felt that work was effective and the system was free from abuse. The most important thing besides effectiveness, however, was that the new system was almost 20 percent cheaper than work done by voluntary labour.¹²⁷

There were also pressures to extend compulsory labour to Buganda, but there were problems regarding the five-mile rule, and since voluntary labour was available, attempts were made to utilize this in the first place.¹²⁸ Despite the praise for the effectiveness of compulsory labour, the construction of roads still progressed slowly. In any case, the new system did little to alleviate the labour shortage beyond the road projects; in fact a grave shortage was felt in the ports, where the unloading of cargoes was often delayed, and the planters also complained that there were not enough workers for the plantations. The blame was put on the high price of cotton, which made people cultivate this enthusiastically. The labour from the outlying districts was absorbed by the mainly Indian ginners, who could afford to pay better wages than either the planters or the government. Also, the Baganda landowners recruited a great deal of labour for their cotton plots with social and economic 'inducements' which the government and the planters were unable to offer. This yielded rather frustrated comments from the top British officials: '... the unskilled man obtains a reward from his work considerably in excess of its normal economic value and in a month or two has satisfied his requirements for the entire year...'¹²⁹

In this situation the solution was 'to increase the stream of voluntary labour from outlying districts, where distance and consequent difficulties of transport preclude the native from profitably engaging himself locally in the production of economic crops...'¹³⁰ This meant mainly the northern and western parts of the Protectorate. Only a couple of years later it was realized that most of the people believed to be arriving from Kigezi and Chua actually came from the Belgian

¹²⁷ Minutes on Compulsory Labour for Road Construction, 20 Feb. 1924. CO 536/130/100/PRO; Loggin to the Chief Secretary, 24. Dec. 1923. CO 536/130/23/PRO; Archer to the Secretary of State for the Colonies, 18 June 1924. CO 536/131/245/PRO.

¹²⁸ Archer to the Secretary of State for the Colonies, 18 June 1924. CO 536/131/245/PRO; Telegram from the Governor to the Secretary of State for the Colonies, 22 July 1924. CO 536/131/PRO.

¹²⁹ Archer to the Secretary of State for the Colonies, 20 Aug. 1924. CO 536/132/329/PRO.

¹³⁰ Archer to the Secretary of State for the Colonies, 20 Aug. 1924. CO 536/132/329/PRO.

territories of Rwanda and the Congo. Many arrived in terrible condition, hungry and ill with fever. It was felt that the recently established Labour Department should urgently try to improve the conditions of migration and labour in general. The aim was that labourers should be allowed to form a 'caste' of their own at the bottom of the social hierarchy, and that working and living conditions should be improved to make paid labour an attractive choice for peasants wishing to earn money.¹³¹

Neither the government nor the planters were willing to invest in improvements in the conditions for migrant labour, however, since in a world of rapidly fluctuating prices the investment could easily turn out to be a useless waste of money.¹³² Nevertheless, migrants kept arriving, mainly because of the increased taxation in areas outside Buganda, the relatively high price received for cotton, and the possibility of a migrant worker becoming a tenant for a larger landowner. With hard work, the migrants could earn the money to pay the necessary taxes and rents and grow cotton to obtain more income. There was likely to be less abuse, at least compared with regions such as Rwanda and the Congo, where many of the migrants came from, as long as they fulfilled their obligations to their landlords and the colonial state.¹³³ When the flow of migrants from Rwanda and Burundi ceased temporarily in 1925 because of state intervention, an extensive recruitment campaign was launched to attract more labourers from the western parts of the Protectorate. In Ankole, Bunyoro and Toro the *luwalo* work demanded by the chiefs had in many places turned into unpaid forced labour for an unspecified time, refusal to do which often led to either imprisonment or a fine. Many peasants were therefore willing to migrate to Buganda to escape this forced labour and to make some money as unskilled workers.¹³⁴

The cotton boom seems to have increased abuses related to *luwalo* in Buganda as well. A special Luwalo Law was passed in 1927 by the *Lukiko* restricting the labour demanded to the original 30 days per annum and allowing those permanently employed to pay off their obligation in cash. This was a remarkable reform, for peasants had previously been subject to *luwalo* for as many as 20 days a month. In other parts of the Protectorate *luwalo* was allowed to continue, for it was feared that otherwise the local governments would be left entirely without labour. Another reason was that the Protectorate Government greatly benefited from *luwalo*, as the largest part of the road network in Uganda had been built with *luwalo* labour, i.e. unpaid forced labour. This had enabled the costs to be cut to about a half of the real price of construction.¹³⁵ In the course of the 1930s it became possible to commute

¹³¹ Gowers to the Secretary of State for the Colonies, 20 Feb. 1926. CO 536/139/105/PRO; Powesland 1957, 28-32.

¹³² Powesland 1957, 62.

¹³³ Powesland, 1957, 10-11; Wrigley 1959, 46-7. For conditions encouraging migration from Rwanda, see Roger Botte, 'Rwanda and Burundi, 1889 - 1930: Chronology of a Slow Assassination, Parts 1 & 2', *IJAHS* Vol. 18, No. 1 & 2, 1985, 53- 91, and 289 - 314, respectively.

¹³⁴ Powesland 1957 50-1; Rutabajuka 1996, 24-27, 29.

¹³⁵ Buganda Kingdom. The Luwalo Law 1927. CO 536/149/85/PRO; Minutes on a Missionary Conference, 22 Jan. 1921. G3/A7/O/1921/133/CMS; Mitchell to the Secretary of State for the Colonies, 14 July 1937. CO 536/194/40141/PRO.

luwalo to a cash payment, which the Luwalo Law of 1939 set at ten shillings for every person liable to pay poll tax. *Luwalo* payments already formed the financial backbone of the local governments in Uganda by 1937, a fact that reflected its unpopularity among the people. Its total abolishment would have meant greater financial responsibility for the colonial government with respect to road maintenance and construction.¹³⁶

It seems that the labour situation improved during the 1930s, since most of the European-owned plantations had already ceased to exist or had been passed to Indians, who began to grow sugar. Also, since the porters, rickshaws and *hamali* - four-wheeled carts drawn by men – were gradually replaced by motor transport during the 1930s, there were less employment opportunities for unskilled labourers in the cotton industry.¹³⁷ Although work in the cotton industry was seasonal, it had been relatively well paid to secure good incomes for the workers. Because of declining price of cotton during the 1930s, however, employment opportunities within cotton industry decreased and wages declined. Thus where the average wage for an unskilled labourer in 1932 had been 12 Shs. per month, in 1935 it was below 10 Shs. The wages for skilled labourers, on the other hand, rose significantly at the same time, varying between 25 and 240 Shs. a month depending on the nature of the work.¹³⁸

The Baganda landowners had also become dependent on the supply of immigrant labour by the late 1930s. This was mainly because of political and social changes in the late 1920s, which will be discussed further below. Immigrants were arriving at a rate of 100 000 per year from areas as such Bunyoro, the West Nile, Ankole, Kigezi, Tanganyika and Rwanda. Low wages and a lack of organization meant that conditions deteriorated, since no one was willing to invest in the welfare of workers. Many immigrants were accepted as tenants by the Baganda landowners, often working just to secure enough food. It was estimated that there were about 28 000 immigrant labourers settled on Baganda homesteads in 1937. Thus the immigrant labour, most of which was labelled as unskilled, was becoming the lowest 'caste' of society in Buganda, people who were poorly paid to undertake work that everybody else loathed to do, earning barely the minimum needed for survival. Those who wished to return reached their homes as poor as when they had left.¹³⁹

Uganda was apparently the only territory in British East Africa where forced labour was allowed to continue after 1922. This was done for the sake of the cotton industry, on which the revenue of the whole Protectorate depended. Whenever there was an increase in the price of cotton on the world market, the peasants, the planters, the cotton industry, the chiefs and the colonial state alike tried to derive maximum

¹³⁶ Mitchell to the Secretary of State for the Colonies, 14 July 1937. CO 536/194/40141/PRO; Kingdom of Buganda. The Luwalo Law, enclosed in Mitchell to the Secretary of State for the Colonies, 13 Nov. 1939. CO 536/203/40208/PRO.

¹³⁷ Walter Elkan, *Migrants and Proletarians. Urban Labour in the Economic Development of Uganda*. London: E.A.I.S.R.; Cambridge University Press 1960, 22-3; Tosh 1978, 429.

¹³⁸ *Colonial Reports 1933*, 31; *Colonial Reports 1935*, 31.

¹³⁹ Powesland 1957, 11, 59-62.

benefit from it. Consequently, peasants and labourers were occasionally abused by the chiefs, who made sure that their own plots would yield as much cotton as possible.¹⁴⁰ The cotton ginneries, mainly Indian, although paying better salaries in boom times, were disliked as employers because they tended to treat their workers harshly. To cut the costs of production, many ginneries employed child labour. The colonial government, unable to match the wages offered by the cotton industry and some landowners, had to use some degree of coercion in order to ensure its own labour supply, which, notwithstanding the economic slump in the early 1930s, was at most times inadequate.¹⁴¹ Ultimately, it was the landless peasants and immigrant labourers who paid the price of the rivalry over the cotton profits between the chiefs, the government and the Indian ginneries, with a deterioration in their own living conditions.

COLONIAL POLICY AND THE AGRARIAN QUESTION, 1927-1939: REFORM AND STAGNATION

LACK OF DEVELOPMENT

Colonial economic policy from the late 1920s to 1939 reflected the general trend in the whole colonial project in Uganda and elsewhere at that time, namely the pursuit for greater political, economic and social stability by means of indirect rule.¹⁴² Generally speaking, British colonial economic policy in the 1920s was characterized by *ad hoc* responses to the fluctuations in world markets, with no long-term development planning. The colonies were administered according to the needs of the mother country, which increased their vulnerability to fluctuations, since the colonial regulations barred genuine development of markets and institutions and led to regulated economies lacking in diversity.¹⁴³ The 1929 Colonial Development Act brought in by the new Labour government in Britain did not adopt any radical new lines. The colonies were still to be developed according to the needs of the mother country, but now with a more systematic approach. The worldwide economic depression of the early 1930s altered the situation, however. Large-scale development projects such as railways, dams and harbours became impossible, and

¹⁴⁰ Report of the Committee appointed by His Excellency the Governor to consider certain matters affecting tenure and rents of native land in the Buganda Province, 31 Dec. 1925. CO 536/141/5/PRO. It is difficult to estimate the scale of coercion on the part of the chiefs, but it seems that it was restricted to the minor chiefs eager to earn extra income. The wealthier landowners in Buganda attracted workers with good pay, so that *leja-leja* contract labourers became common in 1930s. Under *leja-leja*, a chief would hire a worker to do a certain task in a certain time, the price of which was settled beforehand. Contract times varied from one day or two to more weeks, and the labourer was free to leave when the work was completed. See Uganda Protectorate. *Report of the Committee of Enquiry into the Labour Situation in the Uganda Protectorate, 1938*. Entebbe: Government Printer 1938, 19-25.

¹⁴¹ Gowers to the Secretary of State for the Colonies, 20 Feb. 1926. CO 536/139/105/PRO; Joint Select Committee on East Africa. Minutes of Evidence, 13 May 1931, pp. 584-89. CO 536/166/21087/PRO; Uganda Protectorate. *Department of Agriculture 1923*, 5.

¹⁴² Ingham 1958, 189; van Zwanenberg and King 1975, 65.

¹⁴³ Havinden and Meredith 1993, 148-159.

many improvements in economic infrastructure such as roads, electricity and sanitation were also by-passed. Smaller projects related to public health and medical services were put into operation, but the Colonial Development Advisory Committee, formed in 1932 to administer the Colonial Development Fund, with its rather conservative members, brushed many of these projects aside since they did not fulfil the criteria of the earlier development policy, i.e. they were not seen to benefit the British taxpayers.¹⁴⁴

In Uganda the period between 1921 and 1940 was characterized by 'growth without development'. Although the cash crop production economy grew in size, virtually nothing was done to increase the productivity of agriculture in general. There was a lack of investment - the peasants had no means to secure enough capital to invest in land - and the major landowners concentrated on securing their political and economic interests mainly by living off the land rents they received and the agricultural work done by their tenants. This once 'revolutionary' avant garde of chiefs now formed a conservative rentier class, an elite clinging to power by freezing the structures of the society and opposing any reforms.¹⁴⁵

Uganda was badly affected by the economic depression of the early 1930s. The price of cotton fell 50 percent between 1929 and 1933, and was still about 25 percent below the 1929 level in 1937. Wages for unskilled labour stagnated after 1929 and dropped to less than 10 Shs. a month between 1932 and 1935. At the same time the prices of food and livestock dropped, while the cost of imported goods such as cloth remained unchanged. This meant that the peasants received less money for their produce in the local markets to pay their taxes and rents and to buy such necessary items as cloth and agricultural tools.¹⁴⁶ To maintain their standard of living, the peasants had to increase the acreage under cotton. Though cotton prices sank, the cotton output in Uganda doubled between 1929 and 1937.¹⁴⁷ The drop in coffee prices was even greater, and coffee production tripled. In Buganda the growth in output was even greater, the acreage under cotton multiplying by a factor of more than four between 1929 and 1937, although the poor cultivation methods and the effects of soil erosion tended to reduce the size of the yields. Production of the principle cash crop in Bunyoro, tobacco, grew six-fold during the same period.¹⁴⁸ Thus the driving force behind the economy was the fact that at times of falling prices and wages the peasants had to grow more cotton and engage in paid labour for more than one month in order to pay their taxes and rents and to obtain such necessary goods as clothes and agricultural tools.¹⁴⁹

¹⁴⁴ Havinden and Meredith 1993, 147, 160-163.

¹⁴⁵ van Zwanenberg and King 1975, 64-65; Wrigley 1959, 49.

¹⁴⁶ van Zwanenberg and King 1975, 69; *Colonial Reports 1932*, 31-32; *Colonial Reports 1935*, 31; Jørgensen 1981, 114-115.

¹⁴⁷ van Zwanenberg and King 1975, 69.

¹⁴⁸ See appendices 3 and 4.

¹⁴⁹ The evidence indicates that the peasants in Buganda did not experience a serious decline in their real incomes in the 1930s. Cotton yields per acre had been growing since the early 1920s, so that the average crop to be harvested in 1938 was around 600 lbs per acre. The general trend during the

The economic slump of the 1930s and the consequent financial problems of the Protectorate resulted in increased taxation of African and non-African businesses and of individuals, e.g. the cotton tax and 'non-native poll tax' were increased in 1934. The cotton tax partly explains the huge increase in cotton acreage in the early 1930s. The cotton industry alone was not enough to achieve around genuine development for the country as a whole, although the Uganda Cotton Commission was highly optimistic of its value in this respect. In fact coffee, especially in the Buddu area, increased its popularity during the 1930s because of its better price ratio than for cotton. Nevertheless, despite the statistically impressive production figures for Uganda, there had been little genuine economic or social development. By the mid-1930s it was realized that the tight financial policies of the colonial state had so far held back development relative to surrounding territories, so that Uganda was now clearly lagging behind in rural water supplies, the standard of African urban housing and the development of sanitation. Also, the cultivation of both food and cash crops was found to be in bad shape, which posed a further threat to development in the Protectorate.¹⁵⁰

THE BEGINNINGS OF RURAL REFORM IN BUGANDA

The ever more frequent abuse of tenants led the British to seriously revalue their relation with the leading chiefs in Buganda. Following the economic slump of 1920-1921, the prices of cotton rose sharply.¹⁵¹ The landowning chiefs did not hesitate to take advantage of the situation, and two attempts by the Lukiko to legalize the increased collection of *busulu* and *envujjo* were vetoed by the Governor in 1920 and 1924. Over-exploitation was nevertheless commonplace. In 1926 about one third of the cotton crop grown by a peasant was requested by his chief as *envujjo*, which was enough to convince the British that the landowning chiefs were primarily interested in their own welfare at the expense of the peasantry – no matter whether times were good or bad.¹⁵²

1930s seems to have been a decline in output per acre, however, mainly because of the increased acreage and consequent soil erosion and inadequate methods of cultivation, as well as the fragmentation and sub-division of plots. In the most fertile parts of Buganda there was also a lack of agricultural land, which, among other things, shortened the fallow periods and contributed to soil degradation. There is evidence indicating that peasants in Buganda were receiving an annual income of approximately 160 to 250 Shs. from cotton plots of three acres, while in Bunyoro the annual income varied between 34 and 59 Shs. These figures should be viewed with caution, however. The greater inputs of labour required to increase the output from cotton cultivation nevertheless diverted labour from other household tasks, including food production. See Uganda Protectorate, *Report of the Uganda Cotton Commission, 1938*. Entebbe: Government Printer 1939, 13-14, 30; Uganda Protectorate. *Department of Agriculture 1938*, 8; Uganda Protectorate. *Department of Agriculture 1940-1941*, 4-7; *Colonial Reports 1938*, 24.

¹⁵⁰ Ingham 1958, 208, 210-211; Wrigley 1959, 39-42; E.J. Wayland and N.V. Brasnett, *Soil Erosion and Water Supplies in Uganda*. Entebbe: Government Printer 1938, 68, 75; Uganda Protectorate. *Report of the Uganda Cotton Commission, 1938*. Entebbe: Government Printer 1939, 13-14, 24-25; Uganda Protectorate. *Department of Agriculture 1932*, 20-21; Uganda Protectorate. *Department of Agriculture 1940-1941*, 1-7.

¹⁵¹ Van Zwanenberg and King 1975, 190.

¹⁵² Report of the Committee appointed by His Excellency the Governor to consider certain

It was estimated in 1926 that several thousand landowners, perhaps as many as 10 000, had been levying excessive rents and tributes in kind and freely evicting tenants who were unable or unwilling to pay, and therefore 'seriously endangering the production of economic crops and creating a sense of insecurity in the minds of their tenants'.¹⁵³ A committee appointed in 1925 and led by the Provincial Commissioner, Postletwaite, had proposed the abolition of the *envujjo* on the grounds that it was not only 'a serious menace to progress and prosperity', but also an 'oppressive burden to the landless class' and 'repugnant to justice and morality'.¹⁵⁴ It seems, however, that concern over peasant welfare was not the sole motive behind this sudden burst of sympathy by the colonial state, but that it was interested in increasing the wealth of the peasantry for financial reasons. The committee had calculated that the poll tax could be increased as much as 50 percent by regulating the amount of *busulu* and *envujjo* extracted by the landowners. The increased revenue could then be used for educational purposes and for the creation of salaried chiefships, which would in turn limit the chiefs' economic and political power, to the benefit of the colonial state. The *bakungu* were no longer seen as the guarantors of colonial rule but as a conservative rentier class interested in making profit at the expense of their tenants. This profit, the British felt, should accrue to the colonial state rather than to the landowners, and therefore it was in the interests of the colonial state to restrict the powers of the chiefs and bring greater economic security to the peasants, so that they could grow more cotton in the future and could be taxed more heavily.¹⁵⁵

The *kabaka* and *Lukiko* naturally opposed the government's plans. According to the *kabaka* Daudi, '...it was only natural that some of the landlords abused their right in this respect and demanded excessive percentages from their tenants'. Moreover, he was of the opinion that all the fuss about the *envujjo* was 'out of proportion' and 'groundless', since the practice was 'in accordance with tradition', and the peasants anyhow enjoyed their traditional occupational and cultivation rights. Finally, Daudi considered that since the *Lukiko* had fixed the annual amount of *envujjo* to be paid, the practice was not harmful, for there were no complaints coming to the native courts about any abuses.¹⁵⁶ The chiefs in turn argued that there was no evidence of a decrease in cotton cultivation because of the *envujjo*, for it was the duty of the chiefs to encourage it, and that abolition of the *envujjo* would only prevent them from doing their work properly, so that cultivation would suffer.

matters affecting tenure and rents of native land in the Buganda Province, 31 Dec. 1925. CO 536/141/5/PRO; Low and Pratt 1960, 237.

¹⁵³ Jarvis to the Secretary of State for the Colonies, 18 Aug. 1926. CO 536/143/2/PRO.

¹⁵⁴ Report of the Committee appointed by His Excellency the Governor to consider certain matters affecting tenure and rents of native land in the Buganda Province, 31 Dec. 1925. CO 536/141/5/PRO.

¹⁵⁵ Report of the Committee appointed by His Excellency the Governor to consider certain matters affecting tenure and rents of native land in the Buganda Province, 31 Dec. 1925. CO 536/141/5/PRO; West 1972, 70-71; van Zwanenberg and King 1975, 66; Jørgensen 1981, 85-86.

¹⁵⁶ Daudi Chwa to the Governor, 25 June 1926. CO 536/143/2/PRO.

Moreover, in order to accept the proposed increase in poll tax, the chiefs in the *Lukiko* demanded the abandonment of the development tax, which had been introduced in 1922 to be levied from land rents.¹⁵⁷ The British were now clever enough to see through these claims, however. Though they accepted the abandonment of the development tax in order to collect a higher poll tax, the true nature of the chiefs' administration in Buganda was becoming all too visible. It was already known well before that that no chief would take up a case against another chief, since they shared common interests. The ongoing *bataka* controversy only seemed to prove this. The true nature of the *Lukiko* as a council of large landowner chiefs and not representatives of the people was thus becoming obvious even to the British.¹⁵⁸

To reduce the economic and political power of the landowning chiefs, to protect the peasants against exploitation and evictions and to boost the cash crop economy, the colonial state set out to replace the traditional administrative chiefs with salaried ones. The number of these at the lower levels in the local administration were increased in Buganda and the Eastern Province (except Karamoja) from 1926 onwards, and the system was extended to certain areas of the Northern and Western Provinces, namely Ankole, Toro, and Acholiland, in 1929.¹⁵⁹ The most important reform, however, was the *Busulu* and *Envujjo* Law of 1927, which placed limits on landlords' rights to extract rent and tribute from tenants and improved the security of tenancy. The committee of 1925 suggested the complete abolition of the *envujjo*, but this was considered unwise. It was decided that rents and tithes should merely be restricted, mainly for the sake of social stability. The *busulu* was limited to 10 Shs. per annum, and the *envujjo* to 4 Shs. per acre per annum for the first three acres of cotton and coffee. The tenant was entitled to undisturbed occupation of his *kibanja* provided that he kept it under cultivation and fulfilled his obligations towards his landlord as defined by law. This meant that a peasant could not be evicted without proving a case of neglect against him, and that his position as a tenant would be inherited by his successors. In the course of time, as the value of money fell but rents and tithes remained unchanged, the tenants received better money for their crops and could themselves invest in land. This greatly enhanced the formation of a class of private smallholders in Buganda, many of whom were former *kibanja* tenants.¹⁶⁰

Thus a class of smallholders was emerging in Buganda by the early 1930s, and the number of estates of 20 acres or less increased fourfold between 1930 and

¹⁵⁷ Nsibirwa Manteneruza, Andereya Kiwanuka & Ezera Kabali to the Governor, 6 July 1926. CO 536/143/2/PRO; Report of the Committee appointed by His Excellency the Governor to consider certain matters affecting tenure and rents of native land in the Buganda Province, 31 Dec. 1925. CO 536/141/5/PRO; Low and Pratt 1960, 243.

¹⁵⁸ See Report on a tour through Chagwe, Bugerere, Mruli and Bulamwezi by Sub-Commissioner Tomkins, 23 March 1905. A8/6/UNA; Low and Pratt 1960, 243-245.

¹⁵⁹ Gowers to the Secretary of State for the Colonies, 11 April 1929. CO 536/156/20353/PRO.

¹⁶⁰ West 1972, 70-73; Jørgensen 1981, 85, 87-89; van Zwanenberg and King 1975, 66; Mamdani 1976, 151-153.

1940. The average size of a holding decreased by one acre during this period because of fragmentation and sub-division by sale, gifts and inheritance.¹⁶¹ Those tenants who could not afford land of their own were still economically far better off than earlier, since cotton, and increasingly also coffee, continued to provide a relatively good income, and because rents and taxes remained unchanged despite inflation.

It is hard to say how much the greater economic security contributed to the increase in cotton cultivation in Buganda from 1928 onwards. It has been argued that the legislation of 1928 barred the formation of a class of truly capitalistic farmers employing large numbers of paid workers on large farms. In any case, most of the *bakopi* remained as tenants, preventing the large landowners from developing their estates had they wished to do so. The smallholders' and tenants' farms were too small to allow them to prosper by collecting rents and tithes, and there was little incentive for the tenant farmers to increase the production of cash crops beyond their immediate needs. For the smallholders it was the small size of the farms and the costs of labour that limited production. Nevertheless, many Baganda landowners could hire immigrant labourers to work on their farms at low rates of pay.¹⁶²

The main reason for acquiring land in Buganda seems to have been the social status related to this. By becoming a smallholder one would become a 'chief'. Even before the 1920s land had been eagerly sought after in order to avoid the hated *kasanvu* and *luwalo*, and the peasants' willingness to grow cotton during the cotton boom of the mid-1920s can partly be explained by their desire to earn money in order to buy land. For the major landowners, the growing prosperity and independence of the tenants meant a threat to their political power. While the *Busulu and Envujjo Law* reduced the large landowners to rentiers, it in practice created classes of 'free' tenants and smallholders at the same time, the former working to buy a piece of land, while the latter were concentrating on enjoying the prestige and increased status that this freehold land gave him.¹⁶³

ATTEMPTS AT RURAL REFORM IN BUNYORO

In Bunyoro the *kibanja* system developed unchecked throughout the 1920s, although there is very little information available on it before 1930, when it came under scrutiny from the colonial authorities. The land commission of 1919 had proposed in its report that five acres of land per head should be reserved for Africans, with registration rights for more, while the remaining land should become crown land liable to be appropriated for non-Banyoro, including Europeans and Asians. The commission did not interfere with the private and official estates owned by the royal family and leading chiefs, but granted two square miles of land to each *gombolola* chief and estates of various sizes to several princes and important chiefs. Clan heads received official estates, while those chiefs who did not receive private estates were

¹⁶¹ Mukwaya 1953, 29-35.

¹⁶² van Zwanenberg and King 1975, 65-67; Mamdani 1976, 151-153; Powesland 1957, 55-61; Powesland 1954, 36.

¹⁶³ Powesland 1954, 23-24, 36; Mamdani 1976, 152-153; Mukwaya 1953, 36.

allowed to continue the possession and occupation of the official estates they were holding at that time, and they were entitled to receive compensation if their land was later appropriated. They continued to receive rents from the peasants living on their land, but none of these rights would be inherited by their successors except the right of occupation.¹⁶⁴ It is not clear what effect the annulment of the Land Registration and Transfer Act of 1920 had on these arrangements in Bunyoro.

It appears, however, that the number of *kibanja* holders grew rapidly immediately after the World War, which can be explained by the cotton boom, the gradual withdrawal of the Baganda chiefs and the fear of losing land to European planters. In 1924 the Bunyoro *Rukurato*, or council, was informed that no system of private land tenure analogous to that operating in Buganda would be established in Bunyoro. The *Rukurato* would not accept this, however, and continued to nurse hopes of *mailo* land. Meanwhile, the number of *kibanja* holders continued to increase. A person wishing to obtain a *kibanja* could appeal to his superior, who would pass the matter forward until it reached the *Rukurato*, which in turn forwarded it to the *omukama* for a final decision. As fertile lands became scarce, official estates were converted to *kibanja*. By the 1930s the size of the *kibanja* holdings that were granted had become smaller, and the estates were often fragmented into separate small plots.¹⁶⁵

In 1931 a committee formed by J.G. Rubie and H.B. Thomas was appointed to investigate the *kibanja* system, for there had been difficulties in finding appropriate solutions to the questions of land, local administration and agricultural development in the district. They found that about 25 percent of the land area of Bunyoro was under sleeping sickness regulations (see Chapter 6) or set aside as game reserves, while part of the remaining land consisted of forests, escarpments and wastelands that were unsuitable for cultivation. The best lands of the district were divided into *kibanja* and *obwesengeze*, the official estates of the chiefs, making the total number of *kibanja* holders about one thousand, with the average size of a holding varying from a few acres to two square miles or more. Most of the holders were members of the royal family and various court officials.¹⁶⁶

The committee likewise found that the peasants were obliged to pay 10 Shs. poll tax to the colonial state, perform one month's *ruharo* (*luwalo*) labour for their chiefs (commutable to a cash payment of 10 Shs. per annum), pay one shilling in education rates under the Education Ordinance of 1927, pay *obusuru*, or land rent, to their chief to the value of seven shillings per annum and perform *kwerukire*, or minor services authorized by the Native Authority Ordinance, for their chiefs.¹⁶⁷

¹⁶⁴ Land settlement in Ankole, Bunyoro, Busoga and Toro. Report of the Committee and the Provincial Commissioners of the Eastern and Western Provinces, 20 Sept. 1920. CO 536/104/520/PRO.

¹⁶⁵ Uganda Protectorate. *Enquiry into Land Tenure and Kibanja System in Bunyoro*, 1931. *Report of the Committee*, 1932, 19-21. CO 536/171/22057/PRO; Dunbar 1965, 137-138.

¹⁶⁶ Uganda Protectorate. *Enquiry into Land Tenure and Kibanja System in Bunyoro*, 1931. *Report of the Committee*, 1932, 3-4, 21. CO 536/171/22057/PRO; Gowers to the Secretary of State for the Colonies, 12 Feb. 1932. CO 536/171/22057/PRO; Richards 1960, 109.

¹⁶⁷ Uganda Protectorate. *Enquiry into Land Tenure and Kibanja System in Bunyoro*, 1931. *Report of the Committee*, 1932, 4. CO 536/171/22057/PRO. It appears that after 1914 the lowest level

Thus the situation resembled that in Buganda before 1928, in that the *kibanja* holders behaved like private landowners, collecting unauthorized land rents and extracting considerable amounts of labour and services from their tenants on both official and unofficial estates. There was a deliberate tendency among chiefs to direct people to settle on their privately held *kibanja* in order to collect all the revenue for themselves. The British found that this state of affairs not only led to a lack of funds in local administration and slowed down the establishment of salaried chiefships, but it also held back agricultural development, as the chiefs tended to live off the revenue extracted from their tenants instead of engaging in cash crop cultivation in the proper manner. On most *kibanja* the number of tenants was small, and the income of the holder from his tenants might not have been considerable. A *kibanja* holder himself was not liable to pay rent or perform service, however, which according to Rubie and Thomas, made *kibanja* attractive and encouraged idleness.¹⁶⁸

The committee suggested that land arrangements should be made according to the model in operation in Ankole and Toro, in which *obusuru* was paid as tax to the local government to be used to pay salaries for chiefs instead of being paid directly to the chiefs for their private purposes. It was hoped that this would do away with the official estates, limit the expansion of unauthorized *kibanja* and free the peasants for other duties besides those for their chiefs. Land certificates would be given to peasants guaranteeing the security of their tenancy. Likewise, chiefs without private land would receive occupational rights to their estates after retirement.¹⁶⁹

The reform proposals encountered resistance, since many chiefs were unwilling to give up their perceived private rights over *kibanja* land for fear of losing their benefits, and the missionary societies also protested, as they had been entitled to collect *obusuru* from tenants living on missionary lands and would therefore suffer a decline in their income. Nevertheless, abolition of the *obusuru* paid to *kibanja* holders was made a part of the 1933 Bunyoro Agreement, which finally clearly defined the kingdom's status within the Protectorate.¹⁷⁰

The *kibanja* system was so deeply rooted in the *kinyoro* society, however, that its total eradication proved impossible. The 1933 Agreement obliged each *kibanja* holder to register his holding by paying a registration fee of five shillings. Since *obusuru* was banned, those chiefs holding *obwesengeze* would receive a salary and pension from the local government. Consequently the unauthorized private *kibanja* holders suffered a decline in their income because of the abolition of the *obusuru*. They were left without salaries and pensions, dependent on the tenants for their

of recognized administrative chiefs, the *muruka*, were paid one shilling from the *obusuru* collected from the peasants. See Beattie 1971, 169.

¹⁶⁸ Uganda Protectorate. *Enquiry into Land Tenure and Kibanja System in Bunyoro, 1931. Report of the Committee*, 1932, 18-20. CO 536/171/22057/PRO; Richards 1960, 109.

¹⁶⁹ Uganda Protectorate. *Enquiry into Land Tenure and Kibanja System in Bunyoro, 1931. Report of the Committee*, 1932, 23-34. CO 536/171/22057/PRO; Gowers to the Secretary of State for the Colonies, 12 Feb. 1932. CO 536/171/22057/PRO.

¹⁷⁰ Gowers to the Secretary of State for the Colonies, 12 Feb. 1932. CO 536/171/22057/PRO; Uganda Protectorate. *The Bunyoro Agreement 1933*. Makerere University Library Collections, G EAU (02) 1933/2.

maintenance, who were still required to render gifts and minor services to their masters. One way open to them was to increase the productivity of their land, in order to obtain greater economic returns. For the peasants, the 1933 reforms brought improvements. Although they did not receive the same protection as the Baganda tenants in 1927, they were relatively safe in their tenancies, although abuses and evictions without proper reasons continued to occur. Under the 1933 Agreement a peasant could even establish a *kibanja* of his own, provided that he could find a suitable piece of land and five shillings to register it officially.¹⁷¹

Rural development in Bunyoro before 1914 had been hindered not only by the *kibanja* system but also by a labour shortage. Many Banyoro sought more remunerative work outside Bunyoro, especially in Buganda, until the outflow of workers diminished in 1919 because of the advances in the plantation sector and concomitantly improved income earning possibilities in the district itself. But extension of the plantation sector in Bunyoro ran into many difficulties. A famine in 1918 and 1919 created a labour shortage and prevented the recruitment of workers, as private companies were prohibited by the government from drafting labour from famine-stricken areas in order to ensure the availability of labour for food production.¹⁷² The low wages relative to Buganda and Busoga, together with the frequent demands for *ruharo* made by the chiefs, drove many Banyoro to seek work elsewhere, leaving both the plantations and the local administration short of labourers. Compulsory unpaid *ruharo* work drained the household labour supply over long periods of time with no practical returns to the households themselves.¹⁷³ However, as has been seen above, there was little the government could do to limit the use of unpaid labour by the local chiefs, and this labour also manifestly benefited the colonial state itself.¹⁷⁴

Abolishment of the *kasanvu*, or *buronde* as it was called in Bunyoro, had considerable consequences for economic development in Bunyoro. Contrary to the situation in Buganda, the chiefs in Bunyoro were not demanding abolition of the system, since in the absence of significant agricultural and commercial activity, there was no serious competition for labour between the colonial state, the planters and the chiefs before the 1920s. Its abolition was a serious setback for the emerging plantation sector in Bunyoro, as elsewhere, however, as wage rates more than doubled, depriving the planters of cheap labour. Some planters managed to survive by recruiting cheap labour from the West Nile district. Despite the increase in wages, there was still a huge difference in wage levels between Bunyoro and the

¹⁷¹ Uganda Protectorate. *The Bunyoro Agreement 1933*. Makerere University Library Collections, G EAU (02) 1933/2; Jørgensen 1981, 97; Beattie 1971, 181-188.

¹⁷² Powesland 1957, 23; Coryndon to the Secretary State for the Colonies, 10 May 1919. CO 536/94/178/ PRO.

¹⁷³ Coryndon to the Secretary of State for the Colonies, 21 July 1920. CO 536/101/323/PRO; Eliot to the Secretary of State for the Colonies, 9 Feb. 1922. CO 536/118/85/PRO; Dunbar 1965, 129, endnote 14.

¹⁷⁴ According to Dunbar *ruharo* was to be stopped in 1921-1922, but there is no evidence to back this. It seems that the peasants were still liable to perform *ruharo*, since otherwise the labour supply for local government work would cease. See Dunbar 1965, 132.

main cotton areas of the Protectorate. While the rate in Buganda and Busoga in 1922 varied between 11 and 14 Shs. per month, that in the Western Province varied between six and eight shillings. Consequently, many Banyoro continued to migrate east in search of more remunerative work. The imbalance in wages and population drain that this fostered nevertheless contributed to the slow economic development and social instability experienced in Bunyoro.¹⁷⁵

Doyle has argued that security of tenure is essential for rural development.¹⁷⁶ While this may often be true, the lack of development in Bunyoro cannot be explained solely by the absence of freehold land or insecurity of tenure. As the example of Buganda has shown, the main motive for freehold land was not profit and economic development, but the prestige and social status associated with it. In Busoga, another part of the Uganda where there was no freehold land nor any great security of tenure, the production of cotton surpassed the figures achieved in Buganda before 1914. Here the cultivation of cash crops was in the hands of the chiefs, who were not entitled to collect land rents or tithes from their peasants, but they were entitled to peasant labour, which, as hereditary leaders, they directed to their own cotton plots on lands under their control, thus making huge profits.¹⁷⁷ In other words, they acted in the manner of large-scale farmers, and had the economy been of the free market kind, their prosperity would probably have generated some real development. In Bunyoro, on the other hand, the situation from the beginning of the twentieth century onwards resembled more that of Buganda, where the chiefs continued to levy heavy rents and tithes from the peasantry instead of encouraging the expansion of cash crop cultivation. The introduction of land certificates in 1933 consolidated the chiefs' control over the *bibanja* estates in practice, while, as in Buganda, it restricted their power over their tenants, thus inhibiting any attempts at large-scale farming. The main incentive for a tenant to grow a cash crop was the payment of taxes and rents, as in Buganda - often under coercion - and to save enough money to pay the registration fee of five shillings for a *kibanja* of his own.¹⁷⁸

More than insecurity of tenure, agricultural development in Bunyoro was hampered by the insufficiency of the economic infrastructure, mainly roads and ginneries, and the heavy burden of local administration laid upon the peasantry. High taxation, frequent compulsory labour demands and the low wage rates all pushed many Banyoro to seek work in Buganda. Bunyoro was connected to the Lake Victoria trading area only via Lake Kyoga and the Nile. While there was some development of the internal road network, there was no road suitable for heavy traffic connecting Masindi and Hoima with Kampala and the economic heartland of the Protectorate.¹⁷⁹ This lack of proper means of transportation meant that cotton

¹⁷⁵ Eliot to the Secretary of State for the Colonies, 9 Feb. 1922. CO 536/118/85/PRO; Powesland 1957, 33-36; Archer to the Secretary of State for the Colonies, 30 July 1923. Co 536/126/424/PRO.

¹⁷⁶ Doyle 1998, 270.

¹⁷⁷ Wrigley 1959, 41.

¹⁷⁸ See Dunbar 1965, 146-147; Beattie 1971, 184-191.

¹⁷⁹ Doyle 1998, 276-282; Dunbar 1965, 150.

cultivation was not profitable in Bunyoro. It was admitted in 1909 that '[u]ntil we have better means of communication and cheaper transport, there will be little or no progress made in the development of the cotton or any other industry in Unyoro [sic].'¹⁸⁰ The government's cotton rules limited the use of hand gins in the outlying areas, so that before 1924, when the first ginnery was established near Hoima, all cotton had to be headloaded or taken by carts to be ginned in Buganda.¹⁸¹ Thus, as Doyle has argued, the development of proper roads would have solved many of Bunyoro's problems, since it would have removed the reliance on portage and thus reduced the costs of transportation, bringing greater profits for growers. The cessation of portage would also have reduced the frequency of demands for compulsory labour, leaving the peasants more time to attend to their farms, and it would have reduced migration to Buganda, since there would have been opportunities to earn more cash by growing cotton. But since Bunyoro was located far away from Lake Victoria and the railhead and there was no established, profitable production that could be directly utilized by the colonial state, and also because of epidemiological threat posed by the spread of the tsetse fly, development of the infrastructure in the district was neglected. Not even the promising prospects of tobacco cultivation in the 1930s yielded any alleviation of the district's transportation problems.¹⁸² Even in the late 1930s, when Bunyoro was reported to be wealthier than ever before in the colonial period - mainly because of tobacco, cotton and sesame - the lack of infrastructure and costs of the local administration kept production costs and taxes high, bringing considerable economic hardship to the peasantry.¹⁸³

¹⁸⁰ Unyoro Annual Report for 1908-09, 12 May 1909. Secretariat Minute Paper A45/177/UNA.

¹⁸¹ The establishment of a ginnery in 1924 increased economic activity in the district. By 1925 three ginneries were in operation, with a slight increase in cotton production. See Annual letter by H. Bowers, 2 Dec. 1924. G3/AL/1917-1934/CMS; Doyle 1998, 294; Appendix 4.

¹⁸² See Doyle 276-282; Dunbar 152.

¹⁸³ Uganda Protectorate. *Annual Report of the Provincial Commissioners of Eastern, Northern and Western Provinces on Native Administration, 1937*. Entebbe: Government Printer 1938, 30; Uganda Protectorate. *Annual Report of the Provincial Commissioners of Eastern, Northern and Western Provinces on Native Administration, 1938*. Entebbe: Government Printer 1939, 26.

V Social Disruption, Deprivation and Hunger

DISRUPTION AND IMPOVERISHMENT

CONSEQUENCES OF THE 1900 LAND SETTLEMENT IN BUGANDA

Like the earlier reshuffle of chiefships and land, that carried out in 1900 also generated a vast population movement inside Buganda. Though the Buganda Agreement was signed in mid-February 1900, the land grabbing had already started before that, and the country was still in a state of complete confusion in August 1900. Many missionaries and colonial officials made bitter comments about Johnston and the way he was turning the country upside down and bringing it to the verge of another rebellion. Since surveying the land took a long time because of the large number of freeholders, land grabbing and evictions continued unchecked for many years. Force was not spared, and the smaller and weaker had to make room for the larger and more powerful. Families with all their possessions were following their chiefs to new locations, and some who wished to remain on their farms were brutally evicted by their new landlords. Families were desperately seeking places to settle down, build their huts and start cultivation.¹

The greatest injustice of the 1900 Buganda Agreement was that it concentrated a great deal of the economic and political power in the hands of a very small group of people, i.e. the regents, ministers and *saza* chiefs who formed the *Lukiko*. As has been shown, these men did not hesitate to use their power for their own ends, one of which was enrichment, for which freehold tenure offered ample opportunities. The British had already been worried in 1899 about chiefs 'attempting to avail themselves to an unfair extent of easily derived revenues from local taxes', which was seen as unfortunate for future agricultural development. The government tried to curb the arbitrary extension of rent and tithe payments by developing agriculture on commercial lines to satisfy the chiefs' desire to make a profit.² Subsequent increases in *busulu* payments in the course of time led the British to note in 1925 that 'under the new regime the ruling or upper classes have benefited enormously at the expense of the serf class.'³ The mere choice of words, 'serfs' instead of 'tenants' or 'peasants' seems to reflect the rural reality of the 1920s in Buganda, indicating that among the *bakopi* there had been little progress in terms of social and economic development since the late nineteenth century.

Another example of the power of the ruling oligarchy in Buganda was the *bataka* controversy. As early as 1904, when land grabbing was still going on, the

¹ Low and Pratt 1960, 110-111; Roscoe to Baylis, 9 June 1900. G3/A7/O/1900/130/CMS; Annual Letter by Baskerville, 24 Oct. 1900, 204. C.M.S. Annual Letters 1900, 204, CMS; Moffat to his mother, 7 Jan. 1900. MSS. Afr. s. 1792/36/75, RH; Albert Cook to his mother, 5 Aug. 1900. A110/Box 1/PP/COO/WTL; Annual letter by Chadwick, 3 Dec. 1904. C.M.S. annual letters 1904, 517, CMS.

² Wilson to Berkeley, 18 Jan 1899. A4/15/UNA; Annual letter by Walker, Nov. 1899, C.M.S. Annual letters 1899, 128-129, CMS.

³ Report of the Committee appointed by His Excellency the Governor to consider certain matters affecting tenure and rents of native land in the Buganda Province, 31 Dec. 1925. CO 536/141/5/PRO.

bataka requested the deportation of landowners from clan lands. The British, however, felt that if land was to be reallocated according to the requests of some *bataka* it would create a chain reaction leading to chaos.⁴ In 1908 the *Lukiko* rejected a proposal by the government to return some of the ancient clan burial grounds to their original holders, and in 1918 it likewise turned down a proposal that *butaka* land should be vested in clan trustees in return for compensation from Crown lands. It was especially the *bataka bamasiga*, the heads of sub-clans who had been deceived the most by the 1900 agreement, who were behind the *bataka* movement, and though they lacked political power and authority, they enjoyed popularity and support among the rural masses. By the early 1920s, then, the *bataka* had become a channel for rural protest in Buganda, sparked off not only by the injustices in land settlement, but also by the increased oppression, abuse and injustice experienced by the *bakopi*.⁵

The Bataka Association did succeed in directing attention to the rural reality in Buganda. The legislation of 1927 can be seen as a consequence of their activity, which sparked investigations on the part of the colonial state. The year 1927 in fact forms a landmark in the history of early colonial Buganda, since it was then that the political power of the landowning chiefs was eliminated: 'As soon as the state granted the peasantry effective immunity from the control of the parasitic landed class, the material basis of popular support for the traditional ruling class vanished. Given the paucity of their numbers and their lack of control over any means of production, their political demise was immediate.'⁶ But the events of 1927 and 1928 also deprived the Bataka Association of its popular support, making the smallholding peasantry and tenants the most important group in political and economic terms in the 1930s.

In the long run private land ownership and inheritance of land worked to undermine clan ties and the political power of the landed aristocracy. In the 1920s a new class of small landowners was emerging in Buganda, mainly through the inheritance of *mailo* land. It had been felt necessary in 1916 to regulate land inheritance in Buganda by legislation in order to guarantee proper and just inheritance, and accordingly, each man owing *mailo* was to name a heir in his will, usually his oldest son, who would receive a half of the deceased person's land, the remainder being divided between his other children. This procedure had to be confirmed by the king. If the deceased had no written will, the clan would decide

⁴ Fowler to Acting Commissioner & Consul General, 16 Nov. 1904. A8/5/UNA; Tomkins to Acting Commissioner & Consul General, 8 Dec. 1904. A8/5/UNA.

⁵ Archer to the Secretary of State for the Colonies, 20 April 1923. CO 536/125/245/PRO; Low and Pratt 1960, 233-236; Mamdani 1976, 123-124.

⁶ Mamdani 1976, 171-172. See also Jørgensen 1981, 82-87. Hanson (1997, 134) has argued that cash was the main factor undermining the old forms of allegiance such as clientage in the early colonial period. The cash income of tenants was minimal before the 1920s, however, since cotton cultivation, the main source of cash, was profitable only for those who could command large amounts of free labour. Moreover, it may be argued that the new tax and labour obligations made the peasants more dependent on their chiefs, who occasionally paid their tenants' taxes to secure their labour, and the peasants willingly sought exemption from *kasavvu* by placing themselves in the "permanent" employment of the chiefs.

about the order of inheritance. Where women inherited land, they were prohibited from selling it outside the deceased person's clan.⁷ The laws and regulations served to undermine the influence of the clans in the process of inheritance, although - contrary to western ideas of private property - they still held considerable power over the inheritance of privately owned land. Clans could not by themselves decide who would be a suitable successor, as this decision lay with the owner of the land himself, but the law prohibited one from naming an heir from outside one's clan. The rules of inheritance therefore tended to enhance father-son relationships. This was not a serious threat to clan authority over the land, however, as long as the heirs were not 'bad heirs'. On the other hand, many heirs receiving large estates apparently did not hesitate to make money by selling land indiscriminately, which posed a threat to a clan's authority and undermined its traditional control over its members. Similarly, the dissolution of the landed property of the major chiefs in Buganda during 1920s and afterwards led to a decline in their political and economic power, although this was more effectively compromised by the 1927 legislation. Therefore, because of inheritance, there emerged a class of independent smallholders during the 1920s and 1930s to whom land was primarily a means of achieving social prestige. Materially, their standard of living was not elaborate, in view of the small size of the majority of the estates (a few dozen acres or less, for the most part) and the limited number of tenants, but it was nevertheless above of that of the *bakopi*.⁸

LAND AND POLITICAL UNREST IN BUNYORO

The greatest fear of the ruling elites in Bunyoro in the early colonial period was that of losing their land to aliens, first to the Baganda and later to European planters. This fear sprang from the lost counties issue of the 1890s.⁹ The subsequent anxiety and concern over land in Bunyoro must be understood against the background of this traumatic experience.

During the first decade of colonial rule in Bunyoro the hostility and suspicion was mostly directed towards the Baganda chiefs who came to rule the country under British protection in 1901. The idea originated from George Wilson, an Acting Commissioner at that time, and was not welcomed by the Banyoro. In the next few years the British officials in Bunyoro were sympathetic to the Banyoro request for withdrawal of the Baganda, but the matter was swept aside by the uprising of Banyoro chiefs against the Baganda in 1907.¹⁰

The origin of the 1907 *Nyangire* uprising appears to have been the deep mistrust of the Banyoro towards the Baganda and the British - aggravated by the lost counties issue - and consequent antipathy and lack of proper leadership. It was also

⁷ Wrigley 1964, 38-39; Southwold 1956, 88-95.

⁸ Southwold 1956, 89-90, 95; Hanson 1997, 202-204; Richards 1966, 24-25; Wrigley 1964, 39.

⁹ J.H.B. Beattie, *Bunyoro's Lost Counties*. Institute of Social Anthropology. University of Oxford, s.a., 2-8; Doyle 1998, 179-184.

¹⁰ Low 1965, 86.

fuelled by the 1904 land arrangements, which actually served as an opening for the *kibanja* system, as seen above.¹¹ After the capture and exile of Kabalega in 1899 Bunyoro had for practical purposes been placed under a military administration, which was incapable of creating settled conditions in the country. The most capable chiefs had either been killed or deported, and the new chiefs were inexperienced or simply not up to the task they were facing. The lack of proper jurisdiction and authority to settle disputes and maintain order created insecurity. Many Banyoro continued to see the exiled Kabalega as their legitimate ruler rather than his under-aged son, Kitahimbwa, who had been enthroned as the new *omukama*. The people did not have any confidence in their chiefs, and the chiefs, pushed by the colonial state to collect taxes and organize labour recruitment, had to use coercion to make their people condone this.¹²

Thus, in order to establish effective administration in Bunyoro, the British imported Baganda chiefs in 1901 to act as supervisors over the local chiefs in matters of administration. It was soon clear, however, that not only would the Baganda be satisfied with organizing the administration, but many minor chiefs with their clients and servants would follow on the heels of the two high-ranking Baganda chiefs intended to supervise the local administration.¹³ This was opposed by the Banyoro, who took it as a further humiliation that they were regarded as unqualified to govern themselves and should be subjected to Baganda rule. The first complaints were heard soon after the influx of Baganda began. People did not want to live under the Baganda chiefs, who were accused of treating the peasants like serfs. They were also accused of robbing the Banyoro and taking the wealth of the country back to Buganda.¹⁴

These accusations were not baseless. Many Baganda, with the help of the two leading Baganda *saza* chiefs, were receiving estates as sub-chiefs and village chiefs, bringing more clients, followers and kinsmen to live with them. At the village level, the Baganda were in some places replacing the Banyoro in the key positions. They were also eager to extract wealth from Bunyoro. In 1899 they were able to use their rights as occupiers to rob Bunyoro of its cattle, and they would also try to convince the British that the Banyoro should pay annual tribute to Buganda same way as the Basoga did, but these claims were rejected.¹⁵

The C.M.S. missionaries resident in Bunyoro strongly favoured the introduction of the Baganda chiefs. According to Doyle, the C.M.S. had a very powerful role in the local politics, and they managed to convince the British in 1902

¹¹ Uzoigwe 1970, 30-31, 33; Low 1965, 86; Doyle 212-215.

¹² Uzoigwe 1970, 33-36; Doyle 1998, 216-218.

¹³ Cubitt to the Deputy Commissioner, 21 Feb. 1907. Affairs in Bunyoro, CO 536/13/PRO; Uzoigwe 1970, 37-38.

¹⁴ Uzoigwe 1970, 39-40; Bagge to H.M. Commissioner & Consul General, 16 April 1902. A4/2/UNA; Cubitt to the Deputy Commissioner, 21 Feb. 1907. Affairs in Bunyoro, CO 536/13/PRO.

¹⁵ Ternan to Salisbury, 16 Sept 1899. FO 2/204/PRO; Political report by Evatt, 10 May 1899. A4/7/UNA; Memorandum by Wilson, 11 Aug. 1899. A4/19/UNA; Annual report on the District of Bunyoro 1905-6, 16 May 1906. Secretariat Minute Paper, A42/61/UNA.

that the young king, Kitahimbwa, should be replaced by a Protestant, Andreyka, which actually happened.¹⁶ Despite the fact that their new king appeared to be loyal to the C.M.S. and the British, many Banyoro shunned away from the Protestant religion because of the pro-Baganda politics of the C.M.S. A further schism developed when the missionaries attempt to install Luganda as an official language of Bunyoro, as lessons at C.M.S. mission schools and bible classes - held by Baganda catechists - were already being given in Luganda and not in Lunyoro.¹⁷

Early in 1904 the alleged abuse of peasants by their chiefs had led the British to suggest that the chiefs should have their own land for their maintenance.¹⁸ This solution apparently convinced the Banyoro and the resident Baganda that land would be allocated for freehold tenure in a similar manner to that in Buganda. What followed was a further influx of Baganda sub-chiefs and their clients, however, and allocation of estates for minor chiefs, both Baganda and Banyoro, by the new *omukama*. Understandably, this created the fear in the minds of the Banyoro chiefs that their land would be taken over by the Baganda.¹⁹ In September 1906 *omukama* Andreyka, with the leading Baganda chiefs, requested that the *mailo* system should be established in Bunyoro. Agitation against the Baganda chiefs commenced in Bunyoro around that time and was especially strong in the lost counties.²⁰

In their protest against the Baganda, the Banyoro sought help from their neighbours, and there is evidence that they attempted to manipulate the anti-baganda feelings in Busoga, Ankole and Toro for their own ends. Moreover, the Banyoro chiefs proposed that a special council consisting of the chiefs in these countries should be appointed to consider the Baganda question in Bunyoro, and, apparently, also in Ankole and Busoga.²¹ The plan was that the chiefs in these countries should support each other in driving out the Baganda. For the Banyoro, ousting of the Baganda was a precondition for the return of the lost counties, and, as Uzoigwe has

¹⁶ Doyle 1998, 212.

¹⁷ Cubitt to the Deputy Commissioner, 21 Feb. 1907. Affairs in Bunyoro, CO 536/13/PRO; Doyle 1998, 212-213; Lloyd to Baylis, 2 Sept. 1901. G3/A7/O/1901/219/CMS.

¹⁸ Prendergast to H.M. Commissioner and Consul General, 2 Jan. 1904. A12/5/UNA; Wilson to H.M. Commissioner and Consul General, 10 March 1904. A12/5/UNA; Commissioner's Office to the Deputy Commissioner, 22 March 1904. A13/2/UNA.

¹⁹ Annual letter by Miss J.E. Chadwick 12 Nov, 1904. C.M.S. annual letters 1904, 535, CMS; Wilson to Elgin, 25 June 1907. Affairs in Unyoro, Co 536/13/PRO; Uganda Protectorate. *Enquiry into Land Tenure and the Kibanja System in Bunyoro, 1931. Report of the Committee*, 1932, 10-11. CO 536/171/22057/PRO.

²⁰ Uzoigwe 1970, 41-42; Uganda Protectorate. Intelligence Report No. 30, April 1907, Appendix G. CO 536/13/PRO; Wilson to Elgin, 25 June 1907. Affairs in Unyoro, Co 536/13/PRO; Fisher to Tucker, 20 & 25 May 1907. G3/A7/O/1907/155/CMS.

²¹ Haddon to Collector, Unyoro, 19 May 1907. Affairs in Bunyoro, CO 536/13/PRO; Memorandum from Knowles to Deputy Commissioner, 25 June 1907. Affairs in Bunyoro, CO 536/13/PRO.

argued, expelling the Europeans, though there is relatively little evidence to back this last argument.²²

The plot was put into operation in May 1907, at a time when the leading Baganda chief, Jemusi Miti, was in Buganda. The chiefs calculated that they had better chances of succeeding when the leader of their opponents was out of the way, as he would probably immediately see through their arguments and reveal their real motives to the British. However, though tension was high, the plot was eventually undermined by a non-violent show of force by the British and the arrest and later exile of the 53 chiefs.²³

What were the actual motives behind the rebellion? Fear of losing land to the Baganda can certainly be regarded as one. On the other hand, after the shuffle of chiefships in 1904, there were only 22 Baganda chiefs in Bunyoro in 1907, although many of them were apparently in key positions, which meant that they would have received considerable estates if *mailo* ownership had been installed.²⁴ This would have meant the consolidation of their political power in Bunyoro for a long time to come. In retrospect, therefore, the issue was not primarily the return of the lost counties, but political power. The rebellion also had its religious and ethnic underpinnings, for while the Catholic White Fathers mission had been openly supporting Banyoro claims, the C.M.S. was strictly opposed to it, considering the *nyangire* as an anti-European and racially motivated campaign against British-Baganda rule.²⁵ Governor Bell accepted this explanation and welcomed the severe punishments proposed by Wilson for the rebellious chiefs. He saw that since Bunyoro was a conquered territory, the Banyoro should have 'no claim whatever' regarding their treatment.²⁶ There was a politico-religious purge of chiefs, as 49 of the 53 chiefs exiled were Catholics, while 51 of those replacing them were Protestants. Thus it was the *omukama* and the pro-British Protestant party that reaped the benefits from the *nyangire*. Religion had entered into the political life of Bunyoro, and it was Protestantism that was the religion of the elite, while Catholicism was reduced to the religion of the peasantry.²⁷

As a consequence of the *nyangire*, the British, with the exception of Wilson, understood that the Baganda administration in Bunyoro should be done away with as soon as possible. As has been seen above, however, it took several years to accomplish this. Most of the Baganda were out by 1914, and by 1930 only Jemusi

²² Uzoigwe 1979 45-46.

²³ Telegram from Collector, Hoima, to Deputy Commissioner, 16 May 1907. Affairs in Bunyoro, CO 536/13/PRO; Isemonger to Deputy Commissioner, 18 June 1907. Affairs in Bunyoro, CO 536/13/PRO.

²⁴ Tomkins to Deputy Commissioner 15 April 1907. Affairs in Bunyoro. CO 536/13/PRO.

²⁵ Fisher to Tucker, 20 & 25 May 1907. G3/A7/O/1907/155/CMS; Annual Letter by Miss L.O. Walton, 29 Nov. 1907. C.M.S. annual letters 1907, 236, CMS.

²⁶ Bell to the Under-secretary of State for the Colonies, 21 Aug. 1907. CO 536/17/PRO.

²⁷ Doyle 1998, 231-232.

Miti himself remained.²⁸ Uzoigwe has argued that, being in fear of losing land and authority to the Baganda, the Banyoro chiefs withheld any further requests for private land until 1910.²⁹ It seems that since Governor Bell was reluctant to grant freehold land to the Banyoro, they waited until he was out of office before taking the matter up again. Instead of campaigning to give publicity to the freehold land question, they strove for the *omukama*'s favour and disputed over prospective *kibanja* estates.

The administrative structure of Bunyoro did not undergo any significant improvements as a result of the incidents of 1904 and 1907. On the contrary, the expansion of *kibanja* tenure made matters worse. A missionary named Fisher complained in 1907 that the country was divided into numerous large and small 'chieftainships', which, according to her, were detrimental to development. There was no progress, since it had become paramount to every man to be installed on a piece of land and to become a 'chief' in order to secure his own welfare.³⁰

TAXES, RESISTANCE AND IMPOVERISHMENT

By 1900 the external tributes collected by the Baganda from their satellites had ceased. The burden of supplying the administrative structure in Buganda then fell entirely on the *bakopi*, and it was evidently a considerable burden, on account of the imposition of colonial rule with its tax and labour requirements. In most of Buganda the hut tax was paid in labour from 1900 onwards, since people were not only short of money but also had little saleable produce. This free hut tax labour was used by the government, the missionaries and the planters to erect buildings and to commence cash crop cultivation.³¹

The beginning of tax collection sparked widespread population movements, with people from Bugerere moving north to Lango, while there was an influx of men from the Sese Islands into Buganda, mainly to Kyagwe, in search for work.³² Many people from Buddu moved south to German territory, and many migrated west from the Kakumiro district. It was estimated that 800 families had left Buyaga in 1903 for Toro to escape the hut tax and fibre collection. By 1908 it was feared that the *sazas* of Bugangadzi, Buwekula and Buyaga would soon be completely deserted because of out-migration.³³ Young men were leaving eastern and northeastern Buganda for

²⁸ Tomkins to Deputy Commissioner, 15 April 1907. Affairs in Bunyoro, CO 536/13/PRO; Uzoigwe 1970, 54.

²⁹ Uzoigwe 1970, 55.

³⁰ Annual letter by Mrs. A.B. Fisher, undated. C.M.S. annual letters 1907, 235, CMS.

³¹ Johnston to Salisbury, 25 Aug. 1900. FO 2/299/PRO.

³² Memorandum by Tomkins, 9 Aug. 1900. A8/1/UNA; Pordage to Acting Deputy Commissioner, 14 Aug. 1900. A8/1/UNA; Annual letter by H.T.C. Weatherhead, 30 Oct. 1902. C.M.S. annual letters 1902, 171, CMS; Leakey to Sub-Commissioner, 7 Sept. 1903. A8/3/UNA.

³³ Tomkins to Sadler 20 Nov. 1903. A8/4/UNA; Ormsby the Sub-Commissioner, 29 Feb 1904. A8/4/UNA; Report for the month of January by Manara, 5 Feb. 1904. A8/4/UNA; Talbot-Smith

Lango and Busoga to join Kakungulu - a Baganda chief under whose authority Johnston had placed a vast stretch of land in eastern and central Uganda - in the hope of estates and loot.³⁴

A more common means of evasion was the abandonment of farms and dwellings during the tax season, the inhabitants moving in to live with relatives in their compounds. According to the hut tax rules, a married man was allowed as many as four separate huts within his enclosure, on which he paid one unit of tax.³⁵ Since only married men were obliged to have huts, and since tax was collected from every owner of a hut, the hut tax came to be seen as a tax for married men. Thus at times of tax collection the men would send their women away and present themselves as bachelors, abandoning their dwellings when the collectors were coming and moving in to live with friends, other bachelors, or relatives, often several men in one hut, on which only one unit of tax needed to be paid.³⁶ Some tried to avoid the collectors by temporary escape, but the chiefs responsible for tax collection curbed this practice by seizing the women left behind and holding them in hostage until the men returned and paid their taxes.³⁷

The British also found that the hut tax had some unwanted and unpredicted "side-effects": it encouraged migration and 'unsettled habits', discouraged young men from marrying, and contributed to epidemics and unsanitary living conditions because of overcrowding and migration.³⁸ Whether these side effects were actually real or just a disguise for the prospective introduction of a higher poll tax is debatable. People clearly did not correctly understand the meaning of the hut tax, as it was commonly believed that it could be avoided by not marrying. It is also plausible that overcrowding in the households led to a decline in hygiene and sanitation, and that people tended to wander around in the absence of permanent settlement, all factors favouring the spread of epidemic disease. There was also a moral side to this argument, as the missionaries - especially the C.M.S. - regarded the hut tax as leading to a loosening of sexual morals, promiscuity and the spread of venereal diseases.³⁹ It was partly for these reasons, though primarily to curb tax

to Sub-Commissioner, 3 May 1905. A8/6/UNA; Boyle to Crewe, 15 Nov 1909. Confidential: Poll Tax. CO 536/28/PRO; Report on Kakumiro and Mubendi for September 1908. Secretariat Minute Paper, A44/98/UNA. Raphia and Senseviera fibres were requested by the colonial state as tax payments.

³⁴ Jackson to Lansdowne, 24 Jan. 1902. FO 2/589/PRO. For Kakungulu, see Twaddle 1993.

³⁵ Johnston to Salisbury, 25 Aug. 1900. FO 2/299/PRO.

³⁶ Sadler to Lansdowne, 16 Nov. 1902. FO 2/594/PRO; Jackson to Lansdowne, 24 Jan. 1902. FO 2/589/PRO; Report by Mr. Tomkins on a Tour through the Western and Southern Portions of the Kingdom of Uganda. Enclosed in Sadler to Lansdowne, 30 Nov. 1903. BDFa/G, Vol. 16, 312.

³⁷ Ormsby to Sub-Commissioner, 29 Feb. 1904. A8/4/UNA; Nsambya Diary, 23 Dec. 1901. UGA/5/A/7/MHM; Atanda 1969, 155.

³⁸ Bell to Crewe, 27 April 1909. Confidential: Poll Tax in Uganda. CO 536/26/PRO.

³⁹ Report by Mr. Tomkins, enclosed in Sadler to Lansdowne, 30 Nov. 1903. BDFa/G, Vol. 16, 312; Births & Deaths in the Uganda Kingdom, 1906. Secretariat Minute Paper, A42/143/UNA; Tuck 1997, 70-72. This question is discussed in detail in chapter 6.

evasion and increase revenues, that the poll tax was introduced in 1905. Since taxation had been extended to areas beyond Buganda by that time, many emigrants were returning to their homes from Toro and Bunyoro, where they had escaped from western Buganda, the area where tax evasion by migration appears to have been most common.⁴⁰

Resistance to tax collection was greater and more active in Bunyoro than in Buganda, and was intermingled with other activity directed towards the British and especially the Baganda. As in Buganda, the hut tax was discharged almost entirely in the form of labour in 1901, since people had nothing else to offer. This labour was used on roadworks and the erection of government stations. Hut tax workers flowed into Buganda, mainly to Entebbe, from Bunyoro and the other western territories.⁴¹ In 1902 the first signs of concrete resistance to tax collection emerged in Bugungu in northern Bunyoro. Systematic tax evasion by means of migration was noticed, in that people would avoid collectors, some by moving to live on mission lands in the hope that they would be exempted. By the end of 1903, the revenue from the district had decreased to the degree that the Commissioner's Office in Entebbe saw it necessary to remind the collector in Hoima of his duties.⁴² In his reply the collector presented evidence of excessive labour demands made on the peasantry by the chiefs as a cause for the decline in tax revenue, which then sparked off the events of 1904, as described earlier.⁴³

Tax evasion by means of migration increased in 1904. Many people in northern Bunyoro migrated east of the Nile into Lango, where no hut tax was collected, hundreds of people being reported to have done so in 1906 alone. There they became targets of hostility from the Langi, who feared that tax collecting would also be introduced into their country because of the Banyoro. Consequently, some Banyoro migrated as far north as Nimule.⁴⁴ Migration to the east bank of the Nile apparently involved only a few thousand people by 1905 -1906. Less is known about migration westwards into the Congo, although some evidently took place. It was reported in 1905 that a fairly large community of Banyoro were living near Mahagi on the western shore of Lake Albert, and that there was another community of

⁴⁰ Confidential: Bell to Crewe, 27 April 1909. CO 536/26/PRO; Atanda 1969, 156; Manara to Sub-Commissioner, 1 Dec. 1905. A8/7/UNA.

⁴¹ Report of the Unyoro District, 31 Dec. 1901. A12/1/UNA; Jackson to Lansdowne, 13 July 1901. FO 2/462/PRO.

⁴² Report on Unyoro District, 16 May 1902 1902. A12/2/UNA; Tomkins to H.M. Commissioner and Consul General, 10 Feb. 1903. A12/3/UNA; Knowles to H.M. Commissioner and Consul General, 16 May 1903. A12/3/UNA; Commissioner's Office to the Sub-Commissioner of the Western Province. May 19 1903. A13/1/UNA; Commissioner's Office to the Collector, Hoima, 26 Nov. 1903. A13/1/UNA.

⁴³ See Prendergast to H.M. Commissioner and Consul General, 2 Jan. 1904. A12/5/UNA; Wilson to H.M. Commissioner and Consul General, 10 March 1904. A12/5/UNA.

⁴⁴ Report on Hoima Station, August 1904. A12/5/UNA; Telegraph from Assistant Collector to Commissioner, 30 August 1904. A12/5/UNA; Migration of Banyoro into the Nile Province, s.d. Secretariat Minute Paper, A42/230/UNA; Leakey to H.M. Commissioner, 16 Feb. 1906, with enclosures. Secretariat Minute Paper, A42/57/UNA.

Banyoro and Baganda settled among the local Lendu and Balega further inland from the lake. The area appears to have been serving since the 1880s and 1890s as a place of political sanctuary for Baganda and Banyoro fleeing from chaos in their respective countries. Later, people also migrated to the Congo in order to escape food shortages and sleeping sickness (see Chapter 6) on the eastern side of the lake.⁴⁵

Partly because of a fear of spreading sleeping sickness and partly because of concern over losing taxpayers after the introduction of the poll tax in 1909, the colonial government took action to curb out-migration and to force the tax refugees to return to Bunyoro. The property of defaulters was confiscated when found, including their goats and sheep, and those ferrymen taking people across the Nile and the lake were punished.⁴⁶ Nevertheless, migration from Bunyoro to the east of the Nile continued because of the cheaper rents and lower taxes collected in Lango. During the First World War many men probably migrated to escape army recruitment.⁴⁷

The greatest flow of migrants from Bunyoro was to Buganda. Many men, unable to raise the three rupees required, wandered to Entebbe to work for the government.⁴⁸ Many took up a wandering way of life, which had become habitual and common by 1914. They had no settled homes, and as foreigners they paid no taxes in Buganda, and when returning to their homeland they stayed with their relatives. Many 'detrivalised' themselves in order to escape taxes and other obligations. During the 1920s and 1930s the colonial state attempted to curb widespread evasion by arresting and imprisoning defaulters, so that by the end of that period the number of tax defaulters in prisons had grown significantly, most of them young, able-bodied men.⁴⁹

Resistance to tax collecting in Bunyoro also took violent forms. In 1904 an African tax collector was killed in Bahagani. Some village chiefs told their people not to pay and to drive away anyone who came to collect taxes. In Bugungu people

⁴⁵ Wilson to H.M. Commissioner and Consul General, May 18 1905. A12/5/UNA; Fowler to H.M. Commissioner and Commander-in-Chief, July 12 1905. CO 536/2/PRO; Speke to the Acting Sub-Commissioner, Western Province, 4 Aug. 1905. CO 536/2/PRO.

⁴⁶ Migration of Banyoro into the Nile Province, s.d. Secretariat Minute Paper, A42/230/UNA; Leakey to H.M. Commissioner, 16 Feb. 1906, with enclosures. Secretariat Minute Paper, A42/57/UNA; Grant to Chief Secretary, 29 March 1909. Secretariat Minute Paper, A45/115/UNA. A different policy was followed regarding the Baganda tax refugees, whose repatriation from Bunyoro or any other territory was not considered necessary, since they were considered to be beneficial in terms of the economy. See Minutes by Tomkins, 30 May 1906. Secretariat Minute Paper, A42/57/UNA.

⁴⁷ Northern Province Annual Report 1914-15. Secretariat Minute Paper, A46/808/UNA.

⁴⁸ Wilson to H.M. Commissioner and Commander-in-Chief, 14 Oct. 1905. A12/7/UNA; Report on the District of Unyoro, September 1905. A12/7/UNA.

⁴⁹ Elliot to the Secretary of State for the Colonies, 1 Sept. 1922. CO 536/120/506/PRO; Scott to the Secretary of State for the Colonies, 19 Nov. 1932. CO 536/173/22170/PRO; Boudrillon to the Secretary of State for the Colonies, 14 April 1934. CO 536/182/23589/PRO; Mitchell to the Secretary of State for the Colonies, 15 March 1938. CO 536/197/40070/PRO.

refused to pay and repeatedly beat the collectors and chased them away with their spears. Consequently, many sub-chiefs were unwilling to carry out their duties and threatened to resign unless they were given protection.⁵⁰ The British collector at Hoima felt that proper punishment was needed to restore the collectors' authority, though any use of force was against the principles of tax collecting.⁵¹ In this case, however, special measures were seen to be necessary in order to put an end to the resistance in northern Bunyoro.⁵²

In December 1904 Commander Fowler was ordered on a 'special mission' to enforce the collection of taxes in Bunyoro and to extend taxation to the neighbouring Lango country, and to put an end to raids on the Banyoro by the Langi. The necessary use of force against aggressors and defaulters was authorized by Entebbe.⁵³ By February 1905 Fowler had managed to organize the collection of taxes in the troubled Bugungu area and attempts had been made to impose tax collection in Lango, east of the Nile, although this was apparently a failure.⁵⁴ Though Fowler's operations in northern Bunyoro and Lango caused much disturbance and population movement in the area,⁵⁵ the active resistance to tax

⁵⁰ Telegram from Assistant Collector to the Commissioner, 6 Sept. 1904. A12/5/UNA; Report on Hoima Station, September 1904. A12/5/UNA; Report on Hoima Station, October 1904. A12/5/UNA; Grant to H.M. Acting Commissioner and Consul General, 8 Nov. 1904. A12/5/UNA.

⁵¹ Grant to Acting H.M. Commissioner & Consul General, 8 Nov. 1904. A12/5/UNA; Commissioner's Office to Grant, 28 Nov. 1904. A13/2/UNA.

⁵² Telegram from Acting Commissioner to Fowler, 18 Dec. 1904. A13/2/UNA.

⁵³ Commissioner's Office to Fowler, 19 Dec. 1904. A13/2/UNA. Protectorate officials in Entebbe were well aware of Fowler's prejudices and misconceptions about the Banyoro, and they gently and politely turned down his wildest proposals, such as incorporating Bunyoro into Buganda. Fowler's proposal for the establishment of a permanent station at Chope and his idea of a 'travelling commissioner' to support the tax collectors were nevertheless warmly welcomed. See Fowler to H.M. Acting Commissioner and Commander-in-Chief, 31 Dec. 1904. A12/5/UNA; Wilson to Tomkins, 9 Jan. 1905. A12/5/UNA.

⁵⁴ Telegraph from Acting Collector-Hoima to Acting Commissioner, 11 Jan. 1905. A12/6/UNA; Telegraph from the Acting Commissioner to Sub-Commissioner-Hoima, 11 Jan. 1905. A13/2/UNA; Copy telegram from Grant to Acting Commissioner, 25 Jan. 1905. A12/6/UNA; Sub-Commissioner to Acting Commissioner, 11 Feb. 1905. A12/6/UNA; John Tosh, 'Colonial Chiefs in a Stateless Society: A Case Study from Northern Uganda', *Journal of African History*, 14 (3) 1973, 473-490, especially 8-9.

⁵⁵ Telegraph from Sub-Commissioner to acting Commissioner, 29 Jan. 1905. A12/6/UNA; Telegram from Sub-Commissioner to Acting Commissioner, 15 Feb. 1905. A12/6/UNA. Fowler's 'pacification' of the 'Bakedi' (Langi) sparked off a population movement in which people fled from the east bank of the Nile to Bunyoro, and also over the Kafu River to Buganda. The situation became worse towards the end of January, when Fowler launched his 'punitive action' against the Langi to recapture the women, children and cattle abducted by them during previous raids. The villages by the Nile and the Kafu became deserted and hundreds of people were amassed on the Bugandan side of the border. The estimated two or three thousand refugees, mainly Banyoro, in the barren borderlands by the Kafu and the Nile remained there until the middle of February, when they were driven back to Bunyoro by hunger and disease. See Telegraph from Sub-Commissioner to Acting Commissioner, 6 Feb. 1905 & 15 Feb. 1905. A12/6/UNA; Fowler to H.M. Acting Commissioner and Commander-in-Chief, 8 March 1905. A12/6/UNA.

collecting seems to have calmed down by early 1905. People took advantage of Indian petty traders who were willing to buy and export sesame, iron hoes, skins and salt, and rubber was collected in the Budongo area for an Italian company, which brought the people money to meet their tax obligations, but annoyed the British since few were willing to hire themselves out as workers for the government.⁵⁶

The resistance to tax collecting in Bunyoro and elsewhere in the Western Province grew out of abuse as well as poverty. It frequently happened in Bunyoro that people had paid their taxes in time but had not received tickets indicating that the payment had been made, which meant that they were required to pay twice. When people refused by saying that they had already fulfilled their obligation, coercion was occasionally used to extract the required payment. This greatly increased the people's dislike of the Baganda chiefs who were said to be rough in their methods, and eventually led to violence towards tax collectors in general.⁵⁷

There is ample evidence to indicate that taxation caused a great deal of impoverishment. The rate of taxation was too high considering the undeveloped nature of the economy, and a lack of cash and the means to earn it led to the pauperization of the less affluent peasant population.⁵⁸ By the end of 1902 it was already evident that taxation in Buganda had caused a 'heavy strain on the country's resources' especially in the western parts of the kingdom.⁵⁹ After the abolition of the cowry currency people were urged to pay either in labour or in kind, varying from grain and livestock to crocodile eggs. In the absence of any saleable produce, many peasants had to use iron hoes, pottery and baskets as payment or borrow money from their chiefs. Many families pawned their children to induce the chiefs to pay their taxes.⁶⁰ In Bunyoro the hut tax forced people to take up 'buying and selling' to the degree that local churches and missions were deprived of their teachers and readers,⁶¹ while in Buvuma people had virtually nothing to pay with except potatoes because of the ongoing famine, and eventually they had to give up their remaining goats as the collector took anything he could get. A British medical officer felt in

⁵⁶ Report on Hoima Station, October 1904. A12/5/UNA; Wilson to H.M. Commissioner, 22 Aug. 1905. A12/7/UNA; Report on the District of Unyoro and Station of Hoima, 31 June 1905. A12/7/UNA; Report on the District of Unyoro, July & August 1905. A12//UNA.

⁵⁷ Tomkins to H.M. Commissioner & Consul General, 10 Feb. 1903. A12/3/UNA; Knowles to H.M. Commissioner & Consul General, 16 May 1903. A12/3UNA; Report on Hoima Station, August 1904. A12/5/UNA. For example, five chiefs collecting hut tax in drought-stricken South-West Ankole, where crops had been lost and food prices were rising, were attacked and killed by the locals. See, Uganda Protectorate. Intelligence Report No. 30, Appendix F, April 1907, CO 536/13/PRO.

