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A

Graduation Thesis,
for the
Degree of M. D.

by
William Anderson Soga, M.B.

March 20th 1894.

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Thesis.

"The Ethnology of the Bomvanas of Bomvanaland, an aboriginal tribe of South East Africa; with observations upon the Climate and Diseases of the Country, and the methods of Treatment in use among the people."

In the year 1885 Cape Colony formally annexed the independent native territories beyond her eastern border. Many tribes were thus brought under British rule, among them being the Bomvanas of Bomvanaland. Everything that would tend to throw light upon the unknown people of the African continent is of much use, especially in the way of helping to preserve what in time to come is likely to be lost. Facts, moreover, of value may be learned even from savage tribes, and all contributions to our stores of knowledge from whatever source are to be welcomed. First of all then it may be necessary to glance briefly at the region itself which is occupied by these people.

Bomvanaland, as it is called, lies upon the coast, ^{of South Africa} between the Bashee and Umtata rivers which empty themselves into the Indian Ocean; it may be said to lie about mid-way between Cape Colony and Natal. Lat. 31.0 South; Long. 28.5 East. It thus lies within what

is termed the Temperate Zone. The country is valuable as a grain growing district, Indian Corn, millet, sugar-cane &c. grow in abundance. Tobacco, which forms the chief article of export, is largely cultivated by the natives. The district is well wooded in many parts, and grass grows most luxuriantly in the open plains. It is a famous cattle rearing country and in proportion to its size contains a larger number of cattle than any other similar portion of Southern Africa. Vegetables of all kinds grow well, and fruit-trees such as Peaches, Apples, and Oranges, though not indigenous to the soil, thrive well and yield plentifully. The country is somewhat broken & rugged in many parts, it is intersected by numerous small streamlets which run rapidly into the sea. So deep down are the Channel-beds cut into the soil that it is of little use trying to get water from them for irrigation, as a consequence of this the people depend upon the rainfall in order to plough in their crops. The soil, as a rule is prolific, with very little cultivation the fields yield plentifully, even without the artificial aid of manure. The best of the soil, generally of a rich black loam, is found upon the banks of the larger streams.

I. The Ethnology of the Borneos.

The chief difficulty in investigating the Ethnology of an aboriginal tribe, such as this, is that it has no written

language. The history of these people accordingly does not go back more than a few generations, or at most a few centuries if even so far, and it is, purely traditional being handed down from father to son. It is only within recent years that our knowledge of the African tribes has been extended. The numerous geographical discoveries within the Continent have brought to light among other things the wide distribution of the "Bantu" tribes. These tribes are to be found as far south in Africa as Cape Colony, in the adjacent native territories of South East Africa, right up along the East Coast to the Lake Districts Nyassa, Tanganyika & on to Uganda. They are known under various names such as ama-Xosa, aba-Tembu, ama-Mpondo, ama-Zulu, Ama-Swazi, ama-Tabele, aba-Agori, &c. The term by which they are most widely known among themselves is "Bantu", or "the people." While in the main presenting similar physical features common to each other, the language has to a considerable extent undergone changes, resulting in marked dialectic differences in each tribe. At the same time the language throughout all this region, and all these tribes, is in the main one, and the natives of the various tribes have little difficulty in understanding each other. They are a brave and warlike people. Their chief stock-

in-trade consists in cattle. Indeed it is a characteristic features of the Bantus, and one noted by those who are intimate with the African Continent, that they are found wherever Cattle are found in Africa. They themselves say "We are the people to whom Cattle belong. What do other tribes know about Cattle?" All their wars more or less are connected with raiding and the Capture of Cattle. Their Commissariat in time of war consists in Cattle - being unable to carry food about with them they take to driving Cattle for food. Polygamy - all Bantu tribes are Polygamous - is kept up by Cattle; each wife being purchased for so many head. Wealth consists in the number of daughters a man has, for each is sold as soon as she is 14 or 15 years of age, to the highest bidder in Cattle. No African race is so given over to the worship of cattle; their great fault is Cattle thieving. Nae to the European settlers in their immediate vicinity; they keep up a continuous Cattle-lifting-war which is most vexatious and harassing to to their white neighbours.

The Boroanas have been scarcely a Century in their present Country; indeed the time may be accurately set down at 90 years. About that time they came from Pondoland which adjoins their present territory. At that time they were under the paramount

Chief of the Sondos, Ngungushi. They were warlike and often engaged in fighting among themselves. On one occasion they rose up against the chief, fought, and killed him. For this act they had to fly from the Country, they fled with their wives, children and Cattle across the Unutata river into their present Country. It was then vacant being occupied ^{only} by numberless troops of wild animals, among which were to be seen the Elephant, the Buffalo, and the Lion. Here they formed an alliance with Kawuta, the Chief of the Galeda Kafirs, further South, so that if molested they should get help. They then settled down to cultivate the soil and to rear Cattle in which they are very wealthy.