⁵⁸ Powesland 1957, 14.

⁵⁹ Dashwood to Deputy Commissioner, 28 Dec. 1902. A8/3/UNA.

⁶⁰ Johnston so Salisbury, 25 Aug. 1900. FO 2/299/PRO; Jackson to Lansdowne, 13 July 1901. FO 2/462/PRO; Sadler to Lansdowne, 16 Nov. 1902 FO 2/594/PRO; Telegraph from Assistant Collector to the Commissioner, 22 June 1904. A12/5/UNA; Tucker 1908, Vol. II, 265; Atanda 1969, 152; Tuck 1997, 70 fn. 51.

⁶¹ Annual letter by A.B. Fisher, 30 Dec. 1900. C.M.S. Annual Letters 1900, 215, CMS; Annual letter by F. Rowling, 21 Dec. 1901. C.M.S. annual letters 1901, 228, CMS.

1901 that it was 'utterly impossible' for the famine-struck Basoga to pay their hut tax, but the Special Commissioner Johnston did not allow them to be exempted.⁶²

Taxation apparently caused poverty indirectly by depriving people of their valuable assets, especially livestock. Apparently, however, some were also quick to take advantage of the situation by abusing the fears and ignorance of the people for their own ends. There was a rumour going around in Buganda in 1901, allegedly launched by some Baganda traders wishing to earn cash, that the British would confiscate all the livestock in Buganda.⁶³ This led to a mass killing of goats as people wished to sell the hides to buyers, who then made good money by selling them on to Indian traders for export. In 1903, when cattle were also increasingly being killed for money, the British saw it necessary to put an end to the mass slaughter by ordering the *Lukiko* to stop the killing, but with no success.⁶⁴ A restriction on goat killing was likewise attempted in Bunyoro, but since skins and hides were the only remunerative exports, the slaughter continued.⁶⁵ Baganda buyers were active in Ankole in 1903, when famine forced people to sell their cattle, sheep and goats for cash at cattle markets in order to pay their taxes and buy food.⁶⁶

It was also found in Buganda, however, that goats were not only being killed for their valuable skins: 'The skins are not wanted for trading purposes, and no amount of restriction will from what I can discover prevent the natives from killing the animals. They kill them for food.'⁶⁷ In some places food shortages undoubtedly led to the slaughtering and eating of animals, but in parts of Buganda it was related to the spreading sense of hopelessness and despair among the peasantry because of sleeping sickness. This lethal epidemic, which was rife in Buganda and Busoga from 1900 onwards at least, was said to have caused not only a great deal of sickness and death but considerable misery and psychological suffering, leading to indifferent and even self-destructive behaviour. People were reported to be 'dispirited' and, seeing themselves as 'doomed' because of the disease, were killing all their livestock and eating and drinking heavily before settling down 'in gloomy despair' to await death.⁶⁸

⁶² Tomkins to Commissioner and Consul General, 8 Nov. 1901 A8/1/UNA; Letter from Proctor, 20 April 1902. UGA/2/1902/MHM; A.D.P. Hodges' diary, 28 July 1901. MSS. Afr. s. 1782, RH.

⁶³ Tomkins to Commissioner and Consul General, 8 Nov. 1901 A8/1/UNA.

⁶⁴ Tomkins to Commissioner and Consul General, 8 Nov. 1901 A8/1/UNA; Nsambya Diary, 27 Feb. 1903. UGA/9/11/MHM; Nsambya Diary, 17 April 1903. UGA/9/11/MHM; Collector to the Secretary, 13 March 1905. A8/6/UNA.

⁶⁵ Leakey to H.M. Commissioner, 16 May 1906. Secretariat Minute Paper, A42/67/UNA.

⁶⁶ Commissioner's Office to the Sub-Commissioner of Western Province, 14 Nov. 1902. A13/1/UNA; Report of the Ankole District, Feb. 1903. A12/3/UNA; Report of the Ankole District, August 1903. A12/4//UNA; Cubitt to H.M. Commissioner and Consul General, 12 Nov. 1903. A12/4/UNA.

⁶⁷ Collector to the Secretary, 13 March 1905. A8/6/UNA.

⁶⁸ Annual Letter by H.O. Savile, 19 Feb. 1905. C.M.S. Annual letters 1904, 537, CMS. See also Annual letter by Miss A. A. Jacob, Nov. 1905. C.M.S. annual letters 1905, 66, CMS; Annual letter by Miss S.R. Tanner, 24 Oct. 1903. C.M.S. annual letters 1903, 177, CMS.

LABOUR

The chiefs' traditional right to peasant labour in Buganda and Bunyoro was transformed into outright exploitation during the first years of the twentieth century. In some places peasants complained that they were being treated as serfs by their chiefs, and many people migrated elsewhere to avoid the ever more frequent labour calls.⁶⁹ It appears that while labour service for the chiefs was allowed in the first place as being the cheapest way of collecting the hut tax and paying for the local administration, its disastrous effects for the country were soon becoming clear. An officer stationed in Bunyoro commented: 'I am of opinion that this labour should be done away with not only in the interests of humanity but in the interests of Administration and the country itself.'⁷⁰ These remarks may well have been correct in the early twentieth century, and also in the 1920s. Under the *luwalo* and *ruharo* systems people were often made to come from long distances for an unspecified time to fulfil their unpaid labour obligations to the chiefs. In the absence of men, women were frequently called to work, especially in the more sparsely populated districts.⁷¹

Since hut tax labour was much cheaper than labour hired on the free market, permission for its unlimited use was obtained from London.⁷² Since most of the construction sites were located in Buganda, workers had to travel several days by foot to reach Entebbe from such distant locations as Bunyoro or the western *sazas* of Buganda. Many were in poor condition on arrival, as the chiefs often sent the old and sick to work for the government while keeping the able-bodied men to work for themselves.⁷³ As most of the tax labour was absorbed by government, mission, or planter projects in central Buganda, there was a shortage of labour in Bunyoro and in the western *sazas* of Buganda, with a consequent delay in public works projects. Thus frustrated administrators in Bunyoro reported that the supply of workers consisted mostly of women. Likewise, the frequent task of road clearing was almost completely undertaken by women in Buganda.⁷⁴

It seems that taxation, and especially tax labour, was causing annoyance and disruption in family life among the peasantry. The head of the family might be engaged in labour duties for months, even a year, if he accepted labour service as a porter with the government or private caravans. Also, while men frequently worked for their chief away from home, women were likewise occasionally ordered and sent

⁶⁹ Bagge to H.M. Commissioner & Consul General, 16 April 1902. A12/2/UNA.

⁷⁰ Prendergast to H.M. Commissioner & Consul General, 10 Jan. 1904. A12/5/UNA.

⁷¹ Eliot to the Secretary of State for the Colonies, 9 Feb. 1922. CO 536/118/85/PRO.

⁷² Letter from Jackson, 16 June 1901. FO 2/462/PRO.

⁷³ Jackson to Lansdowne, 13 July 1901. FO 2/462/PRO.

⁷⁴ Report on the District of Unyoro, September 1905. A12/7, UNA; Albert Cook to his mother, 12 March 1904. A182/ Box 1/PP/COO/WTL.

by the district administration for as long as three months to grow food for the men employed on the plantations. Those who refused were forced to obey, sometimes even by beating.⁷⁵ In cases where the men had run away for good or were otherwise absent for a long time, the hut tax was collected from the women who were left behind, even though this was against the law: '... women..., ... whose husbands have been absent from their huts for over a year, trading, and otherwise employed, have agreed to work for their Chiefs near their homes for two months, and in return were to have their hut-tax paid for them by the Chiefs.'⁷⁶ This practice of women hiring themselves out to the chiefs apparently became more common in both Bunyoro and Buganda, and probably had some repercussions in terms of food production. In Buganda, the chiefs willingly took solitary women as tenants, for they were preferable to men since they were not required to pay taxes or to engage in *kasavu* labour. Instead, they could grow cotton for themselves and for the chief. According to Hansen, women were sometimes given *mailo* land by chiefs, or obtained it by purchase, thus becoming independent land holders. There is little evidence of female *mailo* holders before 1939, however. Social customs discouraged female land ownership, as the clans would not want women to inherit *mailo* land since there was a risk of the land passing to a rival clan if the woman was to remarry.⁷⁷

Cotton cultivation opened up an opportunity for the peasants to earn cash without accepting labour calls, which in turn reduced the government's labour supply. As seen above, the colonial state responded first by increasing taxation in 1905 and 1909, and by pressing chiefs to make their people more willing to accept work. Chiefs in Bunyoro were told to 'put pressure on the natives with the object of convincing them of the necessity of working...'⁷⁸ The dislike of government labour was increased by the low wages paid to workers. In 1906 the wages for unskilled labour in government service were frozen at three rupees per month, and chiefs were expected to use their authority if there was not enough labour coming in at the given rate.⁷⁹ It was plain to the British officials from the beginning that the wage rate was too low to attract labour other than the old and sick who were unable to find any other means of earning cash. It was also clear that this low rate of pay would lead 'to deprivation of the necessities for subsistence.'⁸⁰

In 1909, after the *kasavu* labour system had been established, the retiring bishop of the Protestant church, Tucker, attacked the colonial government on the issue of low wages and forced labour. According to him, if wages were 'reasonable' there would be no shortage of labour in government projects or any need for the

⁷⁵ Doyle 1998, 285.

⁷⁶ Report on Hoima Station, September 1904. A12/5/UNA.

⁷⁷ Hanson 1997, 179-180, 201-202.

⁷⁸ Leakey to Commissioner and Commander-in-Chief, 9 March 1905. A8/6/UNA.

⁷⁹ Circular No. 23 of 1906 by Tomkins, 26 Nov. 1906. Secretariat Minute Paper, A42/246/UNA.

⁸⁰ Letter by Wilson, 1 March 1907. Secretariat Minute Paper, A42/246/UNA.

labour camps to which workers from all over the Protectorate were collected and then distributed to work either for the government or for the planters (for some reason he forgot to mention the missions). Tucker saw that people were willing to improve their standard of living if they were only given a chance to earn money. For him, the government's policy was not only morally but economically unsound. He believed that trade and business in Uganda were being carried on 'on a false basis', against the principles of British rule and the 'freedom' that it propagated.⁸¹

Tucker's criticism was directed mostly at Governor Bell's policies regarding labour and the economy in general. The *kasanvu* system and the labour camps established under Bell's governorship required at least 24 000 labourers annually, as road construction was undertaken under *kasanvu* in addition to the *luwalo* road works, and hut tax labour was employed for portage as well as for the maintenance of government buildings and rest houses.⁸² Tucker also criticized working conditions, especially those in road construction, which was especially hated by the people. Men and women were called to work quite sporadically, whether or not they had paid their taxes, and the food was poor and often difficult to obtain, having frequently been taken from nearby farms without payment. Construction of the Mubende road, for example, was commenced at a time of food scarcity, and resulted, according to Tucker, in the 'most regrettable loss of life'. Tucker concluded that, considering the labour done for the chiefs and for the government, the burden had become truly excessive and was 'crushing' the people and thereby promoting out-migration, especially from Buganda.⁸³

The colonial government had considerable difficulties in replying to the criticism beyond the usual liturgy on the principles of the use of tax and compulsory paid labour. It had to admit that the use of unpaid labour, poor working conditions - especially poor food - and the practice of requisitioning food from farms and gardens without payment, were regrettable yet frequent evils in the system. But the idea of improved wages was refuted by arguing that this would cause wage rates to rise uncontrollably, making labour too expensive, and would undermine what was called the 'old feudal system of labour' as well as the chiefs' traditional authority.⁸⁴ The Colonial Office in London shared the pragmatic views held by the Uganda government: '... the man with the practical responsibility of government knows that... the country would be at a stand still, or would even retrogress, if the authority of the chiefs over labour supply... [...]... as exercised from time immemorial, were suddenly broken down.'⁸⁵

⁸¹ Tucker to Boyle, 20 Dec. 1909. G3/A7/O/1910/38/CMS.

⁸² Buxton to Seely, 3 Feb. 1910. MSS. Brit. Emp. s. 22/G 138, RH.

⁸³ Tucker to Boyle, 20 Dec. 1909. G3/A7/O/1910/38/CMS.

⁸⁴ Tomkins to the Secretary of State for the Colonies, 27 March 1911. CO 536/40/93/PRO; Jackson to Read 19 July 1911. Affairs in Uganda, CO 536/41, PRO; Boyle to Tucker, 4 Jan. 1910. CO 536/40/93/PRO; Thomas Fuller, 'African Labour and Training in the Uganda Colonial Economy', *IJAHS* 10 (1) 1977, 77-95, especially, 86.

⁸⁵ Minutes on Native Labour, 27 March 1911. CO 536/40/93/PRO.

Therefore wages were to be kept low and chiefs were ordered to put pressure on the peasants whenever necessary.⁸⁶ The preservation of traditional labour obligations, low wages, taxation and the *kasavvu* kept the costs of road construction and other infrastructure at a low level. Despite the coercive nature of the work and frequent abuses, the missionaries mostly kept silent, since they also utilized and benefited from the cheap labour. The Uganda Company, the forerunner of the cotton industry in Uganda, was not only managed by a C.M.S. missionary, Borup, but had originally been launched by T.F.V. Buxton, a president of the Anti-Slavery and Aboriginal Protection Society, both of whom were aware of the situation in Uganda but apparently - after Tucker's retirement - decided to quieten things down.⁸⁷

The Labour Commissioner, Scott, reported extensively on the faults in working conditions under the *kasavvu* system in 1921:

I have found men sleeping in the open at night, as the huts allotted to them were so infested with ticks, jiggers and fleas as to be uninhabitable. I have found men sleeping in tattered grass hovels which afford practically no protection from the weather. I have found men who after their day's work have had to go two miles for water in which to cook the evening meal and have also had to hunt about in the surrounding country for firewood. I have found in labour camps, and employed on quite hard work, old men who should never have been brought away from their homes. I have found men with no food and no means of getting any, and also men being fed on utterly unsuitable, even injurious, food. I have found men employed on tasks quite in excess of the maximum which any native can reasonably be expected to perform as his daily work for [a] month.⁸⁸

Kasavvu also had significant social repercussions. It was shunned since it remained a form of slavery, like any other work done under compulsion. Young women were said to shy away from young men who were engaged in *kasavvu*. Young men, in order to avoid it, migrated outside Buganda, and many young women followed. In 1920 it was estimated that a third of the able-bodied Banyoro men were permanently absent from their homes working in other parts of the Protectorate. Family life was shattered as wives were left behind to cultivate the land, to take care of the children and livestock, and see to all the other necessities. It happened that families lost all their livestock because of wild animals, theft, or poor care, since the women were overburdened with household and other work so that they could not take care of the

⁸⁶ The argument about the chiefs' loss of authority because of higher wages is not entirely convincing. Colonial officials often referred to the necessity to preserve what was understood as the 'traditional' authority of the chiefs. It is plausible, however, that the colonial state had substantially increased the authority of the chiefs relative to the pre-colonial period. The regents and chiefs were already telling the British in 1901 that Buganda had never been in as good order as it was then. See Tomkins to Commissioner and Consul General, 28 Feb. 1902. A8/1/UNA; and Tosh 1973, 473-490.

⁸⁷ van Zwanenberg and King 1975, 60; Buxton to Seely, 3 Feb. 1910. MSS. Brit. Emp. s. 22/G 138, RH. See also Hansen 1993.

⁸⁸ Scott to Chief Secretary, 6 Aug. 1921. Secretariat Minute Paper, A46/2230/UNA.

animals. Cotton fields became overgrown since there was no time to weed them, and the loss of crops and subsequent cash incomes tended to sap any industrious spirit there was left. The wages received from *kasavvu* labour were not enough to compensate for the losses, for part of the worker's salary often had to be spent on food and maintenance while working. Because of the government policy of re-directing *kasavvu* labour to the private sector, work was not only done for the good of the country, but increasingly for private businessmen, i.e. planters and traders who only sought 'their own wealth.' For the peasantry, then, *kasavvu* only meant hardship with no economic or any other returns. This meant that, by breaking up families and household units and bringing no economic returns for the peasants, *kasavvu* caused much distress and impoverishment in rural Buganda and Bunyoro.⁸⁹ It also brought about a great deal of economic inequality. Because of the large number of exemptions, the actual numbers of men performing *kasavvu* were rather small, and since those capable achieving exemption, usually by hiring themselves out to their chiefs, had better opportunities to engage in cash crop production than those who were unable to arrange exemption and were therefore made to work even harder and for longer periods of time. They could not properly guard and improve their farms, no could they grow cotton to earn better incomes. Their family life was shattered and they were more vulnerable to further exploitation. The workers likewise suffered from physical hardships because of poor nutrition and disease. *Kasavvu* thus contributed to the creation of a true class of rural poor.⁹⁰

The use of *luwalo*, *kasavvu* and other forms of compulsory labour for road construction was likewise harsh for the communities living near the construction sites. As workers were often taken by force from the local villages regardless of whether they had paid their taxes and rents or not - people fled when word of a road construction and maintenance scheme spread around. Often women had to be employed in the absence of men, which kept them away from their gardens, leaving their crops and property vulnerable to wild pigs, elephants and thieves.⁹¹ Moreover, since the labour gangs had to be fed, any large construction site, perhaps involving hundreds of men and women, put a serious strain on local food supplies. As the supply in the immediate vicinity became exhausted, food had to be transported from further away, which, even with a nominal price paid to the growers, made it too expensive for workers, who voluntarily starved themselves in order to save money.⁹² Often, however, the food was not paid for at all but requisitioned from the local people for free. In addition to road gangs, local people were expected to provide all

⁸⁹ Saza chiefs to the Provincial Commissioner, 25 June 1918. Papers of Robert Coryndon, MSS. Afr. s. 633/1/4/RH; Andrea Kimbugwe to Cooper, 13 July 1917. Papers of Robert Coryndon, MSS. Afr. s. 633/1/4/RH; Coryndon to the Secretary of State for the Colonies, 21 July 1920. CO 536/101/323/PRO; Doyle 1998, 286-287.

⁹⁰ Hanson 1997, 198-199.

⁹¹ Leakey to Sub-Commissioner, 7 Sept. 1903. A8/3/UNA; Sub-Commissioner, Unyoro, to H.M. Deputy Commissioner, 20 May 1908. Secretariat Minute Paper, A43/222/UNA.

⁹² Sub-Commissioner, Jinja, to H.M. Deputy Commissioner, 2 Dec. 1907. Secretariat Minute Paper, A43/303/UNA; Food for labourers on road work in non-inhabited districts, 2 Dec. 1907. Secretariat Minute Paper, A43/303/UNA; Tucker to Boyle, 20 Dec. 1909. G3/A7/O/1910/38/CMS.

touring government officials and their guests and staff with food, and also any government or private caravan that was passing through. This hospitality obligation was even objected to by the local chiefs who were in responsible for conveying the orders to the people.⁹³ It is not surprising that some chiefs neglected their duties regarding road clearing, for example, in order to preserve their popularity, or to prevent their people from migrating on account of the frequent labour demands. The local administration, however, finding out that some road work had been neglected, could impose a fine of several goats, for example, on the chief under whose jurisdiction the particular road was, but the chief would presumably fine the person below him double the amount of goats, and this went on until the fine was eventually paid by the local peasants who had no one to turn to to correct the injustices.⁹⁴

The second attack by the C.M.S. against the apparent injustices in government labour policy came only in the late 1920s. Archdeacon Owen, stationed in Kisumu, Kenya, accused the Uganda Government and the Baganda chiefs of using forced labour in road construction and cotton cultivation. He published his criticism in the *Manchester Guardian* and the *East African Standard* and sent evidence to the Colonial Office of the alleged coercion, whippings, floggings and imprisonment carried out as punishment for those refusing the labour obligation. He attacked Governor Gowers for allowing the use of 'old methods' in terms of labour, and especially for cotton growing,⁹⁵ and called the labour policies of the Uganda Government 'pure Bolshevism', especially the use of immigrant labour, which to him represented a 'negation of trusteeship' and a form of 'exploitation'.⁹⁶ Owen had already attempted to raise the issue in 1920, but had been muted by the Governor of Kenya, and probably also by his fellow missionaries.⁹⁷ In 1929 he therefore also accused the C.M.S. Uganda Mission of covering up the use of forced labour.⁹⁸ The Uganda Mission had to admit the existence of forced labour and coercion, but stated pragmatically that it could be tolerated as a means towards the public good: '...when work of national importance is concerned it may be doubted whether any primitive country could ever go far were compulsion of any purpose, however necessary,

⁹³ Bagge to H.M. Commissioner and Consul General, 21 April 1902. A12/2/UNA; Tucker to Boyle, 20 Dec. 1909. G3/A7/O/1910/38/CMS; Leakey to Sub-Commissioner, 7 Sept. 1903. A8/3/UNA.

⁹⁴ Report on a tour through Chagwe, Bugerere, Mruli and Bulamwezi by Sub-Commissioner Tomkins, 23 March 1905. A8/6/UNA.

⁹⁵ Cotton Growing in Africa: Extracts from the *Manchester Guardian*, 22 October 1929. CO 536/157/20406; Gowers to the Secretary of State for the Colonies, 6 Nov. 1929. CO 536/157/20406/PRO, with enclosures.

⁹⁶ Letter from Archdeacon Owen to the *Manchester Guardian*, published on 23 Oct. 1929. CO 536/157/20406.

⁹⁷ Rowling to Manley, 3 Sept. 1920. G3/A7/O/1920/180/CMS.

⁹⁸ Daniell to Thornton, 18 Nov. 1929. G3/A7/O/1929/138/CMS; Owen to Thornton, 22 Nov. 1929. G3/A7/O/1929/137/CMS; Owen to Daniell, 22 Nov. 1929. G3/A7/O/1929/138/CMS.

wholly ruled out.⁹⁹ Governor Gowers, for his part, denied any use of force in cotton cultivation, discredited Owen's sources - ordinary peasants and labourers - and blamed him for believing 'any statement made to him by a native' in order to discredit the government or local administration.¹⁰⁰ He nevertheless regretted that some chiefs had recently gone too far in their attempts to make people grow cotton during the price boom by means which were 'more forcible than polite', thus putting the blame for the abuses solely on the chiefs and local administration.¹⁰¹

LOCAL INDUSTRIES, TRADE AND CASH CROPS

The colonial state pushed people into dependence on colonial commodity and labour markets by imposing monetary obligations such as taxes on them and by reducing their freedom of trade and promoting state labour or cash cropping as means of making a livelihood instead of local industry and trade. Moreover, indigenous industries suffered greatly due to increased competition from imported industrially manufactured goods. Local barkcloth manufacture in Buganda was suppressed when the demand for high quality barkcloth diminished as local elites preferred imported cotton clothes. In Bunyoro the tanning of hides suffered similarly. Nevertheless, crude barkcloth and hides still remained the major clothing for the poor, with their market value greatly reduced.¹⁰² There is little information about how the important craft of pottery coped in this situation, but it presumably persisted in the villages, where people were unable to acquire industrially manufactured and often expensive cooking pots.¹⁰³ According to Doyle, most of Bunyoro's old industries were failing by 1910. Iron working and the trade in hoes were still doing quite well in 1908, but soon after that locally manufactured hoes were replaced by more expensive but more durable industrially made ones. Small-scale local production of iron hoes persisted, however, as most of the rural dwellers were too poor to acquire industrially manufactured tools and utensils. Such was the demise of indigenous crafts and industries that in 1920 *omukama* Andreyka asked the C.M.S. missionaries to teach his people the skills of carpentry and smithing.¹⁰⁴

Cattle rearing was also in serious trouble. The cattle herds had been reduced by rinderpest in the early 1890s, and the remaining cattle population in Bunyoro became subject to looting by the Baganda towards the end of the decade. The remaining cattle were further decimated by the subsequent attacks of East Coast

⁹⁹ Copy of a letter by Bishop of Uganda to East African Standard, enclosed in Daniell to Thornton, 25 Nov. 1929. G3/A7/O/1929/140/CMS.

¹⁰⁰ Gowers to the Secretary of State, 18 Jan. 1930. CO 536/159/20488/PRO.

¹⁰¹ Gowers to the Secretary of State for the Colonies, 6 Nov. 1929. CO 536/157/10406/PRO; Gowers to the Secretary of State, 18 Jan. 1930. CO 536/159/20488/PRO.

¹⁰² van Zwanenberg and King 1975, 120-121.

¹⁰³ Mamdani 1976, 34-35.

¹⁰⁴ Doyle 1998, 248-249; Grant to Chief Secretary, 16 Aug. 1909. Secretariat Minuet Paper, A45/115/UNA; Andreyka Dugaga II to Manley, 15 Jan. 1920. G3/A7/O/1920/115/CMS.

Fever and rinderpest.¹⁰⁵ The latter made its 'second coming' in Uganda between 1910 and 1920, spreading to Buganda mainly from Busoga and Bunyoro. It killed cattle on the banks of the Sezibwa River in Kyaggwe in 1913 and spread further, into Bulemezi, Buruli, Singo and Busiro, in the following years. In 1919 and 1920 it devastated cattle herds in western Buganda, killing about 40 000 head in the Masaka district, about 80 per cent of the cattle population of the area. The cattle herds in Buganda shrank to a half during these two disastrous years. In Bunyoro the disease found a permanent reservoir the large game populations, especially the buffalo, with a constant threat of spreading to the cattle herds of western Buganda.¹⁰⁶ Efforts at controlling it were mainly futile. The immunization campaign undertaken in 1928 was unpopular because of the costs - three shillings per cow - and because of the poor quality of the vaccine and its poor administration. According to Doyle, the immunisations in 1928 'killed almost forty percent of Bunyoro's cattle.'¹⁰⁷

Another serious and harmful disease was trypanosomiasis, which made cattle rearing difficult over a large area of northern Bunyoro and in parts of Buganda.¹⁰⁸ The spread of the tsetse fly and trypanosomiasis was apparently associated with depopulation, cattle trading and the colonial policy of wild life preservation. By the early twentieth century the area north of the Kafu River, especially between the Kafu and Masindi, had degenerated into bushland because of depopulation and a lack of human activity. Tsetse flies, following the movements of game, had taken over the bush and were prevalent along the main roads, since, in the absence of human traffic, wild animals - the main food source for the tsetse - were wandering along the roads and pathways. By 1904 vast areas of Bunyoro had been infested with *Glossina morsitans*, a sub-species of tsetse, because of depopulation and the establishment of a large game reserve, which effectively advanced trypanosomiasis by creating a safe haven for game populations acting as a reservoir for the disease. In 1903 and 1904 the Baganda chiefs began to buy cattle east of the Nile and import them into northern Buganda and Bunyoro, and later the cattle trade intensified as chiefs invested the money they received from cotton in cattle. It is probable that some of the imported cattle became infected and carried the disease to northern Buganda, where trypanosomiasis among cattle was first detected in Nakosongola in 1904. It is difficult to determine which played a greater role in the spread of the disease, cattle trading or the movements of wild game, but Doyle sees the spread of

¹⁰⁵ Doyle 1998, 250-253; Telegram from the Assistant Collector of Unyoro to Secretary, 24 Jan. 1903. A12/3/UNA; Bruce et.al. 1909-1911, 257-271.

¹⁰⁶ Veterinary Officer on an Outbreak of Rinderpest in the Eastern Province. CO 536/35/339/PRO; Telegram from Jackson to the Secretary State for the Colonies, 11 Oct 1913. CO 536/62/PRO; Uganda Protectorate. *Department of Agriculture 1910-11*, 17-19; Uganda Protectorate. *Department of Agriculture 1913-14*, 30-31; Uganda Protectorate. *Department of Agriculture 1914-15*, 45-48; Uganda Protectorate. *Department of Agriculture 1918*, 37; Uganda Protectorate. *Department of Agriculture 1919*, 33-34; Richardson to the Director of Agriculture, 28 Aug 1919. CO 536/95/350/PRO; Northern Province Annual Report 1920. Secretariat Minute Paper, A46/813/UNA; Memorandum on rinderpest, 14 Aug. 1928. Secretariat Minute Paper, A45/366/UNA.

¹⁰⁷ Doyle 1998, 254-255.

¹⁰⁸ Uganda Protectorate. *Department of Agriculture 1912-13*, 24. See also Ford 1971, 168.

trypanosomiasis as a consequence of depopulation and the colonial game preservation policy. In any case, cattle were dying in the northern Bunyoro and Buganda-Bunyoro borderlands in 1908 and by 1913 the countryside from northern Bulemezi up to the Hoima-Masindi road and to the Budonga forest north of Masindi had become infested with the tsetse fly and was therefore unsuitable for cattle rearing.¹⁰⁹

It was estimated in 1919 that rinderpest and other cattle diseases had killed 33 percent of the cattle herds in Uganda since 1915, with the most severe losses occurring in the Western Province. The economic and social consequences were considerable: there was less milk and meat available for the food markets in Kampala and Entebbe, not to mention local markets elsewhere, exports of cattle had almost ceased, and as trading in cattle products dwindled, people had great problems in fulfilling their tax requirements. The shortage of livestock also deprived people of the traditional means of accumulating wealth, thus reducing marriages, social mobility and food availability and exchange.¹¹⁰

Salt production and the salt trade on the shores of Lake Albert, which played a very important role in the lives of the lakeside people, was hampered by a decision by the British to prohibit the barter trade in salt, with the hope of securing as much salt as possible for the markets, which would then be taxed to increase the Protectorate's revenues. Contrary to these hopes, the ban cut down the scale of production, while the barter trade in salt had been the only means of subsistence for the people living in the salt-producing areas of Katwe and Kibiro. The prospects for agriculture in the area around the salt production centres were very limited, which meant that salt was bartered for food from the neighbouring communities. The ban therefore put an end to production, since the article could no longer be freely exchanged in local trade.¹¹¹ Furthermore, the increased taxation of salt production introduced in 1910 made it practically unprofitable.¹¹² The final blow for salt production at Kibiro came with the sleeping sickness epidemic, which meant that the area lost about 75 percent of its population by 1912 and there was a general movement of people inland, away from the infected lake shores. Apart from salt production, fishing and the fish trade, and also the canoe trade across the lake, were depressed for years because of the epidemic. Resettlement was only commenced in

¹⁰⁹ Report on the present condition of the Masindi District of the Northern Province in regard to cattle trypanosomiasis, parts 1 and 2, by M. Robertson, August 1913. CO 536/62/491/PRO; A.D.P. Hodges, 'Report on Sleeping Sickness in Unyoro and the Nile Valley', in *Reports of the Sleeping Sickness Commission of the Royal Society*, VIII. London: H.M.S.O. 1907, 86-99, especially, 98-99; Doyle 1998, 253-254.

¹¹⁰ K.R.S. Morris, 'Studies on the Epidemiology of Sleeping Sickness in East Africa. Sleeping Sickness in Bunyoro District of Uganda', *Trans. R. Soc. Trop. Med. Hyg.* 54 (6) 1960a, 585-596, especially 585-9; Coryndon to the Secretary State for the Colonies, 25 Aug 1919. CO 536/95/326/PRO; Doyle 1998, 250-253.

¹¹¹ Ormsby to Sub-Commissioner of Western Province, 2 Feb. 1903. A12/3/UNA; Ormsby to Sub-Commissioner of Western Province, 28 Feb. 1903. A12/3/UNA; Wilson to H.M. Commissioner & Consul General, 2 March 1903. A12/3/UNA.

¹¹² Doyle 1998, 249.

the 1920s.¹¹³

Large-scale African trading in the Protectorate had been strictly regulated by means of expensive licences since 1901, and soon there were attempts to extend control over trade to the numerous markets where local producers exchanged their goods. In 1902 there was only one market in Kampala, under government control, from which it collected taxes and market dues. Elsewhere, local markets were controlled by the *saza* chiefs, who acted as supervisors and collectors of fees.¹¹⁴ In 1905 it was decided that all markets in the Uganda Protectorate should be placed under government control so that local trade could be regulated and taxed more efficiently. In Bunyoro this caused anxiety not so much among the peasants as among the *omukama* and the chiefs, who had been controlling the markets so far and executing their own tax policy.¹¹⁵ Market fees were of course an annoyance for the Banyoro traders and peasants, but they could always sell their produce on the illegal markets which developed because of state intervention. By taxing the markets, the colonial state likewise attempted to reduce trading in order to make people grow more cotton, which had been unsuccessful prior to 1907, since people made more money by collecting rubber for the Italian company, *Societa Coloniale Italiana*, in the Budongo forest. Rubber paid well compared with cotton, as one pound of rubber was worth one rupee, while 13 and 25 lbs of cotton, cleaned and uncleaned, respectively, were required to earn the same sum.¹¹⁶

Cash cropping in general did not provide the peasants with the means of earning money for their taxes other than in the vicinity of major trading centres. For others, the low price received for their products discouraged cultivation. The growers brought their groundnuts and sesame to the markets in Kampala in packages of 20 or 30 pounds, while the market price was around one rupee for 50 pounds of produce. Since tax was collected in kind, many were disappointed since everything was taken from them for free, in tax. Occasionally people in Buganda preferred to burn their crops instead of carrying them long distances to the markets for nothing.¹¹⁷ In Bunyoro drought, pests and disease also interfered with cash cropping, so that promising yields of sesame and cotton were destroyed by poor weather conditions and pests in 1904, for instance.¹¹⁸ The spread of sleeping sickness from

¹¹³ Morris 1960a, 587-589.

¹¹⁴ Tomkins to H.M. Commissioner and Consul General, 28 Feb. 1902. A8/1/UNA; Grant to Jackson, 1 March 1902. A8/1/UNA.

¹¹⁵ Collector's Office, Hoima, to H.M. Acting Commissioner and Commander-in-Chief, 3 April 1905. A12/6/UNA.

¹¹⁶ Report on the District of Unyoro and Station of Hoima for the Month and Quarter Ending 30 June 1905. A12/7/UNA; Report on the District of Unyoro, July & August 1905. A12/7/UNA; Wilson to H.M. Commissioner and Commander-in-Chief, 14 Oct. 1905. A12/7/UNA.

¹¹⁷ Tomkins to Sadler, 20 Nov. 1903. A8/4/UNA; Leakey to Sub-Commissioner, 15 Nov. 1904. A8/5/UNA.

¹¹⁸ Speke to Collector - Unyoro; Report on a Tour in the Chopi District during November 1904. A12/5/UNA; Morris 1960, 585-6.

the Weiga River to the Budonga forest, the shores of Lake Albert and the banks of the Nile from 1904 onwards eventually ended the collecting of rubber by 1909, as the whole fertile Bugungu area in the north had to be evacuated. Good fishing waters were lost and large areas of fertile agricultural land were left to turn to bush and become invaded by the tsetse fly.¹¹⁹

The majority of the Banyoro preferred cotton growing to hut tax labour as a means of earning cash, but the high transport costs and low prices paid to growers soon made cultivation unprofitable, since they could not afford to carry their produce to the nearest ginnery, located in Buganda. Moreover, the labour requirements for the planting, thinning, weeding and picking of cotton were considerable and coincided with the cultivation of the principal food crops, a fact which again did not increase its popularity.¹²⁰ Thus, though cotton cultivation increased, much of the crop was left rotting in stores in Bunyoro, making the peasants' attempts to earn money futile. Hand gins were provided as a solution to the transport problem, but they were banned by the 1908 cotton legislation, which sealed the demise of cotton growing in Bunyoro before the mid-1920s. Cotton was still planted annually under orders from the chiefs, but it brought no real wealth to the district as the crop was sold to traders in Buganda.¹²¹

The cotton boom of the mid-1920s improved the situation in Bunyoro. The high price and the establishment of ginneries created better income-earning possibilities locally and apparently slowed down out-migration from the district. Tobacco cultivation was commenced in the late 1920s, and by the mid-1930s this was the most profitable cash crop in Bunyoro.¹²² In 1939 the Provincial Commissioner reported: 'An air of general prosperity and well-being...[...] ... exists in Bunyoro. Where tobacco, cotton and sim-sim [sic] are easily grown and sold, prosperity should continue, even though the high prices of past years are unlikely to be obtained in the future.'¹²³ But the cash returns to the grower from tobacco in relation to the work put in did not bring much prosperity. Moreover, the income received from cash crops was not evenly distributed, but tended to benefit only the few large farmers who were able to command and direct the labour of their tenants

¹¹⁹ Unyoro District Reports, 9 June 1906. Secretariat Minute Paper, A42/94/UNA; Morris 1960, 587-588.

¹²⁰ Tosh 1978, 426-427.

¹²¹ Annual report on the District of Unyoro 1905-6, 16 May 1906. Secretariat Minute Paper, A42/61/UNA; Cultivations in Unyoro, 1907. Secretariat Minute Paper, A43/151/UNA; Cotton in Unyoro, 23 April 1908. Secretariat Minute Paper, A44/160/UNA; Doyle 1998, 292-295. Despite the expansion of cotton cultivation, the British officials presented a rather ambivalent wish that cultivation should not be pushed too much, or it would lead to a growing shortage of labour. Obviously, the ideal situation for the government would have been one in which the women grew all the food and cash crops and the men were engaged in paid labour.

¹²² Archer to the Secretary of State for the Colonies, 6 Oct 1924. Co 536/132/401/PRO; Doyle 1998, 297-300.

¹²³ Uganda Protectorate. *Annual Report of the Provincial Commissioners, Eastern, Northern and Western Provinces, on Native Administration 1938*. Entebbe: Government Printer 1939, 26.

for their own commercial ends.¹²⁴

In Buganda cotton cultivation was disliked, since it was seen as just another sham practised by the colonial state, comparable to the earlier unprofitable groundnut and sesame schemes. The peasants felt cheated since they were told to grow crops to earn money and then they received only a fraction of the price promised to them, which was promptly required back as hut tax. In Kyagwe and Bugerere even the *saza* chiefs were reluctant to grow cotton, which naturally affected the extent of its popularity and cultivation. Kyagwe was ravaged by the sleeping sickness epidemic, which resulted in apathy among the inhabitants as well as their chiefs, while in Bugerere and Bulemezi, both suitable for cotton cultivation, the distance from the lake and the consequent high transport costs hampered cultivation until the roads were improved and ginneries established. Also, the landowning chiefs in well-populated *sazas* such as Kyagwe, where there were large royal estates, did not bother to push cultivation too much, since they received a decent income from land rents.¹²⁵ The British accused the chiefs of laziness and hedonism: '...many neglected work [and] cultivation by too great indulgence in pleasures.'¹²⁶ Another thing to discourage cotton cultivation was that no one in Uganda really knew how cotton should be cultivated properly. Borup, the manager of the Uganda Company, complained that it was no use distributing seed to peasants unless they were educated in how to sow it and how to take care of the crop.¹²⁷

Cotton growing was a sufficiently unprofitable business before the 1920s that it could only be carried out under compulsion. In 1903 the chiefs in the *Lukiko* were told by the British to push the cultivation of cotton in their villages, and as a consequence, the women were forcibly employed to grow cotton. As soon as the British noticed what was going on, they told the chiefs that they should encourage cash crop cultivation among men, not women. It also became evident that the chiefs were forcing people to work in their fields, which was against the principle adopted by the British that every man should be his own farmer.¹²⁸ Compulsion in cotton growing was tolerated, however, since it was the only way of inducing people to grow the crop.

The policy regarding cotton growing in Uganda was strongly criticized by Bishop Tucker, who saw that systematic compulsion should be abolished even if it meant a decline in the cotton industry. He also attacked Governor Bell's claim that

¹²⁴ Doyle 1998, 300-303.

¹²⁵ Leakey to Sub-Commissioner, 7 Sept. 1903. A8/3/UNA; Manara to Sub-Commissioner, 3 Nov. 1905. A8/7/UNA.

¹²⁶ Nsambya Diary, 17 May 1905. UGA/9/14/MHM.

¹²⁷ Ormsby to Sub-Commissioner, 30 Dec. 1904. A8/4/UNA; Report on a tour through Chagwe, Bugerere, Mruli and Bulamwezi by Sub-Commissioner Tomkins, 23 March 1905. A8/6/UNA.

¹²⁸ Nsambya Diary, 20 April 1903. UGA/9/11/MHM; Nsambya Diary 21 Sept. 1903. UGA/9/16/MHM; Tomkins to H.M. Commissioner and Consul General, 21 Sept. 1903. A8/3/UNA; Report on a(?) tour through Chagwe, Bugerere, Mruli and Bulamwezi by Sub-Commissioner Tomkins, 23 March 1905. A8/6/UNA.

compulsion was only used when cultivation was first established, for according to Tucker, the good results obtained in 1904 only encouraged the use of this 'feudal system' to the full in forcing the chiefs to coerce their people into planting cotton.¹²⁹ He pointed out that the bulk of the cotton cultivation was undertaken by women since men 'shirk labour on the fields', thus bringing 'endless toil' for married women.¹³⁰ Tucker also regretted that the British were so busy in pointing out atrocities and abuse in the neighbouring territory of the Congo that they did not see what was happening in Uganda.¹³¹

When the cotton boom ensued in the early 1920s, coercion and abuse became commonplace as the chiefs attempted to make a profit from the crop. The criticism aimed at Uganda's cotton industry by Archdeacon Owen in 1929 also shed light on the practices of compulsion undertaken earlier in the colonial period. Owen claimed that the 'old methods' of compulsion included 'cruel floggings and imprisonment' of men and women who failed to plant cotton. According to him, Uganda cotton was 'stained with blood and tears', and similar policies were still being adopted to enforce cultivation.¹³² Owen's accusations were not baseless. In 1925 Chief Justice Griffin paid attention to the high incidence of whippings and floggings of women by local courts, especially in the cotton-growing areas. Apparently women frequently refused to grow cotton for their husbands, who then took the matter to the chiefs who formed the local courts. As the chiefs benefited from cotton, they were eager to mete out harsh punishments to those who refused to follow their orders in this respect.¹³³ British officials were reluctant to interfere with this practice, which was again seen as a 'tribal custom', since according to them, it was not in contradiction with the values held by society. It was argued that floggings were preferable to spearing, also referred to as an ancient tribal custom, in dealing with disobedient women.¹³⁴ Griffin and Governor Gowers were nevertheless of the opinion that the flogging of women - which was taking place everywhere in Uganda - should no longer be tolerated.¹³⁵

¹²⁹ Tucker to Boyle, 23 Dec. 1909. G3/A7/O/1910/232/CMS; Tucker to Boyle, 20 Dec. G3/A7/O/1910/38/CMS. As the labour shortages became chronic, the colonial government was willing to accept the policy already implemented by the chiefs that women were to grow most of the cotton. In Bunyoro this was proposed in 1908 in order to free more men for labour duties. See Cotton in Unyoro, 23 April 1908. Secretariat Minute Paper, A44/160/UNA.

¹³⁰ Tucker to Boyle, 23 Dec. 1909. G3/A7/O/1910/232/CMS.

¹³¹ Tucker to Baylis, 3 Jan. 1910. G3/A7/O/1910/45/CMS.

¹³² Cotton growing in Africa: Extracts from the Manchester Guardian, 22 Oct. 1929. CO 536/157/20406/PRO; Owen to Daniell, 22 Nov. 1929. G3/A7/O/1929/138/CMS. See also Carol Summers, 'Whips and Women: Forcing Change in Eastern Uganda during the 1920s', at <http://www.global-partners.org/africa/2000/papers/csummers>, 3.12.2003.

¹³³ Notes on a meeting held at Government House, 22 Sept. 1925; Chief Justice Griffin to the Governor, 7 Aug. 1925; Gowers to Chief Justice, 7 Dec. 1925, all enclosed in Confidential despatch, 8 March 1926. CO 536/139/PRO.

¹³⁴ Minutes by Perryman, enclosed in Confidential despatch, 8 March 1926. CO 536/139/PRO.

¹³⁵ Notes on a meeting held at Government House, 22 Sept. 1925; Minutes by Perryman,

Without the chiefs' cooperation the establishment of cotton cultivation in Uganda would have been impossible. The fact that cotton growing before 1920s had to be forced on the peasants, and on some of the chiefs, was because the European and Asian planters saw it to be unprofitable:

'Planters already established in the country do not regard the cultivation of cotton as a serious commercial proposition, and they are probably the best qualified to judge...[...] ... in normal years, before the recent rise in prices, the cultivation of a plot of cotton did not yield a profit to the native grower, if the value of his labour and that of his family is taken into consideration. In the district of Bukedi, for example, the average price paid to the grower for nine years 1910 to 1918 was six cents per pound, and the average yield per acre 400 pounds. The cash-return from a half-acre plot was therefore Rs. 12, while the cost of labour involved in clearing, planting, and tending the plot, picking the crop and transporting it to the nearest market, and finally destroying the trees, would have been approximately Rs. 19 at the rate of wages then in force.'¹³⁶

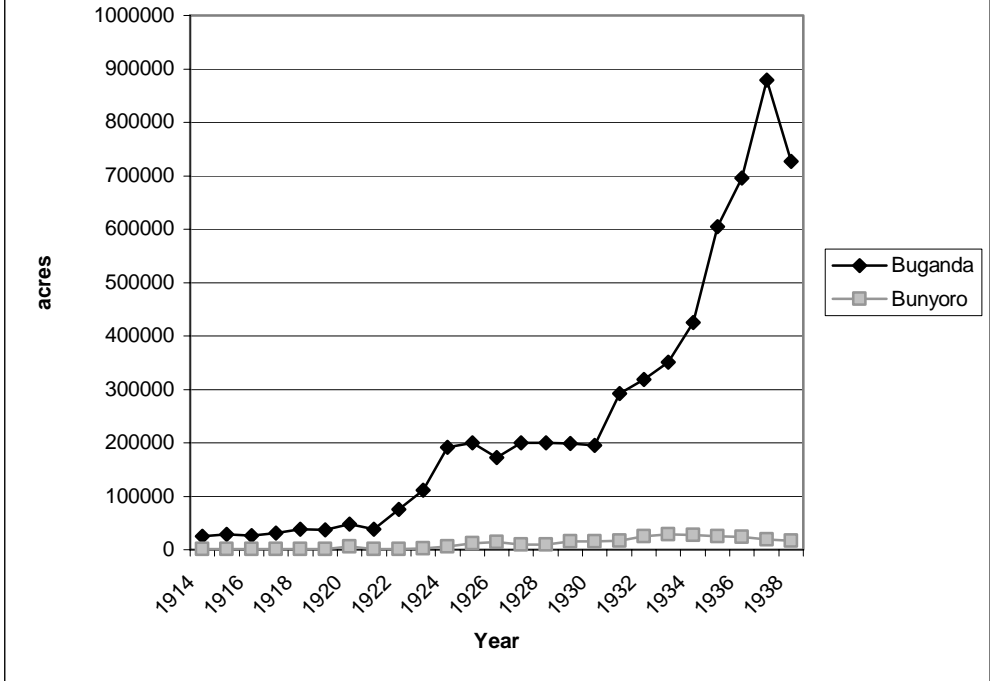
Though acreage under cotton in Buganda increased considerably between 1920 and 1929, this did not mean that the real income of the peasants was increasing. The leaps in acreage followed the increases in poll tax, and thus reflected the economic distress experienced by the peasantry. The peasants made fairly good money from cotton in the mid-1920s, as transportation costs were lower than in the pre-war situation, the world market price was high and cotton buyers were more numerous than ever. The price of cotton dropped from the mid-1920s until the slow recovery in the early 1930s, but it did not regain its 1921 level until the early 1940s. The price of coffee, another important export crop, was equally low. Thus from 1929 onwards, in a situation where the prices received for the major cash crops were sinking, wages for unskilled labour were dropping, taxation and rents remained unchanged and the prices of food, cloth and other necessities remained unchanged or declined only slightly, the peasants responded by increasing the acreage under cash crops to preserve their standard of living.¹³⁷

both enclosed in Confidential despatch, 8 March 1926. CO 536/139/PRO. Apparently little could be done to prevent floggings, however. Barrister Macken reported in 1928: 'I remember some time early in 1927 being informed by Dr. Hunter C.M.S., Ngora... that he had been so disgusted at the excessive floggings of natives by the Chiefs that he had taken photographs of some bad cases treated at the hospital, for their scars, and had handed these to the District Commissioner... Dr. Hunter's idea as expressed at the time was to try to get the government to take some steps to stop the excessive and unnecessary corporal punishment of natives that was part of the administrative methods in vogue...' See Letter from Macken, 25 Feb. 1928. UGA/22/1928/MHM.

¹³⁶ Carter to the Secretary of State for the Colonies, 25 May 1920. CO 536/100/234/PRO. The price received by peasants for cotton in 1936 in Busoga was 10.5 Shs/100 lbs. – roughly the same as in 1915-16 - while the tax burden of a person liable to poll tax and native administration tax was 30 Shs. per annum. In practise this meant that the peasants were earning less money with more labour. See Uganda Protectorate. Press Bulletin, 3 Feb. 1936. CO 536/187/40004/3/PRO; Mitchell to the Secretary of State for the Colonies, 15 March 1938. CO 536/197/40070/PRO.

¹³⁷ van Zwanenberg and King 1975, 69, 190-1; Jørgensen 1981, 114-115; *Colonial Reports 1932*, 32; *Colonial Reports 1935*, 31; *Colonial Reports 1938*, 24.

Figure 1. Development of cotton cultivation in Buganda and Bunyoro
 Source: Uganda Protectorate, Department of Agriculture, 1914-1938.



Whereas the coercion regarding cotton before the 1920s had resulted from the pressures put on the chiefs by the colonial state, the high price of cotton in the 1920s served as a motivation for forcing the peasantry to cultivate more cotton. Thus the Uganda Planters' Association complained in 1924 that the chiefs, driven by high prices, were compelling peasants to grow cotton in their fields and that the free movement of labour was being restricted.¹³⁸ The economic returns received from cotton explain the sometimes brutal behaviour of the chiefs towards their subjects. Tax rebates, salaries and cotton made them wealthy, and the social and economic division between the chiefs and the common people, or between the landowners and tenants, became more pronounced. Freed from both economic and political dependence on the peasantry, the wealthy chiefs had little interest in the welfare of their subjects. Finally, as a consequence of the gradual abolition of the hereditary chiefships in the 1930s, the remnants of the old social cohesion which might have worked for the benefit of the peasants in rural communities were shattered.¹³⁹

¹³⁸ Confidential: Compulsory labour for cotton growing, 20 July 1924. CO 536/131/PRO.

¹³⁹ For similar developments in the Congo, see Likaka 1995, 200-220.

COLONIALISM, HUNGER AND FAMINE

HUNGER AND FAMINE IN BUGANDA

In April 1898 Dr. Albert Cook wrote that Buganda was finally quietening down after a period of internal strife, but that it was a 'quietude of exhaustion'. Western and north-western Buganda had been ravaged by war, the latter being practically depopulated. Roads and gardens in western Singo had become overgrown and food was scarce, while famine and sickness were rife in northern Kyagwe, which had been badly ravaged by the Sudanese mutiny.¹⁴⁰ The government doctor Hodges noted that while there was plenty of food in Busoga in 1898, food was difficult to buy in Kampala.¹⁴¹ Then both the spring and autumn rains failed in 1899, and the food shortages created by war and unrest escalated into famine. By March of that year people were going around in Kampala saying that 'hunger has arrived',¹⁴² and by the end of the year people were living 'from hand to mouth', although the women, in spite of suffering greatly from fever, were working hard to grow food on the swamplands in the valley bottoms.¹⁴³ The government reported a 'great scarcity of food' in Buganda, and food prices had gone up sharply. Some missionaries in Kampala had had to pay ten times the original price when buying food.¹⁴⁴

Even so, the government was careful not to speak of famine, saying only that there would be 'considerable sufferings' if the drought continued. Similarly, some missionaries reported that 'though there is no actual famine many people are suffering acutely',¹⁴⁵ while others spoke of 'general scarcity' and 'great want'.¹⁴⁶ Yet by 1899 famine was reported to be rife in the German territories to the south and in Busoga and Kikuyuland in the east, greatly disturbing the supply lines to Buganda, as caravans had difficulties in operating in famine-stricken areas.¹⁴⁷ The severe shortage of food apparently continued well into the middle of the year 1900, when bananas bore their first fruit after the drought.¹⁴⁸ The famine was more severe in

¹⁴⁰ Albert Cook to his mother, 3 April 1898. A60/Box 1/PP/COO/WTL; Albert Cook to J.H. Cook, 25 July 1898. A66/Box 1/PP/COO/WTL; Hanlon to Casartelli, 7 Sept. 1898. UGA/4/III/MHM.

¹⁴¹ A.D.P. Hodges' Uganda Diary, 28 Aug. & 14 Sept. 1898. MSS. Afr. s. 1782, RH.

¹⁴² Albert Cook to his mother, 26 March 1899. A77/Box 1/PP/COO/WTL. See also Ternan to Salisbury, 7 Oct. 1899. FO 2/204/PRO.

¹⁴³ Annual letter by R.H. Walker, Nov. 1899, 128. C.M.S. annual letters 1899, CMS; Annual letter by Miss J.E. Chadwick, 9 Dec. 1899, 131. C.M.S. annual letters 1899, CMS.

¹⁴⁴ Ternan to Salisbury, 7 Oct. 1899. FO 2/204/PRO; Hanlon to Casartelli, 12 Dec. 1899. UGA/4/IV/MHM.

¹⁴⁵ Ternan to Salisbury, 7 Oct. 1899. FO 2/204/PRO; Annual letter by Miss B. Taylor, Nov. 1899, 141. C.M.S. annual letters 1899, CMS.

¹⁴⁶ Hanlon to Casartelli, 12 Dec. 1899. UGA/4/IV/MHM.

¹⁴⁷ Hanlon to Henry, 24 March, 12 June, 10 July & 4 Oct. 1899. UGA/2/E/1/MHM; Kirk to Rector, 24 Dec. 1900. UGA/2/E/2/MHM; A.D.P. Hodges' Uganda Diary 1 Sept. 1899. MSS. Afr. s. 1782, RH.

¹⁴⁸ Hanlon to Henry, 16 March 1900. UGA/2/1900/MHM.

western Buganda, especially in the 'lost counties' of Buyaga and Buwekula, because of the persistent drought and raiding. There were even some villages by the Kafu River that were only inhabited by men, since the women had been carried off by raiders.¹⁴⁹

In 1901 the food supply remained limited in many parts of Buganda, keeping the food prices high. Hut tax labourers in Entebbe complained of hunger, and the sweet potato crop in Buwenkula and Bugangadzi was destroyed by wild pigs, creating a further severe food shortage. In Kyagwe the rains had failed and wild pigs were devouring the remaining crops.¹⁵⁰ While the Bavuma were said to be attempting to barter their fish and pottery for food from the Basoga and Baganda in November 1901, they were reported by April 1902, after the failure of the spring rains and subsequent loss of their crops, to be eating wild plants and fruits, since their last sweet potatoes had been taken from them in hut tax.¹⁵¹ At the end of 1902 'great scarcity' was reported in Koki, amounting to 'actual famine' in the western parts of the county.¹⁵² The autumn rains in western Buganda failed again in 1903, and by February 1904 food had become scarce and famine was said to be looming.¹⁵³

In 1905, in order to respond to the news in English papers about famine in Uganda, Commissioner Sadler reported that there had been 'only scarcity of food in parts of Uganda usual after drought', and that there was 'no famine or prospect of one.'¹⁵⁴ Meanwhile people in the Kakumiro district were subsisting on water lily bulbs, the usual famine food, and the remaining crops in northern Bugangadzi, likewise afflicted by drought, were lost to wild pigs and elephants. Still the touring officer reported that though food was scarce, he found no trace of famine.¹⁵⁵ Likewise, a touring officer found no famine in the drought-ridden counties of Buddu, Mawogola and Koki in early 1906:

I have been through each county and have seen for myself that there is scarcity of food but no real famine, nor has there been any death reported

¹⁴⁹ Annual letter by H.B. Lewin, 30 Jan. 1900. C.M.S. annual letters 1899, 144, CMS.

¹⁵⁰ Johnston to Lansdowne, 18 May 1901. FO 2/462/PRO; Mengo Notes, December 1901, 94. G3/A7/O/1902/20/CMS; Tomkins to H.M. Commissioner and Consul General, 8 Nov. 1901. A8/1/UNA; Tomkins to H.M. Commissioner and Consul General, 11 Dec. 1901. A8/1/UNA.

¹⁵¹ Tomkins to H.M. Commissioner and Consul General, 8 Nov. 1901. A8/1/UNA; Letter from Proctor, 20 April 1902. UGA/2/1902/MHM; Proctor to Rector, 18 May 1902. UGA/2/1902/MHM.

¹⁵² A letter from Wyndham, 9 Oct. 1902. A8/3/UNA.

¹⁵³ Kakumiro District Report, Nov. 1903. A8/4/UNA; Report for the month of January by Manara, 5 Feb. 1904. A8/4/UNA.

¹⁵⁴ Telegram from Sadler to Lyttelton, received 20 Nov. 1905. CO 536/3/PRO.

¹⁵⁵ Report by Manara, enclosed in Tomkins to H.M. Commissioner and Commander-in-Chief, 14 Aug. 1905. A8/7/UNA; Kakumiro District Monthly Report. 3. Nov. 1905. A8/7/UNA; Talbot-Smith to Sub-Commissioner, 24 Jan. 1906. A8/7/UNA.

from famine. I have seen no case of "living skeletons", for the natives always procure roots and herbs which, though coarse, are nourishing enough. I have seen no advantage in applying for help for the natives; money is of no use for them and food can always be obtained in Buddu if there was real famine.¹⁵⁶

The 'real famine' struck Buganda in 1907, with a failure of the rains that affected the whole Protectorate. In early 1907 people from Buddu, Koki and Kabula were migrating south to German territory to escape the drought and food shortages, and by July the food situation had deteriorated to the degree that the young *kabaka's* planned tour had to be postponed.¹⁵⁷ Mengo was reported to be under a 'serious threat' of famine, and deaths from starvation were reported in the northern and western parts of the country.¹⁵⁸ The shortage of food forced people in Bugerere to seek relief by crossing the Nile to Lango, although that area was similarly suffering from famine, and by May 1908 Bugerere and Buruli were reported to be in a state of famine, though no deaths from starvation were reported.¹⁵⁹

The second major famine in Buganda occurred in 1918-1919, although again it was not as severe as in the neighbouring territories of the Western, Eastern and Northern Provinces. The outbreak of the World War had led to a wave of recruitment of porters for military duties, and as most of the caravans and troops passed through the Masaka district on their way to the front, the task of feeding the soldiers with local produce had become difficult by 1917.¹⁶⁰ Owing to the failure of the rains and the increased demand for food because of the military convoys and the porters, local food shortages developed quickly in the larger towns and centres. In June 1918 food had to be imported into Kampala from distant locations such as Singo and Buddu, and by early 1919 there was severe famine in Buruli, where people were dying from hunger and eating inedible 'things'. Neighbouring Bugerere was also struck. It was reported that 4000 people in Buruli alone were in immediate danger of starvation.¹⁶¹ As the food shortage became prolonged, high food prices

¹⁵⁶ Isemonger to Sub-Commissioner, 31 Jan. 1906. A8/7/UNA.

¹⁵⁷ Uganda Protectorate. Intelligence Report No. 29, Feb. 1907. CO 536/12/PRO; Uganda Protectorate. Intelligence Report No. 31, July 1907. CO 536/14/PRO.

¹⁵⁸ Annual letter by Miss M.L.R. Barry, 29 Dec. 1907. C.M.S. annual letters 1907, 216, CMS; Annual letter by M. Gerber, 16 Nov. 1907. C.M.S. annual letters 1907, 222, CMS; Annual letter by H.B. Levin, 19 Nov. 1907. C.M.S. annual letters 1907, 223, CMS; Annual Report on Buganda for 1907-8. Secretariat Minute Paper, A44/255/UNA.

¹⁵⁹ Baskerville to Tomkins, 27 May 1908. Secretariat Minute Paper, A44/212/UNA; Tomkins to the Deputy Commissioner, 28 May 1908. Secretariat Minute Paper, A44/212/UNA; Drought in Bukeddi, 1 April 1908. Secretariat Minute Paper, A44/132/UNA; Annual letter by G.K. Baskerville, 30 Oct. 1908. C.M.S. Annual letters 1908. 141, CMS.

¹⁶⁰ Buganda Annual report 1916-17. Secretariat Minute Paper, A46/429/UNA.

¹⁶¹ Cooper to Chief Secretary, 12 June 1918. Secretariat Minute Paper, A46/1809/UNA; Kagwa to provincial Commissioner Buganda, 25 Feb. 1919. Secretariat Minute Paper, A46/1809/UNA; Sturrock to Chief Secretary, 30 May 1919. Secretariat Minute Paper, A46/1809/UNA.

deprived many people even in the wealthiest areas of Buganda of their meagre savings and possessions, causing much impoverishment and sometimes even starvation.¹⁶²

The famines of 1898, 1907-08 and 1918-19 apparently taught the colonial administrators a lesson, for when the rains failed in early 1927, as was to be expected, immediate precautions were taken to prevent the food shortages from escalating into a major famine. This policy was successful in Buganda, although the Masaka district, and Buddu in particular, suffered from serious food shortages. The suffering was most acute among the *banyarwanda* immigrants, many of whom had difficulties in securing adequate food even in normal times.¹⁶³ The scarcity persisted until 1928, but a large-scale crisis was avoided in Buganda as the rainfall in 1928 was quite normal and the drought was not prolonged.¹⁶⁴ In 1937 the autumn rains failed, and by early 1938 almost 'famine conditions' were reported in much of the Protectorate, including Buganda. Grasshoppers were numerous and destroyed the crops, but the damage was apparently not as severe as previously. Again large-scale famine was avoided by taking precautions, and by virtue of the onset of the rains early in 1938.¹⁶⁵

The main reasons behind the famines and food shortages were both climatic and politico-economic. Drought was the triggering factor in all the major famines in Buganda. The banana-based economy was extremely vulnerable to drought, and prolonged drought, i.e. failure of the rains in two or more seasons in succession, brought famines and deaths. A mere delay in the rains, or an insufficient amount of rain, was in itself capable of creating localised food shortages. The dependence of food production on rainfall was well understood by the colonial administrators. Johnston realized that 'an extra dry season' would cause the bananas to wither and bring famine, and he and many other administrators, together with the missionaries, frequently blamed the 'indolent natives' for the famines, as they were seen as relying too heavily on bananas alone instead of growing a wider variety of foods for greater security.¹⁶⁶ This attitude in some ways reflects the British ignorance of the local food and agricultural systems. As has been seen, the Baganda did in fact grow a wide

¹⁶² Daudi Chwa, Apolo Kagwa, Stanislas Mugwanya, Y.L. Musajalumbwa to Milner, 8 May 1919, enclosed in Confidential: Coryndon to Secretary of State for the Colonies, 30 June 1919. CO 536/94/PRO.

¹⁶³ Buganda Half Year Report 1928. Secretariat Minute Paper, A46/442/UNA; Typescript by R.E. Barrett, dated 18 March 1983. Mss. Afr. s. 1872, RH.

¹⁶⁴ Uganda Protectorate. *Department of Agriculture 1927*, 5; Rankine to the Secretary of State for the Colonies, 23 April 1929. CO 536/151/20263/PRO.

¹⁶⁵ Uganda Protectorate. *Annual Report of the Provincial Commissioners, Eastern, Northern, and Western Provinces, on Native Administration, 1937*. Entebbe Government Printer, 1938, 5-6; Uganda Protectorate. *Annual Report of the Provincial Commissioners, Eastern, Northern, and Western Provinces, on Native Administration, 1938*. Entebbe Government Printer, 1939, 21-22, 33.

¹⁶⁶ Preliminary Report on the Protectorate of Uganda, by H.H. Johnston, s.d. 1900. FO 2/298/PRO. See also, Albert Cook to his mother, 16 April 1900. A102/Box 1/PP/COO/WTL; John Roscoe, *Twenty-Five Years in East Africa*. Cambridge University Press 1921, 244.

variety of foods, and they also fished, hunted, traded and raided in order to secure an adequate food supply at all times of the year. What the colonial administrators and missionaries had difficulty in understanding, or what they refused to understand and admit, was that the colonial rule had paralysed large parts of this food system and thus narrowed the basis of subsistence, making the people almost totally dependent on one sector of it, i.e. household cultivation, which itself was crippled by the labour demands of the local administration and the colonial state.

The politico-economic causes of interruptions in local food systems included warfare, land privatisation, taxation and labour obligations, and also the control exercised over trading in such articles as ivory, skins, salt and cotton. An obvious cause of the famine in Buganda in 1898-99 lay in the wars of 1897-98, which devastated fertile areas such as Kyagwe, Singo and Buddu. Depopulation through mortality and migration allowed the fields and gardens to revert to bush, and the large-scale population movement caused by the warfare was perpetuated by the establishment of the *mailo* system and hut tax in 1900, as the people were constantly taking refuge, being evicted, or following their chiefs to new areas, so that there was no time to cultivate crops. After settling down it took several months to obtain the first harvest. In the meantime one had to find other means of procuring food. Hunting and fishing suffered as the men spent months escaping from the tax collectors and the labour obligations, for while on the run they probably had means of providing food for themselves but not for the families they had left behind. Meanwhile, those who did not try to evade the tax collectors had to relinquish their food, livestock or any other produce they had to pay their taxes, or else they had to engage in hut tax labour. The most remunerative choice appears to have been to kill livestock, especially goats, which provided food for the household while the skins could be sold for a few rupees to pay the tax.

The most significant reason behind the increased vulnerability to climatic fluctuations was the draining of male labour away from farms to road work and other public building and construction projects. The Sese islanders, for instance, complained that the frequent labour demands of the missionaries prevented them from attending their farms. Thus, to escape from these demands and the harsh rule of the Baganda chiefs, the Basese men would migrate to mainland Buganda for tax and other work leaving their women behind, sometimes being absent for as long as seven months at a time.¹⁶⁷ With the men absent, the women, who were frequently called on to work for the chiefs, could not cope with the labour burden imposed on them. Apart from the Sese Islands, this was also evident in the low rainfall areas in western Buganda some distance away from the economic centre of the Province:

'Men away from their homes working on roads or elsewhere have left their wives for want of other means to take the road and carry their tithe of potatoes to the centre of activity. For days or for a week or more the shamba [sic] is left unattended and unprotected. And with what result? The woman returns, perhaps with the husband and his Hut Tax Ticket, to find their labours lost, their food stuffs eaten and their small plot of cotton for the Government

¹⁶⁷ Letter to Acting Commissioner, 29 March 1901. A8/1/UNA; Portage to Acting Commissioner, 14 Aug. 1900. A8/1/UNA.

destroyed by pigs; or still worse their entire garden and their home laid waste by wandering herds of elephants.¹⁶⁸

Wild animals, especially wild pigs and elephants, posed a serious threat to household food supplies. The Game Regulations of 1899 virtually prohibited the hunting of all animals - especially those of economic value - by the locals. The purpose of these regulations was to establish government control over the elephants and the ivory supply and to protect the species from local culling in order to attract European and American sports hunters. Special systems of annual hunting licences were created with separate paid licences for sportsmen, public officers, settlers, traders and natives. The Uganda Game Ordinance of 1903 did not allow peasants to drive elephants off their gardens, but instead they had to call for a chief, who was allowed to kill a maximum of two elephants in the marauding herd. Any damage was compensated for from the value of the ivory obtained from these elephants. The Uganda Game Ordinance of 1906 banned the hunting of certain animals altogether, and made the hunting of most mammal species subject to licence; if members of the community wished to hunt small game, they needed permission from a collector, or otherwise they needed a licence. The ordinance also marked off large parts of Northern Bunyoro, including the Budongo forest and coast of Lake Albert in the north, as a Game Reserve.¹⁶⁹ This policy reduced hunting by locals, but obviously encouraged poaching. Also, game populations grew in size and spread from the forested areas and savannas to the vicinity of human habitations, which meant that unattended and unprotected farms and gardens were in great danger of being destroyed.

Sleeping sickness likewise contributed to the food shortages and famines. The Buvuma and Sese Islands suffered from increased mortality, as did the population along the shores of Lake Victoria, until the shoreline was evacuated in 1908 and access to the lake became restricted, so that fishing and trading between the islands and the mainland came to an end. In Kyagwe, already devastated by recent warfare and drought, sleeping sickness caused further depopulation through mortality, evacuation and migration.¹⁷⁰

The emerging cash crop economy diverted labour away from food production to the cotton plots and plantations, contributing to the prevalence of food shortages and hunger.¹⁷¹ Cotton growing, like the nascent rubber industry, utilized the virtually free household labour. Whereas cotton could be grown by women in small plots

¹⁶⁸ Report on Kakumiro - Mount Mubende district for July-August 1908. Secretariat Minute Paper, A44/98/UNA.

¹⁶⁹ Uganda Protectorate. The Game Regulations 1899. FO 881/7173/PRO; Uganda Protectorate. The Uganda Game Ordinance 1903. CO 684/1/PRO Uganda Protectorate. The Uganda Game Ordinance 1906. CO 684/1/PRO.

¹⁷⁰ Letter from Leakey, 7 Sept 1903. FO 2/736/PRO; Bell to Elgin, 9 Dec 1907. Sleeping Sickness. CO 536/15/PRO; Wyndham to the Chief Secretary to the Government, 4 Oct. 1910. CO 536/35/328/PRO; *St. Joseph's Advocate*, Vol. 5, No. 5, 1907, 90.

¹⁷¹ According to Isaacman, 'food insecurity and hunger were integral features of the cotton regime' in Mozambique. See Isaacman 1996, 166.

within the household compound, the collection of rubber required whole families to be moved away from the farms to work on the plantations or forests. Men were employed in tapping the trees, and the women and girls in clearing and planting, while the boys scraped the coagulated rubber from the trees.¹⁷² Writing in 1907, Bishop Hanlon of the Mill Hill Mission criticized the ruthless way the colonial economy was being established. According to him, at the very same time as people were starving in Buganda and elsewhere, relentless efforts were being undertaken to push cotton growing, ginneries and rubber collection.¹⁷³

The cotton economy transformed the population distribution within Buganda by creating dense populations in the main cotton-growing areas. Buddu and Bulemezi were already the most populated *sazas* by 1910, with both the highest birth rate and the highest death rate, while the distant western *sazas* of Buwekula, Bugangadzi and Buyaga, mainly inhabited by the Banyoro, were becoming more sparsely populated. The sparseness of the population contributed in turn to lower agricultural production and an increased risk of food shortages, which were themselves additional causes of out-migration alongside taxation and labour demands.¹⁷⁴

HUNGER AND FAMINE IN BUNYORO

Hunger and want in Bunyoro almost passed without notice before 1918. The district was of no economic importance for the Protectorate, had a small population, was difficult to reach and supply, and was unpopular with the officials, all of which added up to the fact that the British knew very little about the country and its people and consequently showed very little interest in developing the administration or the economy.¹⁷⁵ Although Bunyoro's economy had once been versatile, it had been crippled by war by the end of the nineteenth century and was being further undermined by the colonial rule.

In 1899 the war-ravaged Bunyoro was in the grip of famine. This event, remembered by the name *Kyamudaki*, was a direct consequence of the population losses on account of the casualties and migration caused by the war in the northern parts of the country. Southern Bunyoro, which had remained free of military operations since the mid-1890s, had a fairly dense population and apparently did not suffer much from the drought of 1898-99,¹⁷⁶ but in the north the situation was

¹⁷² *St. Joseph's Advocate*, Vol. 5, No. 19, 1910, 372-374.

¹⁷³ *St. Joseph's Advocate*, Vol. 5, No. 5, 1907, 90.

¹⁷⁴ Buganda Annual Report for 1909-10. Secretariat Minute Paper, A46/421/UNA.

¹⁷⁵ Doyle 1998, 288-291. Occasionally officials openly admitted that they had no means of knowing what was going on in the country. See, for example, Report on the District of Bunyoro for November & December 1905. A12/7/UNA; Ormsby to his father, 15 March 1903. MSS. Afr. r. 105, RH.

¹⁷⁶ Nyangabyaki Bazaara, 'Famine in Bunyoro (Kitara) 1900-1939', *Mawazo* 5 (3) 1984, 65-75, especially 66, 68; A.B. Fisher, Bunyoro Notes, 4 & 14 Dec. 1899. Acc. 84/F1/CMS; Annual letter by A.B. Fisher, 1899. C.M.S. annual letters 1899, 158, CMS.

different. A.B. Fisher, a C.M.S. missionary, wrote in October 1899 about 'great hunger', with the dead and dying lying on the roads. In some places the people had cassava to eat, but mostly they had nothing except the roots of grass. Starving children were reported to be eating leaves and dying in great numbers. Homesteads were laid waste or abandoned, and many men had been killed by the fighting and women had been captured by the Baganda. Streams of refugees were migrating southwards in search of food. Some fighters held women at ransom to obtain food from the local people. Desperate women wandered around offering themselves to anyone for a handful of grain. After capture of Kabalega, some chiefs begged Colonel Evatt, the commander of the troops in the north, to make rain.¹⁷⁷

In 1900 a shortage of food prevailed around Masindi. The surroundings were depopulated, since the local people did not want to settle around the town because of its grim past as one of the major scenes of battle between Kabalega and the British. Masindi was referred to as 'Starvation Corner', a name derived from the times of war. In addition, the deployment of the ill-disciplined Sudanese forces in the Masindi area scared people off. The water supply was bad and unreliable, and the lack of human activity in cultivation had turned the area to a thicket unsuitable for cattle. Horses, mules, cattle, sheep and goats were reported to be dying in large numbers, which contributed to Masindi's reputation as an unhealthy place. The administrators in the district felt that there was little prospect of any improvement in terms of livelihood in the near future.¹⁷⁸

Because of the difficult food situation, people were ordered to grow food to supply the government station and troops, and as a precaution against famine.¹⁷⁹ Despite the local shortages, the grain collected in hut tax in 1901 was shipped to Nimule in the famine-stricken West Nile District in the north,¹⁸⁰ which received 800 loads each month, entirely from Bunyoro. The food supply was further reduced by the inland caravan traffic, since the main roads leading to the Congo and the Sudan passed through this district. The caravans reportedly abused the local people by taking food by force without payment, and by stealing whatever small items of property the people might have had. Moreover, the caravan traffic and the movements of troops always represented a health hazard for the local population in the form of epidemics.¹⁸¹

¹⁷⁷ A.B. Fisher's Diary, 19 Oct. 1899. Acc. 84/F4/CMS; A.B. Fisher, Bunyoro Notes, 9 & 20 Nov., 4 Dec. 1899. Acc. 84/F1/CMS; A.B. Fisher, Bunyoro Notes, 19 March 1900. Acc. 84/F1/CMS; Annual letter by A.B. Fisher, 1899. C.M.S. annual letters 1899, 158, CMS; Annual letter by A.B. Fisher, 30 Nov. 1905. C.M.S. annual letters 1905, 72-73, CMS; Fisher 1970, 50; Evatt to H.M. Commissioner and Consul General, 17 March 1899. A4/16/UNA.

¹⁷⁸ Wilson to H.M. Special Commissioner, 1 Oct. 1900. A1271, UNA; Wilson to H.M. Special Commissioner, 2 Oct. 1900. A12/1, UNA; A.B. Fisher, Bunyoro Notes, 19 March 1900. Acc. 84/F1/CMS; Annual letter by A.B. Lloyd, s.d. 1901. C.M.S. annual letters 1901, 246, CMS.

¹⁷⁹ Annual letter by A.B. Fisher, 1899. C.M.S. annual letters 1899, 158, CMS; A.B. Fisher, Bunyoro Notes, 7 May 1900. Acc. 84/F1/CMS.

¹⁸⁰ Report of the Unyoro District, 31 Dec. 1901. A12/1/UNA.

¹⁸¹ Bagge to H.M. Commissioner, 17 Dec. 1901. A12/1/UNA; Report of The Unyoro District, 31 Dec. 1901. A12/1/UNA; Commissioner Office to Acting Sub-Commissioner, Western

In 1904 the exacerbation of the land issue and the plight of the peasants had brought all work to a halt, on such a scale that the country was on the brink of famine. The food situation apparently deteriorated further, and by October people were reported to be starving in the vicinity of Lake Albert.¹⁸² The spring rains in 1905 failed over a large part of western and northern Uganda,¹⁸³ although the administrators in Bunyoro did not seem to worry about the extensive drought, even though all the signs of a catastrophe were in the air. In January 1906 there was still no rain, and a scarcity of food and rising prices were reported, especially around Masindi. The officials did not really react to the reports until news arrived from England - based on a newspaper article written by an occasional traveller - claiming that there had been a severe famine in Bunyoro in 1905 and that people in the district were continuously starving to death. The district administration denied the existence of a famine, however, for according to them it was the prolonged drought and subsequent high food prices that explained why travellers had had difficulties in purchasing food. Even so, the Banyoro were reported in 1905 to be living on *endiga* roots and the leaves of beans.¹⁸⁴

The famine of 1899 and the consequent impoverishment were apparently reflected in a further decline in food production. One missionary wrote that Banyoro women had 'no strength to dig because [their] food is so bad, and the bad digging reacts to the food.'¹⁸⁵ She also had a clue about as to the causes and consequences of the deterioration in the nutritional situation:

'Some few years ago all the cows died, and since then the Banyoro have had to depend upon their digging for a livelihood. Their fields are very badly cultivated, and as a result their food, which consists principally of sweet potatoes and 'bulo' (a kind of millet), is hard and un nourishing. The women especially have suffered from the change of diet, and are anaemic and subject to fever, being rarely well for a week at a time. The infant mortality is terrible, many women having lost child after child, none of whom have lived more than a month or so.'¹⁸⁶

Province, 11 Jan. 1902. A13/1/UNA; Jackson to the Acting Sub-Commissioner, Western Province, 18 Jan. 1902. A13/1/UNA; Bagge to Jackson, 5 Feb. 1902. A12/2/UNA; Bagge to H.M. Commissioner & Consul General, 21 April, 1902. A12/2/UNA.

¹⁸² Miss J.E. Chadwick 12 Nov, 1904. C.M.S. annual letters 1904, 535, CMS; Acting Collector to Sub-Commissioner, 5 Oct. 1904. A8/5/UNA.

¹⁸³ Monthly Report of the Hoima Station, March 1905. A12/6/UNA; Jervoise to H.M. Acting Commissioner, 25 Jan. 1906. A12/7/UNA.

¹⁸⁴ Jervoise to H.M. Commissioner, 25 Jan. 1906. A12/7/UNA; Report on the District of Unyoro for January, 1906. A12/7/UNA; Leakey to H.M. Commissioner, 26 Jan. 1906. A12/7/UNA; Leakey to H.M. Commissioner, 12 Feb. 1906. A12/7/UNA; Doyle 1998, 311-312. According to Doyle, the preparation of *endiga* to render it edible took at least couple of days and required much work.

¹⁸⁵ Annual letter by Miss L.O. Walton, 12 Nov. 1904. C.M.S. Annual Letters 1904, 537, CMS.

¹⁸⁶ *Mercy and Truth*, Vol. 9, 1905, 329.

By early 1907 the seasonal food shortages and localised famines experienced every year at the end of dry season had escalated to a major famine. Because of the bad harvests in previous years, food supplies had run out by March. People were subsisting on roots, grasses and herbs in the absence of proper food.¹⁸⁷ Although the immediate cause of the 1907 famine, known as *Kiromere*, was prolonged drought, the surroundings of Masindi, for example, not having had rain since October 1906, the underlying causes were political: the unrest caused by *Nyangire* had put an end to all cultivation, with the result that famine 'gripped the country from end to end.'¹⁸⁸

Political instability and famine caused further social disruption, so that violence, theft and drunkenness were rife. People left Hoima for the surrounding countryside in search for food. Walking skeletons roamed about the mission stations and Indian stores, begging for relief. Some refused the rice offered by the missionaries because of superstition felt towards non-familiar food.¹⁸⁹ Although there was an evident crisis, no food relief was organized by the colonial government to save the starving people. Apparently no one was even interested in estimating the actual casualties. It was as if the Banyoro were seen as having deserved their suffering because of their rebellious attitude towards the colonial state. The famine of 1907 was regarded only as a manifestation of indolence, and not as a political disturbance: 'It is to be hoped that the repeated dearth of food on this account, which occurs nearly every year towards the close of the dry season, will in time teach the natives to be more provident and cultivate beyond their immediate requirements, which they are so disinclined at present to do.'¹⁹⁰

The food situation in Bunyoro showed little improvement in the years following the *Kiromere* famine. People had no means of making money, since cash crop cultivation was in difficulties, and tax had to be paid in labour or produce, which in turn had negative effects on food and cash crop production. As the men were mostly absent from their homes, the households consisted only of women and children and should not have been required to pay hut tax,¹⁹¹ but this rule, as seen above, was not always followed. Also, because of the colonial game regulations, the number of elephants had grown, and the destruction caused by them and wild pigs to the fields and gardens had become one of the major causes of local food shortages.¹⁹² Crop losses and the low volume of production led to a situation where

¹⁸⁷ Hoima District Monthly Reports, 1907. Secretariat Minute Paper, A43/74/UNA; Cultivations in Unyoro. Secretariat Minute Paper, A43/151/UNA; Leakey to H.M. Commissioner, 16 May 1906. A42/67/UNA.

¹⁸⁸ Annual letter by H.B. Ladbury, 12 Oct. 1907. C.M.S. annual letters 1907, 237, CMS; Annual letter by A.B. Fisher, 30 Nov. 1907. C.M.S. annual letters 1907, CMS.

¹⁸⁹ Annual letter by Miss. J.E. Chadwick, 2 Nov. 1907. C.M.S. annual letters 1907. 235-236, CMS; Annual letter by H.B. Ladbury, 12 Oct. 1907. C.M.S. annual letters 1907, 237, CMS.

¹⁹⁰ Hoima District Monthly Reports 1907. Secretariat Minute Paper, A43/74/UNA.

¹⁹¹ Mr. Grant's Report of His Tour, 1909. Secretariat Minute Paper, A45/115/UNA; Unyoro Annual Report for 1908-09. Secretariat Minute Paper, A45/177/UNA.

¹⁹² Damage done by elephants in Unyoro, 14 Sept. 1908. Secretariat Minute Paper,

seasonal shortages frequently turned into localised famines. In 1911 the District Commissioner reported that food shortages and deaths from starvation were commonplace at the end of the dry season.¹⁹³

The failure of the rains over large parts of Western Uganda early in 1914 escalated into famine, remembered as *Zimya Etara*,¹⁹⁴ and the recruitment of more than ten thousand Banyoro men as porters for the military and as labourers in government work projects during the First World War did not make the household labour and food situation any better. Food production had to be increased throughout the Protectorate to support the military, which in the case of Bunyoro meant that 56 tons of food was taken by the military in 1916. People were also frequently deprived of their food stores by the troops deployed in the northern part of the Protectorate. Food production was not only suppressed by the shortage of labour and the needs of the military, however, but also by a lack of agricultural tools, as the local hoe industry had been largely destroyed by 1915 and the only hoes and other agricultural tools available were those imported and sold by Indian traders.¹⁹⁵ Although tools were available, the local people apparently had very little money available to invest in them.

The food situation was worsened further by outbreaks of cattle diseases. Because of the increased wartime mobility, cattle were frequently moved along roads where trypanosomiasis was enzootic. One of such route was between Masindi and Masindi Port on the Nile. Livestock deaths caused by trypanosomiasis in 1914 and 1915 numbered several thousands, including sheep and goats.¹⁹⁶ Then, in 1917, rinderpest, which had become an enzootic in the Eastern Province and in Bunyoro, broke out, killing about 75 per cent of the already decimated cattle population, thus reducing its size to about one thousand head.¹⁹⁷

The food situation in Bunyoro was once more alarming in 1917, and again there was a fear of famine. The rains failed early in 1918 and drought became severe. Officials estimated that food supplies would run out by April. Contrary to the situation in previous famines in Bunyoro, however, the district officials now reacted to save the population from their fate. 3000 tons of food aid was requested as

A44/350/UNA.

¹⁹³ Hoima Monthly Reports 1911. Secretariat Minute Paper, A46/125/UNA.

¹⁹⁴ Northern Province Annual Report for 1914-15. Secretariat Minute Paper, A46/808/UNA; Northern Province Annual Report for 1916-17. Secretariat Minute Paper, A46/810/UNA; Western Province Annual Report 1913-14, 4 May 1914. Secretariat Minute Paper, A46/1085/UNA. *Zimya Etara* meant 'turn out the light.' According to Nyakatura, it was given this name 'because husbands would prefer to eat in the dark so that they could not see their family starving.' Nyakatura 1973, 174.

¹⁹⁵ Northern Province Annual Report for 1916-17. Secretariat Minute Paper, A46/810/UNA; Jarvis to the Secretary of State for the Colonies, 12 March 1923. CO 536/124/159/PRO.

¹⁹⁶ Dunbar 1960, 124.

¹⁹⁷ Northern Province Annual Report for 1918-19. Secretariat Minute Paper, A46/811/UNA; Northern Province Annual Report 1920. Secretariat Minute Paper, A46/813/UNA; Richardson to the Director of Agriculture 28 Aug 1919. CO 536/95/350/PRO; Doyle 2000, 443.

famine relief to support the population for a period of two months until the next rains could be expected. Governor Coryndon himself paid a visit to Bunyoro, and was convinced that 170 tons would be enough. Eventually, however, 330 tons was purchased for distribution. Most of the food was held up at Masindi Port, however, and because of the poor transport facilities, distribution was painfully slow. By mid-April only 70 tons had been distributed through eight food centres, which were originally planned to distribute 60 tons per week each. In the distant parts of the district people were subsisting on roots and grasses, and deaths from starvation were reported. By the end of April only 257 tons of food aid had been received, bulk of which never reached the starving people. Yet the relief food saved lives. Because of this action undertaken by the government, the Banyoro referred to the 1918 famine as *Kabakuli*, meaning the bowls in which grain is carried.¹⁹⁸

It took some time to recover from the wartime collapse of the local food system, and the process was delayed by the collection of an additional famine tax of two rupees, by which the colonial state made the recipients of food relief pay for it. It was finally realized in 1923 that this additional tax was an excessive burden on the peasantry, slowing down the process of recovery and causing much unnecessary hardship, particularly since the 1918 famine was not caused by 'laziness or default' by the people, but because the extensive pressure exerted on local food production under wartime conditions.¹⁹⁹

The famine relief policy adopted from 1919 onwards contributed towards reducing the risk of a major famine in Bunyoro. On the other hand, although grain stores had been established in every major centre, their growth in size since the early 1920s had been fairly slow. Thus the failure of the rains in 1927 still led to considerable food shortages in 1928, although a catastrophe was avoided by famine precautions and the swift distribution of relief food.²⁰⁰ A widespread drought again brought scarcity in 1938, but this was eventually cut short by the onset of the rains.²⁰¹

The effects of colonial conquest and political instability, combined with the colonial tax and labour requirements and prohibitive colonial legislation, may thus be said to have shattered the food system in Bunyoro in the first decade of the

¹⁹⁸ Northern Province Annual Report for 1918-19. Secretariat Minute Paper, A46/811/UNA; Telegram from Coryndon to the Secretary of State for the Colonies, 30 March 1918. CO 536/89; Jarvis to the Secretary of State for the Colonies, 1 June 1918. CO 536/90/126/PRO; Annual letter by H. Bowers, 30 Nov. 1918. G3/AL/1917-1935/CMS; Nyakatura 1973, 174. Doyle (1998, 310) has argued that the only famine that caused deaths in colonial Bunyoro was the one of 1907, but both the missionary and government sources cited above mention deaths from starvation during the *Kabakuli* famine.

¹⁹⁹ Jarvis to the Secretary of State for the Colonies, 12 March 1923. CO 536/124/159/PRO.

²⁰⁰ Northern Province Annual Report, 1922. Secretariat Minute Paper, A46/814/UNA; Northern Province Annual Report, 1923. Secretariat Minute Paper, A46/815/UNA; Annual letter by H. Bowers, 30 Nov. 1919. G3/AL/1917-1934/CMS; Northern Province Annual Report, 1927. Secretariat Minute Paper, A46/817/UNA; Rankine to the Secretary of State for the Colonies, 23 April 1929. CO 536/151/20263/PRO.

²⁰¹ Uganda Protectorate. *Annual Report of the Provincial Commissioners of Eastern, Northern and Western Provinces on Native Administration, 1938*, 22.

twentieth century. Under pressure from taxation and communal and state labour obligations, there was no opportunity for the community to recover from the crises of 1899 and 1907 before 1914, when another long-term subsistence crisis befell the Banyoro. Rainfall conditions appear to have been more favourable in the 1920s and 1930s, however, reducing the risk of prolonged drought, and the increased commercial activity and better transportation network apparently also improved food supplies in the 1930s.²⁰² Yet another significant improvement in terms of food security was the abolition of forced labour and the restrictions imposed on land rents, which without doubt contributed to more stable social conditions in the early 1920s and 1930s.

BUSOGA FAMINES AND THE EMERGENCE OF A COLONIAL FAMINE RELIEF POLICY

The colonial district of Busoga comprised a group of chiefdoms east of the Nile occupying the area between the Nile and the Mpologoma River, bounded by Lake Kyoga in the north and Lake Victoria in the south. Climatic conditions varied greatly between the northern and southern parts of this area, the economy of the low rainfall area in the north being based on grain cultivation and livestock herding while the southern parts, in the vicinity of Lake Victoria, were fertile banana country with abundant rainfall. While the economy in the north was well adapted to dealing with periodic drought by means of mixed cropping, shifting cultivation, grain storage and livestock herding, the reliable and evenly distributed rainfall in the south did not warrant such precautions. Under the erratic rainfall conditions of the late nineteenth and early twentieth centuries, therefore, the southern parts of Busoga suffered greatly from famine.²⁰³

Busoga was an immensely fertile and rich country, having perhaps greater economic prospects than Buganda: 'It appears... that such a densely populated country, extremely rich in ivory, timber trees, rubber and other natural products, and with a remarkably fertile soil, should be opened up and developed as early as possible.'²⁰⁴ In the nineteenth century the riches of Busoga had attracted the Banyoro and Baganda to take advantage of the political weakness of the chiefdoms, and Busoga's resources were extensively plundered in the late nineteenth century through the extortionate tribute claims of the Baganda, who were mainly after ivory, slaves, cattle and bananas. Whenever Buganda suffered from famine or scarcity, the Busoga chiefdoms were raided for food, women and livestock, thus spreading scarcity and famine to that area, too.²⁰⁵ The organised raids gradually ceased with the coming of British rule, but tribute collection, as has been seen, was allowed to continue into the

²⁰² See Iliffe 1995, 238.

²⁰³ Peter F.B. Nayenga, 'Busoga in the Era of Catastrophes, 1898-1911', in Bethwell A. Ogot (ed.), *Ecology and History in East Africa*. Hadith 7. Nairobi; Kenya Literary Bureau 1979, 153-178.

²⁰⁴ Ternan to Salisbury, 7 July 1899. FO 2/203/PRO.

²⁰⁵ Cohen 1977, 77-78; Grant to Jackson, 23 June 1895. A4/1/UNA.

late 1890s.²⁰⁶ The Sudanese rebellion in 1897 and 1898 devastated the part of southern Busoga around Bunha, an important trading centre. Many Basoga were either ordered to fight for the government, or forced to supply the Sudanese, in both cases suffering heavy casualties.²⁰⁷ Thus Busoga was on the brink of catastrophe by 1898 as a consequence of excessive tribute payments, raiding and warfare.

The prolonged drought in 1898 and 1899 killed the banana trees in southern Busoga, the area around Bunha being especially hard hit. Food prices increased tenfold, and the government had to use force to make people sell their food for military and official purposes, i.e. the local chiefs were threatened with fines if they did not organize a supply of food. By February 1900 rumours of mass starvation spread to Kampala and Entebbe, and four to six thousand people were already believed to have died from hunger.²⁰⁸ Some estimates put the death toll in 1899-1900 as high as 20 000.²⁰⁹

Although ample rains fell in 1900, there was no swift recovery from the crisis. Food remained short as the dead banana gardens had to be replaced by new ones, a task which took time. At the same time taxation was extended to Busoga, and H.M. Special Commissioner Johnston refused to exempt the famine-stricken Basoga from the hut tax. People had to give up their remaining livestock in tax, since they had no rupees or crops and they were too weak to work.²¹⁰ The desolation in southern Busoga was complete:

'Coming [and] going thru' Usoga [sic] one is struck by the deserted bananaries [and] absence of people. Where they used to bring always chickens, eggs [and] occasionally sheep [and] goats as presents to camps, [and] also milk and butter, scarcely any of these things are to be seen... they sold their live stock [and] even their children to get food, so there are not enough people to cultivate...²¹¹

Besides famine mortality and enslavement, the depopulation of southern Busoga was aided by the prevalence of disease, of which dysentery, smallpox and sleeping

²⁰⁶ Grant to Jackson, 17 June 1895. A4/1/UNA.

²⁰⁷ Plunkett to Henry, 31 Jan. 1898. UGA/1/D/1/MHM; Nayenga 1979, 156-159.

²⁰⁸ Hanlon to Casartelli, 12 Dec. 1899. UGA/4/IV/MHM; Hanlon to the Cardinal, 20 Feb. 1900. UGA/2/1900/MHM; Preliminary Report on the Protectorate of Uganda, by H.H. Johnston, s.d. 1900. FO 2/298/PRO; Albert Cook to his mother, 16 April 1900. A102/Box 1/PP/COO/WTL.

²⁰⁹ Annual letter by S.R. Skeens, 5 Dec, 1900. C.M.S. annual letters 1900, 214, CMS; A.D.P. Hodges' diary, 28 July 1901. MSS. Afr. s. 1782, RH.

²¹⁰ Annual letter by S.R. Skeens, 5 Dec, 1900. C.M.S. annual letters 1900, 214, CMS; A.D.P. Hodges' diary, 28 July 1901. MSS. Afr. s. 1782, RH. Nayenga (1979, 160) reports that Johnston attempted to organize food relief from the Nandi and Bavuma, but when these attempts failed, he was forced to exempt the Basoga from the hut tax. The evidence presented here nevertheless indicates that the hut tax was collected from the Basoga in 1901.

²¹¹ A.D.P. Hodges' diary, 28 July 1901. MSS. Afr. s. 1782, RH.

sickness were taking the heaviest toll on the population in 1901.²¹² The starving and the sick were devoured by wild beasts in the night-time, to the extent that 120 people were reported to have been killed by hyenas and leopards in one week.²¹³

Depopulation and the subsequent collapse of food production prolonged the crisis. Hodges, touring southern Busoga and Buvuma Island in March 1902, reported that famine and disease were still rampant.²¹⁴ There is little information about the food situation in Busoga in 1902 and 1903, since the sleeping sickness epidemic became the paramount concern of the colonial government, but in view of the social disruption caused by the disease in southern Busoga, it is plausible that food production was severely undermined.

The vulnerability of the Basoga was drastically revealed in 1907, when the erratic rainfall experienced since 1906 and the destruction of crops by wild pigs brought the country to the brink of severe famine once again within a very short time.²¹⁵ By the end of 1907 a missionary by the name of Skeens was reporting 'almost famine conditions' in Busoga. The administrative officers did not report this until February 1908, however, when men were said to be travelling long distances in search for food for their families. Many refused the relief work, which was road construction, saying that their families would starve, and also declined the government's offer of food for work, since, according to them, it would have made them slaves.²¹⁶

Government food relief was commenced as the number of casualties began to rise. In many places people were subsisting on water lily bulbs and the roots of the banana trees, and in many cases they were too weak to move from their villages in search of food. Many died while eating unsuitable foods, and the relief food, mainly rice, was eaten raw and reportedly caused many deaths. The number of estimated deaths rose from 400 in April 1908 to 4000 in late May. At the same time, the amounts spent on famine relief proved grossly inadequate. Governor Bell estimated in April that the costs would be £1000, while at the end of May he believed that £8000 would be required to provide food for those at risk, i.e. about 75 percent of the estimated population of 300 000 or more. By July the number of casualties was estimated at around ten thousand.²¹⁷ Another missionary, Roscoe, reported that the

²¹² Annual letter by W.G.S. Innes, 7 Nov. 1901. C.M.S. annual letters 1901, 247, CMS; van Tern to Rector, 1 Sept. 1901. UGA/2/1901/MHM.

²¹³ van Tern to Rector, 26 Jan. 1901. UGA/2/1901/MHM; van Tern to Rector, 1 Sept. 1901. UGA/2/1901/MHM.

²¹⁴ A.D.P. Hodges' diary, 9, 12 & 25 March 1902. MSS. Afr. s. 1782, RH.

²¹⁵ Nayenga 1979, 170; Cubitt to H.M. Deputy Commissioner, 16 May 1908. Secretariat Minute Paper, A44/232/UNA.

²¹⁶ Annual letter by S.R. Skeens, 3 Jan. 1908. C.M.S. annual letters 1907, 242, CMS; Grant to H.M. Deputy Commissioner, 17 Feb. 1908. Secretariat Minute Paper, A44/54/UNA; Bell to Elgin, 4 April 1908. Famine in Busoga, CO 536/19/PRO; Grant to H.M. Deputy Commissioner, 10 April 1908. Secretariat Minute Paper, A44/54/UNA; Busoga District Annual Report for 1907-8, 12 May 1908. Secretariat Minute Paper, A44/214/UNA.

²¹⁷ Bell to Elgin, 4 April 1908. Famine in Busoga, CO 536/19/PRO; Telegram from Bell to

situation in Iganga and around Jinja was 'truly terrible.' According to him, 'every edible grass and root has been eaten up and the country is desolate'.²¹⁸

Although delayed, the Government's relief efforts evidently saved lives. In mid-May the District Commissioner despatched a circular to mission stations asking for help in the distribution of food, and 37 relief points with cooking facilities were established by the missionaries with the help of local chiefs. As local food supplies were non-existent, food had to be imported. It was estimated that 15 tonnes had to be distributed daily to feed the 40 000 urgently in need of help. At first there was no food to distribute, but from the end of May onwards food became available from Kenya and was shipped from Kisumu to Jinja at great expense. Food prices in Kisumu rose 25 percent because of the famine. From Jinja, the food was carried in wagons to the inland distribution centres. The distribution was delayed by the onset of the rains, which turned roads to mud. Most of the food was distributed free, but those who still had the strength were made to work in carrying the loads, helping in the distribution, maintaining the roads and planting new crops. Hunting bands were organised to kill wild pigs and protect the cultivated land.²¹⁹ By mid-July the worst was over; local food was available in central Busoga, and the situation in the south, although still critical, was improving with the onset of the rains. Food relief was stopped, and locally grown sweet potatoes were again available in August, so that the famine was reported to be over. In some places, however, the scarcity persisted until December.²²⁰

The Protectorate officials claimed that the relief operation saved one third of the population of Busoga, and that the number of casualties would have been much higher if swift action had not been taken by the government.²²¹ Some missionaries nevertheless still felt that the aid had come much too late.²²² In any case, it is clear

the Secretary of State for the Colonies, 8 May 1908. Famine in Busoga, CO 536/19/PRO; Telegram from Bell to the Secretary of State for the Colonies, 23 May 1908. Famine in Busoga, CO 536/19/PRO; Telegram from Bell to the Secretary of State for the Colonies, 29 May 1908. Famine in Busoga, CO 536/19/PRO; Sub-Commissioner's Report on Busoga Famine, 27 July 1908. Secretariat Minute Paper, A44/270/UNA.

²¹⁸ A Brief Report of a Tour through Busoga and Bukedi, May and June 1908, by Rev. J. Roscoe. G3/A7/O/1908/196/CMS.

²¹⁹ Cubitt to H. M. Deputy Commissioner, 16 May 1908. Secretariat Minute Paper, A44/232/UNA; Measures to avert future famines in Usoga, 1908. Secretariat Minute Paper, A44/232/UNA; Wilson to Bell, 16 Sept. 1908. CO 536/21/209/PRO; Annual letter by W.G.S. Innes, s.d. C.M.S. annual letters 1908, 133-134, CMS; Jackson to H.M. Deputy Commissioner, 20 June 1908. Secretariat Minute Paper, A44/54/UNA.

²²⁰ Cubitt to the Sub-Commissioner, Eastern Province, 12 Aug. 1908. Secretariat Minute Paper, A44/54/UNA; Cubitt to the Sub-Commissioner, Eastern Province, 15 Sept. 1908. Secretariat Minute Paper, A44/54/UNA; Annual letter by H. Mathers, C.M.S. annual letters 1908, 165-166, CMS.

²²¹ Sub-Commissioner's report on Busoga Famine, 25 July 1908. A44/270/UNA; Annual letter by S.R. Skeens, 15 Dec. 1908. C.M.S. annual letters 1908, 167, CMS.

²²² A Brief Report of a Tour through Busoga and Bukedi, May and June 1908, by Rev. J. Roscoe. G3/A7/O/1908/196/CMS.

that the food relief could do little to prevent or repair the structural damage experienced by the communities.

The descriptions of the famine scenes speak of the utter human misery and the social, economic and moral disruption of society. People blamed their rainmakers for the drought, and many ritualists lost all their property at the hands of angry crowds. Some rainmakers were quick to escape responsibility and blame people who were old and crippled for the famine, with the result that these people were taken to be sacrificed in order to make rain. There was also a profit to be made from famine. In the larger centres food was available locally from the Indian shops, but the traders cheated the locals by asking extremely high prices for their food. When there was no money to spend, young girls were sold to the traders and to neighbouring peoples for food. Theft and violence increased.²²³

In Jinja, where the food caravans going to the distribution centres were being organized, there were crowds of hungry people fighting over each grain. A British officer noted that '... they did not show the usual physical signs of suffering from famine, and it was difficult to understand the assertions made that men who seemed of fine physical proportions would suddenly drop dead on putting forth the slightest effort, so weakened had they become of hunger.' Further inland the same officer reported:

'...on the way to Iganga one came across old men and women, and children, poor creatures of nothing but skin and bone. So pitiable were they that it was hard to remember that we must rush on to provide relief for hundreds of thousands out of sight, and not to give way to the temptation of the moment to deal with the visible individual sufferings. We came across bodies of those who had died on the way side, on occasions within a few hundreds of yards of relief. I learnt that on one day there had been quite a simple change of position of a depot and that deaths actually occurred when walking half a mile from the old position to the new one.'²²⁴

Roscoe was apparently shocked by the scene waiting for him in the famine-stricken area:

'It is a pitiable sight and also a loathsome one. Men and women have lost all sense of humanity, parents no longer regard their children, nor husband for wife nor wife for husband, like brute beasts they struggle for food leaving the weakest to die. The strongest refuse to help the weak and I saw a number of cases where men had to be taken as captives to bring food for themselves and families from greater centres.'²²⁵

²²³ Annual letter by H. Mathers, C.M.S. annual letters 1908. 165-166, CMS; Annual letter by Miss A. J. Welsh, 15 Nov. 1908. C.M.S. annual letters 1908, 168-169, CMS.

²²⁴ Wilson to Bell, 16 Sept. 1908. CO 536/21/209/PRO.

²²⁵ A Brief Report of a Tour through Busoga and Bukedi, May and June 1908, by Rev. J. Roscoe. G3/A7/O/1908/196/CMS.

Similar scenes were commonplace at the food distribution centres: '... I had to intervene to stop the adults snatching the food given to the poor starving children... I had a dozen men whose business it was to sweep the camp every day and to bury the dead. Graves were dug in the afternoons...'²²⁶

'Women snatched food from their babies; men left their wives, and wives their husbands; every man stole from his neighbour; dozens of lives were lost in the attempt to steal at night from the gardens; life was not accounted anything. Bodies of people who had died from famine, and sometimes from unripe or uncooked food, eaten in their ravenous hunger, were seen on all roads wherever you went. Then they were carried off to the burial, unshrouded and simply tied to a pole like a dead body of a wild animal...'²²⁷

Central and especially southern Busoga were the areas most severely affected. Men and children were reported to have died in greater numbers than women. Some missionaries claimed that the disaster equalled that experienced in the previous famine, when tens of thousands were said to have died of starvation.²²⁸ According to the District Commissioner, the immediate cause of the famine was prolonged drought befalling people who had no food reserves, together with the destruction caused by wild pigs.²²⁹ Sleeping sickness and the subsequent demoralisation and disruption of family life were also said to have contributed to neglect of the grain stores and cultivation. The chiefs were accused of draining the households of labour because of their desire to mimic the lifestyles of the leading Baganda chiefs. Government officials nevertheless remained silent about the labour demands of the colonial state and the local governments, and about the labour requirements of cotton cultivation. According to missionary sources, the introduction of cotton had had a detrimental effect on food production not only in Busoga but throughout the whole Protectorate.²³⁰ Yet some officers and missionaries had difficulties in grasping how famine could be caused by the factors named by their colleagues in such a fertile part of the Protectorate. Instead, they blamed the famine on the Basoga women, claiming that while their husbands were away working on the roads and elsewhere, the women did nothing and thus created famine solely because of their laziness.²³¹

²²⁶ Annual letter by W.G.S. Innes, s.d. 1908. C.M.S. annual letters 1908, 133-134, CMS.

²²⁷ Annual letter by S.R. Skeens, 15 Dec. 1908. C.M.S. annual letters 1908, 167, CMS.

²²⁸ A Brief Report of a Tour through Busoga and Bukedi, May and June 1908, By Rev. J. Roscoe. G3/A7/O/1908/196/CMS; Sub-Commissioner's report on Busoga Famine, 25 July 1908. A44/270/UNA.

²²⁹ Cubitt to H.M. Deputy Commissioner, 16 May 1908. Secretariat Minute Paper, A44/232/UNA.

²³⁰ Wilson to Bell, 16 Sept. 1908. CO 536/21/209/PRO; Uganda Notes, June 1908, 90. G3/A7/O/1908/191/CMS.

²³¹ Measures to avert future famines in Usoga, 1908. Secretariat Minute Paper, A44/232/UNA.

The horrors of famine in Busoga and the coincident famine in Buganda provoked a policy of localised famine prevention and relief. In Busoga this meant that granaries should be maintained and filled with dried sweet potatoes, dried bananas and millet. Control of wild pigs was likewise seen as essential for protecting gardens and fields.²³² These precautions were apparently left to the local administration, for no legislative measure regarding famine prevention and relief was passed at the Protectorate level.

The policy of establishing local food reserves was not enough to guarantee the availability of food in times of shortage. In 1914, when food shortages caused by drought threatened tens of thousands of people in the Eastern Province, the government purchased food supplies from Kenya before any rise in prices could occur and arranged for payment in cotton or cash.²³³

The vulnerability of the local agricultural systems and the insufficiency of the famine precautions were drastically revealed by the 1918 famine, which hit the Eastern Province particularly hard. Father Willemen's description of the events of 1917-18 are worth quoting at length:

Last year [1917], by April, the food scarcity was already so great here that many people left this country. Others however tried to live on roots and leaves found in the forest. At last the rains set in and after three months there was a scanty harvest of millet. The people hoped again for the next crop, of peas, but these also failed in nearly the whole country.

In December they planted potatoes but these did not get sufficient rain to bear, and they had to eat their leaves. Thieves were also roaming round the country and robbed the people of the still green bananas. The poor people had to watch their fields and bananaries day and night, and a good many thieves were speared or put into prison.

The months of January and the first half of February of this year [1918] were dry again. The scanty seed dried up in the soil, and when the rain started towards the middle of February they had to buy the seeds very dear to sow them again. March was a month of misery to our people. Chickens, cooking pots, barkcloth, goats and cows were brought for sale to buy a bit of food from the Indian traders. The poorest sold their little girls to buy cows or food. On my last tour I had to ransom a Christian girl for two cows. She had been sold by her starving mother to a heathen. March brought death in this country. Mothers saw their babies dying at their breasts; husbands were buried by their wives and in other families the mother died leaving orphans behind. Every day one found some dead people on the road. The rains otherwise so very beneficial for the next harvest, brought cold with it and killed a great many people. In six weeks some two thousand five hundred died in our district.²³⁴

²³² Cubitt to H.M. Deputy Commissioner, 16 May 1908. Secretariat Minute Paper, A44/232/UNA.

²³³ Telegram from Wallis to the Secretary of State for the Colonies, 27 April 1914. CO 536/68/PRO; Telegram from Wallis to the Secretary of State for the Colonies, 4 May 1914. CO 536/69/PRO; Wallis to the Secretary of State for the Colonies, 7 Aug. 1914. CO 536/70/357.

²³⁴ Echo from Africa: Material Famine - Spiritual Harvest by Fr. Willemen, s.d. 1918. PER

Again relief food had to be imported, since Uganda was unable to grow a sufficient amount of food to feed its population. Food for the Western Province was brought from Bukoba, still a part of German East Africa, and maize and rice to be distributed to the Eastern and Northern Provinces were bought from Mombasa, where they had been shipped from South Africa and India, respectively. At first the government attempted to sell the food at low prices, but it ended up giving it away free because in many places people had nothing to pay with. Planters and some private corporations gave food relief, and they also sold agricultural tools such as hoes at cost price to impoverished people.²³⁵ Because of the severity and geographical scale of the famine, the costs of relief were high. In 1919 it was calculated that the total costs of the relief had been £50 000. This sum was to be raised from those who had received the relief food by imposing a special famine tax, which was to become a heavy burden especially for the people of the Northern Province, where there was no cash crop economy of the kind found in the Eastern Province and Buganda.²³⁶

The widespread famine in the whole Protectorate in 1918 sparked off an attempt at colonial famine relief legislation. The Famine Relief Ordinance and the Native Foodstuffs Ordinance, passed in March and October 1919, respectively, were aimed at empowering the district and local administration to deal with threatening food shortages and famine by organising relief work, supervising the cultivation of famine relief foods such as cassava and maize, and directing the movement of people during famines to such areas where they could be given food relief. The Native Foodstuffs Ordinance posed limits on food prices and trading in food during shortages, with the aim of preventing stockpiling and profit-mongering by wealthy traders.²³⁷ The Famine Relief Ordinance was amalgamated with the Native Foodstuffs Ordinance in 1919 to form the colonial state's overall famine relief policy, the aim of which was a simple one, to prevent famines and food shortages from occurring, and if they did occur, to relieve the distress mainly by means of the local supplies. In practice this meant the cultivation of cassava as a famine crop in drought-prone regions.²³⁸

Local food production was most insufficient in terms of food security in densely populated areas. The rapid development of cotton-growing in Buganda in the 1920s, for example, had attracted a huge population to live in and around Kampala, considerably increasing the demand of food. Since local producers could not supply the growing urban population, maize flour and beans were imported from Kenya, and rice and groundnuts from Tanganyika to be sold at Kampala, Jinja and

1912/345/1/Willemen/MHM.

²³⁵ Jarvis to the Secretary of State for the Colonies, 1 June 1918. CO 536/90/126/PRO.

²³⁶ Coryndon to the Secretary of State for the colonies, 9 Sept. 1919. CO 536/95/344/PRO; Jarvis to the Secretary of State for the Colonies, 12 March 1923. CO 536/124/159/PRO.

²³⁷ Uganda Protectorate. Famine Relief Ordinance 1919. CO 684/2/PRO; Uganda Protectorate. Native Foodstuffs Ordinance 1919. CO 684/2/PRO.

²³⁸ Uganda Protectorate. *Department of Agriculture 1919-20*, 8, 11, 35.

Entebbe. Railway line serving the needs of the flourishing cotton industry in the Eastern Province terminated at Jinja, so that all the food for Buganda had to be transported by lorry, which was expensive. Improvements in local production were therefore seen to be necessary: 'In any community the local production of an adequate and cheap supply of food is a prime necessity... .. in a country with few railway facilities, food production is vital, and it is the first duty of an agricultural department to see that ample food supplies are available, before exportable crops are considered.'²³⁹ The railway line from Jinja to Kampala cut the costs of transporting food when it was completed in 1931.²⁴⁰

The creation of famine reserves and the establishment of a clear food policy seem to have been abandoned half way, however. The colonial agricultural statistics do not show any dramatic increase in acreages of the principal food crops before 1928 (see appendices 3 - 7). In Buganda, where some authorities still held the firm belief that the good climate and fertile soils virtually rendered large-scale famines impossible,²⁴¹ no extensive food stores were regarded as necessary, even though, as has been seen, one of the most fertile areas of Buganda, the Masaka District, and especially the area of Buddu, suffered from serious local food shortages in 1927 and 1928 (resulting in the recommendation that cassava and other foodstuffs should be cultivated all over the province).²⁴² It seems, therefore, that the famine of 1928 was needed before any policy of famine reserves could seriously be adopted. This meant that the cultivation of famine crops such as cassava and maize clearly increased, so that these became more frequent foods for the urban and rural Baganda living in and around Kampala, and cassava also increased in the lower rainfall areas of Mubende. In Bunyoro, however, cultivation of cassava and maize became more prevalent from the mid-1930s onwards (see appendices 3-7).

As has been seen, there was no systematic famine prevention or food policy in Uganda before 1919.²⁴³ Famine relief operations prior to that time were unsystematic and concentrated in the Eastern Province, the economic mainstay of the Protectorate. Apparently the establishment of a cotton economy in Busoga and other areas in the Eastern Province increased the vulnerability of the communities. Since the men were made to work and the women to grow cotton, food production suffered. Yet the devastating impact of the 1898-99 famine, with a delay in recovery because of depopulation, sleeping sickness and taxation, led to a vicious circle of impoverishment in which the households had difficulties in recovering their lost assets such as livestock, pottery, tools and even human beings. Cotton cultivation was the only way to earn cash, but this was spent in paying taxes.²⁴⁴

²³⁹ Simpson to the Chief Secretary, 24 Nov 1926. CO 536/144/7/PRO.

²⁴⁰ Jørgensen 1981, 110-111.

²⁴¹ Uganda Protectorate. *Department of Agriculture 1928*, 12.

²⁴² Buganda Quarterly Report 1927. Secretariat Minute Paper, A46/750/UNA; Buganda Half Year Report 1928. Secretariat Minute Paper, A46/442/UNA.

²⁴³ For similar developments in North-Nigeria, see Weiss 1997, 240-253.

²⁴⁴ Provincial Commissioner, Jinja, to Chief Secretary, 29 Nov. 1908. Secretariat Minute Paper, A44/54/UNA.

It is remarkable how a rich, fertile area such as Busoga could be devastated by three major famines within twenty years, and it would be tempting to conclude that the establishment of a colonial economy in Busoga and in the Eastern Province invalidated the local food systems to a degree which made such a large-scale catastrophe possible. Yet, because of the long periods of drought, famines would have taken place anyway, regardless of colonial rule. Colonial food relief undoubtedly saved lives in 1908 and 1918, but it is also plausible that, unless colonial rule had attracted resources away from household production and limited such activities as hunting and trading, the communities would have been better prepared to encounter food shortages. The Busoga example likewise demonstrates that the drier grain-cultivating areas in the north fared better than the higher-rainfall areas in the central and southern parts, where agriculture was based on banana production. It is likewise worth noting that cotton cultivation in Busoga was started on a large scale in 1907 and concentrated in areas with a relatively reliable rainfall, i.e. the areas most severely hit by famine.²⁴⁵ It was argued in the mid- 1920, however, that wealth generated by cotton played a significant role in improving food security,²⁴⁶ although in the light of the evidence presented earlier on, it seems that this wealth accumulated in the hands of the chiefs and not the peasantry. Destructive famines were only avoided because of the more propitious weather and the improvements in transportation and food relief, and not because local producers were capable of generating a market surplus, or because of their improved purchasing power due to cotton growing.²⁴⁷

SUMMARY: HUNGER CLEARS THE WAY FOR DISEASE

If disarray and disruption had been caused earlier by civil wars and colonial conquest, they were brought about later by the allocation of land and the establishment of a colonial taxation and labour system, which contributed not only to the breakdown of old social and economic allegiances, but also to increased vulnerability to recurrent food shortages, famines and epidemics. Between 1898 and 1939 there were five major food shortages and famines affecting large areas of the Protectorate, in 1898-1902, 1907-1908, 1917-1918, 1927-1928, and 1937. Not all of the famines led to the loss of life, but most were severe enough to cause great distress and poverty. These periods represent times of severe food shortage, usually triggered by erratic rainfall and drought, but in reality caused by a constellation of political, economic and epidemiological factors: political unrest, withdrawal of labour from the farms, taxation, extensive emphasis on cotton cultivation, rinderpest, trypanosomiasis, etc., reflecting the damage suffered by the local food systems

²⁴⁵ See Wrigley 1959, 19-20.

²⁴⁶ Simpson to the Chief Secretary, 24 Nov 1926. CO 536/144/7/PRO.

²⁴⁷ For example the failure of the rains in Teso, the main cotton district in the Eastern province, in 1935, sent hoards of people wandering around the district in search of work and food. Famine was prevented by distributing grain previously stored as famine reserves. See Uganda Protectorate. *Annual Reports of the Provincial Commissioners, Eastern, Northern and Western Provinces, on Native Administration for the year 1935*. Entebbe: Government Printer 1936, 5.

under colonial rule, which forced communities to rely extensively on household cultivation. Between these peaks of want there were times of less severe shortages, often localised and not labelled as famines, caused mainly by a shortage of household labour. As will be seen below, epidemic and endemic disease became rampant in the wake of the famines and food shortages, as the increased mobility contributed to a rapid spread of diseases and made it difficult to prevent and control them.

VI Disease and demography

INTRODUCTION

Although the second half of the nineteenth century was characterized by frequent epidemics and epizootics in Eastern Africa, including Uganda, the major epidemiological onslaught nevertheless took place during the colonial period, with a number of devastating epidemics, including sleeping sickness, cerebrospinal meningitis and influenza, while pneumonia, smallpox, dysentery and bubonic plague were likewise frequent. The upsurge of disease can be explained by the disruption brought about by colonial rule, which increased mobility and contributed to the emergence of famines and food shortages, during which endemic diseases achieved epidemic proportions. The apparent health crisis forced the colonial state to act in order to stop the depopulation allegedly caused by high mortality from epidemics, mainly sleeping sickness and syphilis. While resources were directed towards combating these two diseases in particular, less attention was paid to other public health hazards such as food and water-borne infections.

COLONIAL MEDICINE AND EPIDEMIC AND ENDEMIC DISEASE THE COLONIAL MEDICAL ESTABLISHMENT AND ITS HEALTH POLICY

Western medicine in the late nineteenth and early twentieth centuries was being revolutionized by the ideas of Pasteur and Koch. The breakthrough of biological medicine and the advent of germ theory marked a departure from the earlier holistic social medicine in which disease was understood as a product of social and environmental conditions. According to the germ theory, disease was caused by invading external biological agents, or pathogens, detectable microscopically and curable by specific medicals. As it emphasized a single causative agent, the old methods of recording symptoms and observing the patient's surroundings and living conditions were becoming increasingly irrelevant for prevention and treatment purposes. Likewise, less attention was directed to such questions as deficiencies or shortages as causes of disease. The early twentieth century textbooks of tropical medicine refer to deficiency as a probable cause of disease for the first time in 1913, but it was not until the 1920s that social and environmental conditions were again afforded wider attention in relation to disease.¹

Both tropical and colonial medicine are outstanding examples of the triumph of biomedicine in the late nineteenth and early twentieth centuries. Colonial medicine evolved as a part of the wider field of tropical medicine, a new branch of the medical profession with its roots in the expansion of the British Empire into tropical regions in the eighteenth century.² In the late nineteenth century there were

¹ K. Cordell Carter, 'The Germ Theory, Beriberi, and the Deficiency Theory of Disease', *Medical History* 21 1977, 119-136; Aldo Castellani and Albert J. Chalmers, *Manual of Tropical Medicine*. Second Edition. London: Baillière, Tindall & Cox 1913, 1212; Sir Patrick Manson, *Tropical Diseases. A Manual of Diseases of Warm Climates*. Fifth revised & enlarged edition. London: Cassell & Co. 1914, 431; Wylie 2001, 11.

² Michael Worboys, 'The Emergence of Tropical Medicine: a Study in the Establishment of a Scientific Speciality', in Gerard Lemaine, Roy MacLeod, Michael Mulkay, Peter Weingart (eds.), *Perspectives on the Emergence of Scientific Disciplines*. The Hague: Mouton 1976, 79-80; Daniel R. 244

two competing views in British tropical medicine, curative and preventive. The first emphasized scientific research into tropical diseases and the development of curative medicine, while the other focused on improvements in sanitation, hygiene and living conditions as means of fighting disease, thus deriving from the older tradition of social medicine. The two main advocates representing these competing branches within British tropical medicine were Patrick Manson and Ronald Ross, respectively, both well-known pioneers of tropical medicine because of their work on malaria. After Manson became medical advisor to the Colonial Office in 1897, his views on medicine were adopted as a part of Joseph Chamberlain's policy for colonial development. Meanwhile the ideas held by Ross, focusing on public health, were abandoned as too expensive and impractical. The training of medical officers in scientific biomedicine, to provide qualified personnel for the colonies, was started at the Liverpool and London schools of tropical medicine in 1899.³

Early colonial medical services in Africa were aimed at ensuring the health of colonial officials and troops, making the environments suitable for Europeans, and to some extent, protecting the local labour supply from epidemic disease. This turned out to be difficult, for not only were many diseases unknown to colonial doctors, but they had very little human or economic resources to deal with diseases encountered in the colonies. Early colonial medicine was concentrated on fighting individual epidemic diseases by means of militaristic campaigns, and on preventing the transmission of disease from indigenous people to European residents. In the early colonial period the resources of medical departments were solely directed to these ends, so that health care for Africans was left in the hands of the missionaries and charity organisations. In East Africa, the Protestant and Catholic missions began their medical work on the coast, and by the late 1870s they had reached Buganda. Permanent missionary medical work did not commence until the 1890s, however. As with the doctors in the early colonial medical service, the mission doctors had virtually no training in tropical medicine and little knowledge of tropical diseases, which naturally restricted their methods of diagnosis and treatment.⁴

The colonial medical establishment in Uganda owed its origins to the IBEAC, which recruited doctors for its service in 1889, some of whom later formed the core of the medical service in the Uganda Protectorate. The first qualified missionary doctor to be permanently stationed in Uganda arrived in 1891 and belonged to the Church Missionary Society. Missions, and especially the Catholic White Fathers,

Headrick, *The tools of empire: technology and European imperialism in the nineteenth century*. New York; Oxford: Oxford University Press 1981, 59-66. Whereas tropical or imperial medicine used the tropics and the empire as units of analysis, colonial medicine was confined to and determined by the circumstances and conditions of a single colony. See Bell 1999, 1-2.

³ Michael Worboys, 'Manson, Ross and colonial medical policy: tropical medicine in London and Liverpool, 1899-1914', in Macleod and Lewis 1988b, 21-37; H.J.D. Burke-Gaffney, 'The History of medicine in the African Countries', *Medical History* 12, 1968, 31-41, especially 33-34; Worboys 1976, 83-92.

⁴ Iiffe 1998, 19, 27-28; Vaughan 1991, 39; Bell 1999, 4; Sir Albert R. Cook, 'The Medical History of Uganda', *E. Afr. Med. J.* 13 (2) 1936a, 66-81, especially 77-78.

were from the beginning keen practitioners of lay medicine, and medicine fitted in well with their purpose of spreading the Gospel among the local people.⁵

The Uganda colonial medical service was handicapped from the beginning by a lack of funds. The Protectorate was divided into medical districts, usually much larger than administrative districts, in which stations were established under qualified Senior Medical Officers. The district medical officers served under the Principal Medical Officer (P.M.O.), the head of the whole Uganda medical establishment.⁶ In 1900 the Uganda medical service had only nine doctors, so that some Government stations and posts were left without medical staff. Morbidity and mortality among the Europeans was high, and the doctors themselves were likewise at great risk. Many had to resign because of physical fatigue caused by the tropical climate, or for psychological reasons.⁷

In order to make the medical services in the East African territories more cost-efficient, the Kenya and Uganda medical services were amalgamated in 1903 into a single East African Medical Service, with twenty-six doctors, seven dispensaries and three nurses. This proved a hindrance to efficient management, however, and a policy of separate medical departments was readopted in 1908.⁸ Since the colonial medical service in Uganda was short of resources, the growth of the missionary medical establishment was warmly welcomed by the colonial government. The medical branch of the C.M.S. came to work closely with the government medical department in the early twentieth century, and missionary doctors, of which there were only three in 1903, came to enjoy great authority in medical matters in the Protectorate. Although the missionaries established a number of dispensaries providing health care for Africans, their main task was the maintenance of the health of their fellow missionaries. Their medical staff, especially the nurses who were often in charge of running the rural dispensaries, were mostly unqualified.⁹

By 1907 there were three mission hospitals in the Protectorate, two in Kampala and one in Toro. The most advanced one was run by the Cook brothers, who were both C.M.S. doctors, at Mengo Hill near Kampala. The first government hospital, for Europeans only, was opened in Entebbe in 1903, while the C.M.S. hospital and the Nsambya hospital established by the Catholic Franciscan Sisters in 1906 gave medical services for Africans, Asians and Europeans alike. By 1907 there were 13 government-run hospitals in the whole Protectorate - often with

⁵ W.D. Foster, *The Early History of Scientific Medicine in Uganda*. Nairobi: East African Literature Bureau 1970, 11-13; Beck 1970, 8-9; Médard, forthcoming; Berkeley to Salisbury, 30 March 1896, FO 2/112/PRO.

⁶ Circular by Ternan, 15 June 1899. FO 2/202/PRO.

⁷ Ternan to Salisbury, 30 May 1899. FO 2/202/PRO; Johnston to Salisbury, 22 Oct. 1900. FO 2/300/PRO.

⁸ Bell to Elgin, 28 Dec. 1907. Medical Service, CO 536/15/PRO; Beck 1970, 9, 15-16; Zeller 1971, 158.

⁹ Foster 1970, 57-59; Iliffe 1998, 20.

dispensaries attached -, most of which comprised a few grass huts with no clean or running water and with limited hygiene and sanitary arrangements.¹⁰



The first Mengo Hospital (Makerere University Library Collections).

Colonial medical policy in Uganda followed the general trend of colonial medicine, but with local characteristics. One distinctive feature in Uganda was that missionary medicine came to play a very central role in the medical establishment during the early colonial period. Government doctors frequently consulted the C.M.S. doctors on professional issues, and the latter were listened to as specialists by the Protectorate officials and were asked to treat influential members of the Protectorate administration - and their family members - in cases of illness.¹¹ Most importantly, they had better knowledge of the conditions in which the African population lived, based on their first-hand experience in the field. Naturally, therefore, their word carried much weight when decisions were made on the direction of medical policy in Uganda.

The medical policy practised in Uganda between 1900 and 1939 can be divided into four major phases, which overlap with each other, of course, but all of which have their own distinct characteristics. In the first and second phases the colonial medical establishment concentrated on fighting major threats of epidemics. From 1900 to 1908 the main issue was the control of sleeping sickness. In the second phase, starting around 1908 and continuing well to the 1920s, the colonial

¹⁰ Foster 1971, 57-58, 71; Iliffe 1998, 20; Zeller 1971, 161,189-190.

¹¹ Albert Cook was a personal friend of Commissioner Sadler and his wife, whom he treated in 1903, and also of Drs. Hodges and Moffat, the latter of whom was greatly impressed by Cook's findings regarding sleeping sickness in 1901. See Albert Cook's diary, 23 April 1899. G14/Box 4/PP/COO/WTL; Albert Cook's diary, 6 April 1901. G16/Box 4/PP/COO/WTL; Albert Cook's diary, 9-14 April 1903. G18/Box 4/PP/COO/WTL.

medical establishment concentrated, with the help of the missionaries, on containing the spread of venereal disease.¹² The third phase, starting around 1920, put more emphasis on public health, the focus being on the education of Africans and the improvement of maternal and infant care in order to curb high infant and maternal mortality. The maternity programme was primarily carried out by missionaries intermingling with the government-run anti-venereal disease campaign, with the maternity centres acting as means of delivering anti-venereal propaganda and treatment to prospective mothers. In addition to anti-venereal work, the government-run general medical services - utilizing the infrastructure created by the venereal disease campaigns, were gradually extended to rural areas in Buganda.¹³ The fourth phase was marked by the arrival of a new medical policy in Uganda in the aftermath of the worldwide economic depression, and represented a breakaway from the previous doctrines of curative medicine, which had proved to be expensive and highly ineffective in improving the health status and living conditions of the colonies. Thus public health policy became dominant in the 1930s, combined with the increased worldwide interest in development and welfare, so that for the first time accurate information on rural and urban living conditions was generated, which, as will be seen later, had a great impact on the formulation of colonial policy in the late 1930s.¹⁴

SLEEPING SICKNESS

The sleeping sickness epidemic was the most dramatic single event in the medical history of Uganda before the HIV epidemic of the 1980s. Sleeping sickness in humans is caused by certain species of *trypanosoma*, parasitic protozoa of blood and tissue that are transmitted from their natural hosts (wild animals) or adventitious hosts (domestic animals and humans) to man by species of the tsetse fly (*Glossina*). Trypanosomes are found in abundance in nature, but the sub-species causing disease in man are *Trypanosoma brucei gambiense* and *Trypanosoma brucei rhodesiense*, the natural hosts of the Gambian strain being humans and suids, and those of the Rhodesian strain bovinds. Of the tsetse fly species, *T.b. gambiense* is spread by *G. fuscipes fuscipes* (formerly referred to as *G. palpalis*) and *T.b. rhodesiense* by *G. fuscipes fuscipes*, *G. morsitans*, and *G. pallidipes*. The main habitat of *G. morsitans* is wooded savanna, such as the *miombo* woodland found in western Uganda, while *G. fuscipes fuscipes* and *G. pallidipes* are found in lush fluvial and lacustrine environments such as forests and thickets on lake shores and riverbanks. The breeding requirements of the tsetse fly species with regard to temperature and humidity vary, but generally they require shade and moderate temperatures, together with ample vegetation for protecting their pupae against extremes of climate, i.e.

¹² See Zeller, chapter 4; Confidential: W.F. Fiske, A history of Sleeping Sickness and Reclamation in Uganda, 8 July 1926. CO 536/140/PRO; Tuck 1997, 55-78.

¹³ See Zeller 1971, 121-131; Tuck 1997, 281-287.

¹⁴ See Memorandum on Departmental Policy, by W.H. Kaunze, 24 March 1934. CO 536/181/23570/PRO; Uganda Protectorate. *Medical Department 1933*, 5-6; Havinden and Meredith 1993, 196-204.

direct sunlight, extensive heat or flooding.¹⁵ Areas of lush vegetation provide the fly not only with shelter but also with food since wild animals seek food, water and protection in forests and thickets near lakes, rivers and water holes. The main sources of food for *G. morsitans* in wooded savanna include buffalo, warthog and several antelope species, while the tsetse flies found by the rivers and on the lake shores feed mainly on reptiles such as crocodiles and lizards and mammals such as bushbuck and wild pig. Domestic cattle, and man, become susceptible to the tsetse fly when the cattle are herded near wooded savanna, transported through similar terrain or taken to wooded riverbanks to drink. Humans frequently become exposed while drawing water from lakes and rivers, or when fishing or bathing.¹⁶

The primary mode of transmission of trypanosomiasis can be termed cyclical, in that the trypanosome goes through a process of reproduction within the fly. About ten percent of the tsetse carrying *T.b. gambiense* that feed on humans are infected, so that transmission by biting flies is quite rare. The second mode of transmission is acyclical, or mechanical, in which the trypanosomes are carried to a new host without cyclical development in the fly. This typically occurs when the feeding by the tsetse on the blood of an infected host is interrupted for some reason and the fly bites another human or animal within the next few hours. A third mode of transmission is by insects other than the tsetse fly, but this has been mainly documented in livestock.¹⁷

Following infection by trypanosoma, the human immune system responds by generating antibodies against the parasite, thus reducing the number of parasites in the blood. When the remaining parasites multiply they mutate, rendering these initial antibodies ineffective. New antibodies are formed against the new strain of parasite, and the cycle goes on and on until the infected person either dies, recovers, or adjusts to living with the parasite. Though less virulent, *T.b.gambiense* is more infective than *T.b. rhodesiense*, so that even a small amount of trypanosomes in the blood may result in an outbreak of the disease.¹⁸ The Gambian infection has an incubation period of between five and twenty days, after which fever usually appears as the first sign of the disease, followed by headache and occasionally also a rash. The glands, especially the cervical glands, become swollen and tender. If left untreated, this condition may persist for several months, even years, accompanied by localised oedema on the face, hands, feet and ankles. Pregnant women have a high risk of abortion. The latter stage of the disease, referred as sleeping sickness, is characterised by convulsions, drowsiness, muscular tremors and sleepiness as the trypanosomes invade the central nervous system. The progress of the Rhodesian

¹⁵ Ford 1971, 2-3, 48-49, 51-54, 65-70, Jonathan Musere, *African Sleeping Sickness. Political Ecology, Colonialism, and Control in Uganda*. Lewiston; Edwin Mellen 1990, 25-28; C. Gregory Knight, 'The Ecology of African Sleeping Sickness', *Annals of the Association of American Geographers*, 61 (1) 1971, 23-44, especially 26, 32.

¹⁶ Ford 1971, 48-58; Knight 1971, 30-32.

¹⁷ Knight 1971, 27. According to Ford (1971, 3) cyclical transmission is 'obligatory'. He does not recognize the possibility of acyclical transmission.

¹⁸ Ford 1971, 69-70, 86-88; Knight 1971, 28.

infection is more rapid, in that the incubation period is much shorter and the attacks of fever are often severe. The glands are less swollen, but mental symptoms are detected early, since the trypanosomes rapidly invade the nervous system. Death usually occurs before the onset of the sleeping phase. Untreated cases of *T.b. rhodesiense* infection generally die within three to nine months, while *T.b. gambiense* infection, without natural or therapeutic recovery, may last several years before death.¹⁹

In 1896 the Uganda Protectorate officials reported to London that there were no records of the notorious tsetse-fly disease in the country, apparently referring to the animal trypanosomiasis in cattle and horses which had been identified in South Africa in 1894, and in 1900 Johnston reported that if the tsetse fly existed in Uganda it did not spread 'the same malarial germs' as in other parts of Africa. According to him, Uganda was a good, thriving cattle country.²⁰ His beliefs turned out to be "famous last words", however.

The history of sleeping sickness in Uganda began with Albert Cook and his brother Jack Cook, who found *Filaria perstans*, believed at that time to be the causal agent of sleeping sickness, in two patients attending their hospital on February 13 1901. The Cooks suspected that the patients were suffering from sleeping sickness, conducted more examinations, and found more cases during the following weeks. In April, Albert Cook informed the P.M.O., Moffat, and showed him his findings. The P.M.O., being of the opinion that sleeping sickness did not exist in Uganda, was impressed and thanked Cook for revolutionising his ideas.²¹ The Cooks informed Moffat that the disease had entered Uganda from the east via Busoga, and Moffat made immediate plans to visit Busoga to examine suspected victims there, but himself fell seriously ill and had to take sick leave in England. Apparently he told no one else about sleeping sickness, and no one in Kampala and Entebbe except the Cook brothers paid any attention to it.²²

Towards the end of 1901 missionaries stationed in Busoga reported that sleeping sickness was spreading rapidly, especially on the coast and on the islands, and reports from Kyagwe also indicated that the disease was widespread. The high mortality believed at first to have been caused by famine and starvation was now partly attributed to sleeping sickness. On Buvuma Island whole villages were said to have been wiped out by the disease.²³ The missionaries' concerns were apparently

¹⁹ Ford 1971, 66-69.

²⁰ Berkeley to Salisbury, 28 Oct. 1896. FO 2/112/PRO; Preliminary Report on the Protectorate of Uganda, by H.H. Johnston, s.d. 1900.FO 2/298/PRO; John Ford, 'Ideas which have influenced attempts to solve the problems of African trypanosomiasis', *Soc. Sci. & Med.* 13B, 1979, 269-275, especially 270.

²¹ Albert Cook's diary, 13 Feb. 1901. G16/Box 4/PP/COO/WTL; Albert Cook's diary, 6 April 1901. G16/Box 4/PP/COO/WTL; Cook 1936a, 78-79; Douglas M. Haynes, 'Framing Tropical Disease in London: Patrick Manson, *Filaria Perstans*, and the Uganda Sleeping Sickness Epidemic, 1891-1902', *Social History of Medicine* 13 (3) 2000, 467-493.

²² Preliminary Notes on Sleeping Sickness by the Principal Medical Officer, enclosed in Moffat to H.M. Commissioner, 17 June 1902. FO 2/591/PRO.

²³ Walker to Baylis, 20 Nov. 1901. G3/A7/O/1901/5/CMS; Annual letter by W.G.S. Innes, 7 Nov. 1901. C.M.S. annual letters 1901, 246, CMS; Tomkins to Commissioner and Consul General, 8 Nov. 250

transmitted to government ears early in 1902. Dr. Hodges was sent on tour to Kyagwe, Buvuma and Busoga to study the disease, and he found *Filaria perstans* almost universal among the people examined, many of whom were suffering from sleeping sickness, though there were many of those with the parasite who showed no signs of the disease. It appeared to be most widespread around Bunha and Buvuma, accompanied by famine, smallpox, plague and other diseases.²⁴ Hodges found that sleeping sickness had been prevalent on Buvuma Island at least since 1900, while testimonies given by local chiefs on the mainland indicated that the disease had first appeared on a large scale in 1897 and 1898, in the aftermath of the Sudanese rebellion. Another version, recorded in central Busoga, said that the disease had arrived with some Maasai around 1892 and had erupted in Busoga for the first time in 1896, when it was confused with plague at first, but later identified as the Maasai disease when people started 'nodding'.²⁵

In 1901 the regents in Buganda requested the government to do something to stop the epidemic, but their pleas were not heard, and thus they drafted their own sleeping sickness regulations in May 1902, to be distributed to the local chiefs to prevent the disease from spreading.²⁶ When Moffat returned from his sick leave in April 1902, he found out, apparently from Hodges, that the disease had reached epidemic proportions in Busoga, but that virtually nothing was known of it and its ravages by the Protectorate officials in Entebbe. Moffat soon found cases of sleeping sickness around Entebbe, and suspected that the whole of Buganda would be infected within a year if it continued to advance at the same pace.²⁷

Moffat's remarks and estimates were largely based on Hodges' findings in Busoga, and it is not clear how he justified the existence of sleeping sickness on the Entebbe peninsula. The mode of transmission was unknown, and the connection between filaria and disease was becoming less convincing, as filaria infestation was

1901. A8/1/UNA; Tomkins to Commissioner and Consul General, 11 Dec. 1901. A8/1/UNA; Nsambya Diary, 10 & 30 Jan. 1902. UGA/5/A/7/MHM. Contrary to Worboys' claim, mortality from sleeping sickness was not reported until 1901. The heightened mortality in 1900 can be attributed to famine. See Michael Worboys, 'Comparative History of Sleeping Sickness in East and Central Africa, 1900-1914', *History of Science* 32 1994, 89-102; A.J. Duggan, 'Sleeping Sickness Epidemics', in Sabben-Clare et al. 1980, 19-20.

²⁴ A.D.P. Hodges's diary, 19 Jan. 1902. MSS. Afr. s. 1782, RH; A.D.P. Hodges's diary, 8-11 Feb. 1902. MSS. Afr. s. 1782, RH; A.D.P. Hodges's diary, 25 March 1902. MSS. Afr. s. 1782, RH; Aubrey Hodges, 'Sleeping Sickness and *Filaria Perstans* in Busoga and Its Neighbourhood, Uganda Protectorate', *J. Trop. Med.* Vol. 5, Oct. 1 1902, 293-300.

²⁵ A.D.P. Hodges' diary, 25 March 1902. MSS. Afr. s. 1782, RH; Hodges 1902, 293-294; Report on Sleeping Sickness by Dr. Aubrey Hodges, 1 April 1902. FO 2/589/PRO; Koerner et al. have argued that sleeping sickness was already prevalent in Busoga by 1896, caused by social, political and economic disruption, but escaped detection because of the infrequent European presence in Busoga. See T. Koerner, P. de Raadt and I. Maudlin, 'The 1901 Uganda Sleeping Sickness Epidemic Revisited: A Case of Mistaken Identity?', *Parasitology Today*, Vol. 11 (8), 1995, 303-6.

²⁶ Zeller 1971, 163.

²⁷ Preliminary Notes on Sleeping Sickness by the Principal Medical Officer, enclosed in Moffat to H.M. Commissioner, 17 June 1902. FO 2/591/PRO.

found to be practically universal.²⁸ Thus, as word of the mysterious killer disease spread, the European community in Entebbe and Kampala was seized by panic. Commissioner Sadler informed London that 20 000 people were estimated to have been killed in Busoga, and that mortality was also rising in Kyagwe in Buganda, so that there was 'absolutely no means of checking' its advance. He asked for a tropical disease specialist to be sent to Uganda immediately to investigate the disease.²⁹

The Foreign Office made the necessary arrangements with the London School of Tropical Medicine and the Royal Society, whose vice-president was Patrick Manson, and the Royal Society Sleeping Sickness Commission, consisting of Drs. Low and Christy and an Italian parasitologist by the name of Castellani, arrived in Uganda in late 1902. Soon after their arrival Castellani accidentally managed to isolate trypanosomes from the cerebrospinal fluid of sleeping sickness patients while trying to verify his bacterial theory of the disease. He recognized the organism as being similar to that found by Bruce in cattle in South Africa.³⁰

Castellani was unaware, however, that by that time trypanosomes had already been found in humans in Gambia by Forde and Dutton, and that they had named the parasite *Trypanosoma gambiense*. Forde and Dutton suspected the parasite to be the cause of trypanosoma fever, and although sleeping sickness, or 'negro lethargy' had been known in West Africa for centuries, they did not link this parasite with sleeping sickness. This was done by David Bruce, who arrived in Uganda as the leader of the second Royal Society Sleeping Sickness Commission in March 1903. Soon after the arrival of the second commission, C. J. Baker, the government medical officer, found trypanosomes in the blood of sleeping sickness patients and showed them to Castellani, who in turn informed Baker of his own similar findings. Baker, being aware of Bruce's findings in South Africa, was seriously worried, and suspected that the tsetse fly might also be carrying the parasite in Uganda. Bruce, after hearing of the results achieved in Uganda so far, verified the parasite isolated by Castellani as being the same as he had found in cattle in South Africa, where it had been transmitted by the tsetse fly. He also knew about the findings made by Forde and Dutton in West Africa. Bruce combined the threads of information to reveal the mode of transmission, and, rightly or wrongly, reaped the scientific credit for it.³¹

It was now clear that the disease was caused trypanosomes, which Bruce and

²⁸ Uganda Protectorate. Medical report for the Quarter Ending June 30 1902. FO 2/592/PRO.

²⁹ Sadler to Lansdowne, 5 May 1902. FO 2/590/PRO.

³⁰ Albert Cook's diary, 19 Feb. 1903. G18/Box 4/PP/COO/WTL; Cook 1936a, 79; J.N.P. Davies, 'The Cause of Sleeping Sickness? Entebbe 1902-03. Part I', *E. Afr. Med. J.* 39 (3) 1962a, 81-99, especially 86-87; Ford 1971, 240; Ransford 1983, 119.

³¹ Ford 1971, 239-240; Ford 1979, 270-271; Uganda Protectorate. Medical Report for the Year ending 31 March 1903. FO 2/737/PRO; Ransford 1983, 118-121. For strained personal relations and competition over scientific credit between the members of the sleeping sickness commissions, and for the relationships of the researchers with the government doctors, see Davies 1962a, 81-99; J.N.P. Davies, 'Cause of Sleeping Sickness? Part II', *E.Afr. Med. J.* 39 (4) 1962b, 145-160; Ransford 1983, 107-132, *passim*.

his colleagues, following the West African example, identified as *T. gambiense*, transmitted by the tsetse fly species *G. palpalis*. Wildlife and humans living on the islands and shores of Lake Victoria were identified as the hosts of the parasite, and it was believed that humans had become infected while residing in the bush, and that these infected persons later served as a reservoir for the disease.³²



Sleeping sickness camp, Buvuma Island, 1902 (Sir Albert Cook Medical Library).

Meanwhile, the epidemic was raging in Busoga. According to district officials, the disease was not encountered in the northern parts of the district but only in the vicinity of Lake Victoria. By August 1903 it was said to be declining in Busoga, after two years of heavy mortality, but to be increasing in Buganda, especially in Kyagwe, where it was believed to have spread via the large fish markets, where islanders from Buvuma, for example, came to sell their fish.³³ Mortality peaks occurred in 1902 and 1903, when the number of estimated victims in Buganda rose from 24 000 to 30 411, and remained very high in the following years. Mortality in Busoga, for which there were no reliable records available, was estimated to be even higher.³⁴

³² Ford 1971, 240; Ransford 1983, 120-24; Koerner *et al.* 1995, 304.

³³ Cubitt to H.M. Commissioner and Consul General, 15 June 1902. FO 2/591/PRO; G.H. Pooley & T. Grant, Distribution of Sleeping Sickness, s.d. 1902. FO 2/591/PRO; Sadler to Lansdowne, 19 Aug. 1903. FO 2/735/PRO.

³⁴ Ford 1971, 240; Report No. 1 by Christy, 21 Oct. 1902. G26/1/Box 16/WTI/RST/WTL; Bell to Elgin, 23 Nov. 1906. CO 536/8/PRO.

While people were dying, the colonial government, supported by specialists, was unable to decide on a policy to contain the spread of the disease. Though Bruce had demonstrated the mode of transmission, there was still uncertainty about the nature of the disease. Some people infected by trypanosomes were suffering from sleeping sickness while others were not. It was not even clear whether trypanosomiasis and sleeping sickness were the same disease. Eventually, however, sleeping sickness was identified as the late stage of trypanosoma infection. The confusion about the nature of the disease and the lack of reliable information prompted more scientific research on trypanosoma and the tsetse fly, and since the mode of transmission resembled that of malaria, the possibility of vector control was investigated. This was impossible, however, without exact knowledge about the tsetse fly. Therefore the Colonial Office felt that it was unwise to fund any control methods before more was known about the disease and the fly. The only policy that appeared viable was scientific research into the fly and the parasite.³⁵



Sleeping sickness patients (Sir Albert Cook Medical Library).

With the sleeping sickness specialists concentrating on entomological and parasitological research, the care of the sick and dying was left entirely to the missionary societies, which became utterly overwhelmed by the task. The Mengo Hospital had to be closed to sleeping sickness patients when the epidemic reached its peak in 1903. The White Fathers were treating the sufferers in their small

³⁵ Soff 1969, 258-259; Worboys 1997, 91-92. A different policy, emphasizing medical screening, isolation of the sick and medical treatment, was undertaken in the Belgian and German territories, and this was apparently more costly than vector control. See Maryinez Lyons, 'Sleeping sickness epidemics and public health in the Belgian Congo', in Arnold 1988, 105-124; Worboys 1997, 94-98; Ford 1979, 272-273.

sleeping sickness home in Kisubi, between Entebbe and Kampala, where patients received some food and clothing, but the operation of the home was rendered virtually impossible because of the lack of funds. Commissioner Sadler proposed in 1905 that £50 could be granted to aid the White Fathers in their hopeless task.³⁶

Meanwhile, the government medical officers accused the sleeping sickness commission of showing a lack of interest in the sufferings of the people. For them, the Royal Society's specialists were seizing the opportunity to pursue their individual scientific careers at the expense of tens of thousands of African lives. In 1905 Moffat, tired of seeing people dying with no attempts being made to save them, resigned his post as P.M.O., and criticized Bruce and the Royal Society quite openly:

I have no ready made scheme of my own for the prevention of Sleeping Sickness, but I fail to see why some attempt should not be made to evolve one, and I should certainly prefer to see such money as is available being utilized in that direction, rather than in the pursuit of abstract scientific research, which, so far as we are concerned, can produce little practical result. I presume this is now admitted that the trypanosome theory is proved; if so, the next step in my humble opinion is to find either a remedy or a preventive. When that is done those who wish and are able can proceed to elucidate the point as to what happens to the stomach of the tsetse fly...[...] If the Royal Society, representing the scientific world of Great Britain, cannot use to anything better, then personally in the interests of their own reputation I think it is high time they dropped the whole show...³⁷

Moreover, the scientific experiments by the Commission's scientists, which were concentrated in a laboratory in Entebbe and involved both animals and humans, especially long-term prisoners, caused unrest among the leading officials of the Protectorate, including Commissioner Sadler. It was feared that the disease might spread from the laboratory to people residing nearby, and also to the European community. The scientists refused to move their laboratory to the islands as suggested, since it would have placed their lives in immediate danger. The row, which finally ended in the transfer of the laboratory from Entebbe to Mpumu, a small village by the lake, demonstrated not only the strained relations between the Protectorate officials and the Royal Society's scientists, but also the fear and anxiety felt by all the Europeans regarding sleeping sickness.³⁸

The situation altered with the arrival of a new Governor, Bell, in 1906. After four years of inactivity with regard to preventing the disease, Bell was appalled at

³⁶ Zeller 1971, 164; Sadler to the Secretary of State for the Colonies, 29 July 1905. CO 536/2/PRO.

³⁷ Moffat to Bruce, 25 Jan. 1905. G27/12/Box 19/WTI/RST/WTL.

³⁸ Moffat to Greig, 16 May 1905. G27/16/Box 19/WTI/RST/WTL; Greig to Bruce, 7 & 14 July 1904. G27/4/Box 19/WTI/RST/WTL; Sadler to the Secretary of State for the Colonies, 13 June 1905. CO 536/2/PRO; Extract from a letter by Professor Minchin, 13 June 1905. CO 536/2/PRO; Moffat to H.M. Commissioner, 30 Aug. 1905. CO 536/2/PRO.

the human toll. Relying on information received from Bruce and from a German doctor named Koch who was studying the disease on the Sese Islands that the rate of infection was still extremely high, Bell decided to take necessary the preventive measures to curb the advance of the disease and reduce mortality. Believing that the infected people served as a reservoir, he attempted to break the human - fly contact by removing the people living on the shoreline away from the territory affected by the fly. In practice this meant a massive evacuation operation on the lake shore and islands, and the establishment of inland segregation camps for the sick. Movement in the tsetse-infested areas was to be restricted, and people would be given special badges in order to monitor their movements and state of health. The fly itself was to be controlled by extensive bush clearing operations near human settlements. His plan, partly based on ideas put forward by Hodges, was designed to be temporary and operational only until effective vector control could be established.³⁹

Bell described his plans as 'drastic' and expensive, but felt that 'for great ills there must be great remedies'.⁴⁰ He assumed that moving the population away from the lake would save lives, which undoubtedly was the case, but in 1906 the peak of the epidemic was already passed and the evacuation of 100 000 people or more would really be 'a drastic' operation, which could not be accomplished without resistance and opposition. In Bell's view, however, the possible spread of sleeping sickness inland, where it had already been detected on a small scale in 1904, would not only mean extra casualties and social disruption, but a threat to the integrity of the whole British administration in Uganda.⁴¹

At first the Colonial Office in London was not willing to approve Bell's plans because of the high expenditure and controversial information about the disease, although it was admitted that the work of the Royal Society's Commission had been highly unsatisfactory.⁴² While the Colonial Office still hesitated, Bell, being unwilling to wait, authorized the erection of camps and the partial evacuation of the lake shore in November 1906, so that most of the shoreline was empty of inhabitants by March 1907.⁴³ The evacuation, which was later approved by the Colonial Office late in 1907, was put into operation with the help of the local chiefs, creating the 'two-mile zone' on the shores of Lake Victoria, where virtually all human activity, including farming, fishing, hunting, wood collecting and charcoal burning, were

³⁹ Bell to Elgin, 23 Nov. 1906. CO 536/8/PRO; Bell to Elgin, 30 Nov. 1906. CO 536/8/PRO; Confidential: W.F. Fiske, A History of Sleeping Sickness and Reclamation in Uganda, 8 July 1926. CO 536/140/PRO; Worboys 1997, 92-93; Kirk Arden Hoppe, 'Lords of the Fly: Colonial Visions and revisions of African Sleeping-Sickness Environments on Ugandan Lake Victoria, 1906-61', *Africa* 67 (1) 1997b, 86-105, especially 88; Duggan 1980, 22.

⁴⁰ Sir Hesketh Bell, *Glimpses of the Governor's Life. From Diaries, Letters and Memoranda*. London: Sampson Low 1946, 145.

⁴¹ Bell to Elgin. 23 Nov. 1906. CO 536/8/PRO; Bell 1946, 135; Ford 1971, 241-242; Worboys 1997, 93; Hoppe 1997b, 88. See also Twaddle 1993, 238-9.

⁴² Minutes on Sleeping Sickness, 23 Jan. 1907. CO 536/8/PRO.

⁴³ Hoppe 1997b, 90; Bell to Elgin, 9 Dec. 1907. CO 536/15/PRO.

strictly prohibited. A few closely monitored landing places were kept open under the surveillance of the colonial medical personnel. The evacuation itself did not proceed entirely without resistance. Force had to be used to make the people leave their homes. Dwellings were burned and cultivations destroyed. In some places people were allowed to return only to harvest their crop shortly afterwards. More serious popular resistance occurred when evacuations were extended to the Lake Victoria islands in 1908. Opposition was fierce on the Sese and Buvuma Islands, and armed force had to be used to carry out the plan. The evacuation of the islands was finally completed in 1911.⁴⁴

Resettlement of the evacuated people further inland was another difficulty in Bell's plan, and again use had to be made of the power of the regents' and chiefs' over their subordinates. Extra land was needed for the evacuated people, and the issue had to be arranged with the local landowners. Part of the population was resettled on the Crown Lands which were not amongst the most fertile in the Province. People from the Sese Islands were transferred to Buddu and as far as Singo. To ease the trauma of evacuation and resettlement, the people concerned were exempted from taxes for two years. But this offered little relief, as clearings had to be made, houses erected, fences and shelters built, gardens planted and fields dug. It took time before the new fields yielded enough to support whole families. Famine and food shortages did not make resettlement any easier. The need to care for sick relatives, the new and often hostile social environment and the trauma of abandoning their homes added to the burden on the people.⁴⁵

The long-term economic consequences of the evacuation were likewise considerable. The initial creation of the two-mile zone brought the lakeside and inland industries to a halt. Later, Bell's successor, Jackson, continued the policy of concentrating people inland and keeping the shores and islands uninhabited, which not only turned the evacuated areas into a wilderness but finally sealed the destruction of the fish trade, hunting, canoe construction, coffee growing on the Sese Islands and other economic activity by the lake. Some of the people whose livelihood depended on the lake continued to challenge the regulations, and the shores and islands were frequently visited by illegal trespassers such as fishermen, hunters, firewood collectors and charcoal burners.⁴⁶

The disease brought large-scale social disruption. In 1902, when the epidemic was spreading rapidly in Kyagwe, missionaries reported that entire villages had been wiped out by it,⁴⁷ although, as noted by Ford, much of this depopulation was

⁴⁴ Hoppe 1997a, 114-127; Hoppe 1997b, 90-92; Zeller 1971, 169-176; Wyndham to the Chief Secretary, 4 Oct. 1910. CO 536/36/391.

⁴⁵ Zeller 1971, 176-177; Tomkins for the Secretary of State for the Colonies, 13 Dec. 1910. CO 536/36/391/PRO; Buganda Annual Report for 1909-10. Secretariat Minute Paper, A46/421, UNA; Hoppe 1997b, 92.

⁴⁶ Confidential: W.F. Fiske, A History of Sleeping Sickness and Reclamation in Uganda, 8 July 1926. CO 536/140/PRO; Hoppe 1997b, 90-92.