Physically they resemble the Bantus in having well-formed, well developed bodies. This is true both of men and women. They have a very intelligent cast of Countenance, their features being open and pleasant to look upon. One thing strikes an observer viz the extremely light character of their complexion, much lighter than that of the other tribes. The cause of this peculiarity has been set down by some observers to an admixture of European blood. The story of this, so far as we have been able to ascertain it is an interesting and unique incident in the history of a

savage people. Some time during the early part of last century, when the Bomvanas were still resident in Pondoland, a large vessel was wrecked upon their coast, near the mouth of a river called the Jambasi. Out of this vessel a number of people were saved - all of them men. These men were discovered by the natives walking upon the beach along which were strewn pieces of the wreck. The natives raised a cry and the chiefs came down and persuaded the people not to kill the strangers. "These are frogs," they said "things that have come out of the water; do not kill them". No white man had ever been seen there before, and they could scarcely believe these to be human. The coast was a wild one, and unknown to these survivors. They experienced great difficulty in communicating with the people as the language was unknown to them. Their lives, however, having been spared, they set to work and built a large wooden house with bits of the wreck, using much of the iron of the ship in bolting it together - to the great wonder of the natives. The scene of the wreck and the site of this old house are still shown by the natives, and up to a very recent period the native smiths got a good deal of old iron with which they manufactured assegais. The chiefs, in

the course of time agreed that the strangers should be made chiefs and set over portions of the tribe. This was done and the newly made chiefs proceeded to marry wives according to the polygamous custom of the country and according to their rank. Some years afterwards Dutch hunters who were in search of ivory, made their way into the country, and hearing that there were white men living among the natives, made their way to the Zambezi, and discovered white men living like natives. Attempts were made by the Dutch hunters to get the white men to return with them to Cape Town, at that time in the hands of the Dutch East India Company. The men accompanied the hunters a part of the way, but when they came to a large river - the St Johns or Umzimouba - three of them refused to go any further and decided to return to their wives and families. Four of the survivors thus found their way back to the Cape, and three remained in the country. The Bomoanas give the names of three men - not seven - who were the progenitors of the Abelungu or White Clan; their names were Bombose, the chief of them, Hatu and Malangana. It is quite probable that Bombose may have taken precedence of the others from the fact that he may have been an officer in the ill-fated ship. They could not give us the names of the white people in English.

We were able recently to solve this difficulty. In a new work published by Mr. George. M. Theal, the Historian of Cape Colony, we find a record given of the wrecks upon the East Coast of South Africa during last century, at the time when the Dutch were in possession of the Cape. The old Dutch records mention the wreck of a vessel called the *Bennebroek* in 1713, on the Coast of South East Africa in the vicinity of what we now call Pondoland. There were seven survivors of this wreck. Four of them it is stated, went to the Cape with a party of Dutch hunters, but three of them remained, their names are given as William Clark, Thomas Bilyert, and Henry Willard. Two of these names are apparently English and the third Dutch. We have little difficulty now in connecting these three men who were the survivors of the wreck of the *Bennebroek* in 1713 - (particularly as there is no other record of any other wreck) - with the *Abelungwe* of *Bomwanaland*. These people have kept themselves pretty distinct from the rest of the *Bomwanas* but at the same time there has been a good deal of intermarrying. They are readily observable, however, by having a very much lighter complexion than the others, many of them bearing distinct traces of their European origin in the lightness of their complexion, in the cast of countenance and general fluffiness of the hair. This incident has to some extent affected a considerable number of the *Bomwanas*, at the same time we do not assert that this entirely accounts for the lighter com-

plexion. There must have been some such peculiarity among the Bomanas at an earlier period of their history, for their name bears testimony to some such peculiarity. They are called the "ama-Bomou" - or reddish people. We thus account for this peculiarity in the Complexion of the Bomanas as distinguished from all other South African tribes by (1) first, a distinctive peculiarity in the progenitors of the tribe, (2) and second, by an admixture of European blood, later, these two factors contributing in giving them the distinctive peculiarity of complexion.

Their language is rich in words and musical in sound, every syllable ends in a vowel. The striking peculiarity of the language is the presence of sounds called "Clicks". These occur very occasionally in the language and only when such letters as c, q and x occur in a word. There is a deep guttural sound made occasionally when pronouncing