⁴⁷ Annual letter by Miss H.M. Thomas, 28 Nov. 1901. C.M.S. annual letters 1902, 156, CMS; Annual letter by Miss E.L. Pilgrim, 21 Nov. 1902. C.M.S. annual letters 1902, 186, CMS; Uganda Notes, July 1902, 49. G3/A7/O/1902/126/CMS.

probably because people were seeking refuge, i.e. when some individuals started to fall sick and die, the whole place was abandoned. Moreover, it was often the case that the population was already declining for some other reasons before the epidemic broke out.⁴⁸ In Buganda, and also in Busoga, the initial reduction in population was caused by famine and smallpox, and to some extent by migration for tax evasion purposes.⁴⁹

Sleeping sickness was greatly feared at first, and as the first cases appeared people either fled or drove their sick away to die in the bush of starvation or disease, or to be killed by wild beasts.⁵⁰ Later, mainly from 1903 onwards, when the epidemic reached its peak, the existing misery led many to abandon all hope and sink into despair. Many villages were almost deserted, although in some places the women tried to keep their cultivation up, only to fail because of the lack sufficient labour. Numerous missionary reports tell of widespread 'fatalism' and the breakdown of social order: drinking, goat killing, gluttony, violence and 'immoral behaviour' were rampant. For many, the disease was proof against the usefulness of the Christian faith, and 'paganism' was said to have gained ground in Kyagwe and the southern parts of Busoga. Some Protestants took up Catholicism, especially in Kyagwe, for it was claimed to be an 'easier' religion.⁵¹ Many local people believed that the disease was spread by fish from the lake, since only people living near the lake and on the islands were infected. Others blamed the epidemic on the British, claiming that it had been manufactured in the laboratory in Entebbe in order to kill the people so that uninhabited land could be seized by the crown.⁵²

At the sleeping sickness camps thousands of infected people were living under appalling conditions. The food was poor, and, judging from Bell's description, many of the victims seemed to be starving to death: '[W]e came to those who were in the last stages of the disease. Lying about on beds of withered leaves, they had reached a state of emaciation that was horrible to see. The unhappy creatures looked

⁴⁸ Ford 1971, 271.

⁴⁹ Missionary Plunkett reported that parts of Busoga had been completely depopulated because prolonged drought, famine, and smallpox, which were followed by sleeping sickness and plague. See Nsambya Diary, 27 March 1902. UGA/5/A/8/MHM.

⁵⁰ Cubitt to H.M. Commissioner and Consul General, 14 June 1902. FO 2/591/PRO; G.H. Pooley & T. Grant, Distribution of Sleeping Sickness, s.d. 1902 FO 2/591/PRO; Annual letter by Miss E.L. Pilgrim, 21 Nov. 1902. C.M.S. annual letters 1902, 186, CMS.

⁵¹ Letter from Leakey, 7 Sept. 1903. FO 2/736/PRO; Annual letter by Miss Tanner, 24 Oct. 1903. C.M.S. annual letters 1903, 162, CMS; Annual letter by Miss H.M. Thomas, Dec. 1903. C.M.S. annual letters 1903, 163, CMS; Walker to Baylis, 13 April 1902. G3/A7/O/1902/91/CMS; Annual letter by Miss T.L. Dyke, 1 Dec. 1904. C.M.S. annual letters 1904, 513, CMS; Greig to Bruce, 1 July 1904. G27/4/Box 19/WTL/RST/WTL.

⁵² Zeller 1971, 163-164; Annual letter by H.T.C. Weatherhead, 18 Nov. 1904. C.M.S. annual letters 1904, 524, CMS; Bell to Elgin, 23 Nov. 1906. CO 536/8/PRO. See also Luise White, "'They Could Make Their Victims Dull': Genders and Genres, Fantasies and Cures in Colonial Southern Uganda", *The American Historical Review* 100 (5) 1995, 1379-1402.

like skeletons, and only their doleful moaning indicated the presence of life.⁵³ The mortality in the camps was between 25 and 30 percent. Sufferers were treated with Atoxyl (arsenic-based) and mercury. The greatest problem was the food supply, which was made worse by drought and shortage of water. Besides sleeping sickness, smallpox was rife, and the patients were afflicted with lice and jiggers.⁵⁴ It is not quite clear how many of those labelled as infected really were suffering from trypanosomiasis, or how many actually died of the disease rather than some other cause such as starvation.

In 1904, when the epidemic was waning in Busoga and Buganda, the first sleeping sickness cases, eighteen in all, were found in Bugungu, north-western Bunyoro. Individual cases were also recorded along the Nile between Murchinson Falls and Nimule.⁵⁵ In late December 1904 Hodges commenced his tour in the north-eastern corner of the district to investigate the prevalence of the disease, and found that *G. palpalis* was almost universal by the rivers, although he found no trace of the disease. In almost every village said to have some people suffering from it, he was told that it actually existed in the next village. Hodges concluded that the people had hidden their sick, or had driven them away. Sometimes the whole village fled on hearing his party approaching.⁵⁶ Hodges was only able to find a few cases of sleeping sickness, although he found plenty of tsetse and witnessed how people were bitten by the fly while drawing water from the rivers. He concluded that although the tsetse fly and sleeping sickness were to be found in the north-east of Bunyoro, the disease did not exist in epidemic form, mainly because of the sparseness of the population. In his view, there was no large human reservoir for the infection similar to that found on the shores of Lake Victoria.⁵⁷

To the west, at the mouth of the Weiga River, sleeping sickness was detected by the doctors Adams and Speke, who found dozens of cases near the Weiga and Zolia Rivers. The tsetse fly was abundant in thickets by the rivers, but not in the gardens or villages. Mortality among the sufferers was apparently quite high.⁵⁸ In 1906 and 1907 sleeping sickness was mainly reported along the Nile, gradually advancing southwards along the shore of Lake Albert. By 1907 it had reached the

⁵³ Bell 1946, 120.

⁵⁴ Bell to the Secretary of State for the Colonies, 9 Dec. 1907. G28/4/Box 19/WTI/RST/WTL; Quarterly Report on the Progress of Segregation Camps and Medical Treatment of Sleeping Sickness in Uganda, December 1907 - February 1908. CO 536/20/185/PRO.

⁵⁵ Morris 1960a, 585; A.D.P. Hodges, 'Report on the Sleeping Sickness in Unyoro and the Nile Valley', in *Reports of the Sleeping Sickness Commission of the Royal Society*, No. 8. London: H.M.S.O. 1907, 86.

⁵⁶ A.D.P. Hodges' diary, 1-2 Jan. 1905. MSS. Afr. s. 1782, RH; Hodges 1907, 87.

⁵⁷ A.D.P. Hodges' diary, 6 Jan. 1905. MSS. Afr. s. 1782, RH; A.D.P. Hodges' diary, 11 Feb. 1905. MSS. Afr. s. 1782, RH; Hodges 1907, 87, 93.

⁵⁸ E.B. Adams, 'Account of Tour by Mr. Speke and Dr. Adams in the Northern Unyoro and on the Victoria Nile', in *Reports of the Sleeping Sickness Commission of the Royal Society*, No. 8. London: H.M.S.O. 1907, 100-105; Morris 1960a, 586-587.

Budonga forest and the village of Tonya by the lake.⁵⁹ The lakeside villages, especially Butiaba and Kibiro, suffered considerable population losses, but since mortality remained low throughout the epidemic - reaching 461, the highest annual number recorded, in 1908 - and since the officials found no trace of a widespread fatal epidemic, it is likely that most of the depopulation was caused by migration because of the coincident famine.⁶⁰

Naturally the British wanted to avoid another catastrophe, and though there was no proof of a widespread epidemic, they decided to remove the population from the tsetse-infected areas in the north and by the lake. The Bugungu area was proclaimed restricted in 1908, and evacuations were put into operation in late 1908 and early 1909. The operation immediately ran into trouble when people refused to leave their dwellings and cultivations. Coercive methods such as the destruction of huts, canoes and other property were employed to make it impossible for the people to return to their villages. The onset of heavy rains in March caused further difficulty and delay, as much labour was needed to keep the bad roads passable, but by June 1909 the Bugungu sleeping sickness area had been cleared of its inhabitants. As in Buganda and Busoga, much fertile land was abandoned and many fishing villages became totally deserted. Trade across the lake suffered, as canoe traffic was restricted. Northern Bunyoro was surrendered to bush, to be invaded by wild animals and the tsetse fly.⁶¹

It has been estimated that the sleeping sickness epidemic claimed nearly 250 000 lives between 1900 and 1910, of which 50 000 were in Buganda, 10 000 in on the Sese Islands, 75 000 on Buvuma Island and 100 000 in Busoga.⁶² In Bunyoro the number of victims was much smaller, probably not more than two or three thousand.⁶³

The causes of the outbreak of the epidemic were puzzling to contemporaries, and they are not completely understood even today. The colonial authorities believed that sleeping sickness had been transported to Uganda from the west, via the Belgian Congo. This assumption, based on the belief that before the opening up of Africa by European exploration in the late nineteenth century, African communities, with their pathogens, lived in isolation from each other, mainly because of the constant threat of inter-tribal warfare. When this threat was removed by the European colonial powers, the increased movement of people effectively

⁵⁹ Unyoro District Reports 1906. Secretariat Minute Papers, A42/94/UNA; Hoima District Monthly Reports 1907. 1906. Secretariat Minute Papers, A43/74/UNA.

⁶⁰ Morris 1960a, 587; B.W. Langlands, *The Sleeping Sickness Epidemic of Uganda 1900-1920: A Study in historical geography*. Occasional Paper No. 1. Department of Geography, Makerere University 1967, 20-23; Hodges 1907, 93.

⁶¹ Uganda Protectorate. *Medical Department 1908*, 71; Hoima District Monthly Reports 1909. Secretariat Minute Paper, A45/44/UNA; Morris 1960a, 587-588.

⁶² Duggan 1980, 21-2.

⁶³ For the numbers of deaths from sleeping sickness recorded in Bunyoro between 1906 and 1920, see Morris 1960a, 587.

spread various pathogens, causing epidemics on a previously unknown scale.⁶⁴ In Uganda, J.H. Cook believed that the disease had been transported from the Congo to Lake Tanganyika, from there to Nandi and Kavirondo, and eventually to Busoga and Buganda. Another explanation was that the disease was carried from Toro to Busoga with the Sudanese soldiers and their numerous slaves in 1893, and had remained unnoticed there, since there was no permanent government station in the region at that time.⁶⁵ The causes of the outbreak in Bunyoro are even more obscure. A Munyoro medicine man claimed in 1902 that the disease had already been prevalent there in the late 1880s and again between 1893 and 1897.⁶⁶ In the late 1890s, when many people had taken refuge in the Bugoma forest in the south, a peculiar disease was reported to be causing 'some discomfort' amongst the people: 'This disease kills the skin, ultimately withering away the nerves and muscles.'⁶⁷ It is impossible, however, to assert whether it was actually sleeping sickness or not.

The transportation theory has enjoyed popularity in the literature since the colonial period.⁶⁸ Morris, for example, has argued that sleeping sickness around Katwe in 1908 actually represented an eastward advance of the disease from an established endemic focus in the Semliki Valley in the Belgian Congo, from where it spread along the salt trade routes escaping detection because of the lack of permanent European presence. In his opinion, '...any radical change in environmental factors which increase the degree of man-fly contact is liable to turn an endemic into an epidemic outbreak.' The increased movement following the arrival of Europeans, the better transport and the colonial concentration of a previously scattered population into larger units by the rivers and lakes for administrative purposes created suitable conditions for an epidemic outbreak.⁶⁹ Ford criticizes the transportation theory, however, on the basis that trade and population movements were not brought to Africa with colonial rule but had already existed there for centuries. He also explains the popularity of the transportation theory in the colonial period by the colonial officials' need to convince their superiors that '...the Motherland had not acquired yet another 'white man's grave'.⁷⁰ It is questionable,

⁶⁴ K.R.S. Morris, 'The Movement of Sleeping Sickness across Central Africa', *J. Trop. Med. Hyg.* 66 1963, 59-76; Ford 1971, 178.

⁶⁵ J.H. Cook to Sadler, 14 May 1902. FO 2/590/PRO; Preliminary Notes on Sleeping Sickness by the Principal Medical Officer, enclosed in Moffat to H.M. Commissioner, 17 June 1902. FO 2/591/PRO. Iliffe (1995, 209-210) seems to favour the transportation theory as presented by Cook.

⁶⁶ Grant to Commissioner and Consul General, 30 May 1902. FO 2/590/PRO.

⁶⁷ Report on the Legends, History, and People of Unyoro, by Mr. G. Wilson, enclosed in Uganda Protectorate. Intelligence Report No. 12, April 1902. BDFA/G, Vol. 16, 228.

⁶⁸ A brief summary can be found in John Ford, 'Early ideas about sleeping sickness and their influence on research and control', in Sabben-Clare et al. 1980, 30-33. See also Ford 1971, 178.

⁶⁹ K.S.R. Morris, 'Studies on the Epidemiology of Sleeping Sickness in East Africa. III. The Endemic Area of Lakes Edward and George in Uganda', *Trans. R. Soc. Trop. Med. Hyg.* 54 (3) 1960b, 212-224, especially 212-217. See also Good 1972, 543-586.

⁷⁰ Ford 1980, 30-31.

therefore, whether human trypanosomiasis was ever transported from its endemic foci in West Africa and the lower Congo Basin to the outskirts of the rainforest and western Rift Valley as described by Morris. Moreover, the disease he names as sleeping sickness in south-western Uganda, *muhinyo*, was apparently something different.⁷¹

A more convincing theory of trypanosomiasis and the outbreak of sleeping sickness has been put forward by Ford,⁷² who maintains that the tsetse fly and trypanosomiasis existed throughout much of Central, Southern and Eastern Africa, confined to uninhabited areas of wilderness, where the tsetse fly found suitable protection and food. The disease as it affected humans and cattle was kept under control by continuous human activity. The clearing of forest for fields, firewood and building materials tended to destroy the habitats of the fly's hosts near human settlements, which were located some distance away from the river banks and lake shores where the tsetse was found. The burning of the savanna woodland to create pastures that were free of forest vegetation limited the habitats of the wild game as well as the tsetse, confining the disease to narrow locations which, according to Ford, were well known to herders. The hunting of wild animals in order to protect fields and gardens and to supplement the diet with meat, kept the game population under control and drove the wild animals away from the vicinity of human dwellings. It was the breakdown of this environmental control from the late nineteenth century onwards by imperial intrusion that created conditions which favoured the spread of wild game and of the tsetse fly.

The ecological view presented by Ford can be criticized for assuming that pre-colonial communities lived in harmony with their ecological environment, and that it was the intrusion of western imperialism that disrupted the delicate ecological balance, resulting in a form of 'biological warfare' as the epidemiological barriers were broken down by famine, disease and war. Ford, like Musere,⁷³ is right in that depopulation caused by disease and warfare brought about significant changes in the vegetation and settlement patterns of communities, leading to expansion of the bushland, which favoured the spread of the natural hosts of the tsetse fly, but people would have had plenty of chances to be bitten by the tsetse during their normal activities of fishing, hunting, firewood collecting, tree felling, bush clearing, water fetching and herding. Moreover, warfare, famine and epidemic disease on a scale that caused the people to seek refuge and led to heightened mortality and subsequent depopulation had certainly been frequent before that, and people had been in contact with the tsetse fly apparently without being subject to such devastating epidemics as occurred between 1900 and 1908.

There existed one new factor in the late nineteenth century, however, which served to trigger the breakdown of ecological control on a previously unseen scale. According to Ford, rinderpest caused a serious reduction in the wild game

⁷¹ See Morris 1960b, 213. For a detailed discussion of *muhinyo*, see Appendix 1.

⁷² The following paragraphs are based on Ford 1971, 134-140, 144-153, 158-162 unless indicated otherwise.

⁷³ Musere 1990, 123-130.

populations, thus limiting the habitats available to the tsetse fly. Following this panzootic, wild game were free to multiply rapidly and relatively free of disease, because the high virulence of rinderpest also tended to check the advance of other diseases. The restocking of cattle herds, however, proceeded at a much slower pace, and the loss of cattle meant the end of pasture management and enabled reforestation of the pastures and drinking places in the meantime. The drought, famine, epidemics and warfare of the late 1880s and 1890s also caused social instability in much of East and Central Africa, which was manifested in depopulation through greater population movement and the seeking of refuge together with heightened mortality because of war, starvation and disease. This led to a regeneration of the forests as abandoned areas were quickly overgrown. The tsetse fly then followed the rapidly expanding game populations into the bushlands near water sources and close to human settlements.⁷⁴

According to Ford, endemic, mild and chronic trypanosomiasis existed in the Rift Valley and north-eastern Lake Victoria, where *G. fuscipes fuscipes* maintained the transmission between humans as well as between humans and the natural hosts. When the cycle between *T. b. gambiense*, the river tsetse, and man was for some reason broken down, involving the spread of another species of tsetse which mainly fed on wild animals, trypanosomiasis took an acute form and devastating epidemics followed.⁷⁵ This is probably what happened in Busoga and Buganda.⁷⁶ Local people told the British that they had always been bitten by the flies, but without contracting the disease.⁷⁷ This changed apparently after the rinderpest outbreak. This may be interpreted as imply that, following the disappearance of the cattle and the cessation of human activity because of the depopulation caused by famine, war, disease and the seeking of refuge, rapid regeneration of the forest vegetation and bushland took place, favouring the spread of quickly recovering wild game populations. Wild pigs were especially numerous, and because of their greater numbers, they frequently fed on fields and gardens. The abundance of wild animals meant that the tsetse fly was more numerous in the forests and thickets by the waters, and also in the gardens and fields, and people were bitten more often than before. It is also plausible that *G. morsitans*, the chief vector of *T. b. rhodesiense* infection, spread into the bushland near human habitations with the game, as Hodges found it to be thriving in inland

⁷⁴ See also Musere 1990, 106-110.

⁷⁵ Ford 1971, 182.

⁷⁶ Koerner et al. (1995, 305) attribute the vulnerability of Basoga to sleeping sickness to Baganda rule and raiding in the late nineteenth century, colonial interference and the subsequent seeking of refuge and change in economic patterns, and also the centralized bureaucratic rule by the Baganda agents, involving the introduction of cash cropping and land tenure practices: 'The Kiganda system of land tenure, together with taxation and changing patterns of agricultural production, brought more people into closer contact with the tsetse population in Busoga and produced the conditions for an epidemic of sleeping sickness.' Their interpretation contains some inconsistencies, however. Contrary to their claims, *mailo* land tenure was never applied to Busoga, and uniform, systematic taxation was only introduced in 1900 and cash cropping between 1902 and 1904. These factors, therefore, cannot be held responsible for the epidemic, which had already flared up, according to them, well before 1900, maybe as early as 1896.

⁷⁷ Bell to Elgin, 23 Nov. 1906. CO 536/8/PRO.

Bunyoro and it was found in the sleeping sickness area of southwestern Uganda in 1910.⁷⁸

It is plausible to argue that famine contributed to the spread of the disease. People would flock to the rivers and lake shores for water at times of drought, and in driving away the wild animals, they would frequently be bitten by the fly. Infected persons wandering around during famine would then carry the infection further along the riverbanks and shorelines. The high mortality can be explained by the greater number of infections, the existence of malnutrition and the type of parasite, which apparently included the more lethal *T.b. rhodesiense* variety.

There is evidence that the 1900 - 1908 epidemic in Busoga and Buganda involved a combination of *T. b. gambiense* and *T.b. rhodesiense* carried by *G. fuscipes fuscipes*, and in some locations probably also by *G. morsitans* and *G. pallidipes*, all capable of transmitting the disease from its animal hosts, wild and domestic, to humans.⁷⁹ The epidemic of Rhodesian trypanosomiasis in Busoga in 1940 proved that *T. b. rhodesiense* was not confined to *G. morsitans* flybelts, and that tsetse belonging to the *G. fuscipes fuscipes* group were also capable of transmitting other strains of trypanosomes besides *T. b. gambiense*.⁸⁰ The severity of the epidemic in Busoga and Buganda between 1900 and 1908, and the fact that the natural hosts of both Gambian and Rhodesian trypanosomiasis were plentiful in Uganda both in the savanna and beside the waters, speak for the presence of *T.b. rhodesiense*. It is also supported by the fact that Uganda lies at the geographical meeting point of the two strains of the disease (the western edge of Rift valley), where the ancient foci – of *gambiense* in the north-west and *rhodesiense* in the south-east - have remained active throughout the ages.⁸¹ The destructiveness of the epidemic was fortified by the socio-economic conditions, especially the widespread food shortages and famines, which made people vulnerable not only to trypanosomiasis but to other infections as well.⁸²

⁷⁸ Hodges 1907, 98-99; Ford 1971, 175-176.

⁷⁹ Knight 1971, 32; E.M. Fèvre, P.G. Coleman, M. Odiit, J.W. Magona, S.C. Welburn, M.E.J. Woolhouse, 'The origins of a new *Trypanosoma brucei rhodesiense* sleeping sickness outbreak in eastern Uganda', *THE LANCET* 358 2001, 625-628. Gibson, though acknowledging the co-existence of *T.b. gambiense* and *T.b. rhodesiense*, argues that the 1900-1908 epidemic was essentially Gambian, since none of the medical professionals involved in studying sleeping sickness considered the possibility of *T.b. rhodesiense* infection as a causative agent when it first became known in 1910. This does not mean, however, that the two strains did not co-exist. See Wendy Gibson, 'More on Sleeping Sickness in Uganda', *Parasitology Today* 12 (1) 1996, 40.

⁸⁰ Ford 1971, 254-255.

⁸¹ Susan C. Welburn, Eric M Fèvre, Paul G. Coleman, Martin Odiit and Ian Maudlin, 'Sleeping Sickness: a tale of two diseases', *TRENDS in Parasitology* 17 (1) 2001, 19-24; O.C. Hutchinson, E.M. Fèvre, M. Carrington, and S.C. Welburn, 'Lessons learned from the emergence of a new *Trypanosoma brucei rhodesiense* sleeping sickness focus in Uganda', *THE LANCET Infectious Diseases* 3 2003, 42-45.

⁸² See Maryinez Lyons, 'From 'Death Camps' to Cordon Sanitaire: The Development of Sleeping Sickness Policy in the Uele District of the Belgian Congo, 1903-1914', *Journal of African History* 26, 1985, 69-91, especially 69, 77.

COLONIALISM AND EPIDEMIC AND ENDEMIC DISEASE

The frequency and severity of epidemic disease in early colonial Uganda can partially be explained by the existence of food shortages and famines, and partially by the social disruption caused by colonialism, especially by the land settlement policies and the establishment of taxation and labour duties. Both contributed to large-scale population movements, favouring the spread of diseases, and the poor nutrition because of food shortages undoubtedly contributed to higher disease mortality. Moreover, colonialism seems to have favoured the spread of diseases through creating unsanitary habitats and surroundings, thus generating suitable 'breeding grounds' for such diseases as plague, dysentery, pneumonia and relapsing fever.

The disease most obviously connected with famine was smallpox, which by the end of the nineteenth century was clearly endemic to Uganda. The widespread famine at the turn of the century resulted in a major epidemic of smallpox, which was rife in Bunyoro in 1899 and again in 1901 and 1902.⁸³ Similarly, the disease appeared in Buganda in 1899 and again in August 1901, continuing well into 1902 and being most prevalent in the counties of Kyagwe, Bulemezi, Kyadondo and Buwekula. The numbers of deaths were said to be high, though no exact figures were given.⁸⁴ Smallpox was likewise prevalent in Busoga in 1901, so that some missionaries, quoting local chiefs, claimed that it had killed thousands between April and September of that year.⁸⁵ Other serious epidemics occurred between 1905 and 1907. It was reported that smallpox killed more people in the Masaka district than did sleeping sickness and plague together, and that Kyagwe was becoming depopulated because of the two diseases, smallpox and sleeping sickness.⁸⁶ In Bunyoro the social unrest and widespread famine led to an outbreak of smallpox late in 1906, spreading from the Masindi area to the rest of the district. The epidemic was apparently not as destructive as had been first assumed, however, as the number of verified victims was around 200, most of them small children and women.⁸⁷

⁸³ Annual letter by A.B. Fisher, 30 Nov. 1905. C.M.S. annual letters 1905, 72-73, CMS; Report of The Unyoro District, 31 Dec. 1901. A12/1/UNA; Bagge to H.M. Commissioner, 17 December 1901. A12/1/UNA; Commissioner's Office to Acting Sub-Commissioner, Western Province, 11 Jan. 1902. A13/1/UNA.

⁸⁴ Wilson to Berkeley, 20 April 1899. A4/6/UNA; Tomkins to Acting Commissioner, 28 Aug. 1901. A8/1/UNA; Tomkins to Commissioner and Consul General, 3 Oct. 1901. A8/1/UNA; Tomkins to Commissioner and Consul General, 11 Dec. 1901. A8/1/UNA; Uganda Notes, March 1902. G3/A7/O/1902/84/CMS; Annual letter by Miss H.M. Thomas, 28 Nov. 1902. C.M.S. annual letters 1902, 156, CMS.

⁸⁵ Annual letter by W.G.S. Innes, 7 Nov. 1901. C.M.S. annual letters 1901, 247, CMS; van Tern to Rector, 1 Sept. 1901. UGA/2/1901/MHM. These estimate should be treated with care, as the high number of casualties may be attributed to sleeping sickness, which was already prevalent in Busoga at that time.

⁸⁶ Isemonger to Sub-Commissioner, 5 June 1905. A8/6/UNA; Isemonger to Sub-Commissioner, 10 July 1905. A8/7/UNA; Annual letter by G.K. Baskerville Sept. 1905. C.M.S. annual letters 1905, 59, CMS.

⁸⁷ Annual letter by A.B. Fisher, 26 Dec. 1906. C.M.S. annual letters, 1906, 265, CMS; Jervoise to

The incidence of smallpox seems to have declined from 1908 onwards - apparently because of the saturation of the population with the virus and the absence of severe food shortages - until the outbreak of the World War.⁸⁸ In 1915 it was reported to be almost non-existent in Bunyoro, but in Buganda it was becoming more frequent, and it apparently spread back into Bunyoro from Buganda during 1916.⁸⁹ By 1917 a major epidemic had broken out in the Protectorate, its severity evidently being associated with the prevailing famine: 'Shortage of food leads to two conditions that aid in the spread of this disease, namely, depressed vitality, and the necessity of people travelling long distances in search of food.'⁹⁰ Mortality from smallpox in 1917 and 1918 appears to have been around twenty percent. Since effective immunisation was available only for a very limited number of people, and since some time had elapsed since the previous epidemic, there were now plenty of unprotected hosts for the virus, favouring rapid spread and high mortality.⁹¹

Attempts to control smallpox had been undertaken since 1901, but with very poor results. An experimental lymph farm was established in 1901 at the request of the Buganda government, and for a short time Buganda was self-sufficient in terms of vaccine lymph. For some reason, however, the farm was not maintained, and from 1904 onwards both Buganda and the rest of Uganda were dependent on lymph imported from England. At the same time the *Lukiko* passed a law making the vaccination of Baganda children against smallpox compulsory, although this was impossible in practice because of the high price of the vaccine and the poor storage facilities. As there was not enough quality vaccine available to protect people effectively against the disease, segregation and quarantine for the sick virtually remained the only means of combating it, with occasional but limited vaccination campaigns. Apart from Buganda, these campaigns were mainly carried out before the World War in principal cotton-producing areas of the Eastern Province.⁹²

Uganda was ravaged by two very serious epidemics generated by the conditions brought about by the World War between 1916 and 1919, namely cerebrospinal meningitis and influenza. Meningitis had appeared in Buganda in 1902, but its severity was not properly reported.⁹³ A serious epidemic then broke out

Sub-Commissioner, Western Province, s.d. Secretariat Minute Papers A43/126/UNA; Goodliffe to the Senior Medical Officer, 10 July 1907. Secretariat Minute Paper, A43/126/UNA; Hoima Monthly Reports 1907. Secretariat Minute Papers, A43/74/UNA.

⁸⁸ cf. Koponen 1994, 474-475.

⁸⁹ Uganda Protectorate. *Medical Department 1915*, 11, 16; Northern Province Annual Report for 1916-17. Secretariat Minute Papers, A46/810/UNA.

⁹⁰ Uganda Protectorate. *Medical Department 1918*, 11.

⁹¹ Uganda Protectorate. *Medical Department 1917*, 11.

⁹² Zeller 1971, 178-180; Moffat to the Collector, Kampala, 13 April 1905. A8/6/UNA; Wiggins to the Chief Secretary, 4 Sept. 1913. CO 536/61/420/PRO; Telegram from Jarvis to the Secretary of State for the Colonies, 24 Jan. 1914. CO 536/67/PRO; Hodges to the Chief Secretary 20 & 29 Jan. 1914. CO 536/67/64/PRO.

⁹³ Sadler to Lansdowne, 6 May 1902. A38/6/UNA.

in Bunyoro in 1916, reportedly introduced by soldiers passing through the district. In the following years, and especially during the famine, meningitis was common in the larger towns throughout the Protectorate. Situation was worst in Hoima and Kampala, the former alone having 161 reported cases in 1917. The disease was said to be 'the most formidable' the medical authorities ever had dealt with. It was extremely virulent, so that about seventy percent of those infected died. The high virulence also prevented the spread of the disease outside the townships, since its carriers often died before they could transmit it. The epidemic reached its peak in 1917, and by 1918 the disease was already rapidly decreasing in incidence.⁹⁴ It was followed, however, by the influenza pandemic, the worst single killer disease to appear since sleeping sickness. The previous severe epidemic of influenza had hit Uganda in 1900, when it was said to have caused great mortality in both Buganda and Bunyoro, but there is no reliable evidence of its destructiveness.⁹⁵ The ravages of the 1918 pandemic are better documented. The disease swept through Uganda in 1918 and 1919, reportedly killing over 3700 people in Buganda and over 1400 in Bunyoro.⁹⁶ Total mortality from the disease in Uganda in 1918 and 1919 was estimated to have been around 25 000.⁹⁷

Despite the great mortality caused by smallpox, meningitis and influenza, which may be attributed to the abnormal conditions generated by wartime and famine, it seems that, as in the pre-colonial era, the greatest causes of ill health were endemic diseases such as plague, dysentery and pneumonia. These can be seen as particularly related to the worsening living conditions in the early twentieth century caused by the establishment of the colonial economic system. The most fearsome was plague, in the eyes of both the Europeans and Africans, and in the early twentieth century the disease gained new virulence as a third pandemic, which had originated from China in 1893, reached Uganda via the inland caravan routes and the Mombasa - Kisumu railway. The disease entered Uganda with the black rat, which was to replace the local rat species as the main vector for plague. Already by 1905 the black rat had become well established in Buganda.⁹⁸

⁹⁴ Northern Province Annual Report for 1916-17. Secretariat Minute Papers, A46/810/UNA; Northern Province Annual Report for 1918-19. Secretariat Minute Papers, A46/811/UNA; Annual letter by Bowers, 30 Nov. 1918. G3/AL/1917-1934/CMS; Uganda Protectorate. *Medical Department 1917*, 11-13; Uganda Protectorate. *Medical Department 1918*, 11, 23.

⁹⁵ Uganda Protectorate. Principal Medical Officer's Report for the Year ending 31 December 1900. FO 2/462/PRO.

⁹⁶ Uganda Protectorate. *Medical Department 1918*, 11; Uganda Protectorate. *Medical Department 1919*, 10; Northern Province Annual Report for 1918-19. Secretariat Minute Paper, A46/811/UNA; Northern Province Annual Report 1920. Secretariat Minute Paper, A46/813/UNA; Doyle 2000, 443. The mortality figures given in the annual medical reports are lower than those in the provincial reports, but the difference is statistically insignificant.

⁹⁷ Uganda Protectorate. *Medical Department 1919*, 10-11, 14.

⁹⁸ Hiffe 1995, 210; Vaughan 1991, 40; J. Isgaer Roberts, 'The Endemicity of Plague in East Africa', *E. Afr. Med. J.* 11 (7) 1935, 200-219; Prentice 1975, 43-44; Médard, forthcoming. See also Myron Echenberg, *Black Death, White Medicine. Bubonic plague and the politics of public health in colonial Senegal, 1914-1945*. Portsmouth: Heinemann; James Currey; David Philip 2002, 23-24. There

As Vaughan points out, the changes in political economy in the early colonial period favoured the spread of many diseases, including plague.⁹⁹ Its incidence and virulence can be explained by the growth of the cotton economy, which created suitable conditions for the transmission of plague to humans. Plague had been prevalent in famine-stricken areas of Busoga and Buvuma in 1901 and 1902, while in Buganda it was reported in Buddu and around Kampala. At the turn of the century the royal capital, or *kibuga*, appears to have been a suitable breeding ground for both rats and plague.¹⁰⁰ During the years following the introduction of cotton, plague spread to new areas with the cotton industry.¹⁰¹ Thus it killed around 500 people a year in Buganda between 1910 and 1912, while there were no confirmed cases in Bunyoro.¹⁰²

A serious upsurge of plague, coincident with smallpox, took place in the main cotton areas of the Eastern Province in 1913. Its spread was related to the uncontrolled movement of seed cotton, favouring the growth and spread of black rat populations. Poor methods of storage and waste disposal attracted rats and increased the risk of the transmission of plague to humans, as the Indian agents stored their cotton in insanitary sheds, located close to dwellings and shops, thus making market places and living quarters foci of the disease. Storehouses at ports were not rat-proof, and there were piles of rotting cotton waste around ginneries that would have attracted rats.¹⁰³

are two possible ways in which the third plague pandemic could have reached Uganda. First, a non-indigenous species of rat was transported to East Africa in the 1890s, where it spread via caravans and the railway. As it reached Uganda it came in contact with local wild and domestic rodent populations, the former acting as hosts for plague. The black rat, being most prevalent in townships and harbours, became infected and died in greater numbers than the indigenous domestic rodents, which were more resistant to plague bacteria, thus increasing the risk of transmission of the disease to humans. The second possibility is that a more virulent strain of plague bacteria was introduced into East Africa and Uganda in the 1890s with the black rat, infecting local domestic and wild rodents and causing outbreaks of plague. This theory is compromised, however, by the fact that most of the rats found dying from plague were black rats, indicating that they were highly susceptible to plague. Thus the chain of transmission would lead from wild and domestic local rodents to non-indigenous and mainly domestic black rats and on to humans. Environmental conditions in early twentieth century Uganda permitted contacts between wild and domestic rodent populations even in township areas. Higher mortality from plague during famines can be attributed to lowered immunological defences because of hunger.

⁹⁹ Vaughan 1991, 40-41.

¹⁰⁰ A.D.P. Hodges' diary, 25 March 1902. MSS. Afr. s. 1782, RH; Moffat to his mother, 6 July 1902. MSS. Afr. s. 1792/36/75, RH; Nsambya Diary, 14 July 1901. UGA/5/A/2/MHM; Sadler to Lansdowne, 6 May 1902. A38/6/UNA; Peter C.W. Gutkind, *The Royal Capital of Buganda. A Study of Internal Conflict and External Ambiguity*. The Hague: Mouton & Co. 1963, 123.

¹⁰¹ Simpson to Jackson, 31 Oct. 1913. CO 536/62/482/PRO.

¹⁰² Uganda Protectorate. *Medical Department 1912*, 12.

¹⁰³ Wiggins to the Chief secretary, 4 Sept. 1913. CO 536/61/420/PRO; Simpson to Jackson, 31 Oct. 1913. CO 536/62/482/PRO; C.M.S. Mengo Hospital report 1912-13. G3/A7/O/1914/11/CMS.

In 1913, as the number of deaths from plague started to increase in the Eastern Province, the medical authorities reacted. As an *ad hoc* anti-plague measure a rat killing campaign was launched, two cents being paid for every dead rat.¹⁰⁴ Medical officials demanded that the movement of people out of plague-prone areas should be restricted, and that restrictions should also be imposed on the transport of unginned cotton. Ginneries should be located outside townships, and the marketing of cotton should be prohibited near Indian bazaars. Moreover, the officials proposed a massive vaccination campaign to curb further advance of both plague and smallpox in the main cotton-growing areas. The money for this was to be taken from the sleeping sickness control operations, as it was felt that though trypanosomiasis formed a barrier to the extension of cattle-rearing in Uganda, there was no immediate threat to human lives, and that the necessary funds could be diverted to other uses. The proposal was turned down by the Acting Governor, however.¹⁰⁵

It is unclear what preventive measures were actually undertaken after the outbreak of 1913. Meanwhile, people in the main cotton areas continued to succumb to the plague. Mortality from this cause over the whole of Uganda varied between three and four thousand annually between 1911 and 1915. Most of the victims were in districts such as Teso and Lango, while there were several hundred victims every year in Buganda.¹⁰⁶ Apparently this strain of plague was extremely virulent, for the outbreak in Kampala in October 1916, with twenty-one confirmed clinical cases, resulted in fifteen deaths, implying a mortality of 71 percent, and by November deaths from plague were being reported in Bunyoro and Busoga as well.¹⁰⁷ The death toll of the 1916 epidemic in Buganda was extremely high, which casts some suspicion over the numbers reported: of the 238 cases of plague recorded - most of which were in Kampala - 216, or ninety-one percent, were fatal according to government sources.¹⁰⁸

The 1916 outbreak occurred in places connected with the cotton industry. The epidemic started to spread from Port Bell (east of Kampala), where infected and dying rats were observed in September. Soon after that some porters working at the port died of plague. Next, rats were found to be dying en masse at two ginneries in Kampala, and from there the plague spread to the Indian bazaar. The original infected rats had apparently arrived from the endemic plague areas of the Eastern

¹⁰⁴ Jackson to the Secretary of State for the Colonies, 4 Oct 1913. CO 536/62/440 PRO.

¹⁰⁵ Wiggins to the Chief Secretary, 4 Sept. 1913. CO 536/61/420/PRO; Hodges to Chief Secretary, 20 & 29 Jan. 1914. CO 536/67/64/PRO; Telegram from Jarvis to the Secretary of State for the Colonies, 24 Jan. 1914. CO 536/67/PRO; Jarvis to the Secretary of State for the Colonies, 2 Feb. 1914. CO 536/67/64/PRO.

¹⁰⁶ Uganda Protectorate. *Medical Department 1915*, 11.

¹⁰⁷ Telegram from Jackson to the Secretary of State for the Colonies, 6 Oct. 1916. CO 536/82/PRO; Telegram from Jackson to the Secretary State for the Colonies, 1 Nov. 1916, CO 536/82/PRO.

¹⁰⁸ Plague epidemic, enclosed in Wallis to the Secretary State for the Colonies, 19 Feb 1917. CO 536/84/55/PRO.

Province in cargo on the lake steamers, thus infecting the local rats at Port Bell.¹⁰⁹ The methods of control employed included quarantine, limitations on trade in goods from infected areas, and destruction of rats. The Indian bazaars were placed under special supervision and cleared of waste, and rats were poisoned, trapped and hunted. The importing of seed cotton to Entebbe, Port Bell and Jinja was temporarily prohibited to reduce the risk of an outbreak in these densely inhabited areas. Thousands of people were vaccinated against the disease, although the lymph available was often of poor quality and did not provide adequate protection.¹¹⁰ Since the aim was to prevent the plague from spreading out from the cotton areas to the main townships, it was proposed that the ginneries should be located in the cotton growing areas and not outside them as had been the case so far, thus reducing the need to transport cotton from one area to another. The cotton markets were to be supervised and inspected by a special Sanitary Officer, and more staff were appointed for sanitary work, especially in the Eastern Province.¹¹¹

The next serious outbreak of plague in Kampala took place in 1920, at which time the causes of the plague epidemics came under closer scrutiny. It turned out that the new, highly susceptible black rat population had rapidly replaced the more disease-resistant local rats. As the previous rat control methods had mainly reduced the population of indigenous rats, the newcomers were quickly multiplying under the favourable conditions created by the cotton industry. Being more susceptible to the plague bacteria spread by rat fleas, they had become effective transmitters of the disease.¹¹² Inspections of dwellings in the vicinity of cotton ginneries during the 1920-22 epidemic revealed that they contained twice as many rats as houses elsewhere. The slump in cotton prices in 1920 led many peasants to store their cotton in their houses for months in the hope of a rise in the market price, thus attracting rats and greatly increasing the risk of infection.¹¹³ The control methods employed to contain the outbreak were drastic: evacuation, burning of rat-infested dwellings, isolation, segregation and rat destruction. In the long run the spreading of information in the vernacular and mass inoculations proved the most successful measures, i.e. more than 57 000 people were inoculated against plague after the 1920 outbreak and the chiefs were told to inform their subjects of the necessity for taking adequate control measures.¹¹⁴

¹⁰⁹ Uganda Protectorate. *Medical Department 1916*, 39, 42.

¹¹⁰ Plague epidemic, enclosed in Wallis to the Secretary State for the Colonies, 19 Feb 1917. CO 536/84/55/PRO; Uganda Protectorate. *Medical Department 1916*, 39-42.

¹¹¹ Baker's comments on Simpson's report, enclosed in Wallis to the Secretary State for the Colonies, 5 March 1917. CO 536/84/66/PRO; Telegram from Jackson to the Secretary of State for the Colonies, 15 Jan 1917. CO 536/84/PRO.

¹¹² Vaughan 1991, 40. The mode of transmission of plague from rats to humans is mainly indirect, i.e. through rat flea bites. Direct transmission would include a rat bite, for example, the handling of infected animals, or the consumption of infected rat meat.

¹¹³ C.J. Baker, Rats in Uganda and their relation to plague. MSS. Afr. 2. 1091, RH.

¹¹⁴ Vaughan 1991, 41-43.

Small, localised outbreaks of plague continued during the 1920s, one of the most serious appearing in Busoga in 1921 and reportedly killing 1400 people.¹¹⁵ In Buganda the main cotton areas of Buddu and Bulemezi occasionally experienced local outbreaks. In Bulemezi the resistance to the anti-plague measures shown by the Bamalaki, or Malakities, - a Christian sect opposed to medicine - led to three outbreaks of plague between 1926 and 1929.¹¹⁶ In 1929 major outbreak took place with more than five thousand reported deaths, most of them in the Eastern Province, and this led to enforcement of the anti-plague measures. It was now evident that subsequent outbreaks of plague would be related to the cotton industry and the conditions it had created in rural areas as well as in the townships and ports. Improvement of storage, rat destruction, and vaccination were again seen as means for containing the disease. Despite these efforts, plague continued to kill hundreds of people in Buganda every year, and even thousands in the Eastern Province.¹¹⁷

Since the disease was not brought under control despite the preventive measures, another tactic was adopted in the 1930s as part of a shift in policy within the Uganda medical service: 'Under the conditions which prevail in Uganda it has become increasingly obvious that the most hopeful method of dealing with endemic plague and the frequent epidemics which arise is to concentrate more attention on the hygiene of rural areas.'¹¹⁸ The aim was now to improve rural sanitation, hygiene and good housing, in parallel with the anti-plague measures, to keep the disease at bay. Nevertheless, endemic plague was not brought under effective control before the Second World War.

Apart from plague, the fatal epidemic diseases had largely been brought under control by the mid-1920s, and respiratory and alimentary tract infections, particularly pneumonia and dysentery, had become the most dangerous diseases in the Protectorate.¹¹⁹ There was a steady increase in respiratory infections during the early colonial period, of which pneumonia was the most lethal. 60 cases of pneumonia were recorded in the Mengo Hospital in 1904, mortality being around 36 percent, and the disease was one of the greatest causes of ill health and death in general between 1900 and 1908, though overshadowed, like many other diseases at that time, by sleeping sickness.¹²⁰ It was prevalent among the troops between 1915

¹¹⁵ Telegram from Jarvis to the Secretary of State for the Colonies, 23 June 1921. CO 536/112/PRO.

¹¹⁶ Ministers of the Lukiko to His Highness the Kabaka of Buganda, 2 Aug 1929. CO 536/157/20411/PRO. For the Bamalaki, see Zeller 1971, 344-357; Twaddle 1993, 266-288.

¹¹⁷ Uganda Protectorate. *Medical Department 1930*, 9; Uganda Protectorate. *Medical Department 1931*, 27-28; Uganda Protectorate. *Medical Department 1932*, 14; Director of Medical and Sanitary Services to Chief Secretary, 1 Aug. 1929. J/4/6/UNA.

¹¹⁸ Uganda Protectorate. *Medical Department 1933*, 32. See also Knollys to the Director of Medical Services, 30 Jan. 1936. J/4/6/UNA.

¹¹⁹ Uganda Protectorate. *Medical Department 1908*, 40; Uganda Protectorate. *Medical Department 1926*, 9; See also Iliffe 1995, 239.

¹²⁰ Uganda Protectorate. Principal Medical Officer's Report for the Year ending 31 December 1900. FO 2/462/PRO; Albert Cook's diary, 25 Oct. 1904. G19/Box 4/PP/COO/WTL; Albert Cook to his

and 1918, and this effectively transmitted it to civilians. The disease was in the increase throughout the 1920s, being the greatest single cause of death at government hospitals in 1930.¹²¹ Like other acute respiratory infections, it was worsened by malnutrition, and was supposedly most destructive among infants and children, contributing to high infant and child mortality.¹²² Tuberculosis also became more frequent from the 1920s onwards, especially in the labour camps and growing urban centres, from where it was conveyed to the countryside by returning labourers. By 1930 it was considered widespread throughout the Protectorate, together with bronchitis, with a mortality of around 15 percent.¹²³

Food and water-borne infections were undoubtedly extremely common in Uganda in the early twentieth century, and related to poor hygiene: 'Disorders of digestion and the alimentary system generally are the commonest affections which come under the notice of a Medical man in this country, owing of course to the gross and filthy habits of the natives. Chronic dyspepsia, gastritis, diarrhoea and colic are excessively common.'¹²⁴ The water supply easily became contaminated, especially during droughts, when people and livestock gathered to use the same water holes, and in the rainy season, when animal and human excrement was washed into the rivers and water holes by the flow of rainwater.¹²⁵ Northern Bunyoro, particularly the area around Masindi, was especially afflicted with poor water supplies. Erratic rainfall also caused shortages of drinking water in Buganda, and water often had to be drawn from sources at a considerable distance during the dry season.¹²⁶

Consequently, dysentery was most prevalent at times of droughts and famines. Hodges, a medical officer in Busoga during the 1898-1902 famine, contracted dysentery twice and was forced to take a several months' leave in order to recover.¹²⁷

mother, 21 Sept. 1904. A201/Box 1/PP/COO/WTL; Uganda Protectorate. Medical Report for the Year ending 31 March 1903. FO 2/737/PRO; Report on Buddu district for the month of May 1906, 14 June 1906. Secretariat Minute Paper, A42/125/UNA.; Uganda Protectorate. *Medical Department 1908*, 40.

¹²¹ Uganda Protectorate. *Medical Department 1908*, 40; Uganda Protectorate. *Medical Department 1912*, 7; Report on the work of the East African Transport Corps Congo Carrier Section, by Capt. E.G. Fenning, s.d. 1916. CO 536/84/16/PRO; Uganda Protectorate. *Blue Book 1917*, Ca26-55; Uganda Protectorate. *Medical Department 1930*, 9.

¹²² See Douglas C. Ewbank and James N. Gribble (eds.), *Effects of Health Programs on Child Mortality in Sub-Saharan Africa*. Washigton D.C.: National Academy Press 1993, 104-105.

¹²³ Uganda Protectorate. *Medical Department 1926*, 9,12; Uganda Protectorate. *Medical Department 1927*, 12; Uganda Protectorate. *Medical Department 1931*, 15; Packard 1990, 92-93, 125.

¹²⁴ Uganda Protectorate. Principal Medical Officer's Report for the Year ending 31 December 1900. FO 2/462/PRO. See also Uganda Protectorate. *Medical Department 1908*, 34, 40.

¹²⁵ Colonial Office: Medical and Sanitary Correspondence June 1906 to Dec. 1910. London: Colonial Office 1911, 508; Wylie 2001, 53.

¹²⁶ Uganda Protectorate. Medical report for the Quarter ending June 30 1902. FO 2/592/PRO; Annual letter by A.B. Lloyd, s.d. 1901. C.M.S. annual letters 1901, 243, CMS; Ladbury to Manley, 11 Dec. 1918. G3/A7/O/1918/14/CMS; Letter from Campling, 29 March 1928. UGA/22/1928/MHM.

¹²⁷ A.D.P. Hodges' diary, 26-30 April 1900. MSS. Afr. s. 1782, RH.

In 1912 it was noted that dysentery was most prevalent in the Western and Northern Provinces, killing hundreds of people each year. It was common in townships and plantations, where it was believed to have been spread by flies and contaminated food. During the World War the disease became more frequent in Bunyoro, and in the early twenties it was also reported to be common in distant rural areas.¹²⁸ In Buganda dysentery was rife in the labour camps, which apparently served as foci of the disease, and it became more frequent during the 1920s with the influx of labourers from Rwanda, the Congo and Northern Uganda. It was most prevalent along the labour routes passing through northern Bunyoro and in the Masaka district of Buganda, where the Rwandan immigrant labourers were said to suffer extensively from the disease.¹²⁹

Medical officers active in Uganda at that time reported dysentery to be one of the most prevalent diseases and one of the most difficult to contain. After the peak of the bacillary dysentery epidemic in the mid-1920s, however, the disease became endemic with much reduced virulence. It was believed that contaminated food was the main cause of dysentery, especially in the urban areas, and the provision of safe food for urban dwellers as well as safe water was becoming an ever more urgent matter. Inspections of food markets, slaughterhouses, milk sellers and aerated water manufacturers were to be increased.¹³⁰ These measures in themselves serve to indicate, however, that the primary aim was to improve the safety of those foods frequently consumed by European inhabitants.

Tick-borne relapsing fever was one of the commonest diseases in Uganda during the early colonial period, although it was often confused with malaria, and some of its symptoms, mainly diarrhoea, caused it to be diagnosed sometimes as dysentery. Though normally a disease of low mortality, relapsing fever was a great cause of debility and ill health.¹³¹ By 1905 tick fever was frequently encountered in northern Bunyoro, apparently being most prevalent along the widely used caravan routes, where it attacked porters at tick-infested camp sites and rest houses.¹³² There

¹²⁸ Uganda Protectorate. *Medical Department 1912*, 11; Uganda Protectorate. *Medical Department 1913*, 13; Colonial Office: Medical and Sanitary Matters in Tropical Africa Correspondence Jan.-June 1912. London: Colonial Office 1912, 273-274; Northern Province Annual Report for 1915-16, Secretariat Minute Papers, A46/809/UNA; Northern Province Annual Report 1923. Secretariat Minute Papers, A46/816/UNA.

¹²⁹ Uganda Protectorate. *Medical Department 1926*, 10-11; Uganda Protectorate. *Medical Department 1928*, 11; R.E. Barrett, 'Health of the Temporary Immigrant Ruanda and Allied Tribes from Belgian Congo Administrated territories', draft report, May 1942. MSS. Afr. s. 1872, RH.

¹³⁰ Uganda Protectorate. *Medical Department 1926*, 10-11, 28-29; Uganda Protectorate. *Medical Department 1927*, 11, 24, 32; Uganda Protectorate. *Medical Department 1930*, 14; Typescript by R.E. Barrett, dated 18 March 1983. Mss. Afr. s. 1872, RH; R.S.F. Hennessey, Learning about Disease in Uganda: 1929-44 and 1949-55. Typescript. MSS. Afr. s. 1872, RH.

¹³¹ Charles M. Good, 'Man Milieu, and the Disease Factor: Tick-Borne Relapsing Fever in East Africa', in Hartwig and Patterson 1978, 48.

¹³² A.D.P. Hodges' diary 22-24 & 30 Dec. 1905. MSS. Afr. s. 1782, RH; Leakey to H.M. Commissioner, 16 May 1906. Secretariat Minute Papers, A42/67/UNA; Good 1978, 60.

was an epidemic outbreak in Buganda between 1903 and 1905, and by 1909 the disease was said to be highly prevalent in Busoga. In Kampala and Entebbe it was again the labour camps that acted as foci of the disease, infecting labourers arriving from other parts of Buganda, who then carried the disease home with them. According to medical officials, poor housing and the habit of strewing grass on the hut floor favoured the spread of ticks. By 1909 it was considered almost universal in Bunyoro, and it was also increasing in Ankole.¹³³ In the subsequent years it became more lethal, probably because the physical condition of the inhabitants had been weakened by recurrent famines and food shortages.¹³⁴ The arrival of immigrant labourers from Rwanda then resulted in an upsurge in recorded cases in the 1920s, the migrants having been infected en route via Ankole and Masaka. Morbidity and mortality among the immigrants was increased by the poor working conditions at plantations and by malnutrition.¹³⁵

In 1925 the East Africa Commission stated that hookworm was one of the most widespread ailments among the people over the whole of British East Africa, debilitating adults and children alike. Evidence from Uganda indicates that hookworm and other helminthic conditions were almost universal. Hookworm disease was most prevalent during rainy seasons, and its high prevalence indicates widespread rural poverty and suffering. Improvements in sanitation and hygiene were seen as the only way to combat infestation.¹³⁶

The greatest cause of ill health and death for Africans in Uganda was malaria.¹³⁷ It was most prevalent at the end of the rainy season, when mosquitoes were most numerous. According to Albert Cook, almost 25 percent of the 1500 in-patients and 40 000 out-patients treated at the Mengo Hospital clinic and dispensaries between 1897 and 1901 were suffering from malaria,¹³⁸ and an investigation undertaken in Kampala in 1909 showed that 94 percent of the children examined harboured malaria parasites. The disease was likewise extremely common among children in Bunyoro, although this area was considered to be less malarious

¹³³ Good 1978, 61-62; Colonial Office: Medical and Sanitary Correspondence June 1906 to Dec. 1910. London: Colonial Office, 1911, 507-511; Uganda Protectorate. *Medical Department 1908*, 37.

¹³⁴ Uganda Protectorate. *Medical Department 1912*, 7.

¹³⁵ R.E. Barrett, 'Health of the Temporary Immigrant Ruanda and Allied Tribes from Belgian Congo Administrated Territories', draft report, May 1942. MSS. Afr. s. 1872, RH; J.N.P. Davies, typescript. Mss. Afr. s. 1872. RH; Good 1978, 63-66.

¹³⁶ Colonial Office. *Report of the East Africa Commission*. London: H.M.S.O. 1925, 55; Uganda Protectorate. *Medical Department 1923*, 7; R.S.F. Hennessey, Learning about Disease in Uganda: 1929-44 and 1949-55. Typescript. MSS. Afr. s. 1872, RH; W.H. Watson, 'Drainage as a controlling factor in the spread of hookworm', *E. Afr. Med. J.* 11 (10), 1935, 308-315; Kiple 1993, 784-788.

¹³⁷ Preliminary Report on the Protectorate of Uganda, by H.H. Johnston, s.d. 1900. FO 2/298/PRO; Sadler to Lansdowne, 15 Oct. 1902. A38/7/UNA; A.R. Cook, 'Notes on the Diseases met within Uganda, Central Africa', *J. Trop. Med.* 4, June 1 1901, 175-178; Uganda Protectorate. Report for the Year ending December 31 1900, by Dr. R.U. Moffat. *J. Trop. Med.* 4, Oct. 1 1901, 326-330.

¹³⁸ Cook 1901, 175-6.

than Buganda in 1900.¹³⁹ The colonial state's attempts to deal with malaria were undermined by a lack of funding. The building of mosquito-proof houses was delayed, and mosquito eradication campaigns in townships were not undertaken until 1912. The aim of the malaria prevention policy was to make townships safe for European and Asian inhabitants, while nothing could be done to reduce the risk of disease among the African population. But mosquito eradication proved very ineffective, as new breeding grounds for *anopheles* were constantly being created in townships and rural areas. The draining of swamps, for example, involved the digging of ditches, which provided a suitable environment for mosquito larvae.¹⁴⁰

The high rate of malaria infection among infants and children was probably one significant cause of the high infant and child mortality in Buganda and Bunyoro, though, as will be seen later on, doctors frequently associated high infant mortality with syphilis. It was only in the 1930s that it was realized that malaria was behind a considerable number of premature births and miscarriages.¹⁴¹ The *banyarwanda* labourers likewise suffered greatly in the vigorous disease conditions found in Uganda. Coming from areas free of malaria, they were especially hardly hit by the disease their death rate being six times that found among migrant labourers from the West Nile.¹⁴² The 1935 Public Health Ordinance aimed to step up malaria control measures as a part of larger scheme to improve sanitation, hygiene and disease prevention. Despite the attempts, it seems that malaria became more prevalent during the early colonial period, especially in the urban areas with growing populations. According to Albert Cook, there had been 'a considerable increase in malaria' in and around Kampala between 1900 and 1930.¹⁴³

VENEREAL DISEASE AND DEMOGRAPHY POLYGYNY, DISEASE AND DYING RACES

After the sleeping sickness epidemic had waned, the Europeans in Uganda, missionaries and colonial officials alike, became seriously alarmed by the

¹³⁹ Uganda Protectorate. Principal Medical Officer's Report for the Year ending 31 December 1900. FO 2/462/PRO; Colonial Office: Medical and Sanitary Correspondence June 1906 to Dec. 1910. London: Colonial Office, 1911, 508-509; Northern Province Annual Report 1911-12, Secretariat Minute Papers, A46/2693/UNA.

¹⁴⁰ Uganda Protectorate. The Prevention of Mosquito-borne Diseases. CO 536/42/228/PRO; Wallis to the Secretary of State for the Colonies, 23 April 1912. CO 536/49/146/PRO; Draft rules for the Prevention of Malaria. CO 536/49/146/PRO; E.B. Worthington, *Science in Africa. A Review of Scientific Research Relating to Tropical and Southern Africa*. London: Oxford University Press 1938, 518-519.

¹⁴¹ According to the Mengo Hospital returns, 70 percent of children in Buganda died as a consequence of premature birth, were stillborn, or died during the first week after birth. C.M.S. Mengo Hospital Report 1912-13. G3/A7//O/1914/11/CMS; Uganda Protectorate. *Medical Department 1932*, 49.

¹⁴² R.E. Barrett, 'Health of the Temporary Immigrant Ruanda and Allied Tribes from Belgian Congo Administrated Territories', draft report, May 1942. MSS. Afr. s. 1872, RH.

¹⁴³ Uganda Protectorate. Public Health Ordinance 1935. CO 536/190/40165/PRO; Standing Committee Minutes, 8 May 1930. G3/A7/O/1930/62/CMS.

demographic situation in the Protectorate. Infant mortality was high, and the death rate in Buganda, Bunyoro and Toro seemed to be in excess of the birth rate, thus giving the impression of a diminishing population.¹⁴⁴ An optimistic estimate by Harry Johnston in 1900 placed the population of Buganda at one million, while the official figure in 1904, based on unreliable tax returns, was around 717 000, declining to approximately 667 000 by 1910.¹⁴⁵

The explanations for the perceived population decline varied. Sleeping sickness was the greatest single factor behind the decrease until 1908, and once it had been brought under control, two factors remained, monogamy and syphilis.¹⁴⁶ Johnston, influenced by the White Fathers, stated in 1901 that population growth in pre-colonial Buganda had stagnated not only because of the slave trade, inter-tribal warfare and cruel despots, but also because Baganda women had become 'poor breeders' on account of the 'premature debauchery' widely practised in the country. According to Johnson, the infertility of the women had served as the primary motive for Baganda slave raiding in the past. British rule had brought an end to slaving and violence, while Christianity had brought polygyny to an end and introduced monogamy, thus contributing to low population growth and to a situation where, at the turn of the century, the Baganda were facing a risk of 'dying out as a race'.¹⁴⁷

The ultimate agent of destruction, closely related to debauchery, was syphilis:

'It would almost seem as though the Baganda had lost much of their original vigour as a race through the effects of former debauchery and the appalling ravages caused among them by syphilis. It is difficult to overestimate the damage done by this last disease. The French [White Fathers] Bishop, Monseigneur Streicher, writing to the author of this book, describes this disease as "*une plaie désastreuse pour le pays*."¹⁴⁸

Syphilis dominated medical thinking and policy in Uganda up to the 1930s to a greater extent than any other disease after the sleeping sickness epidemic. Huge resources were directed towards combating venereal diseases, which were genuinely believed, at least by some, to be about to wipe out the population.¹⁴⁹ The history of such campaigns in Uganda from 1908 to the 1920s has been widely studied

¹⁴⁴ Uganda Protectorate. *Medical Department 1908*, 28; Uganda Protectorate. *Blue Book 1909-1910*, section Q1.

¹⁴⁵ Johnston 1902, Vol. II, 640; Uganda Protectorate. *Blue Books 1903/4*, 100; Buganda Annual Report for 1909-10. Secretariat Minute Paper, A46/421/UNA; Kuczynski 1949, Vol. II, 236-7.

¹⁴⁶ Minutes on Venereal Disease, 2 & 31 March, 4 April 1908. CO 536/15/PRO.

¹⁴⁷ Johnston 1902, Vol. II, 641-642.

¹⁴⁸ Johnston 1902, Vol. II, 640. Albert Cook agreed with the view presented by the Catholic missionaries. In 1901 he claimed that syphilis was rampant, spreading in many ways, and not only through sexual intercourse. See. Cook 1901, 175-178.

¹⁴⁹ Zeller 1971, 191-193.

elsewhere, so there is no need to go back to those events in detail.¹⁵⁰ Instead, we can take a look at the alleged causes of the epidemic, its ideological and epidemiological basis and its consequences as they were understood by contemporaries.

The origin and causes of the alleged widespread occurrence of syphilis was, according to Johnston, the establishment of connections between the interior and both Egypt and the Indian Ocean Coast from the 1850s onwards. He blamed the Swahili and Sudanese traders and soldiers for introducing 'a new and ravaging form' of the disease to Buganda and Bunyoro, which then spread rapidly because of 'debauchery'.¹⁵¹ Johnston's ideas were affected by the missionaries resident in Uganda, especially the White Fathers, who had already become convinced in the 1880s that the poor health of the Baganda compared with some of the neighbouring peoples was attributable to polygamy and venereal disease.¹⁵²

The belief that syphilis was a major cause of the population decline in Buganda gained more impetus around 1905 and 1906, apparently being reinforced by three factors: the discovery of the causative agent for venereal syphilis in Europe and the development of a serological test to detect it in blood, the projection of European and American ideas of venereal disease and sexual mores in general to African conditions, and the recognized prevalence of other treponematoses in tropical Africa, especially yaws.¹⁵³

The four *Treponema* pathogens found in humans are morphologically identical, to the extent that they can only be properly identified by their epidemiology, clinical manifestations and modes of transmission. Each variety causes a different disease, namely venereal syphilis, endemic syphilis, yaws and pinta. Three of these, yaws, endemic syphilis and venereal syphilis, were found in East Africa. Yaws and endemic syphilis were transmitted by bodily contact in the tropics, where people wore less clothing. Yaws in particular is a disease of the humid tropics, while endemic syphilis is more prevalent in hot, arid climates, e.g. in Northern and Southern Africa. Both diseases affect mainly children. It has been widely established today that infection with one type of *Treponema* in childhood provides considerable immunity against other forms in later life.¹⁵⁴

¹⁵⁰ See Tuck 1997; Michael Tuck, 'Venereal Disease, Sexuality and Society in Uganda', in Roger Davidson and Lesley A. Hall (eds.), *Sex, Sin and Suffering. Venereal Disease and European Society since 1870*. London; New York: Routledge 2001, 191-204; Zeller 1971, 194-207; Maryinez Lyons, 'Medicine and Morality: A Review of Responses to Sexually Transmitted Diseases in Uganda in the Twentieth Century', in Setel et.al. 1999, 97-117; Maryinez Lyons, 'Sexually Transmitted Diseases in the history of Uganda', *Genitourinary Medicine* 70 1994, 138-145; Carol Summers, 'Intimate Colonialism: The Imperial Production of Reproduction in Uganda, 1907-1925', *Signs* 16 (4) 1991, 787-807; Vaughan 1992a, 269-302; Vaughan 1991, 131-154.

¹⁵¹ Johnston 1902, Vol. II, 640.

¹⁵² Médard, forthcoming, fn. 7.

¹⁵³ See Jochelson 2001, 24; Tuck 2001, 194.

¹⁵⁴ Philip H. Manson-Bahr (ed.), *Manson's Tropical Diseases*. 15th edition. London: Cassell 1960, 562; Peter L. Perine, Donald, R. Hopkins, Paul L.A. Niemel, Ronald K. St. John, Georges Causse and G.M. Natal, *Handbook of Endemic Treponematoses: Yaws, Endemic Syphilis, and Pinta*. Geneva: WHO 1984, 2, 8-9; E. Van Dyck, & A.Z. Meheus & P. Piot, *Laboratory Diagnosis of Sexually*

The causative agent of venereal syphilis, the spirochaete bacteria *Treponema pallidum*, was discovered in 1905 by Shaudin and Hoffman. In the same year, Castellani realized that the spirochaete causing yaws was indistinguishable from this. The next year Wassermann and Bordet developed a serological test to detect treponemal antibodies in blood, and in 1909 Ehrlich developed the arsenphenamine Salvarsan 606, an arsenic-based medicine for treating the disease, which had previously been treated with mercury and another arsenic product, Atoxyl.¹⁵⁵ All these medical breakthroughs connected with syphilis made it a popular disease among scientist and doctors, who were for the first time armed with the most recent scientific applications to detect and treat the disease.¹⁵⁶

Before the discovery of *T. pallidum* there were two types of syphilis recognized in Europe, the non-venereal, endemic 'syphilis of the innocent', and venereal syphilis. Non-venereal transmission was known to occur, especially in the conditions of poor hygiene and poverty commonplace in rural Europe in the nineteenth century.¹⁵⁷ Its endemic existence had become indicative of what Engelstein referred to as cultural deprivation, mirroring 'existing levels of filth, poverty, malnutrition, and overcrowding.'¹⁵⁸ Venereal syphilis, on the other hand, was seen as an urban disease, most prevalent among the fast growing urban underclass. On the other hand, it was recognized that its significance from a medical point of view was frequently surpassed by that of public health problems such as tuberculosis and food and water-borne infections.¹⁵⁹

Venereal disease, especially syphilis, nevertheless provided the authorities in nineteenth-century Europe with an excuse to extend the social control and engineering practised by the state with respect to the urban underclass, which was seen to pose a potential threat to political power and social stability. Venereal disease was viewed as being associated with vice, spread by immoral people who were regarded as 'enemies of society'. In Britain and its colonies, the frequent use of prostitutes by soldiers spread syphilis among the troops, thus posing a threat to

Transmitted Diseases. Geneva: WHO 1999, 36; J.Orley, 'Concepts of Infectious Disease Amongst the Rural Ganda - with Special Reference to Yaws and Syphilis', in *Nkanga: Special edition on Medicine and Social Sciences in east and West Africa*. Kampala: M.I.S.R. 1973, 60-66, especially 61; Brenda J. Baker and George J. Armelagos, 'The Origin and Antiquity of Syphilis', *Current Anthropology* 29 (5) 1988, 703-737, especially 703-705; Learmonth 1988, 2-3;

¹⁵⁵ Claude Quételet, *History of Syphilis*. Translated by Judith Braddock and Brian Pike. Cambridge: Polity Press 1990, 140-142; Irina Löwy, 'Testing for a sexually transmitted disease, 1907-1970', in Virginia Berridge and Philip Strong (eds.), *AIDS and contemporary history*. Cambridge University Press 1993, 75-77; Tuck 1997, 59; Jochelson 2001, 29.

¹⁵⁶ Orley 1973, 62-63; Tuck 1997, 59.

¹⁵⁷ J.N. Hyde and F.H. Montgomery, *A Manual of Syphilis and the Venereal Diseases*. Second edition. London: W.B. Saunders & Co. 1900, 25-28.

¹⁵⁸ Laura Engelstein, 'Syphilis, Historical and Actual: Cultural Geography of a Disease', *Reviews of Infectious Diseases* 8 (6) 1986, 1036-1084, especially 1036-1038.

¹⁵⁹ Hyde and Montgomery 1900, 277-278.

British military power. Elsewhere in Europe, as in France after the Franco-Prussian war, military defeat generated a discussion about the state of the nation, spreading a belief that prostitution and the vices of the urban underclass were behind the nation's weakness.¹⁶⁰

In Britain, the state intervention to save the nation was mainly aimed against prostitution. On the other hand, medical textbooks at the turn of the century recognized that attempts to control prostitution and venereal disease in Europe by regulation and compulsory medical examinations had produced no positive results. This was because the problem did not lie in the prostitutes but in the men who acquired their services, the middle class urban bachelors and 'guilty husbands' who, in the days of neurotic late Victorian puritanism, infected their 'innocent wives'. Thus, behind the façade of a vice-sodden urban underclass, it was the bourgeois male desire for eroticism that contributed to the spread and dread of syphilis in Europe.¹⁶¹

The syphilis scare in Europe, and North America, also reflected the racial and sexual stereotypes of the times. In the European and American medical orthodoxy of the late nineteenth century, non-whites, especially blacks, were seen as a particularly diseased group of people, and blacks were also regarded as potentially dangerous because of their uncontrolled sexuality, characterized by sinfulness, immorality and insatiability. The black people of America were perceived as "'a notoriously syphilis soaked race'",¹⁶² a source of social disorder and immorality.¹⁶³ Later in the century these ideas, which by defining black health problems in racial terms freed white doctors and administrators from any responsibility, were transported and projected to Africa by colonial officers, doctors and missionaries.¹⁶⁴

Western ideas of venereal disease, and syphilis in particular, differed markedly from the local understanding of venereal disease in Uganda. As seen earlier on, many late nineteenth century travellers and missionaries reported that syphilis was rampant, but contrary to these reports, there seem to be absolutely no grounds for believing that the disease that the Europeans referred to as venereal syphilis, called *kabotoongo* by the Baganda, was actually a venereal disease. The Baganda did not associate *kabotoongo* infection with sexual intercourse, but regarded it as an irritating but relatively harmless condition, mainly afflicting

¹⁶⁰ Sheldon Watts, *Epidemics and History. Disease, Power and Imperialism*. New Haven & London: Yale University Press 1997, 150-156; Timothy J. Gilfoyle, 'Prostitutes in History: From Parables of Pornography to Metaphors of Modernity', *The American Historical Review* 104 (1) 1999, 117-141, especially 120-122.

¹⁶¹ Hyde and Montgomery 1900, 271-277; Watts 1997, 157; Gilfoyle 1999, 121.

¹⁶² James H. Jones, *Bad Blood. The Tuskegee Syphilis Experiment*. New and Expanded edition. New York: The Free Press 1993, 24-27.

¹⁶³ Allan Brandt, *No Magic Bullet: A Social History of Venereal Disease in the United States since 1880*. New York: Oxford University Press 1985, 6.

¹⁶⁴ Jones 1993, 22; Jochelson 2001, 24.

children.¹⁶⁵ The only sexually transmitted disease recognized by the Baganda was *enziku*, or gonorrhoea, which was clearly attributed to sexual intercourse and often also to overindulgence, or fornication, and as such perceived as being caused by improper conduct.¹⁶⁶ The fact that *kabaka* Mutesa contracted *enziku* in 1879 made it a 'popular' disease, something associated with true manhood and prowess. Gonorrhoea was therefore a disease of men.¹⁶⁷ It was apparently rife among the chiefs and their numerous concubines, and spread as women frequently changed masters, being given away as gifts or used as articles in trade.¹⁶⁸ In 1900 gonorrhoea was said to be 'especially common', but appeared to cause people little trouble, for according to Dr. Moffat, stricture of the urethra - a common complication of prolonged and untreated gonorrhoea infection in men - was rarely found. Moffat claimed that the disease, like syphilis and other venereal infections, was prevalent amongst Africans as well as Europeans, and that government stations, with their Swahili staff, effectively spread the diseases around the Protectorate.¹⁶⁹

Treponema bacteria were undoubtedly present in the early twentieth century Uganda in at least two forms that caused symptoms often regarded as venereal.¹⁷⁰ Many scholars have taken the *kabotoongo* to indicate endemic syphilis,¹⁷¹ although the available historical evidence, contrary to claims expressed by Davies, do not reveal a 'clear-cut' difference in distribution between endemic syphilis and yaws in Uganda in which the latter could be regarded as confined mostly to the drier parts of the country, i.e. the north and east.¹⁷² Moffat wrote about the prevalence of yaws in 1900 as follows:

¹⁶⁵ Tuck 1997, 47-54; Orley 1973, 63; M. Southwold, 'Ganda Conceptions of Health and Disease', in *Attitudes to Health and Disease Among Some East African Tribes*. Kampala: E.A.I.S.R.; Makerere College 1959, 45.

¹⁶⁶ Tuck 1997, 53.

¹⁶⁷ Zeller 1971, 66; Tuck 1997, 113-116; Médard 2001, 83-84. An old kiganda song described gonorrhoea in the following way: 'He is a fool who has not gonorrhoea, he is a coward who fears this disease (*Atalina nziku mugwagwa, Atalina nziku mudembe*)' as cited in Médard 2001, 84 fn. 2.

¹⁶⁸ Henri Médard, personal communication.

¹⁶⁹ Uganda Protectorate. Principal Medical Officer's Report for the Year ending 31 December 1900. FO 2/462/PRO.

¹⁷⁰ According to Albert Cook, syphilis spread in many ways, not only through sexual intercourse. See Cook 1901, 175-6.

¹⁷¹ J.N.P. Davies, 'The History of Syphilis in Uganda', *Bull. Wld. Hlth Org.* 15 1956, 1041-1055; Vaughan 1992a, 281-282; Lyons 1994, 138-145; Tuck 1997, 54;

¹⁷² Davis was actually of the opinion in 1954 that yaws had been present in Uganda for ages, and had been frequently confused with venereal syphilis in the past. See 'Syphilis: Proceedings of a Mulago Staff Clinical Meeting, 15 May 1954', *E. Afr. Med. J.* 31 (8) 1954, 378-379.

'This loathsome disease is exceedingly common in Uganda [Buganda] itself and in the northern and western parts of the Protectorate... I'm inclined to think that it is probably universal throughout the East Africa. The Waganda I believe suffer from it a great deal. I have been informed by an intelligent chief that among the peasantry parents prefer that their children should have yaws early in life. The same idea... exists among the aborigines of other countries.'¹⁷³

According to Moffat, yaws was infrequently found among 'better people', indicating that a higher standard of living reduced the risk of infection. Regarding its connection with syphilis he wrote: 'Without entering into the controversy as to whether the disease called yaws is indeed anything else than a Syphilitic manifestation, I would simply say that in my opinion the two diseases have no connection whatever.'¹⁷⁴ His opinion reflected the ongoing debate about the relationship between yaws and syphilis in medicine, and demonstrated the fragile basis of the medical knowledge on which the doctors operated while diagnosing syphilis and yaws.¹⁷⁵

Tuck has discussed the manner in which the cultural characteristics of Africans dominated questions of diagnosis and judgement. The Europeans, who considered venereal syphilis a disease of civilization, made their judgement based on ethnicity, social organization and place of residence. People coming from distant parts of the Protectorate, belonging to the stateless societies, were considered more backward and regarded - in the light of European experience - as the carriers of endemic, non-venereal syphilis or yaws, while the Baganda, 'the Japanese of Africa', because of their higher state of civilization, were essentially carriers of the venereal infection.¹⁷⁶ Thus European preconceptions about syphilis and race helped the early travellers, missionaries and colonial officials to convince themselves of the existence venereal syphilis in Central Africa by the late nineteenth century.

POLYGYNY, SIN AND DISEASE: MISSIONARY VIEWS ON POPULATION DECLINE
Convinced that the Baganda were infected with venereal syphilis, the missionaries, who were in the frontline of the battle against the disease, attacked what they perceived as the main cause of the epidemic, namely the immorality inherent in the

¹⁷³ Uganda Protectorate. Principal Medical Officer's Report for the Year ending 31 December 1900. FO 2/462/PRO. Yaws was likewise frequently encountered in Bunyoro and Ankole. See Uganda Protectorate. Medical Report for the Year ending 31 March 1903. CO 536/737/PRO.

¹⁷⁴ Uganda Protectorate. Principal Medical Officer's Report for the Year ending 31 December 1900. FO 2/462/PRO.

¹⁷⁵ For this debate, see 'The Relation of Yaws to Syphilis', *J. Trop. Med.* April 1, 1901, 115; G.J. Keane, 'Venereal Disease Measures in Uganda', *Kenya Medical Journal* 2 (8) 1925, 216-224; J.L. Gilks, 'Incidence and Character of Syphilis and Yaws in Kenya', *Kenya and East Africa Medical Journal* 8 (4) 1931, 131-142.

¹⁷⁶ Tuck 1997, 63-65. For endemic syphilis in rural Europe, see Engelstein 1986.

African society that was manifested in polygyny. Albert Cook complained at the Buganda *Lukiko* in 1903 that the indiscriminate use of women by the Baganda was behind the rapid spread of syphilis, and requested the chiefs to do something to put an end to 'fornication and adultery'.¹⁷⁷ In practise, he was accusing Baganda men, and especially the chiefs, of polygyny and concubinage, which was against the principles of the Christian faith. The matter annoyed him a great deal, as it did other missionaries, since the persistence of polygyny in Buganda was concrete proof of the failure of the missionary moral agenda, in that it threatened to undermine efforts to implant proper Christian values and was in contradiction with the "official" picture of Buganda given to the British public by missionary journals.¹⁷⁸ Cook was frequently disappointed when their trusted Christian men relapsed into polygyny and concubinage. He complained that Africans held very 'shallow views' about Christianity, and seemed 'to think nothing of fornication and drunkenness'.¹⁷⁹ He was forced to recognize the '...fact that much of the [Christianity] is nominal [and] that immorality is frightfully common [and] there seems [to be] no national conscience [and] hardly even [Christian] conscience about the sin.'¹⁸⁰

Allegations of immorality among the Baganda began to appear frequently during the sleeping sickness epidemic, which for some Protestant missionaries appeared as a 'stumbling block' for Christianity.¹⁸¹ 'There is a great wave of immorality among the Christians in Uganda, and a consequent falling away, while drink is on the increase - a sort of recklessness because of sleeping-sickness...'¹⁸² 'Amongst the baptized chiefs... .. drunkenness and worse sins are the rule with few exceptions, and what the chief is the people are terribly liable to become.'¹⁸³ 'Drunkenness and profligacy or a deadly indifference to religion and a love of gain at any price devastate the Christians; and over them... ..like a cold mist, lies the dread of sleeping sickness, leading many into a policy embodied in the words, "Let us eat and drink, for to-morrow we will die."¹⁸⁴

¹⁷⁷ Nsambya Diary, 27 April 1903. UGA/9/11/MHM; Albert Cook to his mother, 30 April 1903. A154/Box 1/PP/COO/WTL.

¹⁷⁸ Soon after his arrival to Buganda in 1896, Bishop Hanlon of the Mill Hill Mission remarked that '[t]here has been so much exaggeration about the country [and] its people'. The C.M.S. missionary Crabtree criticized Bishop Tucker for censoring the individual missionaries' annual letters, and for giving the public in Britain a 'totally wrong picture' of conditions in Buganda. See Hanlon to Casartelli, 15 April 1986. UGA/4/II/MHM; Crabtree to Baylis, 24 Nov. 1902. G3/A7/O/1903/2/CMS.

¹⁷⁹ Albert Cook to his mother, 5 Feb. 1899. A76/Box 1/PP/COO/WTL; Albert Cook to his mother, 20 Feb. 1901. A126/Box 1/PP/COO/WTL.

¹⁸⁰ Albert Cook to his mother, 27 Oct. 1904. A206/Box 1/PP/COO/WTL.

¹⁸¹ Annual letter by T. Owrid, 29 Nov. C.M.S. annual letters 1905, 68, CMS.

¹⁸² Annual letter by Miss. S.R. Tanner, 24 Oct. 1903. C.M.S. annual letters 1903, 162, CMS.

¹⁸³ Annual letter by Miss T.L. Dyke, 1 Dec. 1904. C.M.S. annual letters 1904, 513, CMS.

¹⁸⁴ Annual letter by Miss Jacob, Nov, 1905. C.M.S. annual letters 1905. 66, CMS.

Many were denouncing Christianity and taking up their old religion, fearing that sleeping sickness was a punishment from their ancestors for having accepted Christianity.¹⁸⁵ The deterioration of morals was also associated with a 'love of money', which had become paramount for many. People were said to be chasing money and goods of all kinds and to have no time for religion any more.¹⁸⁶ Thus the social upheaval brought about by colonial rule, accompanied by famine and epidemic onslaught, not only challenged many traditionally held norms and values, but also endangered the civilizing mission.

It seems that behind the missionaries' anti-syphilis zeal lay a primary concern for the fate of Christianity and prevailing African sexual mores and social conduct. The missionaries, sturdy Christian men and women born and raised in an environment of Victorian puritanism, apparently regarded many features of African society as sinful and immoral.¹⁸⁷ Polygyny and concubinage were undoubtedly the most provoking, differing radically from Christian patterns of sexual behaviour. Though it could not be admitted in public, it is clear that many missionaries were becoming disillusioned about the real impact of the introduction of Christian values into Uganda.¹⁸⁸ Christian marriages and monogamy were not taking root, but instead polygyny reigned and those who converted to the Christian faith did not change their social and sexual behaviour accordingly.¹⁸⁹ The concern about the contradiction between ideals and reality arose because the missionaries somehow failed to grasp the political, religious and economic realities prevailing in Buganda, that people were driven not by Christian beliefs and ideology but by pragmatic motives. According to Musisi, in a place like Buganda, where politics and religion went hand in hand, Christianity, and Protestantism in particular, offered access to sources of wealth and lustre, and this was often the primary motive for conversion.¹⁹⁰

Then there was disease. The missionaries, like the colonial officials, unanimously reported very high morbidity and high mortality. The medical

¹⁸⁵ Annual letter by Miss H.M. Thomas, 3 Dec. 1903. C.M.S. annual letters 1903, 163, CMS.

¹⁸⁶ Walker to Baylis, 28 April 1902. G3/A7/O/1902/94/CMS; *Church Missionary Intelligencer & Record*, Feb. 1904, 120.

¹⁸⁷ For Victorian ideas of morality, see Gertrude Himmelfarb, *The De-Moralization of Society. From Victorian Virtues to Modern Values*. New York: Knopf 1995.

¹⁸⁸ A frustrated C.M.S. missionary reported from Koki in 1886 that people were very willing to read and learn more about religion, but as soon as they discovered that '...Christianity meant a new life, no drinking, no polygamy - they threw aside their books and became bitterly opposed to Christianity...', as cited in Nakanyike B. Musisi, 'Morality as Identity: the Missionary Moral Agenda in Buganda, 1877-1945', *The Journal of Religious History* 23 (1) 1999, 51-74, especially 61.

¹⁸⁹ Missionary and government reports indicate that monogamous chiefs were rare exceptions, and the peasants apparently imitated the lifestyle of their chiefs as much as they could. It seems that in Bunyoro, where there had been very little Christian influence compared with Buganda, polygyny was universal, restricted only by economic inequalities. See annual letter by Miss M.S. Thomsett, 26 Oct. 1908. C.M.S. annual letters 1908, 144, CMS; Leakey to H.M. Commissioner, 16 May 1906. Secretariat Minute Papers, A42/67/UNA.

¹⁹⁰ Musisi 1999, 57-58.

missionaries were especially concerned about the high infant and child mortality. According to Albert Cook, 90 percent of Banyoro children - a figure which is hard to accept - died at birth or during infancy, and the physique of an average Munyoro was 'pitiable' compared with the condition of the Baganda and certain other neighbouring peoples. Bunyoro was a country 'remarkable for its dearth of children',¹⁹¹ and the situation was said to be only slightly better in Buganda and elsewhere.¹⁹²

Neither Cook nor any other C.M.S. missionary related the poor health and high infant and child mortality to famine, smallpox and plague in public, not to mention malaria or any other disease arising from poverty and poor living conditions in rural areas. Instead, for Albert Cook at least, disease was a punishment for sin.¹⁹³ He praised a sermon given by a Muganda clergyman which highlighted the connection between sin and disease by '..comparing sin in the soul to the "jiggers" in a man's house. A man of wisdom... when he has his house cleansed [and] free from jiggers, takes care not to let the dust [and] dirt accumulate or else the jiggers will return. So it is with sin, careless Christians let their cleansed hearts get dirty [and] back come the sins.'¹⁹⁴ Earlier on, while visiting a village suffering from sleeping sickness, Cook had told people at a service how sleeping sickness resembled sin. As the remedy given by him eased the suffering of the victims, so Christianity would ease the suffering of those who were sinful and therefore sick.¹⁹⁵ Thus his message was that ill-health and suffering was the fault of the Africans. They were sick and dying because they sinned, i.e. fornicated and drank. Fornication led to the spread of venereal disease, which would destroy the people.

Jack Cook reported from Toro in 1907 that '[d]iseases due to immorality are even more frequent here than in Uganda [Buganda]... .. As a consequence infant mortality is appallingly high. It does not decimate the population - it removes eight-tenths perhaps, in early childhood, and is responsible for a large proportion of the adult mortality.'¹⁹⁶ In 1908 Albert Cook himself wrote: 'Statistics show that 70 percent of the children born in Uganda die at or shortly after birth, or are stillborn. The Medical Missionaries consider this to be mainly due to the immorality of the parents.'¹⁹⁷

¹⁹¹ Albert Cook's letter to the Mengo missionaries, 16 Nov. 1905. A256/Box 1/PP/COO/WTL; Albert Cook to his mother, 19 Nov. 1905. A257/Box 1/PP/COO/WTL. See also Fisher 1970, 50; *Church Missionary Intelligencer & Record*, May 1900, 345.

¹⁹² *Mercy & Truth* 12 1908, 301.

¹⁹³ According to Foster, Cook and his colleagues, in their missionary zeal, regarded disease as a punishment for the sin which blurred their objectivity. See Foster 1970, 83.

¹⁹⁴ Albert Cook to his mother, 8 Aug. 1903. A163/Box 1/PP/COO/WTL.

¹⁹⁵ Albert Cook to his mother, 11 April 1903. A152/Box 1/PP/COO/WTL. See also *Mercy & Truth* 14 1910, 309-310.

¹⁹⁶ *Mercy & Truth* 11 1907, 11.

¹⁹⁷ *Mercy & Truth* 12 1908, 301. It seems that the whole missionary community in Uganda shared

Thus, the Cook brothers had become convinced by 1907 that syphilis was behind the vast infant and child mortality which threatened not only the Baganda but other peoples as well with extinction. According to their logic, the reason was polygyny among the chiefs and wealthier men. In order to curb the disease, however, the co-operation of the chiefs was needed. Bold attacks on polygyny had frequently been made on the pages of missionary journals and pamphlets published in Britain, but not in real life. In 1903, when speaking at the Buganda *Lukiko*, Albert Cook did not demand the abolition of polygyny in a similar vein as his predecessors had demanded the abolition of slavery in the 1890s. He merely criticised the chiefs for their improper conduct. The missionaries never took any concrete measures to promote the abolition of polygyny other than baptism and the teaching of Christian values to their converts. Similarly, for political reasons, the colonial state never passed a law prohibiting polygamous marriage. The 1902 Marriage Ordinance - although introducing English law and the concept of monogamous marriage - allowed certain exceptions to the law under the special circumstances prevailing in the country.¹⁹⁸ The colonial state did not wish to press monogamy intensively, since it would have meant compromising the interests of the Baganda chiefs, the guarantors of British power in Uganda. Therefore, instead of chastising men on account of their polygyny, the missionaries and colonial officials, with the help of the chiefs, blamed the women. The anti-venereal disease policy in Uganda took the same path as in Europe in the second half of the nineteenth century, where women, especially prostitutes, became the primary targets for campaigns and were accused of spreading this disease that corrupted and degenerated society.¹⁹⁹

The hearts and minds of the Baganda chiefs were easily won over to the idea, mainly for two reasons. First, they had been convinced by the British doctors, in the missionary and government branches alike, that syphilis was a venereal disease threatening their nation. Since gonorrhoea was associated by the Baganda with sexual overindulgence and adultery - often with tragic consequences for those involved and for their offspring - it was easy to accept that fornication likewise led to syphilis and child deaths.²⁰⁰ Secondly, the measures to combat syphilis reinforced

this view, not only the medical missionaries. See Hattersley 1968, 111-13.

¹⁹⁸ Uganda Protectorate. The Uganda Marriage Ordinance 1902. CO 684/1/PRO; Musisi 1999, 61-62. According to Southall and Gutkind, '... a customary marriage contracted after a Christian marriage constitutes the criminal offence of bigamy, although it appears that prosecutions are never undertaken in such cases [...] Despite the fact that in Buganda a high proportion of the African population professes Christianity, comparatively few contract Christian marriages unless they belong to the upper status groups for whom marriage in church has become a matter of social prestige.' See Aidan W. Southall and Peter C.W. Gutkind, *Townsmen in the Making. Kampala and its Suburbs*. Kampala: E.A.I.S.R. 1957, 68. According to Haydon (1960, 92), monogamy never achieved the force of law.

¹⁹⁹ The focus shifted to men in the 1920s, however, since women were far more difficult to treat for syphilis because of their numerous domestic responsibilities. In Uganda, therefore, at least from 1921 onwards, the majority of those receiving treatment were men. By that time, however, missionaries had developed new means of control over women via maternity centres and midwifery. See Summers 1991, 800-803.

²⁰⁰ Tuck 1997, 112-113; Tuck 2001, 193; Derrick B. Jelliffe and F. John Bennett, 'Aspects of Child Rearing in Africa', *The Journal of Tropical Pediatrics & Environmental Child Health* 17 1971, 26-43, especially 28. 'Amakiro' was another illness common to children caused by the father having had

their control over the women, and thereby over the junior men, which had been recently loosened by the Christian teaching. For many women in Uganda, Christianity provided a lifeline and escape from the drudgery of rural reality and the male-dominated world. The Buganda *Baraza*, the forerunner of the *Lukiko*, had already passed a law in 1893 allowing women in polygamous households to divorce their husbands in order to marry in a church.²⁰¹ Women attended churches, Bible classes and sewing circles. For many, these offered a place of refuge from their drunken and violent husbands.²⁰² The little education women received in this way apparently put a fear in the minds of the men that they might no longer be dependent on their husbands and could break free of their control. In 1899, again because of the missionary desire to strengthen Christian marriages, the *Baraza* passed laws greatly reducing women's freedom of movement independently of their husbands.²⁰³ Generally, however, the baptism of women was vigorously opposed by the men, as it narrowed marriage options considerably, since a father would fear that no man would be willing to marry his stubborn Christian daughter.²⁰⁴ This led to outright persecution of religious women by their husbands and fathers. Many women who refused to obey their husbands were beaten: '...their husbands in many cases beat them if they dare to read, because they think, and rightly too, that if their women read they will no longer agree willingly to be one of many wives.'²⁰⁵ Many baptised women refused to live with their husbands, and when forced to, attempted to run away. For women married to Muslim men, conversion to Christianity appeared to be a way of escaping from the authority of their husbands, who were naturally strongly opposed to the Christian religion.²⁰⁶

Musisi has demonstrated how the missionary zeal for enforcing Christian marriages, i.e. monogamy, actually led to an unwanted situation in which a group of

intercourse with one of his other wives before he had completed the taboos with the mother of the child, or by his having committed adultery. Again, if the mother of the child committed adultery, either before the child was born or while she was nursing it, the child would contract this disease.'(Roscoe 1965, 102). In pre-colonial times, infant mortality was often attributed to *munyo*, a condition of weakness and scaly skin believed to be the result of the mother having eaten salt, a prohibited item, during pregnancy. *Munyo* was incorrectly labelled as syphilis by Europeans in the nineteenth century. Because of this misunderstanding, infant mortality in the twentieth century was often related to *kabotoongo*. See Roscoe 1965, 101; Haydon 1960, 123.

²⁰¹ Tuck 1997, 116; Musisi 1999, 60; Elisabeth Isichei, *A History of Christianity in Africa. From Antiquity to the Present*. Grand Rapids: Eerdmans Publishing Co. 1995, 240-241.

²⁰² Annual letter by Miss. J.E. Chadwick, 25 Nov. 1905. C.M.S. annual letters 1905, 74, CMS; Annual letter by Miss A.K. Attlee, 26 Nov. 1906. C.M.S. annual letters 1906, 257-258, CMS.

²⁰³ Musisi 1999, 60-61.

²⁰⁴ Annual letter by Miss Chadwick, s.d. C.M.S. annual letters 1906, 267-268, CMS.

²⁰⁵ Annual letter by H. Mathers, 27 Nov. 1907. C.M.S. annual letters 1907. 245, CMS.

²⁰⁶ Nsambya Diary, 18 May 1902. UGA/5/A/9/MHM; Nsambya Diary, 4 Aug. 1902. UGA/5/A/10/MHM; Nsambya Diary, 24 Nov. 1902. UGA/5/A/12/MHM.

baptized women might take advantage of the liberty offered by the church and the missions and choose not to marry at all, thus forming a dubious group of 'surplus wives', allegedly prone to immoral behaviour, especially in townships. Being concerned about the consequences of their policy of monogamy and the problem of 'surplus wives', the missionaries were therefore quick to ally themselves with the Baganda chiefs and demand stricter control over women.²⁰⁷ The chiefs, on the other hand, were eager to seize the opportunity to extend their control in this sphere and to shield themselves against accusations of polygyny.²⁰⁸

COLONIAL CONSTRUCTION OF THE VENEREAL DISEASE PROBLEM IN UGANDA

In order to market their campaign against immorality and polygyny to the chiefs, and above all to the colonial state, the missionaries equated 'surplus wives' with syphilis, and immorality and syphilis with high infant mortality. By early 1907 they had succeeded in convincing Governor Bell about the grave demographic situation: 'The spread of syphilis throughout this Protectorate is one of the most serious of all our problems, and demands early treatment. Thousands of children are being born diseased and, from this [cause] alone, the population is steadily decreasing.'²⁰⁹ Bell asked the Colonial Office for a special commission to be sent to Uganda to investigate the situation regarding syphilis. London sent one man, Colonel F.J. Lambkin of the Royal Army Medical Corps (R.A.M.C.), to examine and report on the situation. He arrived in early December 1907 and consulted several medical officers, missionaries and chiefs before returning to England in late December.²¹⁰ His final report was published in 1908.²¹¹ In his conclusions Lambkin wrote:

'Among the tribes, especially the Baganda up to about ten years ago, a custom prevailed of keeping the women belonging to it under strict confinement and surveillance, in fact so strictly was this adhered to that they were more like prisoners than anything else, hence immorality and promiscuous intercourse could not exist. About the time of the outbreak of Syphilis the Chiefs of the Baganda tribe, the majority of whom had become Christians, decided to remove these restrictions as being contrary to

²⁰⁷ Musisi 1999, 60-63.

²⁰⁸ See Vaughan 1992a, 283; Tuck 1997, 110.

²⁰⁹ Bell to Elgin 22 March 1907, CO 536/12/PRO.

²¹⁰ Bell to the Under-Secretary of State for the Colonies, 28 Aug. 1907. CO 536/17/PRO; Bell to Elgin, 28 Dec. 1907. CO 536/15/PRO; Tuck 1997, 108-109; Zeller 1971, 194-195.

²¹¹ F.J. Lambkin, 'An Outbreak of Syphilis in the Virgin Soil. Notes on Syphilis in the Uganda Protectorate', in D'Arcy Power and J.Keogh Murphy (eds.), *A System of Syphilis*. Vol. II. London: Oxford University Press 1908a, 339-355; F.J. Lambkin, 'Syphilis in the Uganda Protectorate', *Journal of the Royal Army Medical Corps* 11 1908b, 149-163; 'Syphilis in Uganda', *The Lancet*, Oct. 3, 1908, 1022; 'Syphilis in the Uganda Protectorate', *The British Medical Journal*, Oct. 3, 1908, 1037-1038.

Christian teachings, and to set women free... the women were released to roam where they would and do as they liked. Other Christian tribes did the same and even those who had not become Christians followed the example of the Baganda as they usually do in almost everything, the former being the predominant race. The result of the removal of these restrictions was exactly what would be expected, i.e. promiscuous intercourse and immorality. I consider that the above was the main cause of the outbreak of the disease.²¹²

Lambkin's conclusions could not possibly be any further away from the truth as it appears from the surviving historical evidence. Lambkin claimed that syphilis had been introduced to Buganda by the Swahili Arabs, and that by 1907 more than a half of the population of the Protectorate had been infected. In some areas, such as in Ankole, the infection rate among the people was said to be around 90 percent. Prevailing customs, such as inoculation of children with yaws, as practised by the Banyoro, were taken by Lambkin - together with the wife-sharing practices among the *bahuma* - as one main cause of the rapid spread of the disease and subsequently high infant mortality. The main reason for the outbreak, however, was Christianity, which had abolished slavery and polygyny and thus emancipated women to indulge in promiscuity. This view was strikingly evident in the testimonies given by the missionary Roscoe and by Apolo Kagwa and Stanislas Mugwanya, the two leading Christian chiefs in Buganda.²¹³ Quite how and why these emancipated hordes of women would turn into vicious, disease-spreading sexual predators was not convincingly explained.²¹⁴

Lambkin's report, which was in principle accepted in both London and Uganda, had two far-reaching consequences, namely that syphilis was regarded as the main venereal infection in Uganda, and that women were held responsible for spreading it.²¹⁵ While these became established facts among the missionaries and the Uganda administration, the Protestant missionaries, especially Bishop Tucker and Albert Cook, under pressure from the C.M.S. headquarters in London, denounced

²¹² Uganda Confidential Despatch on Venereal Disease. Colonel Lambkin's Mission to the Uganda Protectorate on the Prevalence of Venereal Disease. Summary of Evidence. 28 Dec, 1907. CO 536/15/PRO.

²¹³ Lambkin 1908a, 343-347; Uganda Confidential Despatch on Venereal Disease. Colonel Lambkin's Mission to the Uganda Protectorate on the Prevalence of Venereal Disease. Summary of Evidence. 28 Dec, 1907. CO 536/15/PRO. It is worth noting that Kagwa was the primary informant for Roscoe's ethnographic accounts of the Baganda, and might actually be the progenitor of the idea of women's emancipation as the cause of the epidemic.

²¹⁴ According to Lambkin, '[t]he freedom enjoyed by women in civilised countries has gradually been won by them as one of the results of centuries of civilization, during which they have been educated; and women whose female ancestors had for countless generations been kept under surveillance were not fit to be treated in a similar manner. They were, in effect, merely female animals with strong passions, to whom unrestricted opportunities for gratifying these passions were suddenly awarded.' 'Syphilis in Uganda', *The Lancet*, Oct. 3, 1908, 1022.

²¹⁵ Minutes on Venereal Disease, 2 & 31 March, 4 April 1908. CO 536/15/PRO; Tuck 1997, 108-109.

the cause of the epidemic as presented by Lambkin - based on an account given by the C.M.S. missionary Roscoe - and questioned the estimated numbers of those infected. Tucker and Cook did not accept Lambkin's view that Christianity was responsible for the outbreak.²¹⁶ Instead, Cook blamed 'civilization' and saw that '...Christianity from the beginning has acted as a deterring and restraining force, and is, indeed, when intelligently accepted, the only true prophylaxis to this terrible scourge.'²¹⁷ Cook also criticised Lambkin's figures on the prevalence of the infection: 'I am convinced that the proportion of syphilitics is higher here (as Mengo is the native capital) than anywhere else, and feel sure that 90 per cent. in Ankole is far too high. It was certainly nothing like that when I visited there. If only 14.8 per cent. were infected of those who attended our dispensary, the number in the general population is surely much less.'²¹⁸ Thus Cook was of the opinion that the infection rate in the Protectorate was well below 15 percent, and yet he estimated that syphilis caused about one quarter of all pregnancy complications. Though he admitted that even his numbers were quite high, he saw that Lambkin had 'greatly overstated' the incidence of syphilis infection in Uganda. Hodges also disagreed with Lambkin's figures and concurred with those of Cook, suggesting that 10 to 30 per cent of the population were infected, the rate being highest in the towns and townships.²¹⁹

Certainly Cook's view of the prevalence of syphilis is more convincing than Lambkin's. Cook had several years' experience of Uganda, while Lambkin's visit lasted only a few weeks, during which he did not tour the country but merely interviewed informants brought before him by the colonial officials. His predisposition regarding syphilis is revealed by the selective use of the evidence provided for him by the informants. There were only two persons among the colonial medical officers and missionaries who presented contrasting evidence, Hodges and the missionary Chadwick, whose views were withdrawn from the final report. According to Hodges, the disease he took as syphilis was not actually spreading but declining in incidence. He pointed out the severity and 'fearful extent' of gonorrhoea, which, according to him, was responsible for a great deal of infertility and abortions. Chadwick shared Hodges' views about the incidence of syphilis, adding that it must have been present for a very long time, possibly hundreds of years. The only informant besides Hodges to refer to gonorrhoea was Jack Cook, who represented the C.M.S. medical mission during Lambkin's visit, since Albert Cook was visiting England at the time and never actually met Lambkin himself.²²⁰ Gonorrhoea, a venereal infection that was widely recognized and apparently widespread in Buganda, was completely eclipsed in Lambkin's report.

²¹⁶ Vaughan 1992a, 270-271.

²¹⁷ Albert R. Cook, 'Syphilis in the Uganda Protectorate', *The British Medical Journal*, Dec. 12, 1908, 1780.

²¹⁸ Cook 1908, 1780.

²¹⁹ Cook 1908, 1780; Uganda Protectorate. *Medical Department 1908*, 38.

²²⁰ Uganda Confidential Despatch on Venereal Disease. Colonel Lambkin's Mission to the Uganda Protectorate on the Prevalence of Venereal Disease. Summary of Evidence. 28 Dec, 1907. CO 536/15/PRO.

The preventive measures proposed by Lambkin included legislation to introduce compulsory treatment for syphilis. This would be provided in special treatment rooms and supervised by qualified medical personnel, preferably R.A.M.C. doctors.²²¹ The legislation and compulsory treatment were welcomed only by the White Fathers' missionaries, who were apparently unanimously behind Lambkin's proposals. The medical officers and Protestant missionaries opposed them. Hodges saw compulsory treatment as an over-enthusiastic undertaking that was impossible to implement under Ugandan conditions, since, according to him, similar schemes had failed even in more developed countries. It was concluded, therefore, that 'the state of civilisation' in Uganda did not permit the implementation of compulsory treatment. Instead, a policy of regular treatment based on co-operation with the chiefs was adopted.²²² This meant that the chiefs were given a powerful new tool of social control: it was in their power to decide who would be labelled as 'sick' and sent for medical examination and treatment.²²³

Implementation of the anti-syphilis policy began in 1908, with three R.A.M.C. doctors in charge. Lack of resources, however, confined the effort to only the main urban areas of Buganda. Mulago Hospital, completed in 1913, was the centre for this government medical campaign. Because of the World War, however, the work did not commence in full force until 1920s. Throughout the active phases of the campaign the chiefs played a central role in sending people for treatment. The policies, which had included compulsory medical examinations and treatments and had increased the chiefs' control since 1913, were re-evaluated in 1923, however, with the consequence that the formerly largely independent anti-venereal disease work was integrated into the general medical service. The reason for this was the high costs and poor results, and also the scandal that arose when the British press revealed the true nature of venereal disease examinations and treatment in Uganda.²²⁴

²²¹ Lambkin to Governor on Medical Services, 22 Dec. 1907. CO 536/15/PRO; Lambkin 1908b, 158.

²²² Lambkin 1908b, 158-159; Lambkin to Governor on Medical Services, 22 Dec. 1907. CO 536/15/PRO; Uganda Confidential Despatch on Venereal Disease. Colonel Lambkin's Mission to the Uganda Protectorate on the Prevalence of Venereal Disease. Summary of Evidence. 28 Dec. 1907. CO 536/15/PRO. See also Colonial Office. Medical and Sanitary Matters in Tropical Africa. Correspondence January - June 1912. London: Colonial Office 1912, 225-226.

²²³ See Report on the Treatment of Venereal Diseases from January 27 1909 to October 31 1910, by W.M.B. Sparkes. CO 536/33/176/PRO.

²²⁴ Tuck 2001, 195-196; Lyons 1994, 139-141; Zeller 1971, 199-207; Uganda Protectorate. *Report of the Uganda Development Commission 1920*, 31-32. The best description of the methods of examination and treatment is available in Tuck 1997, chapters 5 & 6. Methods of compulsion included corporal punishment, i.e. flogging, of women who refused to cooperate. All the missionary societies were in favour of this method as a means of dealing with disobedience on the subject of venereal disease examinations and treatment. Consequently, women were frequently whipped and flogged by their husbands, while if a man became infected, he was entitled to beat his wife as a punishment for infecting him. See Report on the Proceedings at the Conference held at the Government House, Entebbe, 30 July 1912. CO 536/51/334/PRO; Wiggins to the Chief Secretary, 27 May 1913. CO 536/60/250/PRO; Gowers to Chief Justice, 7 Dec. 1925, enclosed in Confidential Despatch 8, March 1926. CO 536/139/PRO; Musisi 1999, 62-63.

The syphilis epidemic as it was to emerge in Uganda was socially constructed, the alleged causes being essentially social in nature. It was with this epidemic that venereal disease in Uganda became gendered, as it allowed the maintenance and extension of patriarchal control over reproduction on medical grounds. The epidemic offered a powerful vehicle for social engineering, in that legislative measures were applied to restrict the personal freedom of certain people, particularly women. The epidemic was also a colonial construction. It served to justify the hidden political and economic agendas of the colonial state, the Baganda chiefs and the missionary community, since it enabled medical intervention in the name of a larger labour reserve and higher productivity, enforced control over women, marriage and household production, and allowed the extension of missionary medical and evangelical work and influence throughout the Protectorate.²²⁵ Because of the vested interest of the chiefs, the colonial state and the missionaries, undue attention and great resources were devoted to anti-venereal disease policy, which, if otherwise directed, might have yielded better results in terms of public health.

DEMOGRAPHIC, MEDICAL AND SOCIOECONOMIC IMPLICATIONS OF THE SYPHILIS EPIDEMIC

The information relating to alleged depopulation in Uganda is controversial. As seen above, the government doctors reporting on the diminishing population in the Protectorate were relying on the information partly derived from the C.M.S. medical missionaries. There were many reasons for believing that the population was declining. The Sese Islands had suffered a considerable population drain after 1900 as able-bodied men migrated to mainland in search for remunerative work.²²⁶ North-western Buganda was becoming depopulated because of out-migration,²²⁷ which was increasing not only in Buganda but also in Bunyoro because of taxation and labour calls, and famine and epidemic and endemic disease were taking exceptionally heavy toll of the population between 1900 and 1908. Therefore the Uganda Medical Department, although regarding venereal disease as mainly responsible for the population decline, realized that this alone could not explain the whole alarming situation. High maternal mortality, poor hygiene and restraint from marriage were likewise seen to contribute to the high death rates and low birth rates. Moreover, there were some places such as the Eastern Province where it seemed that the population was actually increasing despite the alleged ravages of syphilis.²²⁸

Inside the C.M.S. the issue of depopulation was first taken up by Archdeacon Walker in December 1907, at the time of Lambkin's visit to Buganda. According to him, the population of Uganda was at risk of dying out within twenty years if the

²²⁵ Summers 1991, 789-807; Vaughan 1992a, 283-285; Tuck 1997, 108-117; Buganda Annual Report, 1910-11. Secretariat Minute Paper, A46/422, UNA.

²²⁶ Pordage to Acting Deputy Commissioner, 14 Aug. 1900. A8/1/UNA.

²²⁷ Sadler to Lansdowne, 4 Nov 1902. FO 2/593/PRO; Report on Kakumiro and Mubendi for September 1908. Secretariat Minute Paper, A44/98/UNA.

²²⁸ Uganda Protectorate. Annual Medical Report for the Year 1910. 240/CO 536/42/PRO.

current trend continued.²²⁹ Bishop Tucker, however, was of the opinion that Walker's estimate was based on incorrect data, which set the population at the turn of the century very much higher than it actually was. He believed that the population decline was attributable to increased movement and out-migration, because of the improved communications and increased economic activity, so that although he associated the high infant mortality with the 'moral question', he also saw that this did not alone explain the decline in population.²³⁰ According to Albert Cook, besides sleeping sickness 'there was no ground to fear depopulation of the country.'²³¹ In fact Cook believed that the population was actually increasing outside the areas affected by this disease. When Walker referred to the existence of 'special diseases', i.e. venereal disease, Cook told him that, although the completion of the railway had increased the incidence of some diseases, there were still no grounds for believing that the population was declining.²³² In retrospect, the views held by Tucker and Cook might actually have not been too far from the truth, for the population of Buganda had been grossly overestimated prior to 1900, and later, when population figures became available that were based on tax returns collected by the chiefs - who had every reason to report smaller numbers of taxpayers than there actually were -, they created an impression of a rapidly diminishing population.²³³

The ambiguity of Cook's public statements regarding the population question is clearly visible. In early 1909 he was of the opinion that '[i]n spite of pessimistic and alarming reports to the contrary, I do not think that there is any immediate likelihood of the Baganda dying out and becoming extinct as a nation.'²³⁴ He based his argument on the cessation of the ravages of external and internal warfare and sleeping sickness. 'In the parts of the country untouched by this epidemic [sleeping sickness] the population is undoubtedly increasing.'²³⁵ Later in the same year the tone was different. When addressing a crowd at the opening of a new dispensary at Mukono Cook boasted:

'... the sad fact [is] that for years past the number of deaths in Uganda far exceeded the number of births, and though this was to a certain extent due to the grievous mortality from Sleeping Sickness, yet the chief cause was traceable to the disease resulting from immorality, and that the Baganda had

²²⁹ Walker to Baylis, 11 Dec. 1907. G3/A7/O/1907/290/CMS.

²³⁰ Tucker to Baylis, 30 Dec. 1907. G3/A7/O/1908/45/CMS.

²³¹ Memorandum on Group III Committee meeting, 21 Dec. 1907. G3/A7/O/1908/1/CMS.

²³² Memorandum on Group III Committee meeting, 21 Dec. 1907. G3/A7/O/1908/1/CMS.

²³³ See Zeller 1971, 192-194.

²³⁴ *Mercy & Truth* 13 1909, 10-11.

²³⁵ *Mercy & Truth* 13 1909, 10-11.

the remedy in their own hands, otherwise, sooner or later, they would cease to exist as a nation.²³⁶

The reliability of Cook's argument is weakened by the fact there was no actual evidence available regarding birth and death rates in the Protectorate at that time. It also demonstrates that he used the population argument whenever he wished to give some weight to his words aimed against sin and immorality. Nevertheless when the first population figures containing birth and death rates became available in 1912, they were enough - despite their well-known inaccuracy - to convince both the colonial officials and the missionaries of the critical nature of the demographic situation.²³⁷ G.J. Keane, doctor in charge of the government's anti-venereal disease programs, reflected the ideas of Lambkin and Cook when reporting that '...syphilis will make still more remarkable ravages throughout the country, and in my opinion, will bid fair to wipe out the race.'²³⁸

Lambkin's report had laid out the primary causes of the epidemic as they appeared to contemporaries: loosening of traditional forms of social control, abolition of polygyny and increased mobility. Also, the introduction of the hut tax was seen to contribute to the spread of the disease, as it caused overcrowding, with people flocking to live under one roof in order to evade the tax, thus leading to a decline not only in hygiene but also in morality, favouring the spread of venereal diseases, including syphilis.²³⁹

The impact of the hut tax on the incidence of venereal disease, and on the decline in hygiene and sanitary conditions, is difficult to assess. For each male liable to pay hut tax, four huts was allowed for which he paid one unit of tax.²⁴⁰ If this rule was followed, there should have been no overcrowding on a large scale. Moreover, since tax collection was only undertaken at a certain time of the year, people did not flock to live under one roof permanently, but only when the tax was being collected. It is likewise difficult to ascertain to what extent the marriage rate diminished. The missionaries complained of a decrease in Christian marriages, which was mainly due to opposition by fathers and the marriage registration fee of one rupee for Christian and Muslim marriages introduced by the government in 1902, and also to the economic constraints introduced by colonial rule.²⁴¹ Bridewealth payments were apparently rising, forcing the *Lukiko* to set a maximum limit for bridewealth, first in

²³⁶ *Mercy & Truth* 13 1909, 107.

²³⁷ Uganda Protectorate. *Medical Department 1912*, 18.

²³⁸ G.J. Keane, 'Notes on the Treatment of Syphilis in Uganda', *J. R. Ar. Med. Corps* 18 1912, 45-50, especially 49. See also Uganda Protectorate. *Medical Department 1912*, 18.

²³⁹ Confidential: Bell to Crewe, 27 April 1909. CO 536/26/PRO; Albert R. Cook, *Uganda Memoirs 1897-1940*. Kampala: The Uganda Society 1945, 201-202; Tuck 1997, 70-72.

²⁴⁰ Johnson to Salisbury, 25 Aug. 1900. FO 2/299/PRO.

²⁴¹ Uganda Protectorate. The Uganda Marriage Ordinance 1902. CO 684/1/PRO; Nsambya Diary, 20 May 1903. UGA/9/11/MHM; Tucker to Baylis, 3 Jan. 1910. G3/A7/O/1910/45/CMS.

1901 and again in 1903. From 1903 onwards the *bakopi* were to pay a maximum of 10 Rs., smaller chiefs 15 Rs., smaller provincial chiefs 30 Rs. and *saza* chiefs 40 Rs. and a cow. It appears that this law was not widely followed.²⁴²

Colonialism certainly generated socio-economic conditions which favoured the spread of many diseases, including sexually transmitted ones, as increased mobility and separation of spouses because of labour obligations and tax evasion eroded social control and weakened conjugal ties. The growth of heterogeneous urban populations and subsequent overcrowding, and the establishment of labour camps and police and military barracks created plenty of demand for domestic and sexual services offered by solitary women and prostitutes, many of whom had to support themselves while their husbands were away, or because they had been abandoned altogether.²⁴³ Moreover, the sexual behaviour of men - concubinage among the chiefs, the *bahuma* habit of sharing wives with clansmen and the generally rather frequent sexual violence - certainly created suitable conditions for the spread of venereal diseases.²⁴⁴

Soon after the commencement of the anti-venereal disease campaign the doctors became aware that the clinical picture of syphilis differed from that seen in Europe: 'There is no doubt that the type of syphilis in this Protectorate is not so severe as that prevalent in Europe. The response to treatment in the native is more marked and more rapid than in Europe, [and] this may in some degree be accounted for by the fact that the disease here is of milder type.'²⁴⁵ It is worth noting that doctors reported a very low incidence of primary syphilis, which, if the disease was spreading as an epidemic, should have been the most frequent stage encountered. Now it was mostly seen among the chiefs, traditionally the most promiscuous group of men. Most of the syphilis cases were at the secondary stage, where the clinical picture bears remarkable similarities to that of yaws, while the tertiary stage was again extremely rare.²⁴⁶ It was also realized that gonorrhoea was almost 'universal',

²⁴² Nsambya Diary, 10 June 1901. UGA/5/A/1/MHM; Nsambya Diary, 11 May 1903. UGA/9/11/MHM; Nsambya Diary, 13 Nov. 1903. UGA/9/16/MHM.

²⁴³ Venereal Disease in the Colonial Empire. Summary of replies from Colonial Governors to the Secretary of State's despatch of the 7th April 1943. CO 994/5/PRO; de Boer to the Chief Secretary 5 Oct. 1943. CO 994/5/PRO; Luise White, *Comforts of Home. Prostitution in Colonial Nairobi*. University of Chicago Press 1990, 29-50. According to Tuck (1997, 121), '...any woman who appeared to be living outside of the social arrangements approved by either European or elite Baganda men was in danger of being labelled a prostitute.'

²⁴⁴ Evidence of frequent rape, including rape of children, can be obtained from the court cases brought to the Buganda Lukiko, which, naturally, only represent the tip of the iceberg. See, for example, Nsambya Diary 1903-1905, UGA/9/MHM; Ormsby to Sub-Commissioner, Central Province, 2 Feb. 1905. A8/6/UNA.

²⁴⁵ Report on Treatment of Venereal Diseases from January 27 1909 to March 31 1910, by W.M.B. Sparkes. CO 536/33/176/PRO.

²⁴⁶ Keane to Principal Medical Officer, Uganda Protectorate, enclosed in Uganda Protectorate. Annual Medical Report for the Year 1910. CO 536/42/240/PRO; Keane 1912, 45-50; Orley 1973, 60-61; Kiple 1993, 1028, 1096

causing much female infertility. It was said to be especially rife in townships, especially near European and Asian quarters and around police and army barracks - where the demand for prostitutes was high - thus indicating the greater prevalence of sexually transmitted diseases in more socially and economically heterogeneous urban populations.²⁴⁷ In rural areas, the touring doctors had difficulty in finding people infected with syphilis. People denied the existence of the disease, and attributed deaths to causes such as pneumonia, childbirth and old age. The unwillingness of the people to report their sick for treatment frustrated the doctors and eventually made them suggest the introduction of compulsory legislation.²⁴⁸

The greatest source of concern for the medical professionals in Buganda was the high infant mortality and the frequency of abortions, which the government doctors and missionaries unanimously attributed to syphilis. Congenital syphilis worried the C.M.S doctors in particular, for whom the dying children represented the immorality and sinfulness of their parents.²⁴⁹ But occasionally healthy parents bore diseased children, and vice versa, indicating that the disease was not always transmitted from mother to child. This in turn suggests that the disease the children were mostly likely suffering from was actually yaws.²⁵⁰

The seemingly fruitless venereal disease campaign to curb infant and child mortality entered a new phase after the First World War. It was now 'native medicine' and poor infant care that were seen to contribute to high infant mortality and low birth rates. The C.M.S. started its Maternity Training Programme in 1918 in order to do away with traditional healers and midwives and their medicine and to improve the standard of maternal and infant care, which, according to the missionaries, was poor. The Maternity Centres established around Buganda in the 1920s also served as venereal disease treatment centres for women, where every expecting mother was treated for syphilis with mercury solution as a precautionary measure throughout pregnancy.²⁵¹

Apart from Buganda, the demographic and health situation in Bunyoro had for a long time been a matter of concern for the government doctors and missionaries alike. The high stillbirth rates were directly attributed to syphilis, as in Buganda, despite the fact that, according to the statistics, deaths associated with syphilis were much fewer in Bunyoro, and that gonorrhoea was apparently more fatal in both

²⁴⁷ Annual Report of the Principal Medical Officer, 1909. CO 536/35/297/PRO; Report on Treatment of Venereal Diseases from January 27 1909 to March 31 1910, by W.M.B. Sparkes. CO 536/33/176/PRO.

²⁴⁸ Keane to Principal Medical Officer, Uganda Protectorate, enclosed in Uganda Protectorate. Annual Medical Report for the Year 1910. CO 536/42/240/PRO.

²⁴⁹ *Mercy & Truth* 14, 1910, 309-310; Lambkin 1908b, 157, 161.

²⁵⁰ See Jochelson 2001, 18; E.M.K. Muwazi, H.C. Trowell, J.N.P. Davies, 'Congenital Syphilis in Uganda', *E. Afr. Med. J.* 24 (4) 1947, 152-170.

²⁵¹ W.D. Foster, 'Doctor Albert Cook and the Early Days of the Church Missionary Society's Medical Mission to Uganda', *Medical History* 12 1968, 325-343, especially 343; Tuck 1997, 281-287; Summers 1991, 799.

countries.²⁵² It was claimed in 1923 that 90 percent of the Banyoro were infected with syphilis, even though such high figures of infection had already been refuted in Buganda by the missionaries and government doctors in 1908. Even so, despite the fact that statistics clearly attributed high death rate in Bunyoro to malaria, dysentery and other non-venereal diseases, no attempt was made to question the role of syphilis in the low fertility and high mortality. Instead, the Banyoro were still being looked on as late as 1930 as having remained under the threat of 'gradual extinction' because of frequent stillbirths and high infant mortality caused by syphilis.²⁵³

It is doubtful whether the joint efforts of the government and the missionaries had any impact on the incidence of venereal disease in the Protectorate, or on the physical welfare of the people. In fact their consequences may have been totally the opposite. It is plausible that treatment destroyed the acquired immunity to *Treponema*, creating a pool of unprotected people near the treatment centres located in the larger towns.²⁵⁴ Similarly, the infrequency of yaws among the upper strata may have led to a decrease in immunity at a much earlier date, but this is impossible to prove. It is likewise feasible that improperly sterilized medical instruments became vectors of the disease during the compulsory venereal disease examinations.²⁵⁵ The treatment of pregnant women with mercury was surely very risky and its benefits highly questionable.²⁵⁶

There is no denial that contemporaries perceived venereal disease, and syphilis in particular, as a demographic threat.²⁵⁷ How widespread this "epidemic" actually was is difficult to tell. Before 1906 there were only very few syphilis cases diagnosed at the Mengo Hospital, and it was a far less frequent disease at the turn of the century than malaria or tropical ulcer, for example. During the six-year period between 1897 and 1902 there were only 69 syphilis cases treated in the Mengo Hospital out of over a thousand in-patients.²⁵⁸ Only 14 cases out of 249 in 1897 were related to syphilis, many of them so called 'syphilitic ulcers', in 1900 only 13 cases out of 255 and in 1901 only 22 out of over 600.²⁵⁹ This trend continued until 1904 and 1905 when the number of cases diagnosed started to increase, and by 1907 the percentage of cases diagnosed as syphilis had increased markedly, although the percentage of syphilis cases in 1908 and 1909 - including primary, secondary,

²⁵² Uganda Protectorate. *Medical Department 1919*, 10-11.

²⁵³ Report of an Anti-Venereal Disease Campaign in the Uganda Protectorate undertaken by Dr. & Mrs. Albert Cook in 1921, 18 Nov. 1921. CO 536/118/6/PRO; Uganda Protectorate. *Medical Department 1923*, 9, 19. Uganda Protectorate. *Medical Department 1929*, 11.

²⁵⁴ Tuck 1997, 75.

²⁵⁵ See Doyle 2000, 451.

²⁵⁶ Tuck 1997, 285.

²⁵⁷ Lyons 1994, 144.

²⁵⁸ Mengo Hospital (hereafter MH) case note indexes 1897-1902. ACML.

²⁵⁹ MH 1897/1, i -x; MH 1900, index; MH 1901/1-3 indexes.

tertiary and congenital syphilis as well as cases diagnosed as syphilitic ulcers - still remained below ten.²⁶⁰

The rise in the incidence of venereal syphilis in the clinical records was probably largely due to the expectations of the medical missionaries and government doctors. As has been seen, the missionaries - armed with limited medical knowledge and the racial and sexual ideas of the time - were inclined to attribute the spread of venereal disease to the immoral sexual practices of Africans, i.e. polygyny, using the existence of the latter to prove the former. Undoubtedly Lambkin's report had a major effect in ensuring the recognition of a widespread epidemic, as the doctors were becoming ever more alert and - by connecting high infant mortality with syphilis - were able to obtain very concrete proof of the devastating effects of the disease. The more they looked, the more they found the condition which - because of inadequate medical knowledge and fixed ideological perceptions - they diagnosed as venereal and congenital syphilis.²⁶¹ Furthermore, their assumptions were backed by the latest achievements in laboratory science, namely the Wassermann test.

The use of the Wassermann test to detect syphilis was not very reliable, however, because of a large percentage of false-positive biological reactions. The results obtained with the test were seriously affected by the prevalence of such diseases as relapsing fever, malaria, leprosy, smallpox, trypanosomiasis and infectious hepatitis, all very common in Buganda and elsewhere in the Protectorate at that time. If a person had been exposed to any of these diseases, the possibility of a false positive Wassermann reaction was high.²⁶² On the other hand, the Wasserman reaction was not used frequently in early twentieth-century Uganda because it was rather expensive, technically demanding and time-consuming.²⁶³ Most of the diagnoses were based on clinical testimonies given by the patients and on a physical examination. But when it was employed, the frequency of positive reactions undoubtedly confirmed the doctors' notions that syphilis was raging. Thus, by combining the results of the Wassermann test with the visible lesions of yaws, tropical ulcer or leprosy evident in the population, the medical missionaries developed the idea of a widespread epidemic of syphilis.²⁶⁴

²⁶⁰ MH Case files 1908 & 1909, ACML; MH Admission Register books, 1908 & 1909, ACML.

²⁶¹ Jochelson 2001, 24; Orley 1973, 65; Tuck 1997, 56-57.

²⁶² W.D. Foster & L.L.D. Kerchan, 'Biological False Positive Wassermann Reactions in Uganda', *British Journal of Venereal Diseases*, 42 1966, 272-275; Davies 1956, 1045; Löwy 1993, 79. Löwy has suggested that despite many uncertainties related to the Wasserman reaction, it came to be regarded by serologists as an exceptionally reliable method for detecting syphilis. Only in the 1930s and 1940s, with the advances in testing methods, was the usefulness of the Wasserman reaction questioned. See Löwy 1993, 78-9, 82-3.

²⁶³ Tuck 1997, 227-228.

²⁶⁴ Tuck 1997, 60; Wylie 2001, 52. The Kahn test, employed for the same purpose at a later stage, was also prone to false positive reactions. Malaria, relapsing fever, kwashiorkor, respiratory infections, pneumonia, vaccinations, yaws, leprosy, trypanosomiasis, tropical ulcer, diabetes, pellagra and beri-beri were all reported to increase the possibility of such a reaction. See Muwazi et.al. 1947, 164.

It has been suggested above that a syphilis epidemic also served the ideological and economic interests of the missionaries, especially the C.M.S. medical missionaries. Their non-medical colleagues in the C.M.S. criticized them for using medicine as a superficial way to attract new converts.²⁶⁵ Vaughan points to the need for medical missionaries to obtain justification for their medical work in the eyes of the missionary community. They had to convince their fellow missionaries that medical work was not just medical work, nor an expensive way to attract converts, but a means to heal Africans both physically and spiritually. The crusade against syphilis and sin therefore served as a powerful *raison d'être* for the C.M.S. medical mission in Uganda.²⁶⁶

In addition to this need for justification in the eyes of their fellow missionaries, the medical missionaries needed to convince their supporters back home about the value and urgency of their agenda in order to carry out expensive medical work in Equatorial Africa. The peaks of missionary propaganda on syphilis in the C.M.S. journals coincide with sudden increases in the expenditure of the Uganda Medical Mission. The number of syphilis cases diagnosed at Mengo Hospital started to increase in 1904, so that instead of the sporadic cases diagnosed before, they now contributed around 10 per cent of the total cases treated.²⁶⁷ This rise coincided with the building of the new Mengo Hospital, for the first hospital had been destroyed by fire in 1902. The costs of the new, modern hospital, opened in late November 1904, were high. Herbert Lankester, the Secretary of the Medical Committee of C.M.S. in London, wrote to Cook that '... it is rather a shock to hear that you think the new hospital may cost nearly £2000.'²⁶⁸ To get the money, the public at home, as well as the fellow missionaries in Uganda, needed to be convinced of the importance of the medical missionary work. Syphilis provided the justification, for the disease acted as a physical manifestation and proof of sin, the curing of which called not only for evangelisation but for medical care as well.²⁶⁹

The building of the C.M.S. Annie Walker Memorial Hospital took place at the peak of the syphilis hysteria in 1910-1911. Cook estimated that the cost of the hospital would be over £1000, but he did not have to worry about the costs, since the Uganda Medical Mission was in sound financial condition at that time. Its revenues had increased by one third between 1907 and 1908, from 8768 Rs. to 12558 Rs., implying approximately £585 and £837, respectively.²⁷⁰ Sales receipts seemed to

²⁶⁵ Vaughan 1992a, 273.

²⁶⁶ Vaughan 1992a, 273.

²⁶⁷ MH Admission Register Book 1/1903-7/1909, year 1904. ACML.

²⁶⁸ Lankester to A.R. Cook, Feb. 6, 1903. Mengo Hospital. In-coming correspondence from C.M.S. London, 1899-1910[hereafter MH/C], ACML; Foster 1968, 337.

²⁶⁹ A.R. Cook & J.H. Cook & E.N. Cook, Report of the Medical Sub-Conference, undated, 1909. Copy letters from Dr. A.R. Cook, Mengo, to C.M.S. London: 1909-12, 1916-17, 1921 [hereafter MH/A], ACML. See also Vaughan 1991, 273.

²⁷⁰ A.R. Cook to Walker, 27 Nov. 1911. MH/A/ACML; A.R. Cook to Elliott, 8 April 1911. MH/A/ACML. One English pound was equal to 15 Indian rupees.

have exceeded even his wildest hopes: 'We thought we had reached our limit last year [1911] in getting 20 000 Rs. as local receipts but subjoined figures show we are doing so far very much better this year.'²⁷¹ The private practice among the European and Asian population was the main source of revenue, which meant about 65 percent of total income in 1910.²⁷² The syphilis epidemic also created opportunities to make larger profits. Selling Salvarsan 606, a medicine used to treat syphilis, seemed to be an exceptionally profitable business. In a letter to C.M.S. London asking for more 606 to be sent to Uganda, Cook explained the situation to Dr. Harford: 'I need hardly say the proportion we use for private cases more than pays for the total supply ordered.'²⁷³

The money derived from private practice and the sales of medicine could only cover some of the ongoing projects of the Uganda Medical Mission, however. About one third of the expenses of the Annie Walker Memorial Hospital, the total cost of which reached £1435, came from receipts, and the rest was donated by contributors in England.²⁷⁴ This demonstrates the importance of the general public in Britain; their contribution was vital for the medical missionary work. This public therefore had to be provided with provoking stories about the ravages of syphilis in Uganda in order to emphasize the urgency of the missionary work, and especially its medical branch, which would provide a cure for the consequences of the sinfulness of African society, in both a physical and a spiritual sense.

During the First World War no money was available from the public. The missionary hospitals were treating wounded soldiers of the East African Campaign, for the Government hospitals could not handle the situation alone. Eventually the whole C.M.S. hospital capacity and staff came under great strain, materially as well as psychologically. From the economic point of view, the virtually free medical services they were providing for the government meant that the affluent years of the pre-war period were over. In 1917 the Mengo Hospital balance sheet showed a deficit of 14 000 Rs.²⁷⁵ and the downward trend continued, so that after the war the C.M.S. medical missionaries in Uganda, as in other parts of the world, had to adapt to new financial circumstances. J.H. Cook, acting as Secretary of the C.M.S. Medical Committee in London in the early 1920s, gave his brother a briefing about the unfortunate financial situation:

'I very much regret to have to inform you that the C.M.S. Medical Mission Auxiliary is in a serious position financially... .. There is a deficit on the

²⁷¹ Unsigned & undated copy of a letter to Harford, 1912. MH/A/ACML.

²⁷² Minutes of the Medical Sub-Conference for the Diocese of Uganda, 7 April 1911, item 8, ACML.

²⁷³ A.R. Cook to Harford, 9 Jan. 1912. MH/A/ACML; A.R. Cook to Witty, 12 Sept. 1911. MH/A/ACML.

²⁷⁴ Annie Walker Memorial Hospital, unsigned, s.d. 1912(?). MH/A/ACML.

²⁷⁵ Stanley-Smith to Hodges, 21 May 1917. MH/A/ACML; Unsigned to Hodges, 24 July 1917. MH/A/ACML.

year's working of £42 690... ...A Special Committee is being appointed to put on the sounder basis the organization of Home funds, and a direct call will be made upon the generosity of all C.M.S. supporters to contribute more largely to C.M.S. Medical Missions... ... and an attempt will be made to break up new ground in the way of enlisting active sympathy and help from those parishes which at present are not doing much for the Medical Missionary cause.²⁷⁶

The war was over, and money was desperately needed to keep medical missions going in Uganda. Once again it was time for the British public to reach into their pockets. What more effective way to cause alarm in England could there have been than to refer to the old social evil, which was now claimed to be even more prevalent and destructive than ever before.²⁷⁷ Besides, the building of the Lady Coryndon Maternity Training School was in progress, and although the colonial government was contributing to the costs, the mission still had to raise money for the cause. Moreover, the financial condition of the C.M.S. Medical Mission Auxiliary was forcing many mission hospitals to become entirely self-supporting, a fate which also befell the Mengo Hospital.²⁷⁸ Therefore, as funding from Britain was greatly reduced, the costs of medical services from 1920 onwards had to be met by the income from medical treatments. Tuck has convincingly shown how the Cook brothers made a profit by selling their patients expensive treatments, the greatest revenue being that derived from the anti-syphilis injections. During the 1920s and 1930s anti-syphilis drugs sold at hospitals and maternity centres brought in immense sums of money, for their profit margins were good. The business ended in 1938, when the Protectorate's new medical regulations limited the use of mercury and arsenic-based medicines for therapeutic purposes.²⁷⁹

THE SYPHILIS EPIDEMIC - A REASSESSMENT

It is well-known nowadays that the views held by early medical missionaries and colonial medical officers about syphilis were somewhat erratic.²⁸⁰ What they saw was not necessarily venereal syphilis but most likely yaws, the non-venereal

²⁷⁶ J.H. Cook to A.R. Cook, 12 May 1921. Letters received by A.R. Cook from his brother J.H. Cook, 1915-16, and from his brother Alfred Cook, nephew Ernest Cook and niece Elsie Cook, 1920-21 [hereafter MH/B], ACML.

²⁷⁷ See *Mercy & Truth* 25 1921, 270, 299.

²⁷⁸ J.H. Cook to A.R. Cook, 7 July 1921. MH/B/ACML.

²⁷⁹ Tuck 1997, 217-226. See also Anne Digby, 'A Medical El Dorado? Colonial Medical Incomes and Practice at the Cape', *Social History of Medicine* 8, 1995, 463-479.

²⁸⁰ John Orley, 'Indigenous concepts of disease and their interaction with scientific medicine', in Sabben-Clare et.al. 1980, 127-134; Tuck 1997, 66; Lyons 1999, 99-100; Vaughan 1991, 136-8. A similar conclusion was reached by Jochelson (2001) in South Africa.

treponemal disease prevalent in the tropics.²⁸¹ In Uganda this was only realized and acknowledged gradually during the 1930s, however, after two extensive anti-VD campaigns. Albert Cook himself expressed doubts about the prevalence and extent of syphilis in 1932, admitting the possibility of exaggeration and misdiagnosis.²⁸² Later, modern research has attempted to explain the causes and extent of the epidemic. One explanation, the transformation theory, was presented by Davies in the 1950s. According to him, there existed an endemic, non-venereal form of syphilis in the area of modern Uganda before the arrival of the first Swahili Arabs and Europeans. Venereal syphilis was introduced into Uganda at some point after 1850, probably by the Swahilis coming from the coast. Davies sees that the epidemic in the early twentieth century was essentially a misdiagnosis, for the disease that Cook and his contemporaries were witnessing was most likely endemic syphilis. At the same time a transformation of the disease to its venereal form took place, because the frequency of endemic syphilis, which is transmitted by bodily contact, decreased on account of treatment, improved hygiene and the increased use of clothing.²⁸³

Two questions emerge at this point which require further consideration. First, were social conditions in Uganda in the early twentieth century such that they would have favoured the rapid spread of sexually transmitted diseases, and second, did the endemic form of the disease disappear so rapidly as Davies suggests it did, thus depriving the population of immunity against the other forms of treponema?²⁸⁴ Lambkin's report proposed that Christianity and the subsequent emancipation of women, combined with the loosening of social control, were responsible for the spread of the disease.²⁸⁵ This explanation, which has somehow escaped the critical eye of modern research, seems to be too simple and too clear to be totally convincing. The emancipation of the Baganda women was, to quote Davies, 'relative indeed'.²⁸⁶ As has been seen, polygyny did not vanish at the turn of the century, because there was hardly such a phenomenon as emancipation of women in Buganda. Women, who were at the core of production and reproduction and who were regarded as a form of wealth and property in this patriarchal society, did not all of a sudden lose their significance even though their husbands may have accepted the Christian faith. This was especially true in Uganda, where the European influence was limited at that time and the monetary economy was not yet properly

²⁸¹ Orley 1973, 60-63; R.S.F. Hennessey, Learning about disease in Uganda: 1929-44 and 1949-55. Typescript. MSS. Afr. s. 1872, RH; Minutes on the 349th Meeting of the Colonial Advisory Medical Committee, 15 May 1934. CO 536/181/23579/PRO; 'Syphilis: Proceedings of a Mulago Staff Clinical Meeting, 15 May 1954', *E. Afr. Med. J.* 31 (8), 1954, 378-379.

²⁸² Uganda Protectorate. *Medical Department 1938*, 28.

²⁸³ Davies 1956, 1050-1053.

²⁸⁴ Theoretically, the replacement of endemic syphilis with the venereal form is possible, but would undoubtedly have required a much longer time. See Tuck 1997, 67-68; Dawson 1987, 433.

²⁸⁵ Lambkin 1908a 344 -5; Vaughan 1992a, 271-3.

²⁸⁶ J.N.P. Davies, untitled typescript. Mss. Afr. s. 1872, RH.

established. Some of the men who became Christians may have divorced their 'the excessive wives', but it is likely that these remained in their protection as concubines. A man might have one wife through Christian marriage, the 'ring wife', and others outside this Christian sphere, a practise still common in Uganda.²⁸⁷

Moreover, the missionaries won most of their converts in the larger towns and townships where they had stations. In the rural areas, secluded from "modern" ideas, the bulk of the people lived according to their traditional ways and beliefs. Lucy P. Mair, writing in the 1930s, remarked that polygamy was still very common outside the capital, even though it was slowly dying out. In rural Buganda the economic and social basis for polygyny still existed, which made monogamy a very unfortunate alternative for the majority of the people.²⁸⁸ In 1943 it was reported:

'The African in Uganda is polygamous, and though the Christian missions have during the at least half a century made many converts to Christianity they have not had much influence in introducing monogamy except amongst the few, for many Africans who take their first wives according to Christian rites take others according to native custom or as concubines. What evidence is available goes to show that the first wife does not raise any objections to the taking of further wives [and] in rural areas fosters such takings as it adds to the importance of their husbands and themselves and gives them assistance in the cultivation of food and cash crops and in the performance of domestic duties.'²⁸⁹

Of course many women were widowed because of the wars and epidemics, but usually they found refuge in the kin group, or were remarried. It was a tradition that a dead man's wife became the property of his heir, usually his son, grandson, or brother.²⁹⁰ Despite missionary activity, the old traditions prevailed and were not seriously challenged by Christianity. Many might have accepted the new faith nominally in order to please the *bazungu*, or white men, or to gain access to commodities and services such as land, government office, medical care, etc., or just to escape taxation.²⁹¹ This nominal Christianity continued to worry Albert Cook

²⁸⁷ See Catherine Coquery-Vidrovitch, *African Women. A Modern History*. Boulder: Westview Press 1997, 217. The practise of having additional wives besides the 'ring wife' was common in Bunyoro in the 1950s. See Beattie 1960, 55-6.

²⁸⁸ Mair 1934, 101; H.C. Trowell, *The Passing of Polygamy. A Discussion of Marriage and of Sex for African Christians*. Oxford University Press 1940, vii. Chojnacka (1980, 91-107) sees that the continuation of polygamous marriage depended on the prestige related to a large number of children, the demand for household labour and sexual taboos followed during pregnancy. According to her, in societies where polygamy is common fertility tends to rise because of the lower age of women on first marriage, and because of the almost universal incidence of marriage. Caldwell and Caldwell (1987, 409-437) emphasize the importance of belief systems in the practice of polygamy. High fertility is a sign of 'good moral standing'.

²⁸⁹ de Boer to the Chief Secretary, 5 Oct. 1943. CO 994/5/PRO.

²⁹⁰ Schweinfurt et al. 1888, 86; Southwold 1956, 88-90.

²⁹¹ People living on missions' lands were not required to pay hut tax. Therefore, many people

even in the early 1930s: 'Unhappily there is a great deal of nominal Christianity and we see the evil effects of irregular concubinage under even less favourable circumstances than overt polygamy.'²⁹²

Moreover, venereal syphilis is predominantly an urban disease. In heterogeneous urban populations differential social customs and conditions of living tend to promote venereal transmission of *Treponema*, while in the rural areas yaws remained more prevalent. Certainly rural areas were not spared from venereal diseases, but apparently the main sexually transmitted infection was gonorrhoea, a disease particularly associated with the Baganda.²⁹³ In general, the conditions in Buganda before the First World War did not favour large-scale prostitution, even though there may have been communities of independent women in larger towns.²⁹⁴ There were no large bodies of imported male labour as in Southern Africa, no large European minority, the number of inhabitants in the towns was small, communications were bad, transportation was difficult, etc. Taking these few points into consideration, it is difficult to accept the claim that the emancipation of women took place in Uganda at the turn nineteenth and twentieth centuries as claimed by Roscoe and Lambkin. Social control over women may have been strict by European standards in the pre-colonial period, but the evidence suggests that it became even stricter with colonialism.²⁹⁵

On the second point, yaws and endemic non-venereal syphilis had, according to Orley, been known in Buganda long before the coming of the first Arabs and Europeans. The concepts of syphilis which existed among the people referred to an ages-long acquaintance with these diseases. He is sceptical about the possibility of endemic syphilis being replaced by the venereal form at the turn of the century, but he does not rule out this possibility entirely. He sees that the decrease in yaws among children, due to improved hygiene, may have caused the loss of immunity to treponema in later life, which eventually made more people susceptible to venereal syphilis in adult life.²⁹⁶ It is questionable, however, whether this process was yet

build their dwellings close to mission stations and probably became converts in the process. See Commissioner's Office to the Sub-Commissioner of Western Province, 19 May 1903. A13/1/UNA.

²⁹² A.R. Cook, 'The Influence of Obstetrical Conditions on Vital Statistics in Uganda', *E. Afr. Med. J.* 9 (11) 1933, 316-330, especially 320. For more about the nature and extent of nominal Christianity, see Roland Oliver, *The Missionary Factor in East Africa*. New impression. London: Longman 1970, 208-215.

²⁹³ Baker and Armelagos 1988, 703-704; J.W. Kibukamusoke, 'Venereal Disease in East Africa', *Trans. R. Soc. Trop. Med. Hyg.* 59 (6) 1965, 642-648; F.J. Bennett, 'Gonorrhoea: A Rural Pattern of Transmission', *E. Afr. Med. J.* 41 (4) 1964, 163-167.

²⁹⁴ Prostitution in *kibuga*, the royal capital of Buganda, came under attack from the missionaries during the First World War and in the 1920s. Attempts to curb the practise was placed in the hands of the *Lukiko*, the members of whom had many mistresses among the women involved. Laws prohibiting prostitution were passed in 1941, though it apparently was not the most serious problem affecting *kibuga*. See Gutkind 1963, 154-155.

²⁹⁵ Musisi 1999, 60-63, Summers 1991, 806-807.

²⁹⁶ Orley 1973, 61-65.

taking place at the dawn of the twentieth century. At least a couple of factors seem to contradict the assumption. First, the living conditions of the majority of the people did not improve so quickly as to favour better personal and environmental hygiene. Such commodities as imported soap or cotton clothes were still unavailable for the great majority of people. People lived in huts made of grass and mud, occasionally overcrowded because of the hut tax. Though it was hoped that the introduction of the poll tax in 1909 would contribute to more sanitary living conditions, it probably had no immediate effect. Instead, overcrowding and slums became a feature of urbanisation which continued to worry medical professionals even at a much later date.²⁹⁷ Thus it was not until there were improvements in housing and in personal and environmental hygiene that favourable conditions for a decrease in yaws came into existence.

Secondly, the clinical symptoms of yaws and venereal syphilis, although remarkably similar, show slight differences. In venereal syphilis the primary sore occurs mainly on the genitals, while yaws in its primary and secondary stages causes severe skin sores throughout the body, which resemble those of venereal and endemic syphilis in their secondary stages. This would mean that as Albert Cook and his colleagues must have encountered mostly patients with venereal syphilis at the primary stage and secondary stage, for the tertiary stage, which only develops in about one third of untreated cases, may appear after a latent period varying from one to twenty years,²⁹⁸ they would have found an abundance of genital ulcers and sores, which would have proved the existence of primary syphilis. Confusion with yaws and endemic syphilis would have been more likely at the secondary stage, making the reliability of the diagnoses questionable. However, as seen above, most of the cases diagnosed by government doctors were regarded as secondary syphilis. In 1908 and 1909, primary syphilis was only rarely seen at the Mengo Hospital.²⁹⁹ Also, while blaming the high stillbirth and infant mortality rates on syphilis, the missionary doctors were actually propagating the existence of congenital syphilis, i.e., a situation in which the fetus is infected by a syphilitic mother. It was found in the 1940s, however, that only a very small proportion of infants living in Kampala had congenital syphilis (less than 5 per cent), and that this could not satisfactorily explain the high infant mortality in the area.³⁰⁰

When considering these points it is easy to concur with Orley's conclusions. He suspects that any change to venereal syphilis - brought about by improved hygiene and a retreat of the endemic form of the disease - took place as proposed by Davies, and tends rather to see the 'epidemic' as a consequence of a growing awareness of the disease, i.e. its 'popularity', the fact that the missionaries and

²⁹⁷ Uganda Protectorate. *Medical Department 1932*, 41; Uganda Protectorate. *Blue Books 1933*, 120.

²⁹⁸ Orley 1973, 60-61; Kiple 1993, 1028, 1096.

²⁹⁹ MH Admission Register 1908 & 1909, ACML. By the early 1920s the trend was reversed; primary syphilis predominated and the incidence of secondary syphilis had decreased. See MH Admission Register 1922 & 1923, ACML.

³⁰⁰ Muwazi et al. 1947, 170.

government officials were on the look-out for it and eventually found it all around them. In Orley's view, the high infant and child mortality in the early twentieth century was due to malnutrition, malaria and other parasitic diseases.³⁰¹ As Uganda was an endemic area for malaria and sleeping sickness, the high rate of stillbirths and miscarriage recorded there in the early twentieth century may just as well have been caused by the upsurge of these infections, both capable of transmission from mother to fetus and, in the case of trypanosomiasis, also often leading to spontaneous abortion and perinatal death.³⁰²

It seems that the syphilis epidemic as described by medical missionaries and colonial medical officers during the first two decades of the twentieth was largely exaggerated.³⁰³ Doctors confused prevalent yaws with venereal syphilis, thus creating an impression of a widespread epidemic.³⁰⁴ As the annual medical report for 1938 stated: 'It is interesting to note the increase in numbers of cases of yaws as compared to those of syphilis. This is probably due to many conditions previously to be syphilis now being diagnosed as yaws.'³⁰⁵ In 1947 it was noted that syphilis was fairly common in Kampala, where 11 per cent of the population were suspected of being infected with the venereal form of the disease. This percentage, though high, is considerably lower than the figures presented by Lambkin and Cook in 1908. Therefore, if syphilis was as widespread as had been claimed in the early 1900s, the number of infected people should have been even larger in 1947 than was the case. Moreover, since syphilis was mainly a disease of urban populations, at least in early colonial Africa, the true percentage of persons infected was likely to be considerably

³⁰¹ Orley 1973, 65.

³⁰² African Trypanosomiasis or Sleeping Sickness. WHO Fact Sheet No. 259, March 2001. www.who.int/inf-fs/en/fact295.html. 07/10/2003; Malaria.WHO Fact Sheet No. 94, October 1998. <http://www.who.int/inf-fs/en/fact094.html> 07/10/2003.

³⁰³ Syphilis was not considered a serious public health problem in the neighbouring territories of Kenya and Tanganyika, although medical missionaries in Kenya tended to see the disease as rampant. Kenya Government Medical Officers stated that this was because the missionaries frequently confused syphilis with yaws, which was very prevalent in both territories. Large yaws eradication campaigns were carried out by government doctors and medical missionaries, which gradually destroyed immunity against *treponema* and led to an increased incidence of venereal syphilis. In Ghana the most prevalent sexually transmitted disease was gonorrhoea, while venereal syphilis spread only slowly because of the immunity provided by yaws. Neither in Kenya, Tanganyika, nor Ghana were venereal diseases seen to have much effect on population figures. See Colony and Protectorate of Kenya. *Annual Medical Report for the Year ending 31 December, 1921*. Nairobi 1922, 20, 26-8, 63; Dawson 1987, 422-423, 433; Terence O. Ranger, 'Godly Medicine: The Ambiguities of Medical Mission in Southern Tanzania, 1900-1945', in Feerman and Janzen 1992, 263-8; Deborah Pellow, 'STDs and AIDS in Ghana', *Genitourinary Medicine* 70 1994, 418-423; Patterson 1981, 92-97.

³⁰⁴ Being labelled as a bearer of syphilis meant that a person was considered physically unfit and exempted from labour service and tax obligations until cured. Such people were encouraged to seek treatment, but many did not or took medicine only irregularly. This policy may have encouraged people to identify themselves as syphilitic even though they did not have the disease. See Buganda Annual Report, 1910-11. Secretariat Minute Paper, A46/422/UNA; Exemptions Under Poll-Tax Ordinance 1914. Secretariat Minute Paper, A46/1235/UNA.

³⁰⁵ Uganda Protectorate. *Medical Department 1938*, 28.

lower in rural areas. Nevertheless, even though many of the facts which spoke against a syphilis epidemic were already acknowledged early in the century, the ideology adopted by the medical missionaries and colonial medical service remained constant until the late 1920s.³⁰⁶

The causes behind the alleged high incidence of syphilis in Uganda in the early colonial period were social, ideological and economic rather than epidemiological. Syphilis acted as a 'metaphor for social and moral disorder' prevalent in late nineteenth and early twentieth century Uganda.³⁰⁷ The syphilis scare originated from missionary circles and was driven by moralistic, puritan motives. It seems as if it arose as a reaction to the failure of the missionary agenda in Uganda, where, despite the claims of progress in the missionary cause, Christianity and Christian ways of life were taking root only slowly. The prevalence of disease was likewise used to maintain and extend social control over the productive and reproductive part of the population, the women. This fitted the political, social and economic agenda of the Baganda chiefs as well as the colonial state, in whose interest it was to keep women under strict control. Production and reproduction were increasingly threatened by deteriorating public health, however, to the extent that the population was believed to be declining. By equating syphilis with ill-health, the social control was further extended and medicalized, allowing the colonial state to interfere with the private life of individuals on medical grounds to an increasing degree from 1909 onwards. The underlying motives of both the colonial state and the missionaries were predominantly economic, i.e., to extend the control exercised by the husbands and chiefs over the women by legislation, thus increasing the chiefs' power to manipulate the public towards their own ends and the ends of the colonial state. For the medical missionaries, the anti-syphilis campaign became the economic backbone of their medical work.

DISEASE, DEMOGRAPHY AND REPRODUCTION

The question of population dynamics in early colonial Uganda is a puzzling one. The evidence is scanty, controversial and often abrogated by additional motives on the part of the historical actors. Nevertheless, there is reason to believe that the population in Buganda and Bunyoro almost stagnated, or even declined, between 1900 and 1930.³⁰⁸ It is impossible to give a comprehensive answer, but it appears that the population was in decline between 1898 and 1908 because of the frequent famines and epidemics. Yet the decline was localised, affecting mainly areas suffering from the combined effects of famine and sleeping sickness. Another period of possible decline because of famine and disease was between 1917 and 1919, and, though shorter in duration, this apparently affected a larger population than the calamities that preceded 1908.

³⁰⁶ See chapter 7.

³⁰⁷ Jochelson 2001, 4.

³⁰⁸ See Kuczynski 1949, Vol. II, 320-322.

Contemporaries in early twentieth-century Uganda, and in Buganda particular, attributed the population decline mainly to sleeping sickness, migration and venereal disease. Of these, the depopulation effects of sleeping sickness and out-migration are fairly well documented. Other factors, such as famine and endemic and epidemic disease, though causing a great deal of morbidity and mortality, were not seen as causes of population decline, or even of any significant deterioration in public health. From 1908 onwards the obviously poor health conditions were attributed to syphilis, but contrary to contemporary beliefs, syphilis does not satisfactorily explain the high death rate and low birth rate, for the same statistics which were used to point to the ravages of syphilis in Buganda and Bunyoro clearly indicate that population in Ankole, Toro and Busoga was increasing at the same time, despite the reported high incidence of venereal disease in these countries.³⁰⁹ As seen above, malaria, dysentery, pneumonia, relapsing fever, plague, and tuberculosis were frequent, and their infection rates exceeded that of venereal diseases many times over. Besides being detrimental to infant and child health, they also contributed greatly to miscarriages, abortions and premature births. Infected mothers faced a great risk of pregnancy termination or complications, and many of the stillbirths were undoubtedly attributable to prematurity or other complications of a common disease contracted by the mother (see Table 1).³¹⁰

Birth and death rates in Buganda and Bunyoro as they appear in the colonial statistics are presented in Appendices 12 and 13. Until 1930 it was firmly believed that the population in many parts of the Protectorate, especially in Bunyoro, was declining.³¹¹ The official census undertaken in 1931 nevertheless corrected some statistical errors which had been affecting the population figures, and in the light of the census evidence the population of Bunyoro had actually shown a slight increase from 1921 onwards, a trend which was further accelerated in the 1930s.³¹² The statistics also revealed for the first time that the population growth in Buganda from 1921 onwards - previously claimed to be caused by successful anti-venereal disease work - was actually caused by in-migration and not by biological reproduction among the indigenous population.³¹³

³⁰⁹ Uganda Protectorate. *Medical Department 1927*, 16; Kuczynski 1949, Vol. II, 282-287.

³¹⁰ Analysis of the reproductive histories of approximately five hundred women attending the Mengo Hospital indicates that stillbirths were quite frequently associated with prematurity. See Appendix 16.

³¹¹ According to Doyle (2000, 430 fn. 5, 431), the colonial statistics for the 1920s and 1930s are 'reasonably consistent', though he probably overestimates slightly the accuracy of the 1911 and 1921 population enumerations. The population decline evident in the statistics from 1911 onwards can be largely attributed to out-migration, which was not recorded.

³¹² See Uganda Protectorate. *Census Returns 1931*. Entebbe: Government Printer 1933; Uganda Protectorate. *Medical Department 1931*, 16.

³¹³ Uganda Protectorate. *Medical Department 1932*, 29-30; Venereal Disease in Uganda, by G.J. Keane s.d., enclosed in Confidential: Coryndon to the Secretary of State for the Colonies, 26 Aug. 1922. CO 536/120/PRO.

The information provided by the population figures given in the Uganda Blue Books, as presented in Appendices 10 and 11, especially regarding Bunyoro between 1909 and 1913, is inconsistent with the evidence of social and economic development in the district at that time. In the case of Buganda the figures appear to be more reliable, however, as the sharp increase in population from 1919 onwards can be attributed to the increased immigration because of the post-war economic boom. Nevertheless, given that these statistics provide even a blurred reflection of the reality, it seems that population growth was extremely slow.³¹⁴ Based on an extensive analysis of colonial records, Kuczynski has suggested that population figures in Buganda, Bunyoro and Busoga were most likely lower in the late 1940s than in 1903. According to him, the chief cause of depopulation in Busoga and Buganda was sleeping sickness, while the territorial losses suffered by Bunyoro in the late nineteenth century caused a fairly large population of Banyoro to be counted as inhabitants of Buganda and Toro.³¹⁵ In the case of Buganda, however, Kuczynski's conclusions are questionable considering the unreliability of the data and the impact of migration, for this region received thousands of migrant workers from Ruanda-Burundi and Tanganyika from the mid-1920s onwards, which added to the numbers of migrants arriving from elsewhere in the Protectorate, including Bunyoro. Though the figures are unreliable, it seems that this inflow contributed significantly to population growth in Buganda.³¹⁶

Ankole and Toro experienced population growth between 1911 and 1930 according to Kuczynski, while population growth in Buganda and Busoga began in the early 1920s. Kuczynski places the commencement of Bunyoro's population growth in the mid-1930s, which correlates with the improvements in economic and social conditions in the district.³¹⁷ Doyle has argued that population growth started few decades later in Bunyoro than in the rest of colonial East and Central Africa, and attributes this 'delayed recovery' to 'deepening problems of malnutrition, endemic disease and marital instability'.³¹⁸ These factors certainly inhibited population growth in Bunyoro and other territories before 1920s, but it is difficult to assess whether they intensified or not from the 1920s onwards.

If population growth in Buganda was caused mainly by in-migration, what was behind the slow rate of population growth among the ethnic Baganda? The

³¹⁴ van Zwanenberg and King (1975, 12-13) attribute the slow rate of population growth in Uganda in the 1920s and 1930s to endemic disease - mainly malaria, dysentery and tuberculosis - and to malnutrition, which made people more susceptible to disease.

³¹⁵ Kuczynski 1949, Vol. II, 320-322. The bulk of the population in the Mubende district of Buganda were Banyoro.

³¹⁶ Kuczynski admits that population figures are distorted because of the lack of reliable information on migration. Annual arrivals and departures varied considerably, making estimation of the number of permanent immigrants difficult. See Kuczynski 1949, Vol. II, 240-250.

³¹⁷ Kuczynski 1949, Vol. II, 320-322.

³¹⁸ Doyle 2000, 430, 456. Doyle places the onset of Bunyoro's demographic recovery in the 1950s, when it was accelerated by the prosperity brought by cash cropping.

alleged low fertility of Baganda women as a cause of the low birth rate and slow population growth is very difficult to assess. Once again the evidence is controversial. While authors like Johnston saw Baganda women as poor breeders, other contemporary accounts praise them for their prolificacy.³¹⁹ Gonorrhoea probably caused problems for some women, but it is likely to have had only minor effects on overall fertility.³²⁰ An analysis of the reproductive histories of a few hundred Baganda women giving birth at the Mengo Hospital reveals that many of these had long reproductive histories with multiple pregnancies, although they may have had few or no living children. The evidence suggests that pregnancy termination by miscarriage or prematurity was frequent, and that infant mortality, particularly neonatal, was extremely high (see Table 1).³²¹ A pregnant women aged about 25, for example, is recorded as having attended the hospital when she had complications at the end of the second trimester. Her earlier reproductive history had included one miscarriage and two stillbirths. The doctors could not do much for her, and her baby was born prematurely at the sixth month.³²² Another woman in her twenties had lost three of her children within two weeks of birth. Only her first child was still alive.³²³ Others were even more unfortunate. One woman aged around 35 had been pregnant eight times and yet she had no living children,³²⁴ and another claimed to have given birth to twelve children, of which only two were still living in 1909, while the others had died of *munyo* shortly after birth.³²⁵

³¹⁹ The Sudanese troops were taking Baganda and Banyoro women as wives because of their reputation for fecundity: 'It is distinctly evident... that the Mganda or Mnyoro woman is peculiarly fertile. And for this reason our native troops are taking them to wife.' See Uganda Protectorate. Intelligence Report No. 26, 31 Oct 1905. CO 534/2/42528/PRO.

³²⁰ Infection rates for sexually transmitted diseases were also reported to be high in the Gold Coast, or Ghana, in the 1920s and later, but despite the high prevalence of gonorrhoea, these diseases in general had very little effect on population rates (see Pellow 1994, 418-419; Patterson 1981, 97). Frank has argued, however, that gonorrhoea was 'the single major cause of infertility' in Sub-Saharan Africa. She does not consider other factors, such as high infant and child mortality, behind childlessness among women at the end of their childbearing years, nor does she discuss any additional factors contributing to miscarriages and stillbirths. Moreover, she attributes the variations in infertility between ethnic groups to ethnically determined patterns of sexual behaviour - which, in her view, either promote or inhibit the spread of sexually transmitted diseases and thus affect the incidence of female infertility and sterility - and disregards the impact of socioeconomic, ecological, epidemiological and nutritional differences on fertility between ethnic and social groups. See Frank 1983, 137-144.

³²¹ According to Williams, maternal malnutrition was seen as one major contributor to prematurity, small size of babies and their lack of vitality in the Gold Coast. Williams also held that there was '...abundant evidence from the pre-natal clinics that yaws is a cause of miscarriage and weakly children.' See Cicely Williams, *Morbidity and Mortality of the Children of the Gold Coast* (typescript), 1935, 83, 141. B1/1/Box 6/PP/CDW/WTL.

³²² Mengo Hospital Case Files (MHCF) 1909/159/Jan. 1/ACML.

³²³ MHCF 1904/300/April 22/ACML.

³²⁴ MHCF 1904/388/June 4/ACML.

³²⁵ MHCF 1909/535/April 24/ACML.

Table1. Miscarriages, stillbirths and infant mortality in Buganda (/00)

	1903	1904	1909	1913 ⁴
Miscarriages ¹	19,4	19,5	18,9	24
Stillbirths ²	4,6	7,2	9,7	5,2
Infant mortality ³	34	32,1	31,4	13
<i>neonatal</i>	22,3	26,7	25,3	9
<i>postnatal</i>	15	7,3	8,2	4,3

¹ Percentage of pregnancies terminated before the third trimester.

² Percentage of children born dead.

³ Infant mortality indicates death within the first year of life;
neonatal infant mortality indicates death within the first month of life;
postnatal infant mortality indicates death between the 2nd and the 12th month of life.

⁴ The 1913 figures are distorted because of lack of reliable data. The actual percentages, except in miscarriages, are likely to have been higher.

Source: The Mengo Hospital case files 1903, 1904, 1909 & 1913.

One point that is somewhat concealed in the hospital evidence but otherwise well known is the young age of the mothers and its relation to pregnancy complications and maternal mortality.³²⁶ In 1927 Albert Cook estimated the maternal mortality rate in Uganda to be at least ten times higher than in Britain, around 40 per thousand (or one in every 25), which appears to be high but reasonable. According to him, maternal deaths were most common among young women, indicating that young mothers were often not physiologically mature enough for childbirth. Cook also paid attention to contracted pelvis problems in many Baganda women, which, in the absence of any deforming deficiency disease such as rickets, he associated with hard physical work - the carrying of water, firewood and bananas on the head - done by young and adolescent girls whose bones were not yet fully developed. This he believed to be one cause behind the frequency of obstructed labour, one of the main causes of stillbirth not only in Buganda but in the neighbouring areas as well.³²⁷

Cook's ideas were strongly criticized by Mitchell and other colonial doctors, however, who saw that other reasons than the workload must be behind contracted

³²⁶ According to Ellison (2001, 225-226) '[t]here appear to be significant costs associated with reproducing while in an immature state. Rates of infant and maternal mortality are both high for young adolescent mothers and rise steeply with decreasing maternal age. The frequency of low birth weight infants is also high among young mothers, with respect both to absolute age and to years since menarche...'

³²⁷ A.R. Cook, 'Report of the Lady Coryndon Maternity Training School, Namirembe, 1927', in Uganda Protectorate. *Medical Department 1927*, 81-82; J.P. Mitchell, 'On the Causes of Obstructed Labour in Uganda, Part I', *E. Afr. Med. J.* 15 (6) 1938a, 177-189.

pelvis observed in some Baganda women. Whereas Cook had attributed the maternal problems of the Baganda women to culture and customs, the colonial doctors saw the problem as racial, regarding the reproductive problems of women as indicative of the low status of civilisation and racial inferiority.³²⁸ Nevertheless, no one denied the connections between obstructed labour, high maternal mortality and stillbirths. In the late 1930s around 60 percent of maternal deaths at Mulago Hospital were associated with obstructed labour, while at maternity centres in Buganda the stillbirth rate was claimed to be 230 per thousand births, a figure which appears to be extremely high. Even higher rates were reported in neighbouring areas.³²⁹ It can be argued that the young age of the mothers contributed to the frequency of abortions, prematurity and maternal mortality in Buganda, and probably also in Bunyoro - although there is no direct evidence of this.³³⁰

On the basis of the Mengo Hospital returns covering the years 1903-1904, 1909 and 1913, stillbirths do not appear to have been as frequent as suggested. According to the evidence, stillbirth rates were below 100, or ten percent, and were frequently associated with prematurity. Approximately every fourth pregnancy was terminated either by miscarriage or prematurity and stillbirth. Infant mortality was also fairly high, over 30 percent, and child mortality appears to have been almost equally high. Thus approximately only two out of every three children born alive would survive the first twelve months of their lives, and every third of these would die in childhood.³³¹ This would explain the low rate of population growth and the small number of children in Baganda families.

The colonial statistics on infant mortality, stillbirths and maternal mortality present a slightly different picture. In 1914 the stillbirth rate in Buganda was 107.7, which does not differ radically from the results obtained from the Mengo Hospital evidence, but the rate in Bunyoro at the same time was much higher, 330.5, which is undoubtedly excessive.³³² Besides socioeconomic and epidemiological factors, the difference can be partly explained by the methods of data collection; stillbirth rates in the colonial statistics were high, since abortions and miscarriages were recorded

³²⁸ Mitchell 1938a, 177-189; J.P. Mitchell, 'On the Causes of Obstructed Labour in Uganda, Part II', *E. Afr. Med. J.* 15 (7) 1938b, 206-212; Sir Albert Cook, 'Note on Dr. Mitchell's Paper on the Causes of Obstructed Labour in Uganda', *E. Afr. Med. J.* 15 (7) 1938, 213-217; R.Y. Stones, 'On the causes of Obstructed Labour in Uganda', *E. Afr. Med. J.* 15 (7) 1938, 217-218; H.L. Gordon, 'The Female Baganda Pelvis', *E. Afr. Med. J.* 15 (8) 1938, 268-269; Nakanyike Musisi, 'The Politics of Perception or Perception of Politics? Colonial Missionary Representations of Baganda Women, 1900-1945', in Jean Allman, Susan Geiger and Nakanyike Musisi (eds.), *Women in African Colonial Histories*. Bloomington: Indiana University Press 2002, 100-103.

³²⁹ Mitchell 1938a, 179-180.

³³⁰ According to Albert Cook, girls in Buganda were married as soon as they reached puberty. See Cook 1933, 319-320.

³³¹ See for example MHCF 1904/954/Dec. 23/ACML; MHCF 1909/1423/Nov. 16/ACML; MHCF 1913/846/May 16/ACML; MHCF 1913/1134/July 15/ACML.

³³² Uganda Protectorate. *Medical Department 1914*, 18. Until 1929 the stillbirth rate was erratically given in percentages although counted per thousand.

under this heading before 1930 and probably even afterwards.³³³ Figures on infant mortality are only available from 1927 onwards, and they show considerable variance between the most developed and most backward areas within Buganda, the infant mortality rate being 105 in the Mengo district and 169 in Mubende, but 433 in Bunyoro. Though variation is great and the numbers high, they are consistent with the evidence from elsewhere in colonial Africa.³³⁴ The maternal mortality rate in Buganda in 1931 was 90 per thousand, the Mengo district having the highest rate, 140, or one in every seven. Maternal mortality was lower in Bunyoro, around 50, but again one must be careful not to put too much emphasis on these figures. Notwithstanding the exceptionally high figure recorded for the Mengo district, maternity mortality rates appear to have been reasonable even when compared with statistics for modern Africa.³³⁵

Social factors affecting population growth are important. It was reported in 1921, for instance, that the marriage rate in Bunyoro was decreasing because of 'profiteering fathers' who were asking high bridewealth payments, and in the 1930s the high taxation was blamed for splitting families, as husbands had to work away from home to earn money to meet their obligations.³³⁶ This was nothing new in the sense that similar conditions had prevailed since 1900 but had been infrequently commented on by colonial officials or missionaries as possible causes of slow population growth. Some customs, such as the long period of breastfeeding or polygynous marriage, tended to keep fertility at a low level even at 'normal' times.³³⁷ According to Davies, 'child swapping' was common within kin groups in Buganda, in that women who were unable to conceive were given babies by some of their more prolific relatives.³³⁸ While there is little direct evidence of any such distribution of children, it is likely that this old custom prevailed for economic and social reasons. It was also common that when a mother nursing a child became pregnant, the child was immediately weaned and later, when the new child was born, given to one of his aunts to be taken care of.³³⁹ These customs may partly explain the small number of children found in Baganda households.

³³³ Kuczynski 1949, Vol. II, 288.

³³⁴ Uganda Protectorate. *Medical Department 1927*, 15; Uganda Protectorate. *Medical Department 1931*, 18-19; Patterson 1981, 91; Koponen 1994, 495-496. Infant mortality rate in the Gold Coast declined between 1920 and 1930 from 405 to 113. In German Tanganyika infant mortality in 1914 was around 23 percent.

³³⁵ Uganda Protectorate. *Medical Department 1927*, 15; Uganda Protectorate. *Medical Department 1931*, 18-19; *World Development Indicators 2003*. World Bank 2003, 255-256.

³³⁶ Report of an Anti-Venereal Campaign in the Uganda Protectorate undertaken by Dr. & Mrs. Albert Cook in 1921, 18 Nov. 1921. CO 536/118/6/PRO; Annual letter by H. Bowers, 1 Nov. 1933. G3/AL/1917-1934/CMS.

³³⁷ Koponen 1994, 499; Cook 1933, 319-321.

³³⁸ J.N.P. Davies, untitled typescript. MSS. Afr. s. 1872, RH.

³³⁹ Jelliffe and Bennett 1971, 29-31.

The frequency of marriage, however, must have had a greater impact on biological reproduction. There is evidence to indicate that marriage was an increasingly expensive affair in colonial Uganda. The high brideprice and general impoverishment contributed to fewer marriages and fewer births, while on the other hand, these factors encouraged extramarital relationships, unwanted pregnancies and abortions. The colonial economic system contributed to marital instability by forcing the separation of spouses, often over long periods of time. It is therefore reasonable to argue that economic and social conditions played a fairly crucial role in population growth. The increase in real income probably contributed to an improved standard of living - improved diet and clothing - which may have had a beneficial effect in terms of health, especially for mothers and children. There is no surviving evidence on the marital status of the population over longer periods of time, so that the impact of economic wealth on the frequency of marriages cannot be proved unambiguously. It may be assumed that the two were positively correlated, but as has been seen earlier on, despite the relatively high world market prices of cotton in the 1920s, the wealth of the peasantry in Buganda and Bunyoro did not actually increase. The rural reforms of the late 1920s and early 1930s changed the situation, however, by placing limits on the exploitation of the peasants by the chiefs and by granting greater security of tenure to tenants. Although the reforms may not have been successful in generating rapid rural development, they may have succeeded in generating conditions which favoured greater marital stability, small-scale accumulation of wealth, improved standards of living, more frequent marriage, and therefore more live births.

The available demographic evidence indicates that population growth was primarily checked by high perinatal, infant and child mortality, and by marital instability and decline for socio-economic reasons. Even if socio-economic conditions had favoured marriage and childbirth, population growth would have been slow if infant and child mortality had been left unchecked. So far it has been suggested that the young age of mothers and presence of frequent infections contributed to maternal mortality, miscarriages and premature births. The high infant and child mortality cannot be wholly attributed to the same causes, however, and therefore we must look elsewhere for additional explanations for the high death rates among infants and children.

VII Poverty, health and reproduction

INTRODUCTION: POVERTY AND MALNUTRITION IN THE COLONIAL EMPIRE

POVERTY AND DEVELOPMENT

In the mid-1920s the future success and development of the colonial territories was seen as being linked to the state of health of the populations. In the report of the East Africa Commission, health was seen for the first time as a precondition for development: 'We are convinced that the Governments now fully realise that the future of the country is dependent upon the care of the native population, the increase in its effective birth-rate, and, above all, the prevention and cure of disease.'¹

The 1929 Colonial Development Act called for a more systematic approach to the question of colonial development, although perhaps with less philanthropic motives. In order to boost employment in Britain, more receptive colonial markets had to be developed. Wealthy people would purchase and consume more British manufactured goods than poor people. Therefore the standards of living of the colonial subject populations should be improved. In the colonies themselves, on the other hand, the deepening of the worldwide economic depression from 1930 onwards increased poverty and forced governments to consider their priorities and rationalize their policies, which meant that less resources were available to carry out improvements. Regarding medicine, this meant that the times of expensive curative medicine were over and medical policies were formulated along the lines of preventive medicine in order to improve public health. The improvements remained somewhat limited, however, because of the lack of funding.²

MALNUTRITION

Worboys and Arnold have dated the discovery of colonial malnutrition in the British Empire to the inter-war period.³ In India as well as in East Africa, the initial interest in the problem of malnutrition and poverty was sparked by the upsurge of nutrition research in Europe after the First World War, and by the fact that the poor economic performance of the colonies was largely attributed to ill health and consequent low labour productivity. Despite their prevalence, nutritional disorders in the colonies had escaped attention earlier in the twentieth century because of general ignorance of human dietetic requirements and the high incidence of epidemic disease. Only after the epidemics had been brought under control in the 1920s did people begin to look for other reasons behind the prevailing ill health.⁴

¹ Colonial Office. *Report of the East Africa Commission 1925*, 53.

² Havinden and Meredith 1993, 147, 159-160; Colonial Office. *Report of the East Africa Commission 1925*, 53.

³ Worboys 1988a, 208-225; David Arnold, 'The 'discovery' of malnutrition and diet in colonial India', *The Indian Economic and Social History Review* 31 (1) 1994a, 1-26.

⁴ See Arnold 1994a, 16-17.

Malnutrition became evident as a cause of ill-health in Uganda and elsewhere during the 1930s, and investigations undertaken in the tropical colonies - including Uganda - in the course of that decade revealed poverty and ill-health on a massive scale. The prevalence of chronic malnutrition can therefore also be seen as indicative of a much wider problem of poverty affecting the Empire at that time. Though the low standard of living was recognized as the root of the public health problems, illness and malnutrition were approached purely as separate medical, agricultural and dietary matters instead of structural ones requiring political and economic reform. Colonial attempts to deal with the problem before 1939 therefore remained piecemeal and technical rather than intervening in the structures that generated and maintained poverty and deprivation.⁵

CHANGING VIEWS ON HEALTH AND MEDICINE

A SHIFT IN PUBLIC HEALTH POLICY

After the First World War the Uganda Government's health policy entered a new phase. The international ideological climate now put emphasis on 'trust' and demanded that colonies should be developed for the benefit of the indigenous inhabitants. The war had revealed the urgent need to reform former polices, including those concerned with health. The lack of funds during the war had reduced government spending on medical work, and the missionary societies, especially the C.M.S., which had made a major contribution to medical services in the Protectorate, were likewise in grave financial troubles and could not carry on extensive medical work among the African population on the previous scale. There was therefore a need for a more efficient and less costly health policy, particularly since it had become evident during the war and afterwards that the high mortality and morbidity caused by famine and epidemic disease was reducing tax revenues and thus threatening the financial self-sufficiency of the Protectorate.⁶

The large campaigns undertaken against epidemic diseases had put much strain on the slender resources, and - though partly successful⁷ - had rendered the practice of large-scale curative medicine expensive and therefore impossible. Thus it was estimated by 1920 that there was only one medical officer per 400 000 people in the Protectorate, and one poorly equipped hospital bed for every 15 000 people. Government medical services, especially hospitals, were in poor condition and needed refurbishment. More qualified staff were urgently needed, especially African assistants, to work among the people in rural areas. More emphasis on maternity work and funds for this were needed, as it had so far been carried out only by the

⁵ Arnold 1994a, 21-22; Worboys 1988a, 208-225. In 1933 the British Medical Association set its own standards for nutritional requirements for individuals and defined the minimum weekly incomes required to meet them. It turned out, for example, that 9.3 percent of Londoners were living below this new 'poverty line'. See Jerry White, 'The Boyd Orr Survey of the Nutrition of Children in Great Britain 1937-39', *History Workshop Journal* 50, 2000, 205-207.

⁶ Zeller 1971, 208-211.

⁷ Uganda Protectorate. *Medical Department 1924*, 8.

missionary societies and was on a very tenuous basis considering the financial situation.⁸

In 1923, under the new P.M.O., Reford, the medical policy of the Protectorate came under serious criticism for the first time. Reford was of the opinion that the extensive campaign against syphilis, resumed in 1921, which had yielded no significant reduction in the incidence of the disease itself nor in the numbers of stillbirths or general morbidity in the population, had so far been ineffective. He regarded the directing of extensive resources at anti-venereal disease work alone as endangering other medical work:

'Development of general medical work is being gravely hampered through the withdrawal of resources, of funds and staff for venereal purposes. This lack of resources is rendering it increasingly difficult to replace the existing inefficient native hospitals, to build others where they are so badly required, to organize and properly equip those now existing, or to establish an extensive scale County Dispensaries with their requisite trained native staff, which represent, in my opinion, the most practicable and economic means of bringing medical aid within the reach of the mass of the population of the country...'⁹

The anti-venereal disease work was also tearing the Medical Department apart from within. Together with the bacteriological and administrative branches, venereal disease work was better paid than regular medical work. Some medical officers felt frustrated because of this division and inequality in terms of salaries.¹⁰ Reford's reform agenda was to eliminate this discrepancy by diverting more money to general medical work. Keane, in charge of the anti-venereal work, opposed Reford's ideas, and while attending a meeting of the Colonial Advisory Medical and Sanitary Committee in London, he accused Reford and his 'sect' of jealousy, complaining that he had had to endure constant attacks on his establishment by those wishing to amalgamate the venereal and general branches into a single unit. According to Keane, this would have meant a loss of efficiency, for which his establishment was known and envied by others.¹¹ Though Keane was opposed to amalgamation, it was felt in London that such a reorganisation should be approved. Anti-venereal disease work was seen to be essential, however, and it was decided that Keane should have

⁸ Report by Wiggins, s.d., enclosed in Carter to the Secretary of State for the Colonies, 9 Jan. 1920. CO 536/99/13/PRO. Nevertheless, the East Africa Commission was of the opinion in 1925 that Uganda's medical services were the most developed in the region. See Colonial Office. *Report of the East Africa Commission 1925*, 60.

⁹ Reford to the Chief Secretary, 28 March 1923. CO 536/125/249/PRO.

¹⁰ Van Someren and Marshall to the Principal Medical Officer, 10 May 1923, enclosed in Confidential: Jarvis to the Secretary of State for the Colonies, 15 June 1923. CO 556/125/PRO.

¹¹ Extracts from the Minutes of the 173th Meeting of the Colonial Advisory Medical and Sanitary Committee held on 17 July 1923, enclosed in Minutes on Medical Department Co-Ordination of Services and General Reorganisation, 23 April 1923. CO 536/125/249/PRO.

as free hands as possible to continue his work, which had not yielded any results so far but which was expected, at least in his own words, to do so in the future. In practice the reorganisation of the medical department was cosmetic, for since the anti-venereal disease operations were not to be hampered, there would inevitably be a shortage of staff and resources in other fields. No new vacancies were established in general medicine, though vacancies left open for some time were at last filled.¹² The most concrete improvement was the turning of the Mulago venereal disease clinic into a general hospital in 1923, and the commencement of the training of African medical assistants at Makerere Technical School in the same year.¹³

Yet there were some positive results achieved in the field. According to Reford's model, the venereal disease treatment centres in the counties around Buganda were now assuming general responsibilities, which greatly increased the number of attendants in the remote rural areas of Buganda. Zeller claims that this reorganisation of the Government medical service regarding the role of rural dispensaries brought 'immediate' success, since the birth rate in Buganda exceeded the death rate for the first time in 1924.¹⁴ Whether this positive development, as it appeared in the colonial statistics, was actually caused by the reform of the medical policy only is hard to say, but some socioeconomic factors, such as abolition of *kasanvu* labour in 1922 and the higher price of cotton, may have increased the stability and frequency of marriages and contributed to more births.

From the early 1920s onwards the main target of the Government anti-venereal campaign was to curb high infant and child mortality in Bunyoro. It was believed that the extension of anti-venereal disease work along the lines of Buganda would eventually provide a solution to the health problems of the Banyoro. A new hospital was erected at Hoima, and five sub-dispensaries were opened. There were still no positive results to be reported by 1930, however.¹⁵

Despite disappointing results until the early 1930s, both the medical missionaries and the colonial medical department in Uganda were still waging the same war against immorality and venereal disease which they had declared over twenty years before. Though the vital statistics in Buganda had shown an improvement since the mid-1920s, it was clear by 1932 that the population increase in Buganda was largely caused by immigration and not by biological reproduction among the indigenous population.¹⁶ Though not directly admitted, it is obvious that

¹² Extracts from the Minutes of the 173th Meeting of the Colonial Advisory medical and Sanitary Committee held on 17 July 1923, enclosed in Minutes on Medical Department Co-Ordination of Services and General Reorganisation, 23 April 1923. CO 536/125/249/PRO; Telegram from Governor to the Secretary of State for the Colonies, 13 Aug. 1923. CO 536/126/PRO; Minutes on Medical Staff, 13 Aug. 1923. CO 536/126/PRO.

¹³ Iliffe 1998, 33, 44; Zeller 1971, 212, 254-262.

¹⁴ Zeller 212-213; Uganda Protectorate. *Medical Department 1924*, 8-9.

¹⁵ Uganda Protectorate. *Medical Department 1923*, 61; Uganda Protectorate. *Medical Department 1924*, 63; Uganda Protectorate. *Medical Department 1929*, 11.

¹⁶ Uganda Protectorate. *Medical Department 1932*, 30.

this undermined the declared victory for missionary and colonial medicine over African immorality and sickness.¹⁷

In 1933 W.H. Kaunze replaced Keane, the former head of anti-venereal work, as the Director of the Medical Services in Uganda, and it was with Kaunze that the pre-1939 medical policy in Uganda entered its fourth and final phase. Arriving from Kenya, Kaunze had strong humanitarian principles and extensive laboratory and research experience, which he now brought with him to Uganda.¹⁸ As a man reflecting the spirit of his time, he introduced the principle of preventive medicine, which had been greatly debated around Africa, as a new guideline for the medical work in Uganda.¹⁹ He maintained that health was determined by factors such as the economic situation and the level of education, improvements in which would bring about a reduction in ill-health and generate prosperity. Improved environmental hygiene and sanitation would protect infants against infections and infestations and reduce the incidence of water, food and insect-borne diseases. Children and adults would be given advice in schools, which were to play one of the key roles in the health policy drafted by Kaunze. The numbers of sub-dispensaries in rural areas were to be increased in order to bring public health measures to rural dwellers for the first time.²⁰

Kaunze's ideas were welcomed in London, since it was seen that Uganda was lagging behind the other East African countries in public health policy. This marked a clear departure from the earlier policy, which had attributed the ill health and high infant mortality to syphilis. When Kaunze was asked his opinion about the prevalence of syphilis in the Protectorate, he replied that most of the latent cases found actually resembled yaws.²¹ Instead of syphilis, Kaunze saw that the root of ill health was widespread poverty. For him the essential problem was not medical, but economic:

'Health is also dependent on the prosperity of the district, for without wealth the population will not be able to carry out many of the improvements in rural sanitation which are recommended by the medical officer. The co-operation, therefore, of these departments whose primary aim is the increase

¹⁷ The improvements in vital statistics in 1924 were attributed to the extension of the government's medical work after the war and the good work done by the missionary-run maternity centres. See Uganda Protectorate. *Medical Department 1924*, 8.

¹⁸ Uganda Protectorate. *Medical Department 1933*, 5-6; Iliffe 1998, 47-8.

¹⁹ Uganda Protectorate. *Medical Department 1933*, 5-6; Colonial Office. *Report of the East Africa Commission 1925*, 53-54; Memorandum on Departmental Policy by W.H. Kaunze, 24 March 1934. CO 536/181/23570/PRO.

²⁰ Memorandum on Departmental Policy by W.H. Kaunze, 24 March 1934. CO 536/181/23570/PRO; Minutes on the 349th Meeting of the Colonial Advisory Medical Committee, 15 May 1934. CO 536/181/23570/PRO.

²¹ Minutes on Medical and Sanitary Conditions, 15 Oct. 1934. CO 536/181/23579/PRO; Minutes on the 349th Meeting of the Colonial Advisory Medical Committee, 15 May 1934. CO 536/181/23570/PRO.

of production, such as the Agricultural and Veterinary Departments, must be secured. It can be pointed out that a healthy population can produce more than an unhealthy one.²²

The Public Health Ordinance, passed in 1935, was drafted along these lines, and this was viewed as a major improvement in preventive medicine. From now on the local administration and not the overburdened and undermanned Medical Department was responsible for the implementation of sanitary policy in rural areas. One may ask whether the colonial state merely wished to pass the problem into the hands of the Africans themselves and see what they would do with it. On the other hand, it was realized that the new policy would remain ineffective unless the economic position of the peasant population was improved, but the policy formulations remained rather vague in this respect.²³ Nevertheless, it seems that the connection between rural poverty and ill health in Uganda had finally been recognized.

THE DISCOVERY OF COLONIAL POVERTY: THE NUTRITION PROBLEM

The events that led to the gradual 'discovery of colonial malnutrition'²⁴ in the British Empire began in Europe in the early 1920s. Following the First World War, metropolitan institutions were showing greater interest in nutritional deficiency diseases, and curiosity towards this issue was also projected to Africa. The wartime food rationing in Britain had raised questions about the adequate nutrition required for the maintenance of working-class' production capacity, and about the preservation of social stability. Nutrition research was needed in order to set minimum nutritional and wage standards for the working classes, and it was hoped that a knowledge of nutrition would help to resolve the low production levels and labour problems plaguing the tropical colonies.²⁵

The war and its aftermath showed that international cooperation was needed in order to fight the worldwide problems of disease and suffering. Following the devastating worldwide epidemics of typhus and influenza, the League of Nations began its work for the prevention of disease. International conferences in public hygiene and health had been held since the nineteenth century, but now - for the first time - the problems were being dealt with on a truly global scale, which meant that colonies and their health problems were also receiving more attention. The League of Nations had been investigating nutrition and its relation to health in Europe, Asia and the Americas since 1925 and a special Report on Nutrition and Public Health was completed in 1933, signalling a new beginning in health policies worldwide.

²² Uganda Protectorate. *Medical Department 1934*, 62.

²³ Uganda Protectorate. Public Health Ordinance 1935. Government Printer, 1935. CO 536/190/40144/PRO; Uganda Protectorate. *Medical Department 1935*, 5-6.

²⁴ This expression is derived from Worboys (1988a).

²⁵ David F. Smith, 'Nutrition Science and the Two World Wars', in David F. Smith (ed.), *Nutrition in Britain. Science, Scientists and Politics in the Twentieth Century*. London: Routledge 1997, 147, 149-50.

Besides nutrition, improved sanitary conditions were seen as a precondition for better public health, contributing to a rise in the standard of living of rural populations. Nutrition came to be regarded for the first time as an integral part of public health.²⁶

Nutritional surveys undertaken in Britain in the late 1920s and early 1930s seemed to confirm that remarkable results in terms of public health could be achieved when knowledge provided by nutritional science was applied in practice.²⁷ In 1937 a committee under the Ministry of Health reported on the effects of improved nutrition - meaning the increased consumption of 'protective foods' such as milk, green vegetables, fruits and eggs - on human health: 'During the last quarter of a century, the general death rate, the infant mortality rate and the death rate from tuberculosis have fallen. Gross rickets have become less common, chlorosis has almost disappeared, and the physique of school children has been steadily improving.'²⁸

Nutritional research in East Africa had its beginnings in Kenya. Widespread malnutrition had already been discovered in the late 1920s,²⁹ but it wasn't until the early 1930s that, in the midst of the worldwide economic depression, nutrition came to play a larger role in colonial agricultural and medical policies. The question of nutrition arose at that time in connection with the decline in agricultural productivity which had been recorded in East Africa since the late 1920s. Diminishing resources in the colonies demanded new strategies for agriculture and medicine. As elsewhere in the world, nutrition in East Africa became regarded as part of the preventive medicine adopted in an attempt to improve public health.³⁰

Meeting in 1933, the Conference of Governors of East African Territories strongly advocated the addition of milk to African diets to improve the health and

²⁶ League of Nations, *Health Organization*. Geneva 1931, 3-31, *passim*; Worboys 1988a, 212-3; League of Nations, *The Problem of Nutrition. Volume I. Interim Report of the Mixed Committee on the Problem Of Nutrition*. Geneva 1936a, 7-10; League of Nations, *The Problem of Nutrition. Volume II. Report on the Physiological Bases of Nutrition*. Geneva 1936b, 3-4; Milton I. Roemer, 'Internationalism in Medicine and Public Health', in W.F. Bynum & R. Porter (eds.), *Routledge Encyclopaedia of the History of Medicine*, Vol. II. London: 1994, 1424-1425; David Arnold, 'Medicine and Colonialism', in Bynum & Porter 1994b, Vol. II, 1401;

²⁷ League of Nations 1936b, 3; Ministry of Health. *Advisory Committee on Nutrition. First Report*. London: H.M.S.O. 1937, 4-6, 8.

²⁸ Ministry of Health. *Advisory Committee on Nutrition* 1937, 8.

²⁹ See J.L. Gilks & J.B. Orr, 'The Nutritional Condition of the East African Native'. *The Lancet* Vol. I, 1927, 560-562; J. B. Orr and J. L. Gilks, *Studies of Nutrition. The Physique and Health of Two African Tribes*. Medical Research Council. London: H.M.S.O. 1931; Richards and Widdowson 1936, 166-196; Brackett to Eastwood, 14 April 1936. CO 852/59/1/1/PRO; Brackett to the Under-Secretary of State for the Colonies, 25 June 1936. CO 852/59/1/4/PRO. Colonial malnutrition will be discussed further below.

³⁰ Gilks and Orr 1927, 560-562; Worboys 1988a, 212-3; Little 1991, 11; David Anderson, 'Depression, Dust Bowl, Demography and Drought: The Colonial State and Soil Conservation in East Africa during the 1930s', *African Affairs* 83 (332) 1984, 321-43, especially 322; Worthington 1938, 302-303, 463-469.

productivity of the people, and the Pan-African Health Conferences of 1932 and 1935, discussing the improvement of rural standards of living, noted that the economic position of the African peasant had to be improved in order to raise standards of sanitation and hygiene. In 1936 the Conference of Governors of East African Territories requested more effective agricultural planning and mixed farming to achieve these goals. More information about African nutrition was needed, starting from basic metabolism, the nutritional content of foods, etc. The conference echoed the principles accepted at the League of Nations, namely 'the marriage of health and agriculture', and the era of 'the new science of nutrition'. Following the League of Nations resolution on the subject in 1935, a survey of nutrition in the British colonies was launched in 1936.³¹

The nutrition surveys undertaken in British East Africa led to uniform but very unsatisfactory results.³² In general, the surveys showed that nutrition among rural populations seemed to be inadequate, causing much ill health and loss of economic potential:

'Diseases resulting from malnutrition are not confined to one or two Colonies but... [...] prevail almost everywhere among tribal races. In general, it may be said that the native food problem is not so much one of quantity as one of quality. Excess of carbohydrate, deficiency of fat and first class protein and uncertain or negligible supplies of milk and green vegetables are the outstanding features. Such dietary imbalance involves both vitamin and mineral deficiency which is directly responsible for the prevalence of much night blindness, xerophthalmia, keratomalacia, tropical ulcer, goitre and anaemia, and indirectly ... [...] for the high incidence of tuberculosis, pneumonia, and other pulmonary conditions...'³³

It was seen, furthermore, that the only way to improve health in the colonies was by improving the standard of living of the populations, for medicine alone could not solve the problem: 'In an undernourished population, especially if it is subjected to periods of famine or semi-famine, the mere treatment of disease, no matter how effectively and widely carried out, will achieve but negligible results.'³⁴

³¹ Uganda Protectorate. *Medical Department 1935*, 5-6; Conference of Governors of British East African Territories. Conference on Co-Ordination of General Medical Research in East African Territories. Nairobi: Government Printer 1936, 7-8, 10-11; League of Nations 1936a, 7-9, 98; Economic Advisory Council. *Committee on Nutrition in the Colonial Empire. First Report - Part 1: Nutrition in the Colonial Empire*. London: H.M.S.O. 1939, A2; Worthington 1938, 569-570; Little 1991, 11-12.

³² See Colony and Protectorate of Kenya. *Survey of the position with regard to nutrition in Kenya*. Nairobi: Government Printer 1937, 1-3; Uganda Protectorate. *Agricultural Survey Committee. Report of the nutrition sub-committee*. Entebbe: Government Printer 1937; Zanzibar Protectorate. *Nutritional review of the natives of Zanzibar*. Zanzibar: Government Printer 1937.

³³ Nutrition in the British Colonial Empire. Summary of replies, Nov. 1937. CO 323/1571/5/PRO.

³⁴ Nutrition in the British Colonial Empire. Summary of replies, Nov. 1937. CO 323/1571/5/PRO.

The Nutrition Committee of the Economic Advisory Council published its report on nutrition in the British Colonial Empire in 1939. Based on case studies undertaken in the colonies, it clearly stated that the low material standards of living, ill health and low productivity were largely caused by malnutrition. Among the poorly fed populations, who were highly susceptible to infectious disease, production tended to decrease, preventing any overall rise in the standard of living. The main reasons behind the problem were said to be poverty and ignorance, which rendered development efforts futile.³⁵ The solution, according to the report, lay in increased economic opportunities for the people: 'The problem is fundamentally an economic problem. Malnutrition will never be cured until the peoples of the Colonial Empire command far greater resources than they do at the present.' As for Africa, the greatest obstacle to prosperity was believed to be the general 'shortage of the means of subsistence.'³⁶ By linking nutritional disorders to unsatisfactory living conditions and the undeveloped state of regulated colonial economies instead of merely blaming local diets, the report equated poverty, malnutrition and disease, thus finally bringing to light the widespread rural poverty existing in the colonies.

COLONIAL MEDICINE AND DEFICIENCY DISEASE

ADVANCEMENTS IN NUTRITIONAL SCIENCE

At the end of the nineteenth and beginning of the twentieth century it was believed that human and animal diets were made up of carbohydrates, fats, proteins and minerals. The nutritional scientists of the time were debating about the adequate amounts of each component required for a healthy human diet, especially the amount of protein. The supporters of protein-rich diets, who were mainly Germans and Americans, recommended a much greater protein intake than their British colleagues. The British ideas were affected by the fact that within the British Empire at that time, the peoples consuming predominantly vegetarian diets were seen to be physically fitter and to have more stamina than meat-eaters. This led to a neglect of protein in diets and the exultation of vegetarianism by many contemporaries in Britain.³⁷

In order to determine the minimum requirements of each nutritional component for a healthy diet, experimental animals were fed with pure fat, protein and carbohydrates. Although fed properly, the test animals nonetheless often fell sick and died. This led to the conclusion that some undiscovered nutrients must be missing from the experimental diets. It was already known that infants fed with supplements of pure protein, carbohydrate and fat during nutritional crises often died, and experiments with mice had likewise shown that those fed with pure nutritional components soon died, while those fed only with milk survived. Thus milk was seen to contain certain components that were essential for human health. Finally, in 1913, McCollum and Davies managed to isolate a fat-soluble nutrient,

³⁵ Economic Advisory Council, *Nutrition in the Colonial Empire* 1939, 12, 14, 39.

³⁶ Economic Advisory Council, *Nutrition in the Colonial Empire* 1939, 14, 40.

³⁷ McCollum 1957, 191-198.

fat-soluble A, which later became known as vitamin A, from milk. This breakthrough led to the gradual discovery of other fat and water-soluble vitamins and amino acids between 1913 and 1939.³⁸

Wartime had shown how food shortages could play a significant role in victory or defeat and many countries in Europe were struggling with food shortages and malnutrition after the war, a situation which prompted the League of Nations to take action against hunger. The fact that vitamins had only recently been discovered gave a boost to the new theory of the superiority of a high-protein, vitamin-rich milk and meat diet over vegetarianism, which was now regarded in turn as insufficient and unhealthy.³⁹

But advancements in nutritional science did not mean that nutritional disorders in human populations would be rapidly solved. Nutritional deficiencies are generally difficult to detect, affecting individuals in many different ways, and malnutrition is only rarely reducible to a lack of any one single nutrient. Moreover, the prevailing medical ideas in the first decades of the twentieth century, mainly germ theory, did not provide adequate tools for the understanding of deficiency diseases, though it may have increased the interest of scientists in these conditions. Of the well-known deficiency diseases of today, only scurvy was believed to be related to a lack of fresh meat and vegetables in the diet in the nineteenth century. Beri-beri was not considered to be a nutritional disease at all, since people consuming protein, carbohydrates and fats continued to suffer from it. Other causes of beri-beri, including miasmatic ones, were examined up to the turn of the century, when it was deemed to be another 'germ-born disease'.⁴⁰ Similarly, pellagra was treated mainly as a bacterial or parasitic disease before the 1920s. Later, after the discovery of vitamins, lacks of individual vitamins were believed to be behind pellagra and other recognized deficiency conditions.⁴¹ Thus nutritional deficiencies as causes of disease were only beginning to be properly understood in the early 1920s.

LABOURERS, PRISONERS AND DIETS

Nutritional disorders in East Africa were first recognized in Kenya at the beginning of the 1920s. Beri-beri and scurvy, the two common deficiency diseases at that time, were said to be widespread among the African workers who subsisted on limited

³⁸ E.V. McCollum, Elsa Orent-Keiles and Harry G. Day, *The Newer Knowledge of Nutrition*. Fifth edition. New York: Macmillan 1939, 16-26; McCollum 1957, 201-204, 218; Brantley 1997, 57.

³⁹ Brantley 1997, 57-58.

⁴⁰ Carter 1977, 120-122, 127-128, 131; See also Manson 1914, 385-393, 417-418, 431.

⁴¹ Joseph Gillman and Theodore Gillman, *Perspectives in Human Malnutrition. A Contribution to the Biology of Disease from a Clinical and Pathological Study of Chronic Malnutrition and Pellagra in the African*. New York: Grune & Stratton 1951, 16; Sir Philip Manson-Bahr (ed.), *Manson's Tropical Diseases. A Manual of Diseases of Warm Climates*. 14th edition. London: Cassell & Co. 1954, 408-450.

diets and experienced a seasonal lack of fresh food.⁴² The first clinical evidence for the existence of nutritional deficiency diseases came from the Uasin Gishu railway construction project in June 1923, where some workers developed a strange illness. Later, after a lengthy examination, the disease was diagnosed as scurvy.⁴³

Similar cases soon emerged at the Nairobi Prison. A group of Maasai men were kept imprisoned for investigation and trial, and during their imprisonment an 'outbreak', as it was described by J.L. Gilks, the Principal Medical Officer in Kenya, took place amongst them. Their legs were affected to the degree that they were unable to walk or move around by themselves. After careful examination of several cases, Gilks concluded that the disease was 'Rand Scurvy', a deficiency disease frequently afflicting miners in southern Africa.⁴⁴ Another case of scurvy in Nairobi prison was later reported by Carman. A Nandi man was brought to prison in November 1925 to serve a long sentence. After a year he fell ill and was taken to the prison hospital since he was unable to walk because of pains in the legs. His legs were swollen and stiff, and he was also suffering from anaemia. Carman thought the reason behind the prisoner's illness was related to changes in his mode of life: 'In my opinion the most striking common factor operating in all these cases [of scurvy] was the fundamental alteration in their diet and mode of life.'⁴⁵

Existence of scurvy among the labourers and prisoners in Kenya became a subject of medical speculation. Yet no one denied the connections between ill-health and poor diet. Dietary deficiencies were seen to contribute to the prevalence of leg ulcers, for example. Yet there was very little scientific proof regarding the effects of nutritional deficiencies on humans in the tropics. As elsewhere at that time, medical professionals in Africa studying connections between human disease and dietetics were seriously 'handicapped by ignorance.'⁴⁶

Even though the medical professionals might have been ignorant about African diets and nutrition, new information concerning food habits, the composition of diets and prevalent diseases was gradually accumulating. Procter, a medical officer working in the Kikuyu reserve, reported in the mid-1920s that the typical Kikuyu diet '... consists almost entirely of carbohydrates, and is deficient in fat and proteins; this is especially the case with women, who are very rarely allowed

⁴² Colony and Protectorate of Kenya. *Annual Medical Report 1921*, 91-92.

⁴³ C.J. Wilson, 'A Disease of African Natives Suggestive of Scurvy', *Kenya Med. J.* III (5) 1926, 133-146.

⁴⁴ Wilson 1926, 134-135, 137.

⁴⁵ J.A. Carman, 'A Case of Rand Scurvy in a Nandi Native at Nairobi Gaol', *Kenya E. Afr. Med. J.* IV (3), 1927, 91-93.

⁴⁶ Wilson 1926, 137-139, 141-142. Wilson wrote as follows about the current state of nutritional knowledge in western medicine: 'The pathology of the so-called deficiency diseases is still too uncertain for clear definition of causes and symptoms. Only since the discovery of vitamins has it been possible successfully to attempt to classify the various morbid states which result from an inadequate food supply.' (Ibid., 142) By 1926 four recognized 'deficiency diseases', rickets, scurvy, beri-beri and pellagra, were believed to be caused by a lack of vitamins A, C, B and some amino-acids, respectively.

to eat meat. There is also a shortage of salt in the diet, and it is luxury to the Kikuyu.⁴⁷

Though the poor health conditions of the Africans living on native reserves had been known for some time in Kenya,⁴⁸ Procter's report received special attention because of the wider interest in nutrition when it was published. In the spirit of the 'new nutrition' of the 1920s, which favoured milk and meat diets over vegetarianism, the Kikuyu became the main example of a nutritionally deprived population in Kenya. In 1925, when studying the nutritional composition of Kenyan pastures, John Boyd Orr became aware of the health and nutritional differences between the Kikuyu and the Maasai. Together with Gilks he made a survey of the nutrition of the two tribes during 1926. The results, published in 1927, showed that the greater amount of sickness among the Kikuyu was attributable to their protein-deficient diet. Diseases such as tropical ulcer, pneumonia, tuberculosis and dysentery were less frequent among the Maasai, who consumed more milk and meat. Orr and Gilks likewise managed to demonstrate the effects of malnutrition on morbidity and mortality, in that when the typical Kikuyu male labourer's diet, consisting of maize, was supplemented with legumes, vegetables and meat, morbidity and mortality rates fell. The lack of milk and meat in the Kikuyu diet was seen as the main reason for their poor health, and consequently the vegetarian African diets became labelled as deficient, monotonous and unhealthy.⁴⁹

Although they managed to show the impact of nutritional deficiency on health, Orr and Gilks did not speculate about the causes behind the malnutrition. For them, sickness because of malnutrition represented a different kind of economic problem: the widespread ill-health in Africa because of malnutrition held back development and caused significant economic losses to the colonies. They treated malnutrition and its causes purely as a medical and agricultural problem, i.e. a technical problem, independent of any wider political, social and economic implications.⁵⁰

⁴⁷ R.A.W. Procter, 'Medical Work in a Native Reserve', *Kenya Med. J.* III (10) 1927, 288-289.

⁴⁸ Colony and Protectorate of Kenya. *Annual Medical Report 1922*, 64.

⁴⁹ Gilks and Orr 1927, 560-562; Orr and Gilks 1931, 17-64, *passim.*; Worboys 1988a, 210-211; Brantley 1997, 57-58. A parallel nutritional study was undertaken among the Hausa and Fulani in the Gold Coast by McCulloch (see *West African Medical Journal* 3 1929-30). Despite the fact that the evidence from the field indicated that the Kikuyu males suffered to a great extent from ailments such as tropical ulcer, the poor health condition of the Kikuyu attributed to their insufficient nutrition was only partly true. The Kikuyu women proved to be superior as childbearers to the Maasai women, among whom miscarriages and infant mortality were significantly higher. This was explained by the strict food taboos imposed by the Maasai on pregnant women, but no definite explanation was found for the high fertility of the Kikuyu women. It seemed that their vegetable diet contained minerals such as calcium, which secured the successful outcome of pregnancies and helped the women to escape the ailments present in the male population, who received mainly a maize diet while engaged in labour service. See Brantley 1997, 69-70, 72-73, 75-76; Orr and Gilks 1931, 35.

⁵⁰ Orr and Gilks 1931, 64; Worboys 1988a, 211, 220-221. Brantley (1997, 84-85) is correct in saying that Orr and Gilks disregarded the dynamic nature of African diets and failed to see the changes in diet brought about by colonial rule, so that they introduced a somewhat mistaken view of African diets and eating habits.

The Uganda medical department seemed to be well aware of developments in Kenya. In 1925 Keane cited the Kenya Medical Department, saying that the people living on reserves were suffering from protein starvation, which was seen as a major cause of ill health and debility.⁵¹ Like his Kenyan colleagues, Keane was not primarily interested in the welfare of the larger rural population but that of the labour reserve, whose poor physical and health condition reduced productivity. Keane felt that the low wages of the workers in Uganda were a consequence of their low productivity, for the employers had no means to pay higher salaries all the time the work output was poor. It was believed, however, that an improved diet would increase production and that the current maize diet should be supplemented with meat and beans, i.e. its protein content should be increased.⁵²

Following the example of Kenya, the Uganda Medical Department also took a closer look at the diets of prisoners and labourers. The physical condition of the workers in labour projects had for a long time been unsatisfactory. Beri-beri and scurvy were frequently recorded, and the report of a pellagra outbreak in 1928 brought the nutritional conditions in prisons under investigation.⁵³ It turned out that there had previously been outbreaks of scurvy-related disease in prisons in 1919 and 1924. Over thirty cases of pellagra were reported in 1928 in the Luzira, Kampala and Mbale prisons, sites where the previous outbreaks had also taken place.⁵⁴ These outbreaks seem to have been largely dismissed, since no inquiry concerning nutritional deficiency diseases in the Uganda prisons had been undertaken prior to 1928, when it was prompted by the high morbidity and consequent increase in prison mortality. The nutritional deficiencies found in prisons, together with the coincident food shortages in Buganda, made the linkages between poor nutrition and ill health more obvious.⁵⁵

Up to April 1925 the prisoners' diet in Buganda resembled that consumed by the majority of the people, being based on bananas, sweet potatoes, groundnuts, beans and salt. Symptoms of food deficiency in prisoners subsisting on this diet were first recorded in November 1924: 'Twenty prisoners were affected in the course of two days the disease being characterized by local oedemas, cardiac weakness..., ...petechial haemorrhages on the inner aspects of the thighs and haemorrhage between the teeth on pressure over the gums.'⁵⁶ The disease was diagnosed as

⁵¹ G.J. Keane, 'Memorandum on the Relation Between Medico-Hygienic Considerations and Labour Conditions', in Uganda Protectorate. *Medical Department 1925*, 72.

⁵² Keane 1925, 71-72, See also Brantley 1997, 74.

⁵³ Uganda Protectorate. *Medical Department 1926*, 89; Uganda Protectorate. *Medical Department 1927*, 33.

⁵⁴ Arthur J. Boase, 'The Incident of Pellagra in Uganda', in Uganda Protectorate. *Medical Department 1928*, 89.

⁵⁵ Boase 1928, 89; J.P. Mitchell, 'Observations on Health in Relation to Diet in H.M. Central Prison, Uganda', *E. Afr. Med. J.* 10 (2) 1933, 38-58, especially 40-42.

⁵⁶ Mitchell 1933, 39.

dropsy, allegedly caused by the inadequate supply of sweet potatoes for some months preceding the outbreak. Because of the unreliability of the sweet potato supply, maize diet was introduced in 1925. Although it was known that maize was deficient in both proteins and vitamins and was usually only used as a famine crop, it was still to form the basis of the prisoners' new diet.⁵⁷

In 1926 the inmates of the Kampala prison were intensively engaged in constructing a new, larger prison, and food production in the prison was seriously neglected during the construction work, so that food supplies were soon seen to be running out. Because of the general food shortage in Buganda, the supply of fresh food had run out completely by early 1928. Thus pellagra and xerophthalmia broke out among the prisoners, since they were limited almost entirely to a maize diet.⁵⁸ When investigated in 1928, the prison diet was found to be short of calcium, and the amount of calories was too low for persons expected to perform heavy physical labour. Experiments with different types of diet proved that the addition of meat and beans improved the prisoners' health, and when locally produced fresh food was added, the health of the prisoners improved considerably. Sweet potatoes and sesame were seen to be most beneficial in this sense. The final report of the 1928 investigation concluded:

'The dietetic advantages of local produce, notably sweet potatoes, over imported maize flour are clearly established. The utilization of local foodstuffs should therefore be encouraged, and, if revision of the scale of diet is contemplated a greater latitude of choice should be allowed to local authorities. In this connection it appears desirable that each prison should be made self supporting and that the first claim on prison labour should be for purposes of food cultivation.'⁵⁹

Before the improvements, a prisoner's diet in Uganda had depended on his 'race', meaning that Europeans, Asiatics and Arabs all had their own, more diverse and nutritious diets. Pellagra, or any other nutritional deficiency disease, was never reported among the 'non-native' prisoners.⁶⁰ A similar practise of selective diets was followed in the government hospitals.⁶¹

Not all prisons suffered from similar ill health conditions, however, for Mengo Gaol, which was supervised by the Buganda Local Administration, was free of the deficiency diseases present in the Central Prison. The inmates were fed with

⁵⁷ Boase 1928, 92. A maize diet was introduced partly for political reasons. The white planter community in Kenya needed a market for their maize, and Uganda was one place to which the produce was exported. See van Zwanenberg and King 1975, 205.

⁵⁸ Boase 1928, 92; Mitchell 1933, 40-41.

⁵⁹ Boase 1928, 94.

⁶⁰ Uganda Protectorate. *Medical Department 1925*, 54; Boase 1928, 90.

⁶¹ Uganda Protectorate. *Standing Orders for the Medical Department*. Entebbe: Government Printer 1930, 61.

local produce, and sweet potatoes played a significant role in the diet. The general health of the prisoners was found to be remarkably better than those in the government prisons.⁶² The benefits of local food compared with a maize diet had again been clearly demonstrated.

Towards the end of the decade deficiency diseases such as scurvy and pellagra were often diagnosed in Uganda and elsewhere in East Africa. The fact that nutritional deficiency diseases were prevalent among prisoners in Buganda, who consumed more or less the same diet as the bulk of the rural population, apparently made the medical authorities more alert about the linkages between diet and ill health. Nutrition and nutritional deficiencies were still far from being completely understood, and the medical professionals had very little information regarding the diets and food habits of the people, food preparing practises, the nutritional contents of the foods consumed, etc. Even so, the opinion in Kenya and Uganda was that nutritional deficiencies were 'more or less generally' to be found there.⁶³

TROPICAL ULCER AS A DEFICIENCY DISEASE AND A PUBLIC HEALTH PROBLEM

One remarkable achievement of the Orr and Gilks study was that it recognized tropical ulcer as the most common symptom of nutritional deficiencies in Kenya.⁶⁴ Unlike the situation today, tropical ulcer was extremely common in Uganda and elsewhere in central and eastern Africa in the first half of the twentieth century, as it had apparently been earlier. Today, when encountered, it is referred to as a poor man's disease, as it affects people living in unsanitary conditions in the tropics and subsisting on low-protein diets deficient in vitamins, especially those of the B group.⁶⁵ No other disease except for pellagra was associated with nutritional deficiencies in a more direct manner than tropical ulcer in Uganda from the late 1920s up to 1939.⁶⁶

Tropical ulcer was frequently encountered by the earliest European travellers in Central and Eastern Africa. Ulcers afflicted caravans and expeditions, which were usually chronically short of food and struggling on the brink of starvation. They affected Europeans and Africans alike when living on a scanty, monotonous diet under poor hygienic conditions. One of the most horrific descriptions of the difficulties faced by expeditions was written by P.H. Parke, a medical officer on Stanley's expedition to rescue Emin Pasha in the late 1880s. After months of struggling on its way through the forests of the Congo towards Uganda, the

⁶² Mitchell 1933, 47.

⁶³ J.L. Gilks, 'Dietetic Problems in East Africa', *E. Afr. Med. J.* 10 (4) 1933, 254-265.

⁶⁴ Orr and Gilks 1931, 53-63.

⁶⁵ Tropical Ulcer. The Ross Institute Bulletin No. 4. London School of Hygiene & Tropical Medicine 1973, 3-5.

⁶⁶ See Uganda Protectorate. Agricultural Survey Committee. *Report of the Nutrition Subcommittee*. Government Printer, Entebbe, 1937, 5-16 *passim*.

members of the expedition were in appalling condition. Unable to procure adequate food, the African porters and soldiers as well as the European officers were slowly starving. Parke tried to ease the suffering as well as he could, a task that was impossible in the absence of medicine, fresh water and fresh food. Overburdened amidst of all misery, he faithfully continued to make notes on the diseases and symptoms for his diary. Like all the European staff, he was suffering from severe ulcers, which he related directly to malnutrition: '... our ulcers are in great measure the result of malnutrition... ...When the resistance of the tissues has been reduced to a certain (low) level, every slight abrasion of the skin refuses to heal - especially if on the legs - and becomes a centre of a spreading sore.'⁶⁷

The prevalence of ulcers, and of other diseases, is understandable under extreme conditions such as those experienced by Parke and his companions, but ulcers were also met under normal conditions in East Africa at that time. They were widespread among the peasant population of the Uganda Protectorate, although there are not many descriptions of their nature from the beginning of the twentieth century. Missionaries reported large amounts of ulcers, and the C.M.S. hospital in Toro had to erect a special ward for ulcer patients in 1910.⁶⁸ Most of the ulcer cases in the government hospitals were treated as out-patients, i.e. they were not given a bed in a hospital. They were usually diagnosed either as syphilitic or as common skin disruptions along with other skin diseases,⁶⁹ and it is therefore difficult to estimate the exact number of ulcer cases treated per year. Almost 90 per cent of the patients attending the C.M.S. dispensaries in Buganda in 1909 were suffering from ulcers, although the condition was quite often diagnosed as being caused by syphilis.⁷⁰

In Kenya, Orr and Gilks found tropical ulcer to be prevalent among the mainly vegetarian Kikuyu, but quite rare among the Maasai.⁷¹ Ulcers appeared to be more common at the times of the greatest seasonal food shortages. Injuries were a common cause of ulcers, and though improved physical conditions seemed to contribute to the healing process, no particular foodstuff or dietary treatment was found to quicken the recovery. Attempts to produce tropical ulcer by experimental inoculation failed, thus confirming that it was not a bacterial agent that was

⁶⁷ T.H. Parke, *My Personal Experiences in Equatorial Africa as Medical Officer of the Emin Pasha Relief Expedition*. London: Sampson Low, Marston & Co. 1891, 179-180, 208. Moffat writes in his diary that ulcers were the most common ailment affecting troops during the Bunyoro campaign in 1890s. See Moffat's diary, 1 Jan. 1894. MSS. Afr. s. 1792/34/73/RH.

⁶⁸ *Mercy and Truth* 2, 1898, 31; *Mercy and Truth* 14, 1910, 208-9.

⁶⁹ Uganda Protectorate. *Medical Department 1912*, 33, 67.

⁷⁰ A.R. Cook, J.H. Cook & E.N. Cook, Report of the Medical Sub-Conference, s.d., MH/A/ACML.

⁷¹ Kikuyu women were an exception, as ulcers were less frequent among them than among Kikuyu men. See Orr and Gilks 1931, 35; Brantley 1997, 78.

responsible for the condition. Therefore Orr and Gilks were willing to believe that a deficient diet was the main contributor to its high incidence.⁷²

Around the same time as Orr and Gilks were conducting their research in Kenya, the Uganda Medical Department was devoting attention to tropical ulcer for the first time. In 1926, N.C. MacLeod, a medical officer working in the government's Railway Extension Project, complained about the ulcers afflicting the workers. Work output was decreasing because of the high number of disabled, and MacLeod proposed that an improved diet would be likely to reduce the workers' susceptibility to the disease.⁷³ MacLeod's remark seems to be the first attempt to connect the ulcer problem with diet in Uganda (similar conclusions were reached by McCulloch in the Gold Coast around the same time).⁷⁴ In 1929 the Medical Officer at Mulago Hospital, A. Forbes-Brown, paid attention to the high prevalence and debilitating nature of these ulcers, especially in Buganda. He suspected, like his East and West African colleagues, that the low protein content of the diet was responsible for the situation, although he did not have any further evidence to back his assumption. Similar reports were coming from other parts of the Protectorate, where observations on different kinds of ulcers were made. Some were seen to be caused by yaws, guinea worm and injuries, but there seemed to exist a separate class of ulcers the cause of which remained unknown and which did not heal when treated with anti-yaws drugs.⁷⁵

Research into tropical ulcers was undertaken in Uganda by Leonard Loewenthal, an officer of the Medical Department. Relying on his own experiences and those of Forbes-Brown and McCullough, he wrote two articles on this topic which appeared in the *East African Medical Journal* and *The Lancet* in 1932.⁷⁶ At that time there existed two theories about the origin of tropical ulcers, a bacterial theory and a dietetic theory, i.e. an external cause versus deficiency. Following Orr and Gilks, Loewenthal denied the possibility of bacterial infection as a cause, and regarded such ulcers as being clearly related to nutrition. He explained that '[t]he undoubted fact that tropical ulcer may assume epidemic proportions should not prejudice opinion too strongly in favour of the bacterial theory, without investigation of the general conditions obtaining at the time of such epidemics.'⁷⁷ Having studied hospital records, Loewenthal suggested that tropical ulcer was primarily a disease of

⁷² Orr and Gilks 1931, 55-63. Many of the remarks made by Orr and Gilks, particularly those regarding seasonality and the role of a bacterial agent, have been confirmed by more recent research. See *Tropical Ulcer* 1973, 3-5.

⁷³ Uganda Protectorate. *Medical Department* 1926, 89.

⁷⁴ McCulloch's article appeared in the *West African Medical Journal* (II/1928), but unfortunately this paper was unavailable for use here.

⁷⁵ Uganda Protectorate. *Medical Department* 1929, 107-8.

⁷⁶ L.J.A. Loewenthal, 'Calcium Treatment in Tropical Ulcer', *E. Afr. Med. J.* 9 (5) 1932a, 136-145; L.J.A. Loewenthal, 'Tropical Ulcer as a Deficiency Disease', *The Lancet* 223, 1932b, 884-892.

⁷⁷ Loewenthal 1932b, 889.

the lower social classes, for it was virtually absent in the upper class. He drew attention to the foods consumed by different classes in order to highlight the nutritional differences between the rich and the poor. He found that the average diet of a chief contained bananas, sweet potatoes and milk, supplemented weekly with beef and chicken, and occasionally with rice and eggs. The peasant household consumed mainly bananas and sweet potatoes, and if they had any cattle, they could supplement their diet with milk. Beef and other meat was consumed rarely, maybe once a month or even less. Beer, made of bananas, was consumed by both classes. Loewenthal noticed that the wealthy Baganda who could afford meat, milk and fish rarely suffered from ulcers, but they were very common among the peasants, and especially the poor *banyaruanda* workers subsisting mainly on a vegetable diet. On studying the nutritional content of the diets further, Loewenthal found that the average peasant diet was also deficient in calcium and fats, unlike that of the higher social classes, and that calcium supplementation often proved successful for treating tropical ulcer.⁷⁸

Thus, the Uganda Medical Department had become convinced by 1934 that tropical ulcer was clearly related to nutritional disorders:

'...[T]hese lesions will continue to occur until the general nutrition of the people is greatly improved, for experience and investigation have shown that the places where the people live on a diet which is adequate in protein, fat, carbo-hydrates, minerals and vitamins, ulcers are of rare occurrence.'⁷⁹

It appears from Loewenthal's discussion that tropical ulcer was not as strongly gendered a disease in Uganda as in Kenya. It affected both sexes, especially in adolescence, and could result in death if not treated. He also noted that tropical ulcer had frequently been confused with yaws and syphilis in the past. In terms of severity and prevalence, he saw that the disease was comparable to the other great scourges afflicting the people in the Protectorate: '... there is good reason to suppose that in its mortality and morbidity tropical ulcer may take its place with malaria, plague, and trypanosomiasis.'⁸⁰ Loewenthal's research into tropical ulcer was actually the first nutritional survey undertaken in Uganda, although the poor diet of the average Muganda was nothing new, for some missionaries had claimed in 1895 that the local diet based on bananas and sweet potatoes could not support Europeans under Ugandan conditions. Furthermore, the diet was said to make the Baganda physically the 'weakest tribe' in the whole of Uganda.⁸¹

⁷⁸ Loewenthal 1932b, 890-1; Loewenthal 1932a, 139. Calcium is obtained from milk products, dark-green vegetables and dried legumes. A lack of it may cause bone deformations and stunted growth. See Scrimshaw and Young 1976, 64.

⁷⁹ Uganda Protectorate. *Medical Department 1934*, 8.

⁸⁰ Loewenthal 1932b, 889.

⁸¹ Hanlon to Henry, 21, 24 & 25 Nov. 1895. UGA/1/A/3/MHM.

Research into tropical ulcer was also undertaken elsewhere in East Africa. In 1933 Connell and Buchanan of the East African Medical Service described ulcers on inhabitants of Dar es Salaam, again finding them most prevalent among the lower socioeconomic classes. Discussing their aetiology, they saw '...that the real explanation is the production of an ulcer 'diathesis' due to the unvaried and ill-balanced nature of the poorer natives' diet and the absence from that diet of such 'essential luxuries' as meat and good, fresh vegetables.'⁸²

This ulcer diathesis meant, according to Connell and Buchanan, that in the tropics a seasonal lack of water and some nutrients could easily undermine the physical condition and general health of the individual so that even the slightest injury to the skin refused to heal and eventually developed into a debilitating ulcer. This reflected the observations made by Parke 45 years before. Connell and Buchanan also drew attention to the sex difference in the incidence of ulcers, which was something that Loewenthal had not been able to do satisfactorily. According to them, the higher incidence of ulcers in African men indicated the differences in diet between the sexes. The women's diet was seen to contain some 'essentials' which were lacking from that of the men. But it was realized in a later study by Buchanan and Sanderson that the incidence of ulcers was also connected with liability to minor injuries, men and boys being more susceptible in this sense. On the other hand, the ulceration had begun in many cases from small pimples, which had burst without any external cause, and the habit of neglecting small skin lesions was seen to contribute to the prevalence of ulcers. Buchanan and Sanderson also found that the rate at which the ulcers healed was not significantly faster in people who were given special treatment with a diet rich in vitamins and proteins than in those who subsisted on an ordinary diet and received special treatment for the ulcers, involving iodoform and zinc oxide. Buchanan and Sanderson were therefore able to conclude in 1935 that

'... it would be easy to argue, for instance that malnutrition due to dietetic deficiency or dysbalance was primarily responsible for the gross ulcerations: but while we hold with the theory of an 'ulcer diathesis' being a factor of importance we note the lack of response to a diet rich in vitamins, and we remember that the poor-class African is notoriously prone to neglect early skin lesions. This neglect may be just as important as his presumably inadequate diet.'⁸³

In 1939 Corkill published a paper about tropical ulcer in the Sudan which seemed to confirm the nutritional deficiency theory.⁸⁴ This was the most analytical and thorough of all those published on the topic, for he was able to utilize all the

⁸² W.K. Connell and J.C.R. Buchanan, 'Ulcers in the African Native. A Preliminary Investigation', *Trans. R. Soc. Trop. Med. Hyg.* 27 (3) 1933, 239-254, especially 248-249.

⁸³ J.C.R. Buchanan & Ian Sanderson, 'Ulcers in the Native African. A Further Investigation', *Trans. R. Soc. Trop. Med. Hyg.* 28 (5) 1935, 505-510, on page 508.

⁸⁴ N.L. Corkill, 'Tropical Ulcer: Observations on its Treatment and Cause', *Trans. R. Soc. Trop. Med. Hyg.* 32 (5) 1939, 519-532.

previous literature on the subject, include some papers from outside Africa. Corkill found that tropical ulcer was a manifestation of malnutrition and related it to deficiencies in protein and vitamins A, B2 and C, and to a relative excess of carbohydrate in the diet. Like his colleagues, Corkill found that the incidence of ulcer was related to sex, age and occupation, inasmuch as these factors controlled the diet and exposure of the individuals. He also shed light on the seasonality observed in the incidence of ulcers and the effect of malaria on the healing process. Corkill noticed that the highest incidence of ulcers coincided with periods of climatic stress, i.e. they occurred at the end of the dry season, when food was scarce and the new crop had not yet been harvested, as was also the case with pellagra. Malaria affected the rate of healing of these ulcers, and ulcers were also seen to be more common in areas where malaria was prevalent. Corkill suspected that this was either because of the anti-malarial toxin, which increased endogenous protein metabolism (i.e. the body's proteins were used in defence against the malaria parasite), anaemia, or splenic dysfunction in an immunological sense, or all of these together.⁸⁵

Corkill did not comment in his paper on the possible connection between syphilis and tropical ulcer as his colleagues had done. Connell and Buchanan had pointed out in 1932 the unreliability of the Wasserman and Kahn tests for diagnosing the cause of the ulcers: 'We are inclined to think that the presence or absence of a positive serological reaction is of very little significance in the pathology of the true *ulcus tropicum* [sic.]... ..We are well aware that arsenical preparations have frequently been extolled for their alleged curative influence on *ulcus tropicum* [sic.], but we have ourselves found them singularly ineffective for the treatment of this condition, even in cases where the Wasserman and Kahn reactions have been positive.'⁸⁶ Buchanan and Sanderson shared this view.⁸⁷

These remarks are of great importance, since they suggest that tropical ulcer in Uganda was frequently diagnosed as syphilis by colonial and missionary doctors. Doctors and scientists were having great trouble in distinguishing between the different kinds of *treponema* causing syphilis, congenital syphilis and yaws. Thus Keane noted in 1925 that '...[t]he differential diagnosis between yaws and syphilis is extremely difficult in many cases.'⁸⁸ Similarly, there were problems relating to the origin of ulcers even though they were considered syphilitic: 'Simple ulcers form the

⁸⁵ Corkill 1939, 531; N.L. Corkill, 'Pellagra in Sudanese Millet-Eaters', *The Lancet*, Vol. 226, 1934, 1387-1390. Orr and Gilks had not found any connection between tropical ulcer, malaria and intestinal parasites. See Orr and Gilks 1931, 53-56.

⁸⁶ Connell and Buchanan 1933, 249-250.

⁸⁷ Buchanan and Sanderson 1935, 506.

⁸⁸ Keane 1925, 220. See also 'The Relation of Yaws to Syphilis' (editorial), *J. Trop. Med.* 4 1901, 115; Hugh Stannus, 'Yaws and Syphilis: A Critical Review', *Trop. Dis. Bul.* 23 (1) 1926, 1-15; J.L. Gilks, 'The Incidence and Character of Syphilis and Yaws in Kenya', *Ken. E. Afr. Med. J.* 8 (4) 1931, 131-142; R.U. Gillan, 'The Treatment of Yaws and Syphilis', *Ken. E. Afr. Med. J.* 8 (9) 1931, 246-255; John A. Carman, 'A Case of Simultaneous Infection with Yaws and Primary Syphilis', *Trans. R. Soc. Trop. Med. Hyg.* 29 (3) 1935a, 261-263; J.A. Carman, 'The Relationship of Yaws and Syphilis. Are They two Diseases or One?', *E. Afr. Med. J.* 11 (5) 1935b, 135-149.

commonest single sign of late syphilis, both in men and in women. The ulcers are single, and occur most commonly on the legs. Syphilis accounts for 80 to 90 per cent of the ulcerations met with in this hospital [Mulago], and clinically they are often indistinguishable from non-specific ulcerations.⁸⁹ In contrast to Uganda, investigations undertaken in Kenya in the late 1920s and early 1930s showed that syphilis had extremely little, if anything, to do with the prevalence of ulcers.⁹⁰ Moreover, the symptoms typical of tertiary syphilis in Europe, mainly neurological disorders, were not usually encountered in Uganda or elsewhere in East Africa. Instead, the most typical symptoms of so-called tertiary-stage syphilis in Uganda were small ulcers, mainly on the legs, which shows the difference in the clinical picture.⁹¹

MAIZE, PELLAGRA AND KWASHIORKOR: A COLONIAL SCIENTIFIC CONTROVERSY

While working among the Kikuyu in 1926, Procter came across a disease previously unknown to him:

'The... ..disease occurs only in quite young children; the child is nearly always of an extraordinary light colour and is usually brought up on account of swelling of the feet. The only history obtainable appears to be that in a number of cases there had been slimy motions for some time. As the disease progresses, the child becomes paler in colour and the pigment seems to be concentrated into a curious black desquamation which is most noticeable on the arms and legs; cracks and sores are often seen at the bends of the elbows and knees, and there may be general oedema. The child, as far as my information goes, nearly always dies. These cases are usually seen at out-dispensaries, and are very rarely brought to the hospital, but in the one or two cases which have been treated at Fort Hall, hookworm treatment produced no benefit.'⁹²

Although aware of the deficient, mainly maize-based diet of the Kikuyu, Procter did not enter into any speculation as to whether what he saw was actually some form of nutritional deficiency disease affecting children. His findings gained new significance in the early 1930s, however, as more evidence on serious health problems related to a maize diet began to emerge around Africa. The stimulus for the discussion came from West Africa, more specifically from the Gold Coast. Cicely D. Williams, an officer with the Gold Coast Medical Department, reported on

⁸⁹ W. Leslie Webb & Margaret Holliday, 'Signs and Symptoms in Late Syphilis in Buganda', *Trans. R. Soc. Trop. Med. Hyg.* 21 (1) 1927, 39-48, especially 43.

⁹⁰ Orr and Gilks 1931, 54; Gilks, 1931, 141.

⁹¹ Webb and Holliday 1927, 43-4.

⁹² Procter 1927, 288-289.

her experiences with a recent disease that was rampant amongst the children in Accra. She did not have a name for the disease, but she saw that it was clearly connected with inappropriate feeding. She noted that many small children were fed with maize porridge, and as a rule they developed this sickness sooner or later. The 'syndrome', as Williams called it, was characterized by oedema of the hands and feet, wasting, diarrhoea, irritability, sores in the mucous membranes and skin desquamations. The disease affected mainly children between one and four years of age, usually appearing some time after the child had been weaned. She suspected that the poor diet of weaned children, consisting almost entirely of maize, was a precondition for the disease, which, if not properly treated in the early phase, was in most cases fatal. The most visible symptom was a rash-like skin disruption in which the pigment formed patches and skin seemed to lose its colour and eventually peeled off, leaving the surface patchy, pink, red and black.⁹³ Williams concluded that the disease bore many similarities to pellagra, which was frequently met with in the adult population, but she felt that it was nevertheless something else, although she did not explain how she could tell the difference between the two conditions.⁹⁴

Similar findings regarding maize and pellagra had also been made in other parts of the tropical world. French medical professionals in Indochina had reported a disease seemingly akin to that found by Williams in 1926,⁹⁵ and the disease noted by Procter in Kenya also resembled that of Williams. In Uganda the recorded cases of pellagra had been clearly connected with the high proportion of maize in the diet, as elsewhere in East Africa.⁹⁶

Perhaps because of familiarity with the clinical features, Williams' report aroused interest among the British medical professionals in Africa. The most distinguished critical response came from Hugh Stannus, a British doctor with a considerable reputation and career in medicine in Africa. He was convinced that the disease Williams had encountered, which she had later named as kwashiorkor, was actually pellagra, which was well-known to himself from his previous work in Nyasaland between 1905 and 1910.⁹⁷ Stannus' criticism pointed to the remarkable similarities between the disease described by Williams and pellagra. In his view,

⁹³ Gold Coast Colony. Annual Medical Report 1931-2, Appendix E. Deficiency diseases in infants, 93-99. B1/Box 6/2/PP/CDW/WTL; Cicely D. Williams, 'A Nutritional Disease of Childhood Associated with a Maize Diet', *Archives of Disease in Childhood* III, 1933, 423-426.

⁹⁴ Gold Coast Colony. Annual Medical Report 1931-2, Appendix E. Deficiency diseases in infants, 94-95. B1/Box 6/2/PP/CDW/WTL; Williams 1933, 431-432. See also Passmore and Eastwood 1986, 320-321.

⁹⁵ Normet, 'La "Bouffissure d'Annam"', *Bulletins de la Société de Pathologie Exotique* 19 1926, 207-213.

⁹⁶ Gilks, 1933, 257-258.

⁹⁷ Hugh S. Stannus, 'A Nutritional Disease of Childhood Associated with Maize Diet - and Pellagra', *Archives of Disease in Childhood* 9 1933, 115-118; Hugh S. Stannus, 'Pellagra in Nyasaland', *Transactions of the Society of Tropical Medicine & Hygiene* Vol. 5/1911-12, 112-119; Cicely D. Williams, 'Kwashiorkor. A Nutritional Disease of Children Associated with Maize Diet', *The Lancet*, Nov. 16, 1935, 1151; Vaughan 1991, 30-31.

Williams had described a rather typical case of infantile pellagra and nothing else. He further protested at the use of the term 'kwashiorkor', which Williams derived from the local vernacular, meaning 'the disease the deposed baby gets when the next one is born.'⁹⁸ According to Stannus, this was also 'a common superstition' in other parts of Africa, where the birth of a new baby often meant the death of the older one regardless of the nature of the disease.⁹⁹

Stannus' criticism seemed justified, for the almost identical clinical pictures of the proposed kwashiorkor and pellagra would make correct diagnosis very difficult. Williams' diagnosis received further support in the Gold Coast, however, where this new disease, once recognized, was gaining more attention. Dyce Sharp, a medical officer there, reported cases similar to those found by Williams, and likewise noted that skin lesions were common in areas of pressure and that the skin tended to peel off, contrary to the situation with pellagra, though Stannus had argued that similar peelings were also common in pellagra. Sharp found fatty liver to be a common condition in cases of this disease, something not met with in pellagra but which later came to be regarded as one of the typical symptoms of kwashiorkor.¹⁰⁰

Early in 1935 the findings of Williams and Sharp began to attract wider attention in East Africa. Carman drew the strings of evidence together and claimed that the disease described by his West African colleagues was also to be found in Kenya. He traced its first clinical description to observations made by Dr. Shaw in 1933, to which observations made by other doctors provided a continuation. There was some confusion regarding the nature of the disease, however, as Shaw and his colleagues in the field felt that it had nothing to do with toxication, as had been suggested by Gillan but was caused by 'some form of food deficiency'.¹⁰¹

Soon after the publication of Carman's paper, similar cases were reported at the C.M.S. Mengo Hospital by Dr. Stones, who recalled that the earliest such cases had appeared in Kampala in 1929.¹⁰² The Uganda Medical Department also reacted to the increasing number of reports supposedly relating to the same 'unknown' disease. It was once again Loewenthal, whose interest in deficiency diseases had been sparked off by his studies of tropical ulcer, who summarized the present situation in the ongoing debate inside and between the East and West African medical departments:

⁹⁸ Williams 1935, 1151; Stannus 1933, 118.

⁹⁹ Hugh S. Stannus, "'Kwashiorkor'", *The Lancet*, Nov. 23, 1935, 1207-1208. A similar belief was also held by the Baganda. See Anne Burgess & R.F.A. Dean (eds.), *Malnutrition and Food Habits. Report of an International and Interprofessional Conference*. London: Tavistock 1962, 25.

¹⁰⁰ N.A. Dyce Sharp, 'A Note on a Nutritional Disease of Childhood', *Trans. R. Soc. Trop. Med. Hyg.* 28 (4) 1934, 411-12; Stannus 1935, 1207-8; H.C. Trowell, J.N.P. Davies, R.F.A. Dean, 'Kwashiorkor. II. Clinical Picture, Pathology, and Differential Diagnosis', *Brit. Med. J.* 2 1952a, 800.

¹⁰¹ John A. Carman, 'A Nutritional Disease of Childhood', *Trans. R. Soc. Trop. Med. Hyg.* 28 1935c, 665-666; Robert U. Gillan, 'An Investigation into Certain Cases of Oedema Occurring Among Kikuyu Children and Adults', *E. Afr. Med. J.* 11 (3) 1934, 88-98.

¹⁰² R.Y. Stones, 'Correspondence', *E. Afr. Med. J.* 11 (1) 1935, 113-114.

'Dr. Stannus is probably our leading authority on the subject of pellagra and other food deficiency diseases in African natives, and in the light of his reasoned argument I submit that these cases be regarded as pellagra until evidence to the contrary is more convincing. The possibility of other food deficiency diseases co-existing with pellagra must, of course, be born in mind; "Pink Disease" is now commonly regarded as a manifestation of infantile pellagra, and there is no reason why a series of cases drawn from the poorest classes should not present signs referable to "Pink Disease", adult pellagra and beri-beri.¹⁰³

One can sense from Loewenthal's statement the confusion which had evolved around the subject, even though it was hardly anything special when the clinical picture of a new disease was gradually forming. The dispute between Williams and Stannus remained unresolved, and by 1935 the majority of the medical professionals in Uganda and Kenya seemed to accept Stannus' opinion, as he was regarded as the leading nutritional specialist in the Empire. In the same year Williams was transferred from the Gold Coast to Malaya, which undermined her investigations into the disease in Africa and further consolidated the position and views held by Stannus.¹⁰⁴

There was one man, however, who was not satisfied with the proposed diagnosis and continued the investigations. H.C. Trowell had first come in contact with the disease while working at the old King's African Rifles (K.A.R.) hospital in Nairobi. From 1930 onwards his responsibilities included the children's ward, where he first recognized a strange condition which he later named the 'X-disease'.¹⁰⁵ Trowell described his first encounter with the strange disease: 'There were about two children in each bed, and one underneath... quite many had brown hair. Some had swollen legs, not many. Some were crying, moaning, as I stood there with the hospital's one hurricane lamp.'¹⁰⁶

At first Trowell had no idea what the disease was. All he knew at that time was that the children with black spots in their skin would mostly die within a short time. Autopsies did not reveal anything about the cause of death, and frequently pneumonia, malaria, or intestinal parasites - if traces of any of them were found in the post mortem - were placed on record as a cause of death. After Williams had reported a similar skin condition in the Gold Coast, which Stannus declared to be pellagra, Trowell named the new disease 'infantile pellagra'.¹⁰⁷

¹⁰³ L.J.A. Loewenthal, 'Correspondence', *E. Afr. Med. J.* 11 (1) 1935, 30.

¹⁰⁴ H.C. Trowell, 'Food, Protein and Kwashiorkor', *Uganda Journal* 21 1957, 81-90, especially 85-6; J.H. Sequeira, 'Pellagra in East Africa', *E. Afr. Med. J.* 14 (10) 1938, 316-327.

¹⁰⁵ Trowell 1957, 84, 86; Iliffe 1998, 45.

¹⁰⁶ Transcript a conversation between Hugh Trowell and Elizabeth Bray, 16. Mss. Afr. s. 1872, RH.

¹⁰⁷ Trowell 1957, 85; Transcript of a conversation between Hugh Trowell and Elizabeth Bray, 17, 20. Mss. Afr. s. 1872, RH.

When Trowell met Stannus in London in 1935, he showed him pictures of children with these skin disruptions. Stannus, the expert, was of the opinion that the disease was definitely pellagra. It also seemed that a cure had been found, for scientists in the United States had discovered a new B-group vitamin, nicotinic acid, or niacin, which had been found to be very effective against pellagra. With great expectations, Trowell tried the new vitamin with ten children at Nairobi Hospital, and to his shock and disappointment, eight of them died.¹⁰⁸ After the incident he was no longer convinced that the disease was simply pellagra, even though it had many similar clinical features. His struggle to save the children at Nairobi Hospital came to an end in 1935, however, when he accepted a request to come to work and teach in Uganda. It was there that Trowell, together with some colleagues, was to make the greatest research contribution to resolving the aetiology of the X-disease, or kwashiorkor.

SHAPING OF THE AETIOLOGY OF KWASHIORKOR

Before the mid-1930s the gradual discovery of malnutrition in colonial Africa had taken place in Western and Eastern Africa independently. Cicely Williams' work in the Gold Coast, following that of McCulloch, had laid the foundation for a wider discussion and exchange of ideas between the colonial medical professionals, and one thing that surely lay behind the attention received by William's research was the fact that she was a young woman working in the rather male-dominated field of colonial medicine, which, as the discussion around pellagra showed, was not necessarily always innovative and unprejudiced. In a way, Williams was also criticizing the living conditions that prevailed in the colonies, presenting the poor health and high infant mortality as something unacceptable instead of merely studying and explaining it as a matter of purely scientific interest. By relating the frequency of disease to poverty, she was taking a political stance on the issue.¹⁰⁹

William's findings in the Gold Coast are worthy of a closer examination, since they will likewise shed light on many issues under debate regarding the connections between nutrition and disease in East Africa at that time. Williams paid attention to three important questions, namely the frequency of pulmonary infections as a leading cause of death, child and adult malnutrition, and factors contributing to high foetal, infant and child mortality.¹¹⁰ According to her, pulmonary infections were the leading causes of death in the colony, and pneumonia was the most lethal of these. She saw pneumonia as 'a terminal condition', merely a 'symptom of death' rather than a cause of it, and suspected that behind the deaths associated with pneumonia there were often conditions such as helminthiasis, bronchitis and tuberculosis, all either causes or symptoms of underlying malnutrition. She attributed the high child

¹⁰⁸ Trowell 1957, 85; Transcript of a conversation between Hugh Trowell and Elizabeth Bray, 20-21. Mss. Afr. s. 1872, RH.

¹⁰⁹ See Stanton 2001, 158.

¹¹⁰ The following paragraphs, unless otherwise indicated, are based on Cicely Williams, 'Morbidity and Mortality of the Children of the Gold Coast' (typescript), 1935, 55-141, *passim*. B1/Box 6/1/PP/CDW/WTL.

mortality mainly to poor nutrition, sometimes manifested in kwashiorkor, but more frequently in pulmonary infections.

Every observer would, according to her, mark the visible symptoms of malnutrition in children, but not in adults, who nevertheless consumed similar diets. Williams was nevertheless positive that adult malnutrition existed, and she was particularly concerned about maternal nutrition, for she saw that some mineral deficiencies, for example, could cause anaemia and pregnancy complications. Yet maternal malnutrition was difficult to detect, since female corpulence was admired, and the physical signs of mineral deficiencies caused by unbalanced carbohydrate-rich diets were rarely directly visible.

According to Williams, the factors contributing to high foetal and neonatal mortality included malaria, yaws, malnutrition, the heavy manual work done by women during pregnancy and unskilled midwifery. Families took it for granted that some of their children would die, and that the older children would usually fall sick when their mother became pregnant again. It was also taken for granted that children would contract yaws, and that some of them would show symptoms of kwashiorkor. She regarded yaws as one of the greatest causes of miscarriage. Malaria, in turn, contributed to anaemia and maternal malnutrition, which increased the risk of prematurity. Infants usually became infected with malaria soon after birth, and the disease was most severe between six months and two years of age, after which, if the child survived, some degree of immunity developed. Heavy manual labour, placing a great strain on energy supplies during pregnancy, was another frequent cause of miscarriages, prematurity and low birthweight babies. Regarding midwifery, Williams saw that the local midwives used crude and often unnecessarily harsh methods that were disruptive and risky.

Williams' remarks are important, since they reveal the social, cultural and epidemiological context behind a complex deficiency disease such as kwashiorkor as well as the high morbidity and high rates of infant and child mortality. Poverty, ignorance and social and cultural traditions apparently played a role, as also did the discrepancies in the colonial economy, about which Williams, like so many of her contemporaries, is surprisingly silent.¹¹¹ Although Williams' work with kwashiorkor in Africa ended in 1935, she has been rightly credited for 'discovering' the disease. The scientific research that was eventually to unravel its nature was mainly undertaken in Kenya and Uganda, however, where her ideas had not yet taken root in 1935.

Once in Uganda, Trowell was 'dismayed' to find that virtually all medical services there, including maternal and child welfare work, had been directed towards one aim, the prevention of venereal disease. The high stillbirth and infant mortality rates were seen as a consequence of syphilis.¹¹² Stationed in Mbarara in 1935, Trowell found several children with similar symptoms to those he had seen in Nairobi, and noted that doctors in Uganda paid no attention to visible changes in

¹¹¹ See also Purcell 1939.

¹¹² Uganda Protectorate. *Medical Department 1931*, 64, 66; Uganda Protectorate. *Medical Department 1932*, 49; Trowell 1957, 85.

skin and hair pigmentation in children and adults but regarded them as features common to all sick Africans and therefore insignificant.¹¹³

'...I attended child welfare clinics almost daily throughout the province. At a dispensary clinic a hundred or so infants would attend each day and many registers were found in which about 90 per cent of the infants were diagnosed as congenital syphilis and received antisyphilitic treatment. Most of them had scabies, malaria, yaws or kwashiorkor. Next year back at Mulago Hospital I began to realise that the standard accepted [in] teaching of colleagues was that kwashiorkor was not a disease; it was either congenital syphilis, or a muddled mixture of non-specific signs, such as wasting, anaemia and oedema, which might accompany any lingering infections of malaria, helminths or congenital syphilis.'¹¹⁴

In his solitary struggle against the disease, Trowell continued his experiments with vitamin B. He fed his patients with cow's milk, liver and all of the vitamins, but he continued to lose 40 percent. Post mortems showed no clear cause of death. He felt he was not progressing in his research, and his experiments were becoming a trial to his colleagues, some of whom still stubbornly considered the disease nothing but a form of syphilis. In a paper published in 1937, based on his experiences at Nairobi Hospital, Trowell referred to the disease as infantile pellagra. Yet he was not satisfied. There was no cause of death. He began to doubt the nutritional origin of the disease, since milk, protein and vitamins did not have the desired curative effect. In 1939 he began a systematic search for clinical descriptions of similar diseases in medical journals, and was surprised to find that matching descriptions had been published all around the world. Since 1918 similar conditions had been described in Europe, the Caribbean, the Americas, Asia and also recently in Africa. Despite the similarities in clinical symptoms, no one seemed to have any clear understanding of the origin of the disease, though many of the writers related it to nutritional deficiencies. As he studied these cases in detail, his suspicion of Stannus' diagnosis grew stronger. Some of the symptoms did not seem to fit with the clinical picture of pellagra. He noticed that the rash did not resemble a pellagrous rash, oedema was extremely prominent in all cases, the disease was acute and often fatal, relapses were infrequent, and it was associated with symptoms of other deficiency diseases, which made the diagnosis difficult.¹¹⁵

Trowell's earlier diagnosis of infantile pellagra was criticized by Williams, who defended her own view that the disease was kwashiorkor. Williams saw that there was no definite proof that it was caused by a B-group vitamin deficiency,

¹¹³ H.C. Trowell, J.N.P. Davies and R.F.A. Dean, *Kwashiorkor*. London: Edward Arnold 1954, 18.

¹¹⁴ H.C. Trowell, 'Kwashiorkor Story in Africa', in A Nutrition Foundations' Reprint of Kwashiorkor, 1982. Mss. Afr. s. 1872, RH.

¹¹⁵ Trowell 1957, 85-6; Transcript of a conversation between Hugh Trowell and Elizabeth Bray, 34. Mss. Afr. s. 1872, RH; H.C. Trowell, 'Infantile Pellagra', *Trans. R. Soc. Trop. Med. Hyg.* 33 (4) 1940, 389-403 *passim*.

although she herself could not determine any specific deficiency in relation to the condition. Trowell could not refute the criticism, but at least he felt that the evidence so far was suggestive: 'If pellagra were a simple and single clinical entity with characteristic pathological findings, it would be extremely easy to prove or disprove if kwashiorkor was partly or entirely pellagra. But all attempts to prove that pellagra is a single vitamin deficiency have failed.'¹¹⁶

It was not until 1942 that the mystery began to unfold. In a series of post mortems, R.F.A. Dean, a young pathologist assisting Trowell, found that the pancreas of the deceased had degenerated in each case, i.e. the patients seemed to be unable to digest their food because of a shortage of pancreatic secretions. As more autopsies were carried out by Trowell, Dean and J.N.P. Davies, another pathologist and skilled researcher attached to Mulago Hospital, the aetiology of the disease began to take shape. By 1946 it was clear that the tissues and organs of the body were severely affected by the lack of protein in the diet, since new tissue could not be produced. The functioning of pancreas and liver was gradually undermined, leading to a decline in enzyme production, which is essential for the digestion of food and the absorption of nutrients. Malfunction of these two organs and the subsequent failure of digestion led to diarrhoea and enlargement of the liver because of excessive fat.¹¹⁷

In fact observations of liver changes had already been made by Dyce Sharp in 1934, who found fatty liver in post mortems,¹¹⁸ but at that time he was unable to explain the relation of this finding to the aetiology of the disease. Trowell and his colleagues were able to do this because of the excellent research facilities available and the growing body of information and interest regarding nutritional deficiency diseases worldwide. The fact that the disease had come to be related to protein deficiency was due to information derived from African dietary habits. The analysis of the nutritional content and quality of diets had already begun in the late 1920s through the work of nutritional scientists and anthropologists, but very little was in fact known by the mid-1930s. When the health conditions associated with low-protein diets came to be recognized in the late 1930s, medical professionals could focus their attention on the protein requirements and protein metabolism of the human body. The interaction of proteins and vitamins in human metabolism was recognized, which also explained the prevalence of deficiency diseases in populations who consumed milk and meat diets.¹¹⁹

Even though the aetiology of the disease took shape during a long period between 1930 and 1948, it was not until the 1950s that kwashiorkor, or protein-

¹¹⁶ H.C. Trowell, 'A Note on Infantile Pellagra', *Trans. R. Soc. Trop. Med. Hyg.* 35 (1) 1941, 13-20, especially 19.

¹¹⁷ Trowell 1957, 87; J.N.P. Davies, 'Pathology of Central African Natives. Mulago Hospital Post Mortem Studies - VII', *E. Afr. Med. J.* 25 (6) 1948, 228-235, especially 228; Trowell et al. 1952, 798-801.

¹¹⁸ Sharp 1934, 412.

¹¹⁹ Uganda Protectorate. *Medical Department 1938*, 39; Trowell 1941, 19. Vitamin deficiencies can hamper energy and protein metabolism. See Scrimshaw and Young, 1976, 57-59, 63.

energy malnutrition, became fully recognized as an independent entity by international agricultural and health organisations such as FAO and WHO.¹²⁰ This was because of the confusion with pellagra in the 1930s. In fact, Trowell and his colleagues still did not know in the early 1940s what to call the disease. In 1945 Trowell called it malignant malnutrition, because it was found in both adults and children and the term kwashiorkor only referred to children, but since the disease was most evident in childhood, and since the most of the cases they had been studying had been under 15 years of age, the term kwashiorkor seemed appropriate. This term did not become firmly established until the early 1950s, however, after Brock and Autret as well as Trowell and his colleagues had completed major publications on the subject.¹²¹

Thus it was clear by the end of the 1930s that nutritional deficiency diseases existed in Uganda on a large scale, although neither the diseases themselves nor the conditions that generated and perpetuated them were completely understood at that time. An attempt will be made in the following pages to view malnutrition in early colonial Uganda in its wider ecological, socioeconomic and cultural contexts.

PERSPECTIVES ON HUNGER, MALNUTRITION AND REPRODUCTION IN PRE-COLONIAL AND COLONIAL UGANDA ECOLOGY, DISEASE AND MALNUTRITION

It was the rainfall, soils and prevalence of animal and human disease that determined the ecological and epidemiological framework for food production in the pre-colonial period. Cultivation and herding required constant management of the environment in order to create and maintain safe and healthy surroundings for humans and livestock. There was no shortage of fertile land, and the limits on production were set mainly by the availability of labour. Trade and exchange allowed communities to alleviate the ecological and epidemiological constraints on food production. Foodstuffs and other items which could not be produced locally were obtained from neighbouring peoples by bartering or trading. Even so, although capable of producing a surplus, pre-colonial food systems did not provide adequate food security at all times and were vulnerable not only to climatic hazards but to social and political unrest as well.¹²² It seems that a great deal of deprivation at that

¹²⁰ Passmore and Eastwood 1986, 279. The nutritional problems affecting East Africa were fully recognized after the Second World War. See Colony and Protectorate of Kenya. *Food Shortage Commission of Inquiry Report, 1943*. Nairobi: Government Printer 1943, 57-9; John McFie, 'Nutrition Surveys. A Comparison of the Health of Six Villages Consuming Different Types of Food', in Uganda Protectorate. *An Interim Report of the Standing Advisory Committee on Nutrition, 1956*. G EAU (02) 1956/1, Makerere University Library Collections.

¹²¹ H.C. Trowell and E.M.K. Muwazi, 'A Contribution to the Study of Malnutrition in Central Africa. A Syndrome of Malignant Malnutrition', *Trans. R. Soc. Trop. Med. Hyg.* 39 (3) 1945, 229-243, especially 242; H.C. Trowell, 'Malignant Malnutrition (Kwashiorkor)', *Trans. R. Soc. Trop. Med. Hyg.* 42 (5) 1949, 417-31; Passmore and Eastwood 1986, 279; Brock and Autret 1952; Trowell et al. 1954.

¹²² Giblin 1992, 10, 30-31; Chrétien 1988, 100-102; Webster 1986, 451-452.

time, as today, was caused by social and political strife, although sometimes sparked off by a natural hazard such as drought.¹²³

Agricultural productivity in Buganda was greatly affected in the long run by the fact that land became saleable and inheritable property in 1900. The inheritance of private land, a new phenomenon in Buganda, caused its subdivision and fragmentation, which both tended to reduce productivity through shorter fallow periods and consequent soil degradation. Once land began to be shared between a large number of inheritors, the size of the holdings decreased, thus making long fallow periods impossible. A decrease in yields because of the subdivision of land took place well before 1939 in Buganda, and declining yields per acre meant smaller returns derived from agriculture.¹²⁴

A land shortage was likewise becoming a problem for tenants in Buganda. The tenant farms were smaller in size, and their heirs, if it was agreed to divide the farm between them, had much less to divide. It seems, however, that in most cases the elder son took over the farm from his father while the other sons had to find and establish farms on their own. Landowners benefited from tenancy, as they could extract rent and tithes in cash, produce and labour, which they could effectively direct to their own agricultural ends, usually meaning the extension of cash crop production. The high number of tenants on private lands led to land shortages, which were already evident in the most populous and fertile parts of Buganda in the late 1920s.¹²⁵

Ecologically, the growing population density and increasing shortage of cultivable land led to clearing and gradual disappearance of the forests from private lands. Marginal and infertile lands were taken into cultivation, which meant that the yields per acre were low. In the more fertile areas, on the other hand, the shorter fallow periods resulting from overcrowding and subdivision increased the risk of erosion. Cash and food crops such as cotton and maize quickly caused the land to degenerate, and the monoculture applied in cash cropping made the soils extremely vulnerable to damage from rainfall. Erosion and declining yields per acre had become major agricultural problems in Buganda by 1930.¹²⁶

Following the example of the southern African colonies, a policy of soil conservation was adopted in Uganda in the early 1930s.¹²⁷ In practise this meant the establishment of grass belts on hillside fields in order to halt erosion, a partial return

¹²³ Médard 2001, 68-69; Devereux 2001, 135-140; Joanne Macrae and Anthony Zwi (eds.), *War and Hunger. Rethinking Responses to Complex Emergencies*. London: Zed Books 1994.

¹²⁴ Uganda Protectorate. *Department of Agriculture 1935*, part I, 4; Uganda Protectorate. *Department of Agriculture 1938*, part I, 5-6; Allan 1965, 377, 379; Southwold 1956, 88-95.

¹²⁵ Uganda Protectorate, *Department of Agriculture 1929*, 6. According to Mafeje (1998, 104), the average size of a tenant plot in Buganda was three acres. The small sizes of the farms enabled landowners to have a larger number of tenants on their land and to raise greater amounts of *busulu* and *envujo*.

¹²⁶ Uganda Protectorate. *Department of Agriculture 1932*, part I, 20-1; Allan 1965, 376-7.

¹²⁷ Anderson 1984, 321-43.

to intercropping and the favouring of crops which were more resistant to erosion. These policies did not have much effect on the status of cultivation during the 1930s, however.¹²⁸ The economic depression increased cotton and coffee acreages markedly, which was initially greeted with pleasure until it was realized that extension of the cultivable area without any improvements in cropping methods would lead to massive soil deterioration. Though the benefits of intercropping were acknowledged, there is little evidence that it was actually practised on the the cotton and coffee plots that were most liable to erosion.¹²⁹ Nevertheless, crops such as groundnuts, beans and cassava were mixed with other crops on account of their benefits in terms of soil conservation.

Erosion was a serious problem in areas of Buganda with high population densities, such as the *sazas* of Kyaddondo, Kyagwe and Busiro. On the margins of Buganda's 'fertile crescent' there was still enough land for traditional fallow cultivation as far as the conditions of land tenure permitted. Besides erosion, pests also caused a great deal of trouble for food and cash crops alike. Boll worm attacked the cotton, and banana weevil caused damage to the banana gardens. In the early 1930s banana cultivation was generally in poor condition. The sinking world market prices for cotton and coffee forced the peasants to extend their acreage under these cash crops, and food production, especially banana growing, was not given proper attention. Many gardens were destroyed by pests, and the new ones established soon experienced the same fate. Since neither the colonial agriculturalists nor the African peasants had much information about the pests affecting crops such as cotton, little could be done to prevent the damage. Increasing the acreage to compensate for losses only meant providing more food for the pests, resulting in a growth in their numbers.¹³⁰

The climatic conditions continued to pose a major threat to food production. As described in the chapters above, serious drought conditions affected the whole Protectorate in 1907-8, 1917-18 and 1927-8, escalating into famines in Bunyoro and into severe food shortages and localised famines in the marginal areas of Buganda. A sudden crop loss because of drought could trigger a vicious cycle of malnutrition, in which impaired food intake would lead to a decrease in work output and productivity, a worsening of living and sanitary conditions, disease and more severe malnutrition.¹³¹ The colonial economic system enhanced the incidence of chronic

¹²⁸ Uganda Protectorate. *Department of Agriculture 1932*, part I, 21-2; Uganda Protectorate. *Department of Agriculture 1934*, 25; Uganda Protectorate. *Department of Agriculture 1940-41*, 1, 4-7.

¹²⁹ Uganda Protectorate. *Department of Agriculture 1932*, part I, 20.

¹³⁰ The Director of Agriculture, Killick, blamed the women for the poor state of food production. He saw the modern lifestyle as making agricultural work seem undesirable and inducing many women to neglect their traditional duties. On the other hand, he seems to disregard the fact that increased cotton cultivation simply directed labour away from food to cash crop production. Killick nevertheless realised that because of the low world market prices, the Baganda could not hire enough paid labour to manage their fields and gardens properly. See Uganda Protectorate. *Department of Agriculture 1932*, part I, 20-3.

¹³¹ See Pacey and Payne 1984, 117; *Traditional Food Plants* 1988, 19.

hunger, by limiting the opportunities for subsistence and forcing local producers to compete for labour with the local administration, the planters and the colonial state.¹³² People were likewise left vulnerable to climatic hazards by the lack of diversification in food production, the absence of proper food markets, limited access to possibilities for earning additional income and ineffective and often inadequate state intervention in the form of food aid.

Attempts by the colonial state to overcome famine and improve food security took forms which may have impaired the nutritional status of the people and worsened the chronic state of malnutrition. The expansion of cassava and maize cultivation, especially in the vicinity of urban centres, where the land shortages and declining yields were most evident, tended to direct people's diets in a very unfavourable direction. Cassava, besides being promoted as a soil conservation crop, was easy to cultivate, providing good yields even in poor soils, but its nutritional content was extremely modest. 100 grammes of cassava contained only 0.7 grammes of protein (see Appendices 8 and 9). Considering that cassava and cooking bananas (one gramme of protein in 100 grammes of edible produce) were the staple food of a large number of people in urban and semi-urban areas in the 1930s, it is likely that the urban populations, or people otherwise living in areas of high population density, suffered from malnutrition to a greater extent than those living in rural, low population density areas, where more diverse cultivation was possible.

The nutritional values of different crops in Uganda and their yields per acre are presented in Appendices 8 and 9. With the help of these two tables it is possible to estimate the nutritional content of the food produced by peasant households. When comparing yields and nutrition per acre, it would appear that bananas provided a better source of protein and calories than annually grown millet. On the other hand, one would have to consume 600 grammes of bananas to receive the same amount of protein contained in 100 grammes of millet. Bananas were also significantly poorer in calories, 400 grammes of banana needing to be consumed to obtain the 334 calories contained in 100 grammes of millet. Thus millet provided better nutrition at times when daily rations were adequate. Since both foods were poor in proteins, the bulk of the energy they provided was in the form of carbohydrates. Sweet potatoes did not fill the protein gap in the diet, for these, too, were very poor in protein and calorie content. Groundnuts and sesame, on the other hand, were extremely rich in vegetable proteins and also provided significantly more calories. These were used to flavour cooked bananas, and could provide the proteins that were deficient in the other items of the diet. Together with beans and other pulses, they were a very valuable addition to the diet. The protein content of a peasant's diet still remained low, however, unless additional high protein foods were added. Fish, poultry, goats and eggs were occasionally consumed, though it must be remembered that meat was rarely obtainable for the poorer segments of the population. Moreover, fish and eggs were traditionally forbidden foods for most women.

It is also important to consider the nutritional requirements of humans in relation to the crops grown on the land available for cultivation. It may be assumed

¹³² Chrétien 1988, 110; Gregory H. Maddox, 'Gender and Famine in Central Tanzania: 1916-1961', *African Studies Review* 39 (1) 1996, 83-101, especially 88-89.

that the fragmentation of plots, overcrowding and the need to cultivate drought-resistant, high-yield crops had an impact on the nutritional status of the people. The nutritional requirements of individuals vary according to their age, sex, body size, health, activity level and climate. According to the FAO standards put forward in 1950, the average calorie requirements of an African adult male weighing 55 kg, aged 25 and engaged in light physical activity at temperatures varying between 20 - 30°C varied between 2500 and 2700 calories, rising to 4000 calories per day when engaged in heavy manual labour. The average energy consumption for a female weighing 50 kg engaged in agricultural labour in the tropics was calculated to be 2500 calories per day.¹³³ The average diets consumed by males in Uganda in the 1940s seem to have fallen short of the FAO standard, however, as an unskilled labourer received only 1700 to 2000 calories daily while engaged in heavy manual work. The main items in their diet of such men were cassava and sweet potatoes, occasionally supplemented with vegetables and even more rarely with meat. The Baganda peasant's banana-based diet, supplemented with sweet potatoes, a little meat, groundnuts and vegetables provided nearly 3000 calories daily, which was sufficient for light physical activity.¹³⁴ Unfortunately no calculations exist of the nutrition content of female diets, but considering that the women did the bulk of the cultivation and other household work, i.e. they were engaged in moderate to heavy physical activity and consumed principally the same diet as their husbands, with some modifications, it is likely that their daily calorie intake was inadequate. Their nutritional condition also tended to deteriorate especially during pregnancy and lactation, when the demand for energy, protein, calcium and iron was extremely high. A lack of calcium and iron in particular, would easily lead to complications during pregnancy and impair maternal health during the breastfeeding period.¹³⁵

Disease can affect human nutrition directly by infecting the humans themselves, or indirectly by infecting and killing the cattle which the humans raise for food. Pathogens which infect humans put extra strain on the body's energy reserves, as in addition to the normal bodily functions, energy is needed to fight the invading pathogen, for other defensive functions and for tissue repair. Adequate nourishment plays important role in this, for if there is enough energy to fight the infection it may never manifest itself as a disease but will be suppressed. If not all the required nutrients are available for the defensive system, the human body cannot resist the pathogen and disease takes over.¹³⁶ Therefore, a diet which provides the human body with all the adequate nutrients it needs for its defence system is one

¹³³ H.C. Trowell, 'Calorie and Protein Requirements of Adult Male Africans', *E Afr. Med. J.* 32 (5) 1955, 153-162; Langlands 1974, 62.

¹³⁴ Trowell and Muwazi 1945, 231.

¹³⁵ Debra L. Martin, 'The Persistence of Nutritional Stress in Northeastern African (Sudanese Nubian) Populations', in Huss-Ashmore and Katz 1989, 177-78; Reduction of Maternal Mortality. A Joint WHO/UNFPA/UNICEF/World Bank Statement. Geneva: WHO 1999, 16-7.

¹³⁶ Ellison 1990, 946; Bellagio Conference 1983, 503-6. If all the proteins needed to produce white blood cells are in short supply, for example, human immunocompetence becomes severely undermined.

important factor determining the relation between health and disease, although it is true that some pathogens are sufficiently virulent that they are hard to suppress even with optimal nutrition.

The aggregate impact of human and animal disease on human malnutrition was far greater than any other ecological hazards considered, i.e. drought, erosion or pests. Since much has already been said about the general effects of human and animal disease on nutrition, it is sufficient here to concentrate on the most common disease, malaria, and its impact on nutrition and health, particularly in children. Although people living in endemic malaria areas such as Uganda develop some degree of immunity to the disease, it far too often proves to be lethal. This is usually the case with infants and small children, who do not yet possess strong defences and immunity against it. Severe attacks of fever, decreased appetite and drowsiness hamper the individual's ability to fight the disease effectively, for a sufferer is often too fatigued to take enough nourishment. It is for this reason that malaria in children often leads to kwashiorkor. The malaria parasite, which affects the spleen and liver may cause severe anaemia in the long run and eventually undermine the immunocompetence of the individual in relation to other pathogens. Even so, malaria in malnourished children does not seem to have a significant role in terms of increased mortality.¹³⁷

MALNUTRITION IN SOCIOECONOMIC, CULTURAL AND MEDICAL CONTEXTS

Kwashiorkor was one of the commonest causes of death in late colonial tropical Africa, probably only surpassed by malaria.¹³⁸ There is reason to believe therefore, considering the socioeconomic conditions of the pre-1930 era, that its incidence must already have been high between 1900 and 1930. Determination of the extent and causes of malnutrition in pre-colonial and colonial Buganda and Bunyoro is made difficult, however, by the lack of reliable sources of evidence. The clinical observations regarding nutritional disorders recorded since the 1930s have mainly been concerned with Buganda, and reliable descriptions are only available from the late 1920s onwards for isolated populations such as prisoners and unskilled labourers. The evidence becomes more abundant in the 1930s, but is still confined to small sub-groups such as infants and school children.¹³⁹ There are nevertheless some scraps of clinical and medical evidence which, when viewed against the

¹³⁷ WHO. Malaria - Fact sheet No. 94. www.who.int/inf-es/en/fact094.html 2/12/2003; Jose Gongore & John McFie, 'Malnutrition, Malaria and Mortality', *Trans. R. Soc. Trop. Med. Hyg.* 54 (5) 1960, 471-473.

¹³⁸ Transcript of a conversation between Hugh Trowell and Elizabeth Bray, 19. Mss. Afr. s. 1872, RH; Doyle 2000, 453 fn. 165; Webster 1986, 461.

¹³⁹ See E.A.C. Langton, 'Some Observations on Infants and Young Persons in Bunyoro, Uganda', *E.Afr. Med. J.* 12 (10) 1935, 316-325; Uganda Protectorate. *Medical Department 1936*, 48-50. It was found that Banyoro children aged between 9 and 18 were taller than their Baganda counterparts, but that the Baganda children were heavier, i.e. more robust. Banyoro children between 9 and 15 years did well in growth by comparison with British children, despite their apparently declining rate of growth after the third month in infancy. They fell behind noticeably in height growth after 15 years of age, however.

socioeconomic background and modern knowledge of deficiency diseases, may yield some new information on the subject.

The Luganda words for the condition associated with kwashiorkor, *obwosi* and *musana*,¹⁴⁰ were already known to the doctor Albert Cook in 1903. He interpreted the situation as implying that *obwosi* occurred when a child was weaned because of its mother's new pregnancy, while *musana* represented a state of severe anaemia which he believed to be particularly dangerous for pregnant women. Other anaemic conditions named were *nakasiki* and *munyo*, the latter being frequent in infants and related to infringement of the salt taboo by the pregnant mother. *Munyo* would be manifested in the child in the form of a wasting disease which Cook related to the chronic anaemia caused by malaria.¹⁴¹ According to Bennett, *munyo* was characterized by skin eruption, especially on the scalp, with severe cases involving bleeding from the nose and mouth and oedema, often followed by death. He seems to associate it with mineral deficiencies in pregnant women. The local preventive treatment for *munyo* included eating clay and taking herbal drinks.¹⁴²

The existence of these *kiganda* concepts for the kwashiorkor syndrome in the early twentieth century indicates that the conditions they refer to were well-known and probably also relatively common in Buganda in the nineteenth century. Although there is unfortunately no similar evidence on the *kinyoro* medical concepts during the same period, it can be reasonably argued that a disease such as kwashiorkor would have become more common in Bunyoro from the early 1890s onwards, when the *kinyoro* cattle economy had been practically destroyed by rinderpest, warfare and raiding. Doctor Ansorge was apparently the only European to give a brief description of the disease in northern Bunyoro in the 1890s.¹⁴³

In millet-growing areas the seasonality of kwashiorkor was rather clear-cut, its incidence being greatest during the rainy season preceding the harvest, while outside the grain-growing areas the addition of fish and legumes to the diet was usually enough to keep the disease at bay even if meat and milk were consumed only

¹⁴⁰ Trowell et al. 1954, 283; Burgess and Dean 1962, 25; The Luganda language had no specific word for nutritional deficiency disease, but two words were associated with the condition of kwashiorkor: *obwosi*, or 'poisoned milk', which refers to a situation where the mother is pregnant and her child develops kwashiorkor after weaning, and *omusana*, or 'cold', meaning that the child is deprived of the mother's care. The separation of child and pregnant mother was common, as it was believed that the living child was in danger if it stayed with the mother. On the method of treating kwashiorkor in Buganda, see Bennett 1965, 151-153.

¹⁴¹ Cook 1921, 15, 26-27, 28, 44.

¹⁴² Bennett 1965, 155.

¹⁴³ W. J. Ansorge, *Under African Sun. A Description of Native Races in Uganda, Sporting Adventures and Other Experiences*. London: William Heinemann 1899, 191; Doyle 1998, 314-316. According to Trowell et al. (1954, 283), the Lunyoro word for kwashiorkor was *kwengera*. In the 1950s people in Toro claimed that kwashiorkor had been rarer in the past, when people had more cattle and larger gardens, i.e. a more abundant and diverse diet. They also claimed that at those times women ate better and could breastfeed their children for long periods. See E.H. Perlman, 'Preliminary Inquiry into Concepts of Health, Disease and Child Care in Toro', in *Attitudes to Health and Disease among Some East African Tribes*. Kampala: E.A.I.S.R.; Makerere College 1959, 52-53.

rarely.¹⁴⁴ Thus kwashiorkor and other nutritional disorders in pre-colonial Buganda and Bunyoro cannot be attributed to an inadequate or deficient diet alone.¹⁴⁵ The social and cultural contexts generating poverty and disease seem to have been at least equally important.

The existence of kwashiorkor in the pre-colonial - and colonial - period was fundamentally related to poverty. Political and socioeconomic changes in the late nineteenth century undoubtedly increased poverty and endemic hunger because of over-exploitation of the peasantry. The lavish lifestyles and control over social reproduction practised by the élite in Buganda forced the majority of the population to the brink of want. Moreover, some cultural traditions and beliefs intended to protect people against sickness and misfortune actually worked against these goals. In this sense the food taboos imposed on pregnant women and the stigma and prohibitions associated with foods such as sweet potatoes and some green vegetables exposed people to vitamin and micronutrient deficiencies.¹⁴⁶

Kwashiorkor probably afflicted infants and children mainly in monogamous households, or in families where husband had only one or two wives,¹⁴⁷ and the majority of the peasant population of Buganda in both the pre-colonial and the colonial period would fit into this group. It is in this group that socioeconomic conditions would have favoured a high incidence of kwashiorkor, since women resumed working soon after giving birth and breastfed their children until they became pregnant again, which probably happened soon after the cessation of post-partum amenorrhoea, the duration of which is linked to that of breastfeeding, the age of the mother, her nutritional status and the number of lactations she has undertaken in her life.¹⁴⁸ Breastfeeding may also have ceased because of maternal malnutrition, as undernourished mothers do not have enough milk to feed their babies over long periods. Breastfeeding as the only method of feeding probably lasted six or seven months, after which infants were received supplementary food. Early weaning, whether partial or complete, made the children more vulnerable to diarrhoea, infections and kwashiorkor.¹⁴⁹ In large polygynous households, women could live in

¹⁴⁴ Tosh 1978, 418; Trowell et al. 1954, 55-59.

¹⁴⁵ Generally, as in Buganda and Bunyoro, pre-colonial diets in Africa are seen to have been more versatile than colonial ones. See Wylie 2001, 47; Webster 1986, 448-450; Chrétien 1988, 98-99.

¹⁴⁶ The male inhabitants of the Sese Islands in the 1930s were found to suffer from vitamin deficiencies, since a taboo prevented them from eating green leafy vegetables, which women ate frequently. See typescript by R.E. Barrett dated 18 March 1983. MSS. Afr. s. 1872, RH.

¹⁴⁷ According to Wylie (2001, 42-46), household size was decisive for food security in southern Africa, the smallest households having the greatest risk of deprivation.

¹⁴⁸ The mean duration of post-partum amenorrhoea in all populations is around sixty days. Breastfeeding tends to prolong amenorrhoea up to twelve, or in some cases twenty-four months. Amenorrhoea tends to be more regular and prolonged in women who have a history of several lactations. See Jacqueline M. Mondot-Bernard, *Relationships Between Fertility, Child Mortality and Nutrition in Africa*. OECD Technical Papers, 1977, 21-26.

¹⁴⁹ Ainsworth 1967, 53, 63; Mondot-Bernard 1977, 37-47; Latham 1997, 49-50; Ellison 2001, 83-84.

exclusion from their husbands for longer periods of time while nursing their children, and therefore faced a smaller risk of a new pregnancy. Also, women in polygynous households did not have to work as hard as those in smaller households, and the reduced physical activity saved energy and permitted a longer period of breastfeeding. This meant that the children could be gradually weaned over a longer period of time and would be physically mature enough to digest solid foods properly.

In the mid-1930s very little was known about African diets and nutrition in colonial Uganda. The nutritional content of the diets had not been studied properly. Vitamin deficiencies had been brought up in connection with tropical ulcer and its prevention, but little was known about protein intake or the protein content of local diets, although it was suspected to be insufficient. In line with the new medical and agricultural policies, answers to these questions were sought by the Agricultural Survey Committee, which undertook the task of improving agricultural practices in the Protectorate. This included a nutritional sub-committee with a member from the Uganda Medical Department. Agricultural surveys were carried out around the Protectorate, and a wide amount of information was gathered on the suitability of lands for cultivation, household sizes, population density, cropping methods, crops grown, etc. The results of the survey were published in 1938 by J.D. Tothill, the Director of the Department of Agriculture.¹⁵⁰

From a nutritional point of view, the surveys, which were undertaken mainly by agricultural officers, revealed little. The diets of the immigrant labourers and peasant population were recorded, but their effects on people's health and physique were considered only briefly. More specific nutritional surveys were carried out by medical officers in 1938 and 1939, mainly concerned with the effects of nutritional supplements such as milk and meat on the health of school children and the rural agricultural population.¹⁵¹ Some important conclusions were nevertheless reached by comparing populations living in different ecological environments and subsisting on different diets. The first and most dramatic observation was that a very large number of the African population in the Protectorate seemed to suffer from malnutrition. Nutritional deficiencies and ill health were most prevalent in areas of high population density, i.e. urban areas, where the lack of agricultural land had reduced food production. Around Kampala people were dependent on the food markets, but few had sufficient money after paying their rents and taxes to purchase adequate food. Secondly, the importance of animal protein for health seemed to be confirmed. The fish-consuming societies appeared to be superior in terms of health to those mainly subsisting on a vegetarian diet. Ulcers were extremely rare among the fish

¹⁵⁰ J.D. Tothill, *A report on nineteen surveys done in small agricultural areas in Uganda with a view to ascertaining the position with regard to soil deterioration*. Uganda Protectorate. Department of Agriculture. Entebbe: Government Printer 1938; Uganda Protectorate. Agricultural Survey Committee. *Report of the Nutrition Sub-Committee*. Entebbe: Government Printer 1937, 10.

¹⁵¹ L.J.A. Loewenthal, 'The Effect of Various Dietary Supplements on the Growth of School Children in Uganda', in Uganda Protectorate. Agricultural Survey Committee. *Nutrition report No. 4*. Entebbe: Government Printer 1939; L.J.A. Loewenthal, 'A Survey of Diet and Nutritional Health at Giharo and Mutanda', in Uganda Protectorate. Agricultural Survey Committee. *Nutrition Report No. 5 - Kigezi*. Entebbe: Government Printer 1940.

eaters, and the sweet potato with its green leaves seemed to provide adequate protection against vitamin deficiencies, thus reducing the risk of ulcers. The main factor in reducing ulcers, however, was considered to be the availability of animal protein and calcium.¹⁵²

The surveys furthermore revealed that the material standard of living of the rural population varied not only with region and ecological conditions, but also with ethnicity and social class. In areas of high economic activity, such as the Mengo district of Buganda, the consumption of meat and fish was increasing among the wealthier classes. At the same time, however, large segments of the rural and urban populations were struggling for daily subsistence. In many villages the Rwandan immigrants were the poorest segment of the population, and they were living in grass huts and subsisting on an inferior diet, whereas a typical Baganda peasant, who inhabited a rectangular two-room house with mud walls, could afford a more diverse and nutritious diet.¹⁵³

Despite investigations showing the positive effects of an improved diet on working capacity and productivity, little seems to have been done to improve the conditions under which the labourers lived. Their health was still considered generally poor at the end of the 1930s. The workers' diet had remained unchanged, as had their physical ailments, general morbidity was high and ulcers common. Pignet's index of robustness, as employed in military recruitment, defined 80 percent of the workers as unfit for service.¹⁵⁴ Apparently a large part of the income of an immigrant labourer, regardless of his ethnic origin, went in taxes and land rents, even though some managed occasionally to avoid these obligations. In their attempts to escape poverty in their regions of origin, they were engaged in badly paid work in Buganda which provided little means of overcoming their misery. There was no improvement in their condition in the 1930s, either, for the aim of the government's labour policy in 1930 was still '... the gradual production of a contented labouring class...' at as low a cost as possible. Consequently, expenses were kept low by

¹⁵² Uganda Protectorate. *Medical Department 1938*, 8, 39; Uganda Protectorate. *Medical Department 1939*, 4-5; Loewenthal 1940, 8, 10, 12-13; M.G. de Courcy-Ireland, H.P. Hoskins & L.J.A. Loewenthal, 'An Investigation into Health and Agriculture in Teso, Uganda', Agricultural Survey Committee. *Nutrition Report No. 1 - Teso*. Entebbe: Government Printer 1937, 6-8, 11-2, 17; 'Nutrition Surveys in Uganda. Proceedings of a Mulago Staff Clinical Meeting, 6 March 1954', *E. Afr. Med. J.* 31 (4) 1954, 184-185.

¹⁵³ Uganda Protectorate. *Medical Department 1938*, 39; G.B. Masefield, 'Mutala Survey of Kawoko in Mumyuka Muluka of Musale Gombolola Buddu', in Tothill 1938, 41-44; Trowell and Muwazi 1945, 231. A study undertaken in the early 1950s found that there was a negative correlation between the level of income and the incidence of malnutrition in children in Buganda, as also between the level of education and malnutrition. The same study suggested that the incidence of kwashiorkor was highest among the *banyaruanda*. See H.B. Welbourn, 'The Danger Period During Weaning Among Baganda Children', *E. Afr. Med. J.* 31 (4) 1954a, 147-54.

¹⁵⁴ Uganda Protectorate. Agricultural Survey Committee. *Nutrition Report No. 3 - Unskilled Labour. The Effect of Dietary and Other Supplements on the Health and the Working Capacity of Banyaruanda Labourers*. Entebbe: Government Printer 1939, 4; Uganda Protectorate. *Labour Department 1930* (unpublished), 6; R.E. Barrett, 'Health of Temporary Immigrant Ruanda and Allied Tribes from Belgian Congo Administrated Territories', draft report, May 1942. MSS. Afr. s. 1872, RH.

keeping rations and salaries at a minimum level. While the pay in 1925 had been 12 shillings for 26 days of work, it had been reduced to less than ten by 1935.¹⁵⁵

An agricultural survey undertaken in Bunyoro in mid-1930s indicated that the Banyoro suffered from a 'lack of energy'.¹⁵⁶ Remarks on 'thin and weedy' Banyoro were also common earlier in the century.¹⁵⁷ Malnutrition in Bunyoro in the 1930s was attributed to the lack of milk and meat in the diet and prevalence of food taboos especially in the case of women, who were prohibited from consuming eggs and chicken, for example.¹⁵⁸ There is good reason to believe, however, that the poor nutrition among the Banyoro was not solely caused by their diet or cultural habits, but existed for socioeconomic reasons. The agricultural survey found that food and cash crops were being cultivated jointly by the men and women, so that the drain of male agricultural labour away from the farms earlier in the century may have contributed greatly to the frequency and severity of food shortages and famines in Bunyoro, as it did in Busoga and in many communities in southern Africa.¹⁵⁹ The successive famines and food shortages between 1898 and 1918 further paralysed food production and made hunger and malnutrition endemic in the district. In the early colonial period, with a chronic household labour shortage, seasonal hunger and famine were transformed into chronic hunger and malnutrition.

The nutritional surveys undertaken in Uganda in the 1930s seem to confirm a state of serious protein-calorie malnutrition not only in children but also in adults. Clinical autopsies showed a high incidence of lesions in the liver, pancreas, kidneys and other internal organs. Soft brown hair, crackled skin and an enlarged liver, which were usually found in cases of acute malnutrition in children, marked the continuation of a nutritional disorder into adult life.¹⁶⁰ In children, who presented the clearest clinical signs of malnutrition, the condition seems to have been so common that it had become regarded as a normal phase of development. A study undertaken in Kampala in the 1950s found that 40 to 50 percent of the children aged between one and three years attending child welfare clinics presented symptoms of mild kwashiorkor.¹⁶¹

¹⁵⁵ Uganda Protectorate. Agricultural Survey Committee 1939, 3-5; Masfield 1938, 33; Uganda Protectorate. *Annual Report of the Labour Department 1925* (unpublished) [hereafter Labour Department], 259; Uganda Protectorate. *Labour Department 1930*, 1; *Colonial Reports 1935*, 31; Jørgensen 1981, 114-115.

¹⁵⁶ R.K. Kerkham, 'Mutala Survey of Bujenje, Bunyoro District', in Tothill 1938, 130.

¹⁵⁷ Doyle 1998, 314.

¹⁵⁸ Kerkham 1938, 130-132.

¹⁵⁹ Webster 1986, 453.

¹⁶⁰ Margaret W. Stanier & E.G. Holmes, 'Malnutrition in African Adults, Part 1', *British Journal of Nutrition* 8 1954, 155-164, especially 155; E.G. Holmes, E.R. Jones & Margaret W. Stanier, 'Malnutrition in African Adults, Part 2', *British Journal of Nutrition* 8 1954, 173-193, especially 173; H.C. Trowell, 'Medical Examination of 500 African Railway Workers, Part III', *E. Afr. Med. J.* 15 (4) 1948, 423-432, especially 425; Trowell et.al. 1954, 252-253.

¹⁶¹ H.C. Trowell & J.N.P. Davies, 'Kwashiorkor I. Nutritional Background, History,

Some idea of the extent of protein-energy malnutrition in general can be achieved by comparing the clinical pictures of certain diseases that were common but not clearly understood in early colonial Uganda. The cases of *muhinyo/bihimbo* disease recorded in Uganda between 1906 and 1913, for example, bear a close resemblance to the cases of hunger oedema and protein-calorie malnutrition observed later by Procter, Williams and Trowell (see Appendices 1 and 2). *Muhinyo/bihimbo* could actually have been protein-energy malnutrition, the aetiology of which simply was not understood at the time. The conditions in Ankole in 1913 and West Nile in 1918, for example, seem to support this, as there had been serious food shortages in both areas preceding the emergence of the disease. Trowell regards McConnell's description of the 'oedema disease' in the West Nile region as the first description of adult kwashiorkor in Uganda,¹⁶² which in itself closely resembles the earlier cases of *muhinyo*. Mortality from *muhinyo/bihimbo* exceeded that from malaria, plague, smallpox and sleeping sickness in 1914.¹⁶³

It was realized in the 1950s that kwashiorkor and adult malnutrition had frequently been misdiagnosed as dyspepsia: '...dyspepsia often passes unnoticed, because the parents regard gross abdominal distension and pain as a normal in children at weaning.'¹⁶⁴ Dyspepsia, as described in medical dictionaries in the nineteenth century, had many similar symptoms to kwashiorkor.¹⁶⁵ The disease was already highly prevalent in Buganda in 1902, when it was referred as a common 'alimentary disease of the stomach'. A total of 163 cases had been treated in the government hospitals during the first half of that year.¹⁶⁶

Judging from the Mengo Hospital case files, it was not only dyspepsia which bore a resemblance to kwashiorkor and adult malnutrition, as the condition diagnosed as ascites also seems to fall into this category. The medical history of a Muganda youth aged around 18 illustrates the course of this disease at its worst. He was brought to the hospital on 15th March 1898, having been ailing and ill for the last 15 months. At the beginning of the year his stomach had begun to swell. He was diagnosed as having ascites and taken into hospital. As his stomach was distended, the doctor decided to tap him in order to remove the fluid. He was given iron,

Distribution, and Incidence', *Brit. Med. J.* 2 1952b, 796-797; H.F. Welbourn, 'Signs of Malnutrition among Baganda Children Attending Child Welfare Clinics', *E. Afr. Med. J.* 31 (7) 1954b, 332-336.

¹⁶² Trowell et al. 1954, 3, 13, 251. Professor Ann Answorth Hill and Dr. Elizabeth Poskitt from the London School of Hygiene and Tropical Medicine were of the opinion that *muhinyo/bihimbo* could have been a combination of conditions such as beri-beri, tertiary malaria, severe anaemia and hookworm. I am very grateful for their comments.

¹⁶³ Uganda Protectorate. *Medical Department 1914*, 11.

¹⁶⁴ Cicely D. Williams, 'Social Medicine in Developing Countries', *The Lancet* 1 1958, 863-866, 919-922, especially 865-6.

¹⁶⁵ See, for example, *London Medical Dictionary 1809*.

¹⁶⁶ Sadler to Lansdowne 15 Oct. 1902: Medical Report for the Quarter ending June 30 1902. A38/7/UNA.

bismuth and morphine. After three months in hospital his condition had not improved and he was put on a milk and banana diet. He suffered from diarrhoea with blood, and his stomach kept swelling despite the tapping. In mid-June the doctor also diagnosed an enlarged liver. Despite several tapplings, his condition remained unchanged. He presented clear signs of anaemia, and was generally in a very weak condition. In the middle of September the doctor recognized oedema of both the hands and feet. Some time after this observation he was discharged from the hospital. On October 11 he was admitted again, this time because of an ulcer on his ankle which had appeared around the time he left hospital in September. He still had diarrhoea, his abdomen was distended, and there was oedema on the hands and feet. This time he was put on a meat diet, but this could not save him. On the morning of December 4th he died of 'asthenia'.¹⁶⁷

Virtually all the cases of ascites present a similar clinical picture: a distended abdomen, oedema, weakness and a relatively long history of ailing health, usually between 5 and 24 months. The disease affected both sexes, was found in children as well as adults, and was usually treated with tapping in the case of adults.¹⁶⁸ Occasionally the word 'well-nourished' was applied to a patient diagnosed as having ascites, but in many such cases there were symptoms such as a distended abdomen, oedema, an enlarged liver and anaemia that could refer to adult malnutrition: 'Well-nourished man... .. Abdomen considerably distended. Rather anaemic... .. Spleen not felt. Liver enlarged.'¹⁶⁹ The term 'well-nourished' is evidently ambiguous, in that oedema and swelling of the abdomen may have been misinterpreted as obesity. Such an error was by no means rare, for there is evidence that Europeans in the late nineteenth century seemed to have regarded the bloated condition of children suffering from kwashiorkor as a sign of obesity and therefore of wealth.¹⁷⁰ The frequency of dyspepsia and ascites seems indicate the prevalence of malnutrition, which the doctors, both missionary and government, were unable to diagnose properly. These doctors frequently distinguished such nutritional disorders as anaemia, marasmus and beri-beri, however, which were believed to be related to nutrition.¹⁷¹

¹⁶⁷ MHCF 1898/1/139/ACML; MHCF 1898/2/Oct. 11/ACML.

¹⁶⁸ cf. MHCF 1898/1/144/ACML; MHCF 1899/2/Dec. 4/ACML; MHCF 1900/1/55/ACML; MHCF 1909/3/494/ACML.

¹⁶⁹ MHCF 1898/1/June 16/ACML. See also MHCF 1898/1/June 20/ACML; MHCF 1898/1/Aug. 2/ACML; MHCF 1898/2/ Sept. 28/ACML.

¹⁷⁰ Kjekshus 1977, 138; Rijpma 1994, 49-52. A condition similar to kwashiorkor, known by its German name *Mehlnährschaden*, existed in many European countries in the nineteenth and early twentieth centuries, and was associated with excessive carbohydrate in the diet. See Trowell et al. 1954, 6; Rijpma 1994, 49.

¹⁷¹ For example MHCF 1897/1/73/ACML; MHCF 1899/1/ Feb. 27/ACML. The symptoms of those cases diagnosed as marasmus (mainly infants and children) and beri-beri were the same as for the cases of dyspepsia and ascites described above, and cases of dropsy also bore similarities to these. Albert Cook associated dropsy, or *entumbi*, with 'liver disease', and treated it by tapping. See Cook 1921, 50.

Despite the growing awareness of poverty and malnutrition, the attempts of the colonial state to deal with the problem in Uganda before 1939 remained limited, and were aimed at increasing people's awareness of the importance of hygiene, diet and nutrition. The key issue was education. The most recent information on nutrition was to be disseminated to the people using the channels provided by the schools and maternity centres. Health and welfare shows were also launched in 1934, in which people were given demonstrations and practical advice on how to provide themselves with adequate or better diets at little extra cost, and how to improve the productivity of agriculture. Agricultural policy was aimed at preventing soil erosion and the decline in yields, and at creating suitable conditions for cattle rearing. The aim was to improve the milk production of local cattle breeds and to create a sufficient market for meat and milk, the price of meat had already declined considerably by 1935. Banana cultivation was likewise encouraged, since it was seen as a more economical crop in terms of land use than cereals. But there were many obstacles. Cultural features such as food taboos involving strong beliefs were found difficult to alter, and the general conservatism of Africans was also blamed,¹⁷² but perhaps the biggest obstacle remaining was the poor financial state of the Protectorate, which rendered many of the proposed schemes impossible, or at least ineffective, in practice. Moreover, the unwillingness of the colonial state to undertake greater political and economic reform ensured that poverty in terms of 'means of subsistence' would only continue.

THE DOMESTICATION OF HUNGER: MALNUTRITION AND SOCIAL AND BIOLOGICAL REPRODUCTION

In 1937 the chairman of the nutrition sub-committee, de Boer, outlined a scenario on the prospective benefits of improved nutrition in Uganda:

'It seems almost unnecessary to say that improved nutrition would result in greater health, and that greater health would lead to greater production not only of foodstuffs but of products of economic value. Increased production would be associated with increased wealth which would permit of better housing, better education, and the growth of a more intelligent people... [...] Improved living conditions will no doubt reduce the present high rate of infant mortality, resulting in rapid growth in population. A larger and healthier population in Uganda will increase the purchasing power of the country which will have its repercussions in manufacturing countries overseas.'¹⁷³

One should consider why this kind of scenario had not materialized in Uganda before 1939. One precondition for development is a healthy, educated population. In fact people must be in good health before they can be educated. Health in turn

¹⁷² Uganda Protectorate. Agricultural Survey Committee 1937, 11-16.

¹⁷³ Uganda Protectorate. Agricultural Survey Committee 1937, 16.

cannot be maintained without the eradication of hunger and disease.¹⁷⁴ A precondition for improved health, therefore, would be improved nutrition in terms of both quantity and quality, which in turn would be dependent on adequate access to land, labour and markets. These conditions undoubtedly existed for a greater number of people in the pre-colonial period before 1880s than after 1900, when trade, land and labour were subject to greater state control and became the privilege of a small aristocracy. After the agrarian reforms undertaken in Buganda and Bunyoro in 1928 and 1933, respectively - together with the difficult situation on the world markets - the development of land for greater productivity and better food security was virtually blocked.¹⁷⁵ Colonial forced labour interfered with the ratio between producing and non-producing members of the community by reducing the numbers of the former and increasing those of the latter. Later, the agrarian reforms that enabled the peasants and tenants in Buganda and Bunyoro to resist proletarianisation froze the rural social structure and gender roles, confirming the position of male household heads - whether landowner or tenants - over females, thus confining women primarily to the role of rural producers and reproducers with little or no command over resources such as land and labour. Restricted to small plots of land, dependent mainly on their own input of labour, and subjected to social and economic pressures related to fertility and colonial cash crop production, the rural women were overwhelmed and unable to produce enough to lift themselves and their families out of poverty.¹⁷⁶

Whereas in the pre-colonial period hunger and suffering posed a challenge to the power of the chiefs, under colonial rule a chief's power was no longer directly dependent on the survival or prosperity of his tenants. While the tithes and tributes paid by the peasants to their chief in the pre-colonial period were partly redistributed in the form of social investments such as gifts, parties and services, the payments received from land under colonial rule were no longer redistributed to the tenants. The result was a great improvement in standards of living among the landowning chiefs, enrichment of the primarily foreign merchant sector and impoverishment of the rural population. Early colonial Buganda presents a good example of the 'simple reproduction squeeze', which was clearly visible from 1929 onwards, for example, when the world market price of cotton dropped while the costs of production for the peasants, i.e. rents, labour obligations, price of tools, etc. remained unchanged or were increasing and the returns on labour were decreasing at the same time.¹⁷⁷

¹⁷⁴ It has become established today that malnutrition and undernutrition together with underlying poverty not only cause physical handicaps but also impair cognitive development. See J. Larry Brown and Ernesto Pollitt, 'Malnutrition, Poverty and Intellectual Development', *Scientific American* 274 (2) 1996, 26-31; Jelliffe and Bennett 1971, 41-42; 'Malnutrition in kids still high', *The Monitor*, 29 April 2000.

¹⁷⁵ Mafeje 1998, 108-109. The *Busulu and Envujo Law* was repealed in 1975. See W. Kisamba-Mugerwa, 'Institutional dimensions of land tenure reform', in Holger Bernt Hansen and Michael Twaddle (eds.), *Changing Uganda. The Dilemmas of Structural Adjustment & Revolutionary Change*. London: James Currey 1991, 315.

¹⁷⁶ See Maddox 1996, 83-101; Sender and Smith 1990, 66; Mukwaya 1953, 72-79.

¹⁷⁷ H. Bernstein, 'African peasantries: a theoretical framework', *Journal of Peasant Studies* 6 (4) 1979, 412-443; van Zwanenberg and King 1975, 69. See also Watts 1983, 367-372; Webster 1986, 356

Against this background, it is evident that no amount of work would have been enough to lift the peasants out of poverty under the conditions of 'underdeveloped' colonial capitalism. The simple reproduction squeeze reflects the increased powerlessness and vulnerability of peasants in a situation where the basis and legitimacy of the power of the chiefs has been transferred from the people to an external agent, in this case, the colonial state.

Colonial rule thus enforced and completed a process that had already taken root to some extent before the conquest, namely the "domestication of hunger", i.e. a situation where hunger was no longer an occasional and unwanted visitor such as famine or seasonal food shortage, but something which was there all the time, a shortage or deprivation that had become commonplace, visibly less dangerous than an acute subsistence crisis yet slowly gnawing individuals and communities from within, thus consuming their life energy and making them physically, economically, socially and politically weak and less able. Unlike chronic malnutrition, which has too clinical a tone to it and which is frequently only understood as a syndrome or combination of nutritional deficiencies caused by a both quantitatively and mostly qualitatively insufficient diet independent of any socio-political or cultural background, the domestication of hunger refers to a process where these respective backgrounds contribute to the creation, maintenance and reproduction of structures that deprive people of their means for healthy and productive life.

Impoverishment and the consequent hunger and malnutrition had considerable consequences in terms of biological reproduction. A nutritional study undertaken in Bunyoro in the early 1950s not only confirmed that the results of the nutritional surveys of the late 1930s undertaken elsewhere in Uganda also applied to Bunyoro, but established connections between malnutrition and low fertility, and between malnutrition and high infant and child mortality. Infertility in women aged between 30 and 40 was much more common in the village of Kihoko, where people subsisted mainly on cassava, sweet potatoes, maize, beans and vegetables, than in Kibiro, where fish, milk and meat were frequently consumed. Likewise, infant mortality was lower in Kibiro, as also was the incidence of tropical ulcer. The study concluded that because of the absence of cattle and the consequent lack of animal protein in the diet, malnutrition was common among agriculturalists, contributing to female infertility, especially in women over thirty, and to high infant mortality¹⁷⁸ (the low fertility among the Banyoro had previously been associated with venereal disease rather than with protein-calorie malnutrition).¹⁷⁹ In order to understand this alleged connection in Bunyoro, a closer examination of nutrition-fertility linkages is required, based on recent research into human reproductive ecology.

453-454.

¹⁷⁸ 'Nutrition Surveys in Uganda 1954', 184-185. Kibiro, which declined from a busy fishing village and salt production centre during the early colonial period to a half-dead village of a few hundred inhabitants, experienced a gradual revival in the 1940s and 1950s. Trade in salt and fish was profitable, as in pre-colonial times, and the inhabitants could afford a variety of food, including livestock produce. See Connah et al. 1990, 27-39.

¹⁷⁹ Dunbar 1965, 155, 181.

It has been suggested that female fecundity and the menarche are dependent on body size, i.e. the weight and height of the woman. During last hundred years, the average body size of both children and adults in the western industrialized countries has increased significantly. At the same time the age at menarche has become lower, contributing to a slight overall increase in the fertility rate. The reproductive age of women has been prolonged, and they are capable of giving birth more often during their lives today than they were a hundred years ago.¹⁸⁰ Researchers agree that the growth in body size and earlier maturation are significantly affected by nutritional factors, in that better nutrition contributes to a larger body size, especially in terms of height for age, which in turn leads to a lowering of the age at menarche.¹⁸¹ In the case of chronic malnutrition, the physical growth of an individual may temporarily cease, leading to stunting, and therefore to a higher the age at menarche. Consequently, inadequate nutrition in a population affects general fertility. Also, there is evidence that late maturation because of retarded physical growth affects the reproductive life of the woman in adulthood, lowering the rate of ovarian function, so that women who have suffered from chronic malnutrition or undernutrition in childhood tend to ovulate less frequently.¹⁸² Frisch and McArthur have proposed that body size, and especially the amount of fat, determines the onset of menstruation in adolescent girls. Undernourished girls reach puberty later and become fertile a higher age than girls who are not suffering from malnutrition. Another and perhaps more convincing explanation given recently is the pelvic size theory, according to which menstruation commences when the female pelvis has reached the critical bi-iliac diameter required for successful and safe delivery, around 24 or 25 centimetres.¹⁸³ Malnutrition, by slowing down skeletal growth, would therefore cause a delay in biological maturation, thus raising the age at first pregnancy and leading to lower fertility.

Women of childbearing age generally have higher nutritional requirements because of menstruation and lactation. Menstruating women lose iron and other nutrients in the lost blood and are more prone to anaemia than men. Combined with

¹⁸⁰ J. Bongaarts, 'Does Malnutrition Affect Fecundity? A Summary of Evidence', *Science* 208 (9)1980, 564-569; J.M. Tanner, 'Earlier Maturation in Man', *Scientific American* 218 (1)1968, 21-27; John Komlos, 'The Age at Menarche in Vienna: The Relationship Between Nutrition and Fertility', in J. Komlos (ed.), *The Biological Standard of Living in Europe and America 1700-1900*. Norfolk: Variorum 1995, X 1-14.

¹⁸¹ Rose E. Frisch and Janet W. McArthur, 'Menstrual Cycles: Fatness as a Determinant of Minimum Weight for Height Necessary for Their Maintenance or Onset', *Science* 185, 1974, 949-951. There is not much evidence on the consequences of malnutrition and undernutrition for male reproductive capacity, but Frisch assumes that undernutrition, by delaying maturation, will affect the time when males are best fit for procreation. Undernourished men reach their procreation age later than well-fed men and their procreative power is lower. See Rose E. Frisch, 'Population Nutrition and Fecundity', in J. Dupâquier (ed.) *Malthus Past and Present*. London: Academic Press 1993, 397.

¹⁸² Henri L. Vis, Michel Bossuyt, and Philippe Hennart, 'The Health of the Mother and Child in Rural Central Africa', *Studies in Family Planning* 6 (12) 1975 437-41; Ellison 2001, 156-159, 213; Ellison 1990, 945.

¹⁸³ See Frisch and McArthur 1974, 949-95; Tanner 1968, 21-27; Ellison 2001, 156-159.

a heavy workload, this means that the energy requirements of rural women in Africa are considerable, and that a poor and insufficient diet will endanger their reproductive capacity. The nutritional need is highest of all during pregnancy, and healthy women, if not overworked, will put on extra weight. Adequate bodyweight is especially important for young or adolescent mothers, whose energy requirements are very high. In rural Buganda and Bunyoro, however, many women worked in the fields until the time of delivery and probably continued to lose weight. Similarly, as has been seen, women resumed working soon after giving birth and while still breastfeeding, meaning that their energy balance would remain negative. It has also been well established that malnourished mothers give birth to underweight babies, and often have a very limited supply of breast milk to feed their offspring. Likewise, the incidence of stillbirths and miscarriages is higher in malnourished women, particularly in adolescent mothers. Thus, under heavy physical strain, women become weary, risking their own health as well as that of their children. This is particularly the case with cultures in which large families are appreciated, as recurrent pregnancies at short intervals prevent mothers from recovering and building up the necessary energy stocks for successful and safe childbearing.¹⁸⁴

It has been suggested that the length of the breastfeeding period, which is to some degree determined by the mother's nutritional status, will affect female fertility by influencing the duration of postpartum amenorrhoea. The longer the breastfeeding period is, the longer the amenorrhoea and birth interval and the lower the calculated fertility. On the other hand, there is evidence that breastfeeding has no significant effect on the duration of postpartum amenorrhoea in women and that, conditions permitting, lactating women will often be impregnated again within a year after giving birth.¹⁸⁵ Though it has been widely accepted that the durations of breastfeeding and postpartum amenorrhoea are positively correlated, and thus partially socially controlled, recent research tends to undermine the link between the two. According to Ellison, the duration of postpartum amenorrhoea is determined by the 'relative metabolic load' of lactation on the mother. During pregnancy and lactation, a woman is metabolizing for two persons, and thus requires an increased energy intake. This is because a certain amount of a mother's total metabolic energy budget during lactation is needed for milk production. Since metabolizing for three, i.e. overlapping lactation and pregnancy - particularly when the energy balance is not positive - would pose a serious risk for a mother's health in terms of reduced energy, the female hormones work to reduce the possibility of simultaneous lactation and gestation. Thus hormone function during lactation is directed towards milk production and not towards restoration of the menarche. This is especially true when a mother's energy intake is reduced, as in a population suffering from seasonal

¹⁸⁴ Ellison 2001, 94-95; Ellison 1990, 938-944; Latham 1997, 45-50; Mary D. Salter Ainsworth, *Infancy in Uganda. Infant Care and Growth of Love*. Baltimore: Johns Hopkins 1967, 52-3; Paula C. Zemel and Barbara Levin, 'Adolescent Pregnancy: Implications for Nutritional Care', in Krummel and Kris-Etherton 1996, 41-44; Bryceson 1990, 46; Tangney 1996, 166; Frisch and McArthur 1974, 949-951.

¹⁸⁵ See Jane Menken, James Trussell, Susan Watkins, 'The Nutrition - Fertility Link: An Evaluation of the Evidence', *JIH* 11 (3) 1981, 434-435; Vis et.al. 1975, 438; McKeown 1977, 24; Bongaarts 1980, 566.

food shortages. On the other hand, in mothers who have access to optimal nutrition at all times, ovarian function may be restored soon after pregnancy independent of the length and intensity of breastfeeding. Since female reproductive ability depends on the long-term energy balance, ovulation becomes infrequent and irregular under conditions of a chronic energy shortage, as in the case of malnutrition or undernutrition.¹⁸⁶ Thus breastfeeding is likely to delay restoration of the menarche in nursing mothers subject to nutritional stress.

The case of a Muganda woman illustrates well the effects of apparent adult malnutrition on female reproductive capacity. This woman attended the Mengo Hospital in August 1898 because she was feeling ill. Her skin had begun to turn pale 16 months earlier and her friends had told her that she was pregnant, because her abdomen had begun to swell. Her periods had been regular, but had suddenly ceased a month before, which gave her reason to believe that her friends were right, even though she herself remained sceptical. The doctor found no sign of pregnancy in a clinical examination, but he did discover a reproductive history of one miscarriage and three live births. Two of her children had died soon after birth.¹⁸⁷

The great strain experienced by women is often visible in a high frequency of perinatal and infant mortality. A woman aged around 25, attending in 1903, had given birth to four children, all of which had died. Her first pregnancy had ended in a miscarriage, while of the four born alive three had died within two months, and the fourth had succumbed to smallpox when only few months old.¹⁸⁸ Another woman in her mid-twenties, attending in 1904, had a reproductive history of six miscarriages in a row with no live births.¹⁸⁹

These cases were by no means rare among the women attending the hospital, and they demonstrate well the reproductive problems faced by many Baganda women: heavy physical - and presumably also psychological - stress because of manual labour, successive pregnancies and miscarriages and high infant mortality. Thus it seems that maternal malnutrition maintained a check on fertility by reducing female fecundity and increasing the incidence of intrauterine deaths. The latter phenomenon was linked to the nutritional deprivation experienced by many mothers since childhood. Stunting because of childhood malnutrition is generally seen as risk for female reproductive health, and a stunted girl who has not reached normal physical proportions may later have difficulties in labour:

'During a childhood attack of kwashiorkor (or any other acute debilitating disease), there is a temporary halt to skeletal growth. If perfect health is regained, there is an acceleration of bone growth so that the final skeletal result approximates to the expected age standard of maturity of the long bone concerned. However, it is clinically observable that in the past in many

¹⁸⁶ Ellison 2001, 114-123, 212-213.

¹⁸⁷ MHCF 1898/2/Aug. 21/ACML.

¹⁸⁸ MHCF 1903/416/ May 28/ACML:

¹⁸⁹ MHCF 1904/785/Oct. 28/ACML.

Ganda children recovery from kwashiorkor is only partial, because nutrition continues far below the optimum, while chronic malaria, intestinal parasites, repeated acute pyogenic infections, and other debilitating illness may keep health well below par during the growth period.¹⁹⁰

Another study on the subject demonstrated, however, that the pelvis in Baganda women, although smaller in size than in most European populations, is of normal shape and configuration, and that the relatively small size was still within the normal range of variation between populations. But: 'The pubic arc is low in a much larger percentage of cases than in any other population thus far examined. The pelvic brim configuration is usually brachypellic [short] or mesatipellic because of the low pubic arch. For the same reason, these pelves are generally contracted.'¹⁹¹ This explanation, while undermining the earlier cultural and racial explanations for the contracted pelvis in Baganda women, presents a rather convincing explanation for their reproductive problems. The small size of the female pelvis, caused by childhood malnutrition and infection, and the continuation of poor nutrition in adult life must not only have delayed their biological maturation, but will also have affected the frequency of pregnancy complications both in Buganda and in Bunyoro.¹⁹²

It has been argued above that health and demographic processes are subject to the political economy and to socioeconomic conditions, which either maintain health and create suitable conditions for population growth or undermine it, leading to disease, increased mortality and low fertility.¹⁹³ In Buganda and Bunyoro, it was the crisis of social reproduction in the late nineteenth and early twentieth centuries which brought about the crisis in biological reproduction. The abolition of slavery and economic and social constraints on polygyny from the late nineteenth century onwards, together with the policy of forced labour and cash cropping in the early colonial period, interfered with the realm of production in Buganda and Bunyoro, leading to a decline in maternal, infant and child health because of aggravated seasonal hunger, chronic malnutrition and a high incidence of epidemic and endemic disease. Population growth in the early colonial period was checked by low fertility because of the frequency of miscarriages and prematurity, and by high infant and child mortality, all factors largely attributable to increased chronic malnutrition. Intra-household inequality, which has tended to marginalise women and children in

¹⁹⁰ David Allbrook, 'Some Problems Associated with Pelvic Form and Size in the Ganda of East Africa', *Journal of the Royal Anthropological Institute of Great Britain and Ireland* 92 (1) 1962, 102-114, especially 112-113.

¹⁹¹ Srboľjub Zivanovic, 'Pelvic Form and Incidence of Hernia in Uganda', *Current Anthropology* 14 (3) 1973, 291-295, on page 294. See also Ellison 2001, 157-159.

¹⁹² Caesarean section was practised in Bunyoro in the nineteenth century to help women give birth, indicating that pregnancy complications were common. Childhood and adult malnutrition in women, manifested in small pelvic diameter, therefore posed considerable problems for biological reproduction. See Felkin 1884, 922; Davies 1959a, 47-57.

¹⁹³ See Cordell et al. 1992, 41-44.

particular, exacerbated the problems of maternal and child malnutrition, which, by contributing to greater ill-health in terms of nutritional deprivation, further compromised the productive and reproductive capacity of society.¹⁹⁴

¹⁹⁴ Cf. Bryceson 1990, 46, 51; *Uganda. Growing Out of Poverty*. Washington: World Bank 1993, 10-12.

VIII Conclusions

THE POLITICS OF POVERTY

It was argued in the first chapter that poverty and hunger are fundamentally political questions in the world of today, and this was certainly the case in pre-colonial and colonial Africa. Pre-colonial Buganda and Bunyoro were societies characterized by sharp differences in economic and social standing between the rulers and the ruled, the elderly and the young, and the men and the women. The differences grew greater as political power became more centralized, with complex and overlapping bureaucratic structures. As states, with their administrative apparatuses, grew more complex, and possibly also more efficient, there was no matching development in the economic and social spheres regarding production and reproduction. Instead, these issues became politicized, i.e. the societies' productive and reproductive potential was not fully utilized but restrained for the sake of political control. Within the productive regime this meant that ratio of producers to non-producers was becoming increasingly unfavourable. By the mid-nineteenth century the economic and demographic basis of Buganda was already too narrow to support the state and everything that went with it. Increased extraction of tribute endangered reproduction by increasing the relative costs of marriage and by draining households of their servile labour. Thus the deteriorating conditions of production and reproduction were manifested in lower fertility and in heightened infant and maternal morbidity and mortality, thus further contributing to disruptions in primary production and social reproduction. Nineteenth century Buganda had to make extensive use of military force to remedy its productive and reproductive failures.

In Bunyoro the productive and consequent reproductive crisis proceeded at a somewhat slower pace. Bunyoro's broader agrarian economy and less centralized political system mitigated the economic exploitation of subjects by their leaders. This society based on shifting cultivation and cattle herding was a more mobile one, making economic, social and political allegiances of necessity more flexible. Yet the weakness of the kings fostered political dissidence and dynastic struggles, which were capable of plunging parts of the kingdom into long-lasting civil strife. The lack of unity also made Bunyoro vulnerable to external predations - an ever more frequent source of insecurity in the nineteenth century - as both the Baganda and the Egyptians attempted to tap the sources of Bunyoro's wealth by force.

Thus, by the second half of the nineteenth century, both kingdoms could be characterized as politically and socially 'unhealthy', for they were unable to find sustainable ways of solving their problems relating to production, reproduction and political power. Instead, they came to rely increasingly on coercion and violence to secure the necessary resources. Aggravated by the emerging external opportunities and threats, their predatory politics led to the over-exploitation of scarce natural and human resources and the destruction of social cohesion and the moral economy.

This demoralization process was completed under colonial rule. Colonialism, by shifting the legitimacy and material basis of power of the local elites away from the people to the colonial state, removed the last obstacles to outright exploitation of the peasant masses. The peasantry could be endlessly squeezed without fearing the consequences for one's own political and economic standing. As in the pre-colonial era, the functioning of the state required that the peasants should not be allowed to

prosper but should be subjected to impoverishment and deprivation in order to be effectively controlled. The peasants in Buganda and Bunyoro were squeezed between the colonial state and its agent chiefs, including the local chiefs, who all demanded their share of the fruits of these people's labour. The competition over peasant resources was fierce among the chiefs of different ranks, for peasant labour was the key to the new material wealth brought about by colonialism. Thus, where the pre-colonial states had exerted a great strain on the societies' human and material resources, the colonial state did so to an even greater extent, for the much-desired financial self-sufficiency of the Uganda Protectorate, when it was finally achieved, was torn off from the backs of its peasant population.

The economic, social and political subjugation of the peasantry by the leaders was not only quietly accepted by the colonial state but was regarded as vital for the functioning of the whole system. The British eagerly relied - indirectly - on what they considered to be 'a native custom' or 'tradition', whether it had to do with the forced cultivation of cotton, compulsory venereal disease treatment or the whipping of 'lazy' and 'disobedient' women by their husbands and chiefs. There appears to have been a firm belief among the British in Uganda, whether officials, missionaries or businessmen, that a certain amount of coercion was acceptable for the sake of progress and the common good. This was, of course, in accordance with the general spirit of the times. Yet the coercion and violence applied in Uganda was against the principles of trusteeship that were used to market British imperialism and colonialism, something which was commonly seen as morally superior to what was going on in the Belgian Congo or German East Africa, for example. The British colonial rule in Uganda before 1939 was not such a charitable, benevolent and warmly welcomed undertaking as has sometimes been described in the literature, but, like other colonial systems elsewhere in Africa and throughout the world, it was subject to harsh local realities and great external pressures. In practise, this meant that Uganda was not developed for the good of the majority of its inhabitants, but for the good of the British taxpayers and businessmen.

The economic opportunities brought out by colonial rule in Uganda were unequally distributed - geographically as well as socially - being far greater in Buganda and in the cotton areas of the Eastern Province than in Bunyoro or any other part of western or northern Uganda. The political prospects entailed in private land tenure were quickly realized by the leading chiefs in Buganda and Bunyoro, although the chiefs in Buganda did not direct their energies to the expansion of commercial agriculture until the 1920s, but concentrated on levying rents and other payments from their tenants. Similarly, the majority of the wealthy Baganda chiefs did not grasp the opportunity to use their authority and knowledge of local conditions to become traders, or to enter the cotton industry as independent ginners. Instead, these lucrative businesses were mostly taken over by Indians. During the cotton boom of the 1920s, the chiefs made profits by pushing their tenants into growing cotton for them, but this upsurge in economic activity was rather short-lived. Thus, though there were fundamental judicial changes related to land tenure, the use of land - not to mention the symbolism attached to it - did not undergo any transformation on a similar scale, but remained more or less "traditional". For the chiefs, land tenure was still primarily a tool of political control all the time the peasants continued to offer the means for material prosperity.

The energies of the local chiefs in Bunyoro were directed towards the demands of private land tenure in a similar manner to that adopted in Buganda, and to resisting the growth in the political and economic influence of the resident Baganda colonial agents. The delay in providing even the basic economic infrastructure, a deliberate choice by the colonial state, and the fear of losing land (and hence political power) to foreigners - generated and maintained by the British and the Baganda - effectively sapped economic development in Bunyoro.

As the gap in wealth and welfare between the chiefs and the peasants grew wider, it became the objective of every peasant in Buganda and Bunyoro to acquire the status of a chief in order to be shielded from exploitation. In Buganda, private land tenure offered an opportunity for ordinary peasants, and in some cases even for women, to become landowners. The possession of *mailo* land was commonly associated with chiefly status, even though it might only be a matter of owning a few acres. In order to escape the drudgery of peasant life, every means was seized upon to acquire the necessary capital to buy land. In Bunyoro, in the absence of private tenure, the *kibanja* system first emerged as a means of rewarding the king's favourites, and of ensuring that as much land as possible would remain under local control. By the 1930s the system had grown immensely and become a means by which local petty chiefs could seek "private" land - as it was understood - and secure their own political and economic standing. After state intervention in the early 1930s, the *kibanja* was reformed to give the peasantry greater protection against exploitation by the chiefs. Though the effects of the reform are difficult to assess in the absence of reliable evidence, it can be assumed that it contributed towards improving the economic and social security of the peasants, thus favouring economic development and even population growth.

In the course of the 1920s, and particularly during the cotton boom, the exploitation of the peasantry in Buganda reached proportions which, it was argued, tended to undermine cotton production - the backbone of Uganda's colonial economy - altogether, and slow down the development of the economic infrastructure. The consequence was that the colonial state stepped in to protect the peasantry. The underlying motives were not only economic and humanitarian but also political: it was argued that the landed aristocracy and their power, consolidated by the 1900 Agreement, had become a major obstacle to progress in Buganda. In actual fact, the colonial state and the chiefs were clashing over the most valuable resource that Buganda possessed, the peasants and their labour, a resource which both of them needed for their own political and economic ends. By limiting the chiefs' rights over the peasantry by legislative means, the colonial state aimed at improving economic activity and securing a greater labour reserve for the government. The plan misfired, however. The peasants, who enjoyed considerable security of tenure under their chiefs after 1928, only committed themselves to cash cropping and wage labour to the extent that was required to obtain a piece of land, and thereby to become "a chief". The majority of them, for whom this remained impossible because of the high price of land, the low incomes and wages obtainable from cotton growing and the high taxation, continued to struggle under their chiefs as before. As far as labour was concerned, it turned out that the chiefs could offer the peasants far more attractive conditions of work than the colonial state, which had to rely extensively on forced labour for public projects.

The economic depression of the 1930s exposed the weakness of Uganda's colonial economy. As cotton prices plummeted, production soared, with the peasants struggling to maintain their level of income and standard of living. At the same time, the financial troubles of the colonial state forced it to re-evaluate its earlier policies. Major development projects had to be cancelled or postponed as the various colonial departments cut down their spending. Nevertheless, some improvements took place. Whether it was the new generation of officials, new departmental priorities, or the harsh conditions of life during the depression years it is impossible to tell, but the colonial authorities finally acknowledged that Uganda, and Buganda and Bunyoro in particular, was suffering from massive public health problems indicative of deep-rooted poverty.

Poverty, in all its relativity, was not another evil introduced by colonialism but something which African societies were well accustomed to dealing with. In the pre-colonial period such social institutions as voluntary servitude, human pawns and clientship had evolved to shelter individuals and communities from isolation and subsequent vulnerability, so that the threat of poverty drove people to form ties of dependence which could be very long-lasting. Later on, poverty and destitution, or the threat of these, were used as a political weapon to keep the peasant masses under strict control. As has been seen in the case of Buganda, this method of political control was fairly effective and beneficial for those in power, but its material and human basis rested on warfare and territorial expansion and was only functional as long as the kingdom had access to much larger external resources beyond its own narrow economy.

Under colonial rule, access to outside resources became limited or ceased altogether. Together with the requirements and restrictions brought about by colonialism, the brunt of the maintenance of the heavy and expensive system of administration fell entirely on the Baganda and Banyoro peasants in the form of taxes, rents, tribute payments and labour obligations. This brought a new kind of poverty, a poverty free of mutual social obligations that deprived households of their labour, tools, livestock, agricultural surplus and even means of subsistence and gave them nothing in return, no security whatsoever. Colonial poverty was not a poverty of the few but a poverty of the masses, which deprived them of their material possessions, uprooted them and drove them onto the road in order to escape the tax collectors or in search for work. Colonial poverty was above all a lack of choices, or means of subsistence, which was brought to bear most heavily on the most productive part of the population, the women, reducing their capacity for both production and reproduction.

POVERTY AND REPRODUCTION

Biological reproduction in Buganda and Bunyoro had probably always been precarious. Childhood malaria, hookworm and food and waterborne infections, together with seasonal food shortages, contributed to the prevalence of malnutrition and disease and high infant and child mortality, although it is true that such social institutions as polygyny and slavery contributed to greater reproductive health by reducing the workloads on women and allowing them longer post-partum seclusion from their husbands and perhaps a prolonged period of lactation. Thus it can be argued that though much of the deprivation was endemic - springing from

environmental conditions, socio-cultural customs and political arrangements – the indigenous social institutions were capable of alleviating this distress to some degree, though it appears that by the mid-nineteenth century these institutions were already under strain because of indigenous political developments. In terms of successful reproduction, the improved food situation brought about by the gradual diffusion of American crops was probably the single most decisive factor up to the mid-nineteenth century.

With the growth of European political and ideological influence from the second half of the nineteenth century onwards, the social institutions of the Baganda - and to a somewhat lesser extent those of the Banyoro - came under increasing strain. Though slavery was officially abolished, servitude continued to exist under colonial rule both in traditional and new forms, of which forced labour in its different guises presents a good example. Clientship took on more oppressive forms as the old patron-client relations were transformed into landlord-tenant relations both in Buganda and in Bunyoro, where private land tenure was never officially introduced. Polygyny was never officially abolished, and prevailed as a privilege of the elite. The introduction of colonial taxation on top of the old and new forms of obligations meant the impoverishment of peasant households and constituted a threat to both production and reproduction.

Colonialism undermined social and biological reproduction not only by interfering with the social institutions that had favoured successful reproduction and population growth, but also by destroying the versatility and dynamism of the local food systems, thus increasing vulnerability to famine. The abolition of slavery deprived households of servile labour, and the general impoverishment of the peasantry under early colonial rule made polygyny economically impossible. The decrease in the number of cattle because of cattle disease, together with the cessation of such activities as fishing, trading in fish and also hunting, forced people to rely extensively on household cultivation - which in itself was insufficient for adequate year-round subsistence - contributing to a loss of diversity in food production and to a high incidence of malnutrition.

A great deal of the suffering in early colonial Uganda - more than has previously been assumed - was caused by chronic hunger and malnutrition. In his brilliant work on African poverty, Iliffe has argued that 'feast and famine waned together' during the colonial period. Feasting evidently waned faster, however, for the frequent food shortages and famines between 1898 and 1920 indicate that hunger became chronic, particularly in Bunyoro. The establishment of a colonial economy and the administrative logic of indirect rule ensured that subsistence possibilities became extremely narrow and the responsiveness of communities to crises was greatly limited. Societies had probably never been as vulnerable to drought and famine as they were in the early twentieth century. While it may be agreed that crisis mortality could be reduced by means of famine relief under colonial rule, this does not alter the fact that colonialism caused structural damage which increased vulnerability to famine in the first place, and, regardless of the effectiveness of food aid in lowering mortality, could do nothing to repair the long-term damage or to break the vicious circle of poverty and hunger.

Neither should the effectiveness of colonial famine relief be overestimated. Its success before 1920 in fact remained limited in Uganda, although it was undoubtedly successful in saving lives at the later stages of famines. The relief

operations were dependent on the availability of relief food from sources outside Uganda, however, since there was no adequate local supply, nor were there any reserves to be distributed to famine areas, a fact that points to a major flaw in Uganda's colonial economy - the inability to produce enough food to feed the population. The dependence on external food reserves made famine relief expensive, burdensome and time-consuming. In the 1920s and 1930s it was largely the improved rainfall conditions rather than improvements in famine precautions and famine relief, or any reduction in the vulnerability of rural communities, which kept large-scale famines at bay.

The double impact of malnutrition and disease on female reproductive health in early colonial Buganda and Bunyoro was a grave one. Demographically, this meant slow population growth before the 1920s, since fertility remained relatively low due to the high incidence of intrauterine deaths and other complications associated with pregnancy while infant and child mortality were high because of endemic and epidemic disease and kwashiorkor. With the exception of plague, epidemic diseases waned in the 1920s, mainly because people developed immunity to the commonest infections, and because there were no severe famines.

The demographic impact of colonialism in Uganda is difficult to assess. It appears, however, that the alleged population decline in Buganda in the early colonial period was mainly attributable to migration and sleeping sickness, though a decline in fertility caused by malnutrition and disruptions in family life apparently played some role. In Bunyoro, the migration of able-bodied young men to Buganda in search of work, or their escape to the Congo or some other distant location, drained the agricultural work force away from the farms, leaving the country vulnerable to food shortages and famines. It can therefore be argued that hunger and malnutrition - in common with disruptions in family life - contributed significantly to the prevalence of ill health in Bunyoro and the consequent failure in biological reproduction.

Apart from the syphilis scare, there was no serious outcry over the crisis of reproduction in Buganda and Bunyoro before the 1930s. Contemporaries apparently believed that venereal disease was largely responsible for the reproductive problems. The concern of the African leaders was undoubtedly partly genuine and aggravated by the hysteria among the British, but in Buganda, at least, the chiefs must have realised the opportunities for greater social control that were afforded them by the anti-venereal disease measures. In other respects, the lack of any substantial visible concern over the poor health and reproductive problems of the people suggests that the élites either did not recognize the problem, were indifferent to it, or were already accustomed to circumstances of this kind. The sleeping sickness epidemic demonstrated that the first two options were unlikely, for the leaders in Buganda showed genuine concern about the fate of their people but were dismissed by the Protectorate officials, with disastrous consequences. Yet the sleeping sickness epidemic was a tragedy of such magnitude that it could not simply be passed over. More common everyday deprivation and suffering may have escaped attention, or was simply regarded as insignificant or normal, so that it did not require political intervention.

Although the colonial administrators in Uganda recognized the great prevalence of poverty and ill health, the logic of the colonial system there prevented implementation of the political and economic reforms necessary to alleviate poverty.

Consequently, any attempts to reduce poverty and disease by means of piecemeal medical intervention were useless. It was only in the late 1920s, when poverty and subsequent ill-health were seen as factors undermining productivity, that political and economic reforms were first considered. Even so, apart from the 1927 legislation in Buganda, no reforms were undertaken to improve the economic standing of the peasantry. By the mid-1930s it was clear that poverty and sickness stood in the way of progress and development, and that the problem required urgent attention and concrete action. The country was nevertheless unable under the circumstances to produce enough economic profit to fund the development projects that would have been essential. Even minor schemes were dependent on loans from the Imperial Treasury. Thus improvements in public health would have required radical political and economic reforms that would have opened up new economic opportunities for the peasantry, thus increasing productivity and bringing in extra revenue for the government. This was inconceivable, however, in the political and ideological atmosphere that prevailed prior to the Second World War.

Regarding demography and reproduction in the context of early colonial Uganda, it must be remembered that Buganda and Bunyoro do not represent the common trend, but are exceptions. Elsewhere in Uganda, even in areas severely hit by destructive famines, the population grew in the early colonial period, this being most evident in the west, particularly in Ankole, Kigezi and Toro, and in Busoga and various other places in the east, i.e. in areas where the impact of colonialism on the old ways of life was only moderate before 1939, or at least not as grave as in Buganda and Bunyoro. Thus, what emerges from this dichotomy between Buganda and Bunyoro and the rest of Uganda is that we still do not completely understand the factors - social and biological - that regulated reproductive and demographic regimes in early colonial Africa.

The explanation provided in this work for the somewhat exceptional courses of development observed in Buganda and Bunyoro in the early colonial period is that areas where colonialism caused only moderate structural damage to the indigenous economic and social systems - particularly food systems - fared better in terms of population and health than areas where the functioning of these systems was seriously hampered. This explanation, like any other, has its limitations when applied in a more general context. While it can hardly be denied that hunger and malnutrition have a considerable effect on reproduction and population growth, they still do not seem to successfully explain the demographic trends in Africa from the 1950s onwards. It remains one of the crucial questions in African demographic history how rapid population growth can take place under conditions of persistent poverty and chronic malnutrition - something which has been portrayed as characteristic of sub-Saharan Africa since the colonial period. The search for an answer to this question would require a research project of its own, however.

PAST AND PRESENT

In many ways the situation as it existed in early colonial Uganda is analogical to the present-day reality in many African countries. Although there have been great improvements in the economic, social and health sectors since the early colonial days, it is a sad fact that poverty, hunger and disease are still frequently named as major obstacles to progress and development. As in colonial times, the fundamental

reasons are political. The poverty in Africa is still mostly a matter of the lack of any other means of subsistence than small-scale agriculture, which has for a long time, for one reason or another, been seen as a solution to the problems of African development. Since the predominantly rural African economies are undeveloped and therefore incapable of generating greater national incomes, the material basis for the operation of many African governments rests on external sources. A heavy and inefficient administrative bureaucracy ensures that much of the financial assistance received goes to the running of the inflated public sector instead of being invested in development projects in the agricultural and social sectors. It appears that the state - with its heavy administrative apparatus - does not exist to serve the people, but to advance the individual good of a small group of privileged individuals as in the pre-colonial and colonial periods.

Academics and politicians both in Africa and in the West have argued over the decades about the causes of Africa's misery. African leaders, with the support of local and western academics, have accused the West of neo-colonial policies and protectionism, which has enhanced Africa's dependence on the West and has deprived African countries of the income that they so much need for development. The counter-argument claims that the African post-colonial leaderships have failed to meet up to expectations regarding democracy, good governance and civil rights, and have thus failed to create safe conditions for investments and economic development.

Both of the arguments are correct. The Western countries - particularly the former colonial masters - can be accused of refusing to renounce the old ties of dependence, and of using their economic and political power to defend their national economic interests - mainly agricultural - against competition from the Third World countries. The West has pinned its hopes on development co-operation and aid, but, as has sometimes been argued, such co-operation is by and large cosmetic and does more to soothe the conscience of the donor countries - most of whom cannot in any case meet the United Nations' guidelines for development aid - than actually to generate development where it is needed. The Western countries in turn, together with some African academics and opposition politicians, blame the African governments and leaders - who are often merely being loyal to their kind - for putting their individual interests ahead of those of their nation. To be honest, some African leaders have shown a remarkable lack of credibility - something common to politicians the world over but particularly striking in Africa - by barking at the donors, mainly for domestic political reasons, while at the same time accepting the aid, which in many cases forms more than fifty percent of the annual national budget and makes it possible for them to run their states and to remain in power. Many such presidents-for-life surely realize that the removal of neo-colonial dependence and the limitations on trade, if this were to happen, would not automatically generate development, but would require the support of an open society in which individual innovativeness would be allowed to flourish in all walks of life. It would also require the political leadership to be subjugated to the free will of the people.

The creating of conditions suitable for development would require a change of conduct on both sides. Unfortunately, it is not very realistic to assume that the Western countries would sacrifice parts of their agriculture for the sake of the Third World, nor is it likely that African governments would willingly direct more of the aid they receive - insufficient as it is - to local piecemeal development projects, since

their successful completion and long-term maintenance would require more effective mobilization of local resources for development. Nor can it be assumed that the donors would place the inefficient governments between the hammer and the anvil by requiring concrete results as a precondition for the continuation of aid. This would only spark unrest in a continent already marred by violent internal and international conflict. Therefore, the Western donors are not actually buying development with the financial aid, but the perpetuation of the *status quo*. It seems that, as in colonial times, progress is being sacrificed for political and social stability.

Appendices

Appendix 1

MUHINYO/BIHIMBO DISEASE IN EARLY COLONIAL UGANDA DIAGNOSING A NEW DISEASE

In his report for the year 1908, Hodges, the Principal Medical Officer, referred to the existence of deficiency diseases in the Protectorate. Beri-beri had not been encountered, but '... an endemic, chronic disease undoubtedly exists in the south of the Protectorate, being scattered through Toro, Ankole, and Buddu [in Buganda], of which the exact nature is still doubtful. It is quite possible that more than one disease exists under the same native name, *muhinyo*, *muhinye*, or *bihimbo*. Further inquiry is being made.'¹

There was nothing unusual in the fact that the disease mentioned by Hodges had not been seen before, for tropical medicine was still evolving around that time and new findings were still occasionally being made. When Hodges wrote his report, preliminary research into this unidentified disease was already under way, being conducted by Colonel David Bruce, who was working in Uganda with the Royal Society's Sleeping Sickness Commission. Bruce published his report on *muhinyo* in the Uganda Official Gazette in June 1909, concluding that the disease was Malta fever.² This definition, which was accepted by medical authorities such as Albert Cook,³ was not unanimously agreed upon by Bruce and the government medical officers, and much dispute and debate continued after Bruce's report had been published.

The story of *muhinyo*,⁴ as the disease was usually called, started early in 1906, when a touring Collector searching for traces of tsetse and sleeping sickness came across an unknown disease which was causing great anxiety among the people in Egara, Ankole. He reported that the locals called the disease 'Bihimbo', meaning 'walking with a stick'. It was said to be a new disease, apparently of long duration, and suspected by the Baganda resident in the area to be sleeping sickness. However, after seeing people recover from it, both the locals and the Baganda had come to the conclusion that the disease was something else.⁵

Following the common practice, the officer reported his findings to his superiors, who in time forwarded them to London. Were it not for the bewilderment and terror caused by sleeping sickness, *muhinyo* might have been buried and

¹ Uganda Protectorate. *Medical Department 1908*, 34.

² The Official Gazette of the Uganda Protectorate, Vol. II, No. 30, 1909, 182-3. Malta fever is referred to in medical dictionaries today as *brucellosis*. For Bruce's work on Malta fever and sleeping sickness, see Ransford 1983, 113-27.

³ Cook 1945, 276.

⁴ The terms *muhinyo*, *bihimbo*, and *munyinye* are treated here as synonyms referring to the same disease.

⁵ Uganda Protectorate. Intelligence Report No. 27, 19 March 1906. CO 534/2/13370/PRO.

forgotten as an uninteresting matter, but the sleeping sickness epidemic had put the officials in London on the alert and made them curious about anything which might pose a potential epidemiological threat of the same kind. London therefore ordered that the disease afflicting the people in Egara should be investigated.⁶

The investigations began in July 1906, when Dr. Bagshawe, who had been sent to examine *muhinyo* in Egara, toured Ankole collecting information about the new disease. He encountered people suffering from it in the village of Kicumu, and ascertained at once that it was not sleeping sickness, for there were no tsetse flies around, even though the symptoms bore some similarities to human trypanosomiasis. Bagshawe further noticed that the locals frequently confused the disease with sleeping sickness, or *mongota* as it was called by the Baganda. In fact, he believed that many Europeans were also likely to confuse the two, because of the remarkable similarity in symptoms. According to Bagshawe, people called the disease *ruhinyo* or *okwehinnya* in Lunyoro, meaning 'stretcher' and 'winching', respectively. He learnt that the people were familiar with the disease and that it had come from Entebbe two years earlier, i.e. in 1904 or 1905.⁷

Bagshawe continued his journey along the Kakumiro-Mbarara road to the villages of Karwenyo and Izina. In Karwenyo he estimated that twenty-five per cent of the people were suffering from the disease. He managed to examine some cases, and found them all in a state of general weakness. The most common symptoms included swelling of the lower limbs and tibiae, oedema of the face, tenderness of the calves, muscular wasting, numbness and emaciation. Mortality was high, but there were some cases of recovery. The disease seemed to be of long duration, and after careful examination he diagnosed it as beri-beri.⁸

Governor Bell reported Bagshawe's findings to London in November 1906, saying that *muhinyo* was now believed to be beri-beri, or something closely akin to it.⁹ During the following months further observations were made. Sub-Commissioner Leakey reported *bihimbo* in Buganda, where people also confused it with sleeping sickness. The disease was said to have arrived from Ankole via Buddu, and was prevalent in Mawogola and Buwekula, i.e., the western *sazas* of Buganda. It was said that it made its first appearance in Lugard's time, during the Protestant-Catholic war of 1892. The symptoms resembled those of sleeping sickness: a huge appetite, sluggishness and later weakness and sleepiness, but it was noted that, contrary to sleeping sickness, not all the sufferers necessarily died, and some people had been sick for years. Cases of spontaneous healing had also taken place. People told of a chief in Buddu who had become very sick with *muhinyo* but had eventually

⁶ Elgin to Bell, 11 May 1906. Secretariat Minute Paper, A42/84/UNA; Elgin to the Officer Adminstrating the Uganda Protectorate, 14 Sept. 1906. Secretariat Minute Paper, A42/84/UNA.

⁷ Report by Bagshawe, 1 Aug. 1906, enclosed in Bell to Elgin, 5 Nov. 1906. Secretariat Minute Paper, A42/84/UNA. It has been suggested that *muhinyo* was actually a local word for sleeping sickness, but this view has not gained unanimous acceptance. See Morris 1960, 213; Good 1972, 559, especially note 70.

⁸ Report by Bagshawe, 1 Aug. 1906, enclosed in Bell to Elgin, 5 Nov. 1906. Secretariat Minute Paper, A42/84/UNA; Bruce to Chief Secretary, 2 June 1909. Secretariat Minute Paper, A42/84/UNA.

⁹ Bell to Elgin, 5 Nov. 1906. Secretariat Minute Paper, A42/84/UNA.

recovered after having killed and eaten 193 goats during a period of 12 months.¹⁰

Alongside Bagshawe's investigation, *muhinyo* in Ankole was also studied by Dr. Lowsley:

'It is said to be non-contagious, and the well and afflicted live together in the same hut; usually there was only one sick person in each hut, though in one case I found three persons all ill. The only suggestion of contagion was that if a healthy person ate a sick man's food, he would become sick also. It is more prevalent in the dry weather and tends to decrease during the rains... [...] ...The old are the only persons who die, the young and strong always recover... [...] ... I am told that should a patient be going to die "UPERE" (itch) appears on the legs round the ankles but not otherwise. No other rash is known. Should the patient start to get fat (ascites or oedema) during his illness, and especially [should] his scrotum swell, he was certain to die in 10 days.'¹¹

Lowsley found that the disease did not involve high mortality, and he was absolutely certain that it was not sleeping sickness. Finally, he diagnosed it as dengue with joint pains.¹² The official view, however, adhered to Bagshawe's diagnosis, and it is unclear whether Lowsley's findings were ever reported to London. In 1908, however, they were noticed by David Bruce, who was the first person to undertake more detailed research on *muhinyo* after Bagshawe and Lowsley. Bruce was first told about the disease by Apolo Kagwa, the *katikiro* of Buganda, in October 1908.¹³ At that time alarming reports were coming from the distant parts of the Protectorate on the ravages of *muhinyo*, and, considering Apolo Kagwa's concern, it seems that *muhinyo* must also have been prevalent in Buganda, otherwise it is unlikely that he would have mentioned it to Bruce. Thus, by late in 1908, the reports submitted by the Government doctors had convinced Hodges that something serious was taking place in the western parts of the Protectorate. By the time finished the annual report for that year, in January 1909, Bruce had already launched his inquiries.

These inquiries were not very thorough, however. Bruce only examined one sick person, in January 1909, on his way to Mpumu with the Sleeping Sickness Commission. He found that the patient, who had been ill for three months, '... was extremely weak and thin, but otherwise showed no symptoms which pointed to any special disease. His condition was such as one would expect to result from any severe fever, such as typhoid or Malta fever.'¹⁴

¹⁰ Leakey to the Deputy Commissioner, 5 Feb. 1907. Secretariat Minute Paper, A42/84/UNA.

¹¹ Interim Report re. Muhinya, 20 July 1906. CO 536/8/PRO.

¹² Interim Report re. Muhinya, 20 July 1906. CO 536/8/PRO; Comment by Dr. Bagshawe on Dr. Lowsley's Interim Report on Muhinya, 13 Aug. 1906. CO 536/8/PRO.

¹³ Sir David Bruce, "'Muhinyo', a disease of natives in Uganda', in Sir David Bruce et al., *Collected Papers on Trypanosomiasis, 1909-1911*. WTL.

¹⁴ Bruce to Chief Secretary, 2 June 1909. Secretariat Minute Paper, A42/84/UNA.

No further examinations were undertaken by Bruce before the end of May. Meanwhile, observations on *muhinyo* were made by the Medical Officers. A.C. Rendle reported that the disease was rampant in Toro and around Lake Edward in the south-west.¹⁵ His description on *muhinyo* in Toro in 1909 was the most detailed so far:

From every hut, natives in different stages of illness crawled out. They all stated they were suffering from the same disease, which they called *Muhinyo*. This disease attacked all ages and both sexes - who presented a miserable picture of pain and debility. Many were emaciated, though not in an extreme degree, and all were affected with itch.

The main [symptom] in all the cases was the prominent swollen abdomen.

I was struck by observing that in one instance a family of eight people, living in two huts, were all affected with the disease.

On the following day, February 24th, I had a visit to Matayo Machacha's village. Matayo informed me that during the three months previous to my visit he had lost in his village only: males =46 and females= 6. Total 52.

On questioning Matayo and his people concerning the illness, *Muhinyo*, they stated that the symptoms were as follows:-

1. Fever for about a month in a more or less acute degree, followed by fever in varying degree throughout the illness. The patient is subject to relapses and exacerbation of fever.
2. Pain in legs, especially knees and thighs, and back. This often extends to shoulders and other parts of the body. The pain is very acute at first and persists in a moderate degree throughout the illness.
3. Swelling of the abdomen. The spleen was said to be swollen in most cases and pain usually referred to that area. Dropsy of feet and scrotum was not uncommon, but not a constant feature. This [occurred] frequently during the course of the illness.
4. Death nearly always occurred after a period varying from a few months to a few years (usually about three years). It was usually preceded by epistaxis and haemorrhage from the bowels with frequent stools resembling dysentery. Occasionally pneumonia carried them off. A few cases are said to recover, but I did not see them myself.
5. The foregoing symptoms are always accompanied by progressive loss of strength. Wasting is not usually caused to an extreme degree, and the

¹⁵ Uganda Protectorate. *Medical Department 1913*, 89-90.

digestive system does not appear to be affected in an extreme degree until the last stages of the disease. The appetite remains unaffected during the greater part of the illness and is said to be abnormally increased in certain areas.¹⁶

After undertaking some examinations, Rendle concluded that the disease was kala-azar (*leishmania visceralis*), known at the time as the 'Black Death of India', thus giving a third differential diagnosis of *muhinyo*.¹⁷

Convinced of the severity of the disease, Bruce and Hodges left Entebbe in May to study cases in Buddu. On 24th May they met up in Masaka with Rendle, who had arrived from Mbarara, and Dr. C.H. Marshall, who happened to be passing through the area. Together the four men examined fifty persons suffering from *muhinyo*. Apparently persuaded by Bruce's opinion, they concluded that the disease was Malta fever, caused by the bacterium *Micrococcus melitensis* and characterised, according to Bruce, by a long, irregular course, frequent relapses, sweating, rheumatic pains and inflamed joints.¹⁸ Their diagnosis did not rest on a very solid basis, however. The blood tests taken from those 50 patients in Masaka revealed nothing more than widespread anaemia, and only five of the patients had *M. melitensis* in their blood. Yet Bruce seemed to be quite convinced that the disease was Malta fever.¹⁹

Since Malta fever, or undulant fever as it was occasionally called, was mainly a disease of goats, Bruce expected to find traces of *M. melitensis* in the livestock population in *muhinyo* areas. He therefore had fifty goats brought from the *muhinyo* area in Ankole, with the help of Apolo Kagwa, to be examined by Rendle in order to establish the diagnosis with certainty.²⁰ Bruce believed that *M. melitensis* infected people when they drank goat's milk, or ate goat's meat that was not properly cooked.²¹

His diagnosis and "foresight" about *M. melitensis* and Malta fever were based on his earlier work with the latter on Malta, where sailors who had drunk goat's milk infected with *M. melitensis* contracted a disease with symptoms similar to those he claimed to have found in the cases of *muhinyo*.²² For this reason further inquiries

¹⁶ Uganda Protectorate. *Medical Department 1913*, 89.

¹⁷ Uganda Protectorate. *Medical Department 1913*, 89; Bruce to Chief Secretary, 2 June 1909. Secretariat Minute Paper, A42/84/UNA.

¹⁸ Bruce et al. 1909-1911, 485; *The Official Gazette*, 182.

¹⁹ Bruce et al. 1909-1911, 486-487.

²⁰ Bruce to Chief Secretary, 2 June 1909. Secretariat Minute Paper, A42/84/UNA; Bruce to Acting Chief Secretary, 26 Aug, 1909. Secretariat Minute Paper, A42/84/UNA.

²¹ Bruce to Chief Secretary, 2 June 1909. Secretariat Minute Paper, A42/84/UNA; *The Official Gazette*, 183. It was also proposed that the habit of keeping goats inside the houses contaminated food with their urine, and the contaminated food infected people. See Bruce to Chief Secretary, 26 Aug. 1909. Secretariat Minute Paper, A42/84/UNA.

²² David Bruce, *Malta Fever*, 1-4. G4/Box 15/WTI/RST/WTL; D.J. Vasallo, 'The saga of

into cattle-rearing habits were ordered in the areas affected by *muhinyo*. Leakey, the District Commissioner in Toro in 1909, argued that people in the *muhinyo* area of Toro never drank goat's milk, and that most of them were too poor to obtain cow's milk.²³ Bruce was obviously not very happy to hear of Leakey's criticism, and in late August he explained the tests made on the goats: 'Although the experiments are not finished, I think I may safely assert that several of these animals are suffering from Malta fever.'²⁴ He further explained that the people's habit of keeping goats inside their dwellings at night might lead to contamination of their food with the bacteria, which would eventually infect the people themselves. Though the tests were still incomplete, he held firmly to his previous view: '... in my opinion, all the cases submitted to me are Malta fever and nothing else.'²⁵

The laboratory tests were completed in October 1909:

'... the blood of three [goats] was found to give the agglutination reaction with *Micrococcus melitensis* [sic] got from a case of '*Muhinyo*' and also with the germ of Malta fever brought from London. One of these animals was then killed and cultures made of its spleen. These cultures grew a micrococcus [sic] which had all the cultural and morphological characters of the *Micrococcus melitensis* [sic]. Finally, these micrococci [sic] were tested as to their power of agglutination with the known Malta fever serum, and were found to react in high dilution... .. This, then, completes the proof that '*Muhinyo*' is Malta Fever.'²⁶

Although only three goats out of fifty carried *M. melitensis* in their blood, the laboratory results were taken as a proof of Bruce's diagnosis. Furthermore, reports regarding the goat-keeping habits of the area seemed to confirm Bruce's assumptions about the transmission of the disease.²⁷ There was only one area for which reports were missing. This was Masaka, in Buganda, where the District Commissioner, Baines, had not received the instructions from Entebbe for the further examination of people's habits relating to cattle. He received them in early December and was told to hurry. His report was ready in mid-December, by which time Bruce had already left Uganda. He would have found Baines' report interesting, for it contradicted his theories regarding the transmission of the disease. Baines found that the disease was referred to locally as *munyinka*, which, according to him, meant

brucellosis: controversy over credit for linking Malta fever with goats' milk', *The Lancet* 348 1996, 804-808.

²³ Leakey to Chief Secretary, 13 Aug. 1909. Secretariat Minute Paper, A42/84/UNA.

²⁴ Bruce to Chief Secretary, 26 Aug. 1909. Secretariat Minute Paper, A42/84/UNA.

²⁵ Bruce to Chief Secretary, 26 Aug. 1909. Secretariat Minute Paper, A42/84/UNA.

²⁶ Bruce to Acting Chief Secretary, 1 Oct. 1909. Secretariat Minute Paper, A42/84/UNA.

²⁷ Bruce to Acting Chief Secretary, 1 Oct. 1909. Secretariat Minute Paper, A42/84/UNA; Watson to Chief Secretary, 13 Oct. 1909. Secretariat Minute Paper, A42/84/UNA; Chief Secretary to Director of S.S. Commission, 22 Oct. 1909. Secretariat Minute Paper, A42/84/UNA.

'curable'. It was said to have come from Ankole in 1903-4, spreading to Buddu and causing a serious epidemic in Mawogola in 1905-6, where it also attacked some of the chiefs:

'The duration of the disease, as stated by the Baganda, is from 1-3 years, symptoms intense pain in joints, especially knees and thighs, also constant headache, together with intense craving for food, meat especially. The Baganda believe that the chiefs invariably survive the disease, whilst [a] number of Bakope [peasants] die, owing to them being able to keep their strength on a meat diet.'²⁸

Baines reported that goat's milk was never drunk by the Baganda, and that only the peasants kept goats in their huts at night, but not the chiefs. Goat's meat was occasionally eaten, but cow's meat was an extremely rare addition to the diet. The disease was reported to be most prevalent in Buddu, but it was noted that the *bahuma*, the cattle herders and milk consumers, did not suffer from it.²⁹

In late 1909, when Bruce left Uganda, many points of incoherence still surrounded *muhinyo*. In the light of the available evidence it seems that the disease broke out on a larger scale in 1903-4 in Western Uganda, mainly in the cattle-rearing areas of Ankole and Toro, where it affected the herders and cultivators alike. The disease was also encountered in the *sazas* of Buddu, Mawogola and Buwekula of western Buganda, i.e. in the areas where herding was practised side by side with permanent cultivation. The fact that there are virtually no reports on *muhinyo* from Bunyoro is probably due to poor observation, for the Lunyoro names for the disease referred above indicate that it was also known there.³⁰ There seems to have been some confusion between *muhinyo* and human and cattle trypanosomiasis in Ankole, where people tended to understand *muhinyo* primarily as a cattle disease. They said that when the disease was raging among the cattle many of the herders also fell victim to it, but that where the disease killed the cattle and people very quickly in the olden days, the people could now live for years and sometimes even recover.³¹ The disease of 'the old days' may indeed have been trypanosomiasis, with symptoms similar to *muhinyo*.

CONFUSION PREVAILS

The doctors of the Uganda Medical Department did not seem to accept the diagnosis

²⁸ Baines to Provincial Commissioner, Kampala, 11 Dec. 1909. Secretariat Minute Paper, A42/84/UNA.

²⁹ Baines to Provincial Commissioner, Kampala, 11 Dec. 1909. Secretariat Minute Paper, A42/84/UNA.

³⁰ It was noted by one Medical Officer that the word *muhinyo* was derived from the Lunyoro language, being a synonym for *bihimbo*. See Colonial Office. Medical and Sanitary Correspondence, June 1906 to December 1910. London, 1911, 511.

³¹ Leakey to Deputy Commissioner, 5 Feb. 1907. Secretariat Minute Paper, A42/84/UNA.

given by Bruce, for the disease was still referred in the annual reports for the following years as *muhinyo* or *bihimbo* rather than Malta fever. It continued to be widespread, especially in the western parts of the Protectorate, where it was also looked for more carefully. New evidence of its symptoms and ravages was received from Ankole in 1913, and it was in his report on *muhinyo* submitted in that year that R.E. McConnell gave the best description of the disease since Rendle:

The earliest subjective symptoms of illness are not often at the same time recognized as being due to the disease. It sometimes seems to begin with an attack of fever, which is described as at times lasting up to three weeks. Thirst may supervene, with often a loathing for ordinary food, but a craving for meat. Severe pains constitute an early symptom. They often begin in the legs and thighs, but may do so in the back or arms. In any case these parts are all affected in time as is usually also the chest. The joints too become painful and stiff. The stiffness and pain in the back and legs causes the patients to assume a crouching attitude in moving about, and soon - in about a month - they usually find it necessary to use one or two sticks as aids in moving the dragging feet forward. They may later become so helpless that they have to be carried, and so weak that they cannot put on their own clothes. The joints may become permanently distorted. Intense headache is often one of the earliest symptoms, and it is very general in the course of the disease. The skin, instead of the usual blackish brown hue, assumes a sickly yellowish brown tinge, and presents a greasy and swollen appearance; subjectively it may present an abnormal feeling. Progressive and rapid wasting sets in early, so that by the end of a month their appearance is very miserable. Attacks of fever not infrequently supervene, though whether there is any regularity in their appearance, or whether they may not be often due to other causes, are matters of uncertainty. Profuse sweating may be another feature. Vomiting may or may not be a symptom, but they generally complain the swelling of the abdomen and a feeling of fullness after taking food. The nature of their food may, however, to some extent account for this. Heart palpitation and shortness of breath are very general. Dizziness may be a prominent symptom, so that apart from other reasons they may have to use the stick in maintaining their balance. In certain cases at the end of some six or eight months the body swells...

... A single[sample] of a few cases showed exaggerated kneejerks, some paresis, rapid pulse, diffuse apex beat, tremulousness of the tongue, general weakness and mental apathy. Nothing of interest was gathered from the examination of blood slides.

When recovery takes place the process is a slow one, and it is a question whether complete vigour is ever regained. Dr. J.H. Goodliffe, who examined a considerable number of *muhinyo* cases, reports that there is tenderness of the muscles on pressure (very marked in the calves), which persists throughout the disease, and that there is paraesthesia, anaesthesia, or

sometimes hyperaesthesia, of the skin of the lower and upper extremities.³²

McConnell challenged Bruce's diagnosis on the basis that Malta fever did not entail high mortality and was not sexually selective, while *bihimbo* in Ankole seemed to affect mostly males of all age groups. He noted that it resembled beri-beri, but was most likely a disease of its own origin, 'possibly cognate with beri-beri'.³³ Meanwhile, *muhinyo* was also examined in the Masaka District of Buganda by Dr. F.C. Doble. He recorded that the disease occurred in both sexes and in all age groups, but was more common in men. Headaches and fever were the first symptoms, followed by joint pains resulting in debility. Patients were thirsty and hungry, craving especially for meat. Although he seemed to consider *muhinyo* as an infectious disease closely resembling sleeping sickness, Malta fever, chronic malaria and rheumatic fever, he saw that the symptoms did not fit with any known disease.³⁴

In the course of 1913 new information was received from laboratory tests which seemed to challenge Bruce's theory on the transmission of the disease. Dr. Marshall reported that according to the tests, Malta fever did not spread through urine in its early stages but through blood.³⁵ This partially undermined the theory of transmission via food contaminated with urine.

The information collected on *muhinyo* between 1906 and 1913 was highly controversial, and contradicting views prevailed inside the Medical Department. First, there was a problem associated with the meaning of the terms *muhinyo*, *bihimbo* and *munyinye*. It was suggested that *muhinyo* referred to a person with contracted limbs and unable to move about by himself, while in *bihimbo* emaciation was also present and the person was able to move with the aid of walking sticks. These terms, as noted by Hodges, referred to the physical condition of the patient suffering from the disease. *Munyinye*, meaning 'curable', was used to describe the disease in Buganda, but it was thought that the term could mean the curable form of sleeping sickness. It seems that the different terms evolved to describe the physical condition of the patient during the different phases of the disease, *muhinyo* referring to its most critical stage. Second, there were differences in diagnosis detectable from observed cases. The symptoms presented quite a uniform picture regarding the onset, progress and outcome of the disease, but the diagnoses reached by different observers varied considerably. The features of beri-beri, dengue, Malta fever and kala-azar were accompanied by McConnell's findings about changes in hair and skin pigmentation. This led to an assumption of the existence of several unknown diseases instead of one. Third, there was uncertainty about the nature of the disease in relation to sex, as McConnell and Doble saw that it affected mainly men, while Bagshawe, Lowsley and Rendle maintained that it affected both sexes and all age groups. Finally, opinions were divided over the mode of transmission. Rendle and Doble felt that the disease was more or less infectious, possibly carried by an insect,

³² Uganda Protectorate. *Medical Department 1913*, Appendix V, 87-8.

³³ Uganda Protectorate. *Medical Department 1913*, Appendix V, 88.

³⁴ Uganda Protectorate. *Medical Department 1913*, Appendix V, 90-1.

³⁵ Medical Report on Malta Fever, 10 Oct. 1913. Secretariat Minute Paper, A46/1175/UNA.

while Bagshawe spoke about place or house infection. McConnell, referring to the testimony of the victims, was the only one to state that the disease was not infectious, for it did not seem to spread inside any single household. Amidst this confusion, no proper agreement on *muhinyo* was reached, except that the old views had to be re-evaluated: 'The consensus of opinion seems to be that we have to deal with one or more new diseases and that undulant fever will not account for the majority of the cases observed.'³⁶

During the First World War *muhinyo* became one of the major causes of mortality in the Protectorate. In 1914 it killed more people than malaria, sleeping sickness, plague and smallpox, and deaths were recorded all around the Protectorate. Mortality from *muhinyo* in Buganda and Bunyoro was not exceptionally high according to government statistics, however, and the highest number of cases recorded in the Protectorate in 1916 was in Busoga.³⁷ This shows that the disease was not only characteristic of the pastoral areas in the west but also existed in agricultural societies. This geographical extension of the incidence of the disease was a direct result of increased observation, and it is likely that *muhinyo* was already widespread at the turn of the century, but had simply not been recognized or even looked for before the war.

In 1918 the whole Northern Province was suffering from food shortages, famine and disease, which contributed to an increase in violent encounters with different groups in the north, thus further aggravating the difficult food situation.³⁸ In 1918 McConnell, now stationed in the West Nile District, ran into something which must have seemed familiar to him. People in the village of Arion were complaining about a disease that was new to them which was killing people at an alarming rate. It did not seem to be contagious, and it affected men and women, both old and young:

'The first symptoms are malaise, with oedema of the face, then of the stomach, legs and hands. The scrotum is involved with the abdomen. The skin turns to a reddish brown colour. There is no vomiting and the appetite is often enormous. The stools are usually hard and with the advent of looseness some betterment of the condition sets in. After about 20 days they cannot usually walk. I went out to Arion yesterday, saw 18 cases (6 children, 10 men, 2 women) and elicited the following further information:- Marked anaemic appearance in all cases - one boy said to be three days ill did not show it severely while in another five days ill it was very pronounced. In the adults with illness of two months duration who were making a little progress it was also less marked. In the cases of long standing oedema only showed in one man (limited to the face) [who] said he had had it severely at one time. In a boy of three days illness the scrotum was oedematous, while one of five days had feet, hands, face and abdomen

³⁶ Uganda Protectorate. *Medical Department 1913*, Appendix V, 91-3.

³⁷ Uganda Protectorate. *Medical Department 1914*, 11; Uganda Protectorate. *Medical Department 1916*, 10.

³⁸ Northern Province Annual Report for 1918-19. Secretariat Minute Paper, A46/811/UNA.

involved. A girl with one month's illness was said to have had it severely, then to have improved and to have again developed considerable anaemia and facial oedema, though her general condition was good. Almost all the cases of long standing were very thin.³⁹

At the end of his report, after examining some individual cases closely, he suggested that the symptoms pointed to ankylostomiasis, but the high death rate excluded this possibility. The symptoms nevertheless clearly referred to nutritional deficiencies after a long period of nutritional stress:

'The illness appeared after the famine during which for a month or two they had lived almost exclusively on shea butter nuts, but these have not been eaten for over two months and two of the cases I saw developed in the last week. They were fed for a time on famine food but now have their own supply. Being Lugwari they do not drink goats milk but do that of the cow.'⁴⁰

When comparing the reports submitted by Bagshawe in 1906, Rendle in 1909 and McConnell in 1913 and 1918, supposedly all dealing with the same disease, many common features are found. Moreover, the cases present almost all the clinical symptoms of protein-energy malnutrition, or kwashiorkor, as the disease in children was later to be called: alterations in skin and hair pigmentation, oedema, a distended abdomen, headache, fever, nausea, drowsiness, thirst, enlargement of the liver and high mortality in the absence of proper treatment.⁴¹ By the 1950s, Dr. Trowell and his colleagues regarded McConnell's description from 1918 as the first written report on kwashiorkor in Uganda.⁴²

The colonial officials themselves began to see the connection between the disease and poor nutrition. In 1918 the Lister Institute of Preventive Medicine contacted the Governor of Uganda asking for information about known deficiency diseases such as beri-beri, pellagra and scurvy. The Institute especially wanted reports about outbreaks with 'interesting features.' As a reply, McConnell's report of 1918 was sent to London.⁴³

Thus there was no agreement in 1918 on the exact nature of *muhinyo*. It was unclear whether it was a disease of its own or a variety of some existing disease, e.g. sleeping sickness.⁴⁴ It seems possible that people who had been moderately exposed

³⁹ Uganda Protectorate. *Medical Department 1918*, Appendix II, 40.

⁴⁰ Uganda Protectorate. *Medical Department 1918*, Appendix II, 40.

⁴¹ WHO. *Management of Severe Malnutrition: A Manual for Physicians and Other Senior Health Workers*. Geneva: WHO 1999, 5; Brock and Autret 1952, 11, 29-31; Uganda Protectorate. *Medical Department 1918*, Appendix II, 40-1.

⁴² Trowell et al. 1954, 4. Whether Trowell and his colleagues were aware of *muhinyo/bihimbo* is uncertain.

⁴³ Outbreaks of Deficiency Diseases, 13 Nov. 1918. Secretariat Minute Paper, A46/1852/UNA.

⁴⁴ Langlands, deriving from Morris (1960, 213), argues on the basis of the high mortality from

to tsetse fly had a small amount of trypanosomes in their blood, and when nutritional stress gradually undermined their bodily resistance mechanism, the trypanosomes increased and developed into sleeping sickness. Sleeping sickness itself is liable to be affected by ecological and socioeconomic factors, and a number of conditions have to be fulfilled for it to reach epidemic proportions.⁴⁵ It seems, however, that *muhinyo* cannot be regarded as sleeping sickness, for a number of reasons. First of all, cases appeared outside the worst sleeping sickness areas in Uganda, and people were also affected in tsetse-free areas. Secondly, David Bruce and the Medical Officers in the Protectorate, who can be regarded as the experts on human trypanosomiasis at that time, should have been able to tell the difference between sleeping sickness and other diseases, which presumably was the case.⁴⁶ Thirdly, the remarkably similarity between its clinical picture and that of protein-energy malnutrition would suggest that *muhinyo* was associated with inadequate nutrition. The socioeconomic conditions in *muhinyo* areas also back this assumption.

There are some differences in the clinical picture between *muhinyo* and Malta fever which cast doubt over the correctness of Bruce's diagnosis. The typical features of Malta fever are 'fever of varying pattern, malaise and headache.'⁴⁷ Bruce described Malta fever as being characterised by a long, irregular course, frequent relapses, profuse sweating, rheumatic pains and inflammation of the joints, while the symptoms of *muhinyo* included 'fever, profuse sweating, pains in the joints and nerves, slight swelling of the ankles and extreme weakness and emaciation.'⁴⁸ Neither Bagshawe, Leakey, nor Baines reported fever, but they did report headache and general weakness, pains in the joints, oedema, muscular wasting and emaciation. In general, all the descriptions of clinical features are such that they could apply to many known diseases. The joints are affected by high fevers such as those experienced in malaria, weakness appears after any disease with a prolonged course, and emaciation and wasting can be the result of diarrhoea. Only oedema and swelling of the lower limbs, which were reported by Bagshawe, Bruce and Baines, do not seem to fit with the clinical picture of Malta fever, although they are common symptoms of beri-beri and other nutritional deficiencies such as kwashiorkor and pellagra. Severe malnutrition in children and adults is also characterised by changes in body temperature, which may result in hypothermia or high fever.⁴⁹ Perhaps the most striking difference between Malta fever as found in British sailors in Malta and *muhinyo* was that the patients suffering from Malta fever in the Mediterranean rarely

muhinyo that the disease could only be sleeping sickness. See Langlands 1967, 20-21.

⁴⁵ See Lyons, 1985, 69, 77.

⁴⁶ One typical feature of sleeping sickness, the swelling of the cervical glands, or Winterbottom's sign, was never recorded in any case of *muhinyo* in Uganda. Otherwise, the symptoms between the two diseases bear remarkable resemblance. See Ford 1971, 67.

⁴⁷ Dorland's Illustrated Medical Dictionary. 25th edition. Philadelphia: W.B. Sanders Co. 1974, 230.

⁴⁸ The Official Gazette, 182.

⁴⁹ WHO 1999, 5, 37; Passmore and Eastwood 1986, 321.

died of it, while mortality in cases of *muhinyo* were mostly reported to be significant.⁵⁰ Moreover, except in Buddu, people told the officers that *muhinyo* was a fairly recent disease. This conflicts with the prevalence of *M. melitensis* in goats, for if this had caused Malta fever in humans, the disease would have been known long before 1903 or 1904.

⁵⁰ David Bruce, Malta Fever, 37. G4/Box 15/WTI/RST/WTL.

Appendix 2: Comparison of clinical symptoms of muhinyo, Procter's disease, and kwashiorkor

	Bagshawe	Rendle	McConnell	Procter	Williams	Trowell et.al.	
Location	Karwenyo/Uganda	Toro/Uganda	Ankole/Uganda	Kikuyu reserve/Kenya	Gold Coast	Kampala/Uganda	
Year		1906	1909	1913	1926	1932	1952
Disease	Bihimbo	Muhinyo	Muhinyo	Unknown	Kwashiorkor	Kwashiorkor	
Dyspigmentation	Na	Na	Yellowish-brown skin	Light skin in children	Serous skin changes	Hair & skin changes, ulcers	
Dermatosis	Na	Itch	Na	Desquamations, rash	Desquamations, rash	Prevalent	
Oedema	Face, limbs	Abdomen, legs	Abdomen	Hands and feet	Hands and feet	General	
Emaciation	Visible, weakness	Visible, weakness	Rapid wasting	Wasting	Wasting	Wasting	
Liver changes	Na	Na	Na	Na	Na	Occasional enlargement	
Mortality	High	High	Na	High	High	High	
Gastrointestinal disorders	Na	Haemorrhage from bowels	Na	Na	Diarrhoea	Diarrhoea	
Mental apathy	Na	Na	Visible	Na	Irritability in children	Profound	
Anaemia	Na	Na	Na	Na	Na	Na	
Appetite	Increased	Increased for meat	Craving for meat	Na	Na	Variable in children	
Diet consumed	Sweet potatoes, bananas	Na	Na	Deficient in fats & proteins	Maize porridge	Appears after weaning	

Sources: As cited in the text

Appendix 3: Cultivation in Buganda Province 1916 - 1939: main food and cash crops (estimates)

	Banana	Sweet potato	Groundnuts	SimSim	Maize	Cassava	Cotton	Coffee	Rubber	Tobacco	Beans	Millet
1916	553990	226491	3451	8877	7050	2182	26808	8126	3268	5006	7756	11240
1917	430531	202487	4403	9563	3087	2430	31395	7760	2250	2042	6967	9218
1918	530798	185737	5513	7919	9438	1860	37906	9596	1469	2086	22952	10146
1919	514236	154051	2989	7141	8823	6271	36695	8313	1410	1156	7704	12215
1920	517300	157773	4911	7198	11780	5445	47479	9935	1782	1754	8552	15077
1921	599763	150352	5354	8090	9098	13106	38520	12346	1932	1397	13112	22699
1922	615000	154018	6978	8226	11805	11500	75218	9310	855	1900	17900	13472
1923	581000	157897	7192	8111	13197	12225	111332	10818	930	1900	15361	14071
1924	656000	235634	11140	10530	12733	15790	192000	22008	7068	2292	20298	14078
1925	661000	159437	13167	10044	16807	20275	200000	959*	2287	1951	21888	15765
1926	661000	208823	11408	7634	13920	19362	173000	2239*	291	2136	23760	20820
1927	379000	98500	10800	6150	11050	22500	200000	3140*	210	1520	27800	25450
1928	379000	109959	12822	11059	15041	95707	200100 (?)	4674*	394	1608	29702	34013
1929	468538	134344	18983	12073	58276	110012	199035	11326*	247	2154	53917	35065
1930	463367	130150	24320	13210	80065	104120	194629	16170*	428	936	47526	38061
1931	496000	152000	23000	10950	24000	121300	291665	16970*	208	1030	60000	17450
1932	488000	188952	33000	12150	21000	129500	318311	18762*		400	57000	18850
1933	507481	193000	43000	11000	13000	144000	350878	20650*		800	52000	19150
1934	489089	203330	47315	10819	23517	152516	425231	21050*		924	75217	19850
1935	492630	202409	46516	10952	25563	149923	605376	22550*		1139	70099	20963
1936	511400	155520	47500	4250	13720	113300	695348	27570*		360	56680	18830
1937	493022	162476	51890	4036	19469	124155	878674	30774*		500	106735	14739
1938	516683	158222	60985	5859	38868	129172	726642	32255*		906	119598	15275

*The acreage under coffee which was previously estimated in terms of the number of plots is now calculated on the basis of 700 trees to one acre.

Entebbe district was included in Mengo district in 1936.

Singo county was transferred from Mubende district to Mengo district on 1/1/1937.

Source: Uganda Protectorate. Annual Reports of the Department of Agriculture 1914-1938, Entebbe.

Appendix 4: Cultivation in Bunyoro District 1914 - 1939: main food and cash crops (Masindi/Hoima, estimates).

	Banana	Sweet potato	Groundnuts	SimSim	Maize	Cassava	Cotton	Coffee	Tobacco	Beans	Millet
1914	4000	2454		1321			700	10			
1915	5500	33000	100	2600			1600	300			3300
1916	5700(4000/1700)	18600 (15000/3600)	130 (100/30)	2590 (2000/590)	1520 (1000/520)	10 (-/10)	865 (600/265)	125 (100/25)	20 (-/20)	3100 (1900/1200)	9900(6100/3800)
1917	5700 (4000/1700)	18600 (15000/3600)	130 (100/30)	2580 (2000/580)	1530 (1000/530)	10 (-/10)	795 (600/195)	2313 (1908/405)	30 (10/20)	3070 (1900/1170)	10290 (6100/4290)
1918	5750 (4000/1750)	19000 (15000/4000)	130 (100/30)	2500 (200/500)	1450 (1000/450)	65 (-/65)	950 (600/350)	2289 (1989/300)	25 (10/15)	3100 (1900/1200)	11100 (6100/5000)
1919	6819 (5169/1750)	13984 (9984/4000)	78 (48/30)	2960 (2460/500)	1760 (1310/450)	225 (160/65)	853 (503/350)	356 (56/300)	364 (349/15)	3500 (2300/1200)	9919 (4919/5000)
1920	5616 (4517/1099)	25114 (13112/13002)	647 (592/55)	7661 (1860/5801)	5380 (745/4635)	2588 (430/2158)	6122 (1617/4505)	193 (132/61)	2524 (184/2340)	8927 (755/8172)	16726 (4169/12566)
1921	5000	11500	2000	3500	1300	440	1000	150	150	5800	6000
1922	5300	12000	2200	3500	2000	500	1500	150	150	5800	6700
1923	5300	12000	2000	4000	2000	550	2500	150	150	5800	6750
1924	5300	12000	2000	4000	2000	550	6000	150	150	6500	7500
1925	5300	12000	2000	5000	500	550	12000	*210	150	7500	7500
1926	5300	12000	2000	6000	500	550	13900	*224	150	7500	8500
1927	7000	12000	2000	6000	500	1000	9750	250*	155	7000	10500
1928	7000	12000	2000	8000	500	1200	9870	270*	250	7000	11500
1929	8000	14000	1200	8000	1000	1000	15600	280*	430	10000	16000
1930	8000	14000	1200	12000	1000	1000	15000	310*	440	10000	17000
1931	9000	24000	2200	14000	2000	6000	16550	430*	1200	15000	23000
1932	10000	29000	5700	17000	2000	25000	25000	400*	1800	15500	21800
1933	10000	30000	6000	30000	3000	25000	28986	173*	1688	15000	40000
1934	10000	30000	6000	20000	2000	25000	28000	205*	2600	15000	30000
1935	10000	27000	3400	14200	5700	25000	24626	300*	2300	15000	30600
1936	10000	25000	3830	14000	8000	20000	24016	315*	2390	15000	28300
1937	10000	25000	1225	14000	8750	20000	18876	355*	2418	14700	28700
1938	10000	30000	1230	10256	9000	20000	16759	315*	3650	16700	28700

*The acreage under coffee which was previously esimated in terms of the number of plots is now calculated on the basis of 700 trees to one acre.

Source: Uganda Protectorate. Annual Reports of the Department of Agriculture 1914-1938, Entebbe.

Appendix 5: Cultivation in Buganda Province 1914 - 1939: main food and cash crops (acres):

Mengo district (including Entebbe district).

	Banana	Sweet potato	Groundnuts	SimSim	Maize	Cassava	Cotton	Coffee	Rubber	Tobacco	Beans	Millet
1914	400000	199177	1815	5387			20000		3378			
1915	419600	191650	2000	5490			21802	4167	3183			550
1916	422490	197741	2066	5477	6550	2132	20482	4026	3190		1756	700
1917	419031	182372	1862	4655	440	2385	22475	5532	2300	42	612	313
1918	472434	166461	5250	5044	6440	1792	28675	6207	1363	86	16718	1154
1919	352236	130751	2639	4641	6823	5201	27500	4513	1300	156	6404	1715
1920	442000	126653	3961	3614	7598	2725	32999	4300	1642	204	6232	1109
1921	514763	123217	4497	5937	7267	7105	28067	5976	1863	377	10819	2236
1922	520000	126500	5700	6000	7700	10000	60000	6000	750	900	13900	1500
1923	476000	130500	5500	6000	7500	11000	90466	7000	850	900	11500	1875
1924	551000	208534	9340	8420	7433	14590	125000	17808	7028	1292	16398	1971
1925	55100	154337	10417	7444	11407	18075	140000	*370	2286	951	16488	2664
1926	151000	159423	7408	4484	6720	15362	128000	*1057	160	1136	18060	3620
1927	294000	58000	6300	4800	3550	17500	148000	1286*	150	700	18800	8650
1928	294000	62863	6300	6387	3850	57580	149260	1332*	160	500	18800	15210
1929	376538	84461	12968	7968	46220	66503	152995	4126*	117	800	26179	18015
1930	368367	80050	14620	8240	60265	63520	140529	6170*	128	200	39916	16659
1931	390000	80000	10000	5800	13000	75000	215634	7770*	128	200	40000	2200
1932	381000	102952	19000	5500	10000	83500	244592	8362*		400	33000	3900
1933	393000	116000	22000	5700	8000	(?)	270070	8950*		800	33000	4850
1934	393589	111530	23315	5619	15617	100516	314618	9450*		822	30217	5150
1935	393500	15129	25936	5752	17853	99983	447296	10650*		839	30319	6233
1936	400000	112000	22000	1000	7000	90000	530000	14450*			25000	5700
1937	410212	116000	31000	2000	10000	95000	793731	18404*			82044	6700
1938	420000	114117	29852	3028	16406	101380	650215	19189*		336	94868	6859

*The acreage under coffee which was previously estimated in terms of the number of plots is now calculated on the basis of 700 trees to one acre.

Entebbe district was included in Mengo district in 1936. Singo county of Mubende district was included in Mengo district in 1937.

Source: Uganda Protectorate. Annual Reports of the Department of Agriculture 1914-1938, Entebbe.

Appendix 6: Cultivation in Buganda Province 1914 - 1939: main food and cash crops (acres): Masaka district.

	Banana	Sweet potato	Groundnuts	SimSim	Maize	Cassava	Cotton	Coffee	Rubber	Tobacco	Beans	Millet
1914	120000	12000	600	150			2000	2650	60			1140
1915	120000	15250	1190	1400			5496	3850	30			
1916	120000	15250	1190	1400			5496	3850	30			1140
1917		6615	2391	3508	2197		5020	1928			355	1405
1918	46864	5776	113	1475	2548	23	5331	3149	54		234	1492
1919	50000	5800	200	1500	2500	70	5695	3500	100	500	300	2000
1920	50300	6120	650	1584	3142	220	11700	5135	120	550	320	2968
1921	60000	2135	557	153	731	3501	7435	5870	49	20	293	357
1922	65000	2518	678	226	1505	500	9219	2610	5		500	222
1923	65000	2397	692	111	697	225	10000	3118	80		361	196
1924	65000	2100	800	110	300	200	37000	3500			400	107
1925	60000	2100	750	100	400	200	30000	*369			400	100
1926	60000	24400	2000	150	1200	2000	20000	*839	30		700	7200
1927	60000	15000	2000	150	1500	2000	22000	1214*	50	20	3000	3500
1928	60000	4500	2000	150	1500	1500	17700	2500*	50	20	1500	3500
1929	60000	4500	3000	150	2000	2500	28000	6200*	50	20	2000	3500
1930	62000	5100	3700	155	2500	2600	25600	6800*	50	36	2010	3600
1931	66000	12000	5000	150	1000	6300	39090	6900*		30	9000	250
1932	66000	12000	6000	150	1000	6000	33828	7100*			9000	250
1933	66000	13000	10000	800	4000	10000	33944	8000*			9000	1800
1934	45500	18800	14000	200	5900	12000	50756	7800*			20000	1600
1935	49130	13280	10580	200	5710	9940	52027	7900*		300	14780	1710
1936	58400	11520	14900	250	4430	8300	65947	8700*		360	17680	1730
1937	56810	19224	15290	236	7969	19155	57161	9570*		300	17691	1012
1938	66683	19038	26150	270	19714	13793	55593	10266*		350	16555	800

*The acreage under coffee which was previously estimated in terms of the number of plots is now calculated on the basis of 700 trees to one acre.

Source: Uganda Protectorate. Annual Reports of the Department of Agriculture 1914-1938, Entebbe.

Appendix 7: Cultivation in Buganda Province 1914 - 1939: main food and cash crops (acres): Mubende district.

	Banana	Sweet potato	Groundnuts	SimSim	Maize	Cassava	Cotton	Coffee	Rubber	Tobacco	Beans	Millet
1914	48932	34823	385	610			3500	160	64			
1915	11700	13800	200	2100			1580	250	70			6000
1916	11500	13500	200	2000	500	50	830	250	50	5000	6000	9500
1917	11500	13500	150	1400	450	45	3900	300	50	2000	6000	7500
1918	11500	13500	150	1400	450	45	3900	300	50	2000	6000	7500
1919	12000	17500	150	1000	500	1000	3500	300	20	500	1000	8500
1920	25000	25000	300	2000	1040	2500	2780	500	20	1000	2000	11000
1921	25000	25000	300	2000	1100	2500	3000	500	20	1000	2000	20100
1922	30000	25000	600	2000	3000	1000	6000	700		1000	3500	11000
1923	40000	25000	1000	2000	5000	1000	10866	700		1000	3500	12000
1924	40000	25000	1000	2000	5000	1000	30000	700		1000	3500	12000
1925	50000	3000	2000	2500	5000	2000	30000	*120	100	1000	5000	13000
1926	50000	25000	2000	3000	6000	2500	25000	*343	101	1000	5000	12000
1927	25000	25500	2500	1200	6000	3000	30000	640*		100	6000	12300
1928	25000	42596	4522	4522	9691	36677	33140	840*	184	1088	9402	13698
1929	32000	45383	3015	3955	10156	40989	27643	1000*	80	1334	10580	13550
1930	33000	45000	6000	4815	17300	38000	28500	2200*	250	700	5600	17802
1931	40000	60000	8000	5000	10000	40000	36941	2300*	80	800	11000	15000
1932	41000	74000	8000	6500	10000	40000	39891	3300*			15000	15000
1933	49481	74000	10000	5000	3000	40000	46905	3600*			10000	13000
1934	50000	74000	10000	5000	2000	40000	59857	3800*		100	25000	13000
1935	50000	74000	10000	5000	2000	40000	106053	4000*			25000	13000
1936	53000	32000	10600	3000	2290	15000	99115	4420*			14000	11400
1937	26000	27252	5600	1800	1500	10000	27782	2800*		200	7000	7027
1938	30000	25067	4983	2561	2748	13999	20834	2800*		220	8166	7616

*The acreage under coffee which was previously estimated in terms of the number of plots is now calculated on the basis of 700 trees to one acre.

Singo county of Mubende district was included in Mengo district in 1937.

Source: Uganda Protectorate. Annual Reports of the Department of Agriculture 1914-1938, Entebbe.

Appendix 8: Yields of food and nutrition per acre

	Pounds weight	Kilogrammes weight	Megajoules	Proteins in grammes
Bananas	5000	2587,8	13845	25878
Finger millet	700	318	4462	19068
Cassava	6800	3087	19758	21608
Sweet potatoes	5800	2633	12560	39495
Sorghum	500	227	3178	2361
Beans	400	182	2573	43084
Groundnuts	700	318	7691	85806
Maize	550	250	3788	24970
Simsim	140	64	1574	12720
Field peas	450	204	2879	51075
Pigeon peas	150	68	934	13620
Cow peas	230	104	1484	22968

Source: B.W. Langlands, Manpower and nutritional energy resources in Uganda.

In R.J. Hyde & B.W. Langlands, *Patterns of food crop production and nutrition in Uganda*.

Occasional Paper No. 58, Department of Geography, Makerere University, Kampala, 1974, 84.

Appendix 9: Nutrition values for Uganda foods:

Values per 100 grammes edible produce*

	Grammes of protein	Kilojoules
Bananas	1	353
Finger millet	6	1404
Cassava	0,7	640
Sweet potatoes	1,5	477
Sorghum	10,4	1400
Beans	24	1417
Groundnuts	27	2420
Maize	10	1517
Simsim	20	2475
Field peas	25	1409
Pigeon peas	20	1371
Cow peas	22	1421
Grains	20	1496
Rice	7,1	1500
Wheat	11,7	1463
Yams	2,1	376
Vegetables	1,4	92
Fruits	0,8	251
Beef	14,7	940
Eggs	11	602
Fish	15	426
Milk	5,5	334
Sugar	0	1618

*After preparation, refinement, and cooking

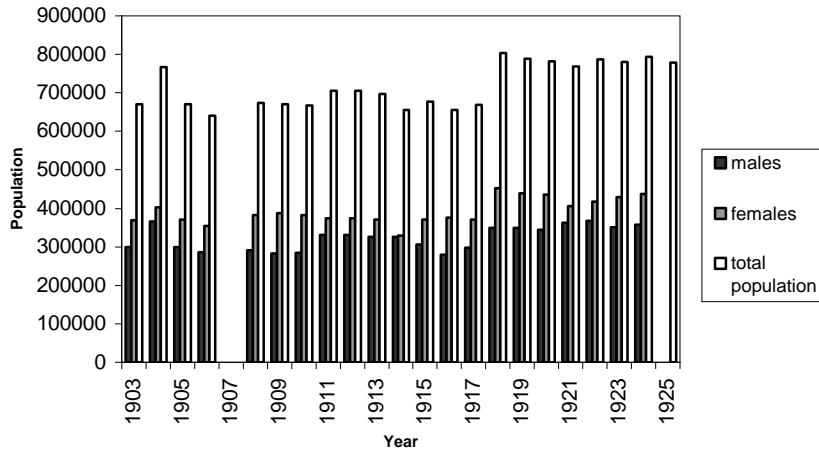
Source: B.W. Langlands, Manpower and nutritional energy resources in Uganda.

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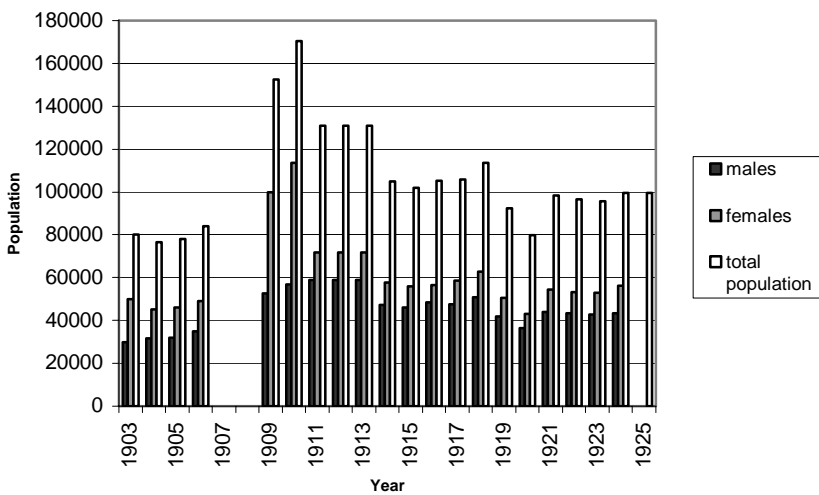
Appendix 10: Buganda- Estimated population by sex, 1903-1925

Source: Uganda Protectorate, Blue Books, 1903-1925



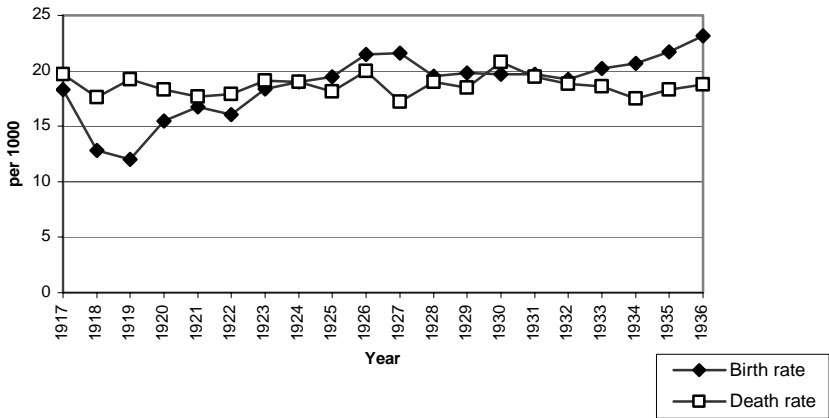
Appendix 11: Bunyoro - Estimated population by sex, 1903-1925

Source: Uganda Protectorate, Blue Books, 1903-1925.



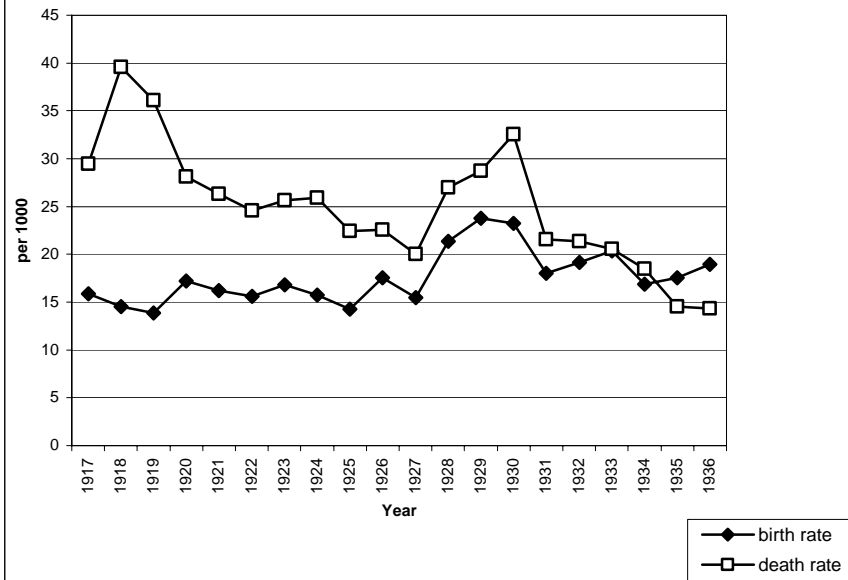
Appendix 12: Buganda - Birth and death rates, 1917 - 1936

Source: Uganda Protectorate, Medical Department, 1917-1936.



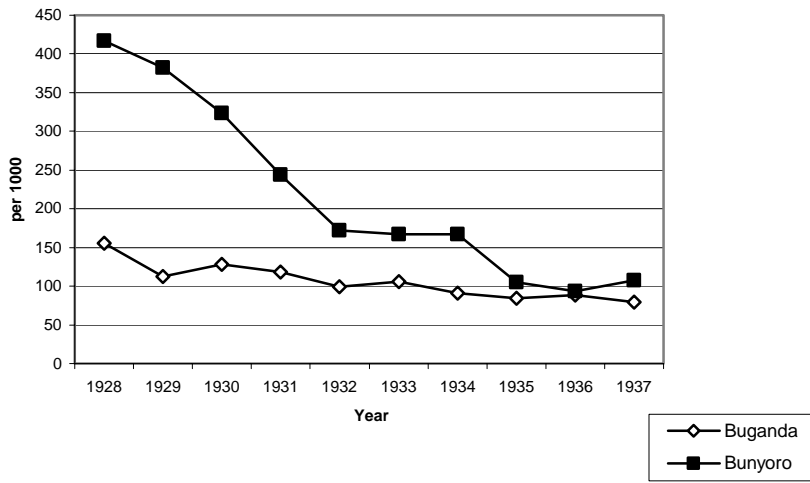
Appendix 13: Bunyoro - Birth and death rates, 1917-1936

Source: Uganda Protectorate, Medical Department, 1917-1936.



Appendix 14: Infant mortality rates in Buganda & Bunyoro, 1928-1936

Source: Uganda Protectorate, Medical Department, 1928-1936.



Appendix 15: Reproductive histories collected from the Mengo Hospital case files

In order to calculate perinatal and infant mortality, the reproductive histories of 502 women attending the Mengo Hospital were recorded as they appear in the authentic clinical case files. Four cohorts were randomly selected a yearly basis, comprising all women attending for childbirth in years 1903, 1904, 1909 and 1913.

Women attending to give birth at the hospital were questioned by the doctors, who made clinical notes on the basis of their patients' descriptions. The women often stated the total number of pregnancies in their lives so far, the outcome of each, the number of living children and approximate times and causes of death of deceased infants and children. On the basis of this information it is possible to a certain degree to determine the number of pregnancies that each woman had had so far; the number of live births within each cohort, the number of miscarriages and stillbirths and the extent of neonatal and postnatal infant mortality.

The reliability of the results depends on the amount of exact information given and recorded in the clinic. Thus, although there was relatively systematic collection of information in 1903, 1904 and 1909, information regarding miscarriages and infant mortality was lacking in 1913, so that these results must be regarded as less reliable than those for the earlier years. The results obtained naturally do not reflect trends in mortality in the given years, but they do point to a longer general trend within the cohort of women before the given year.

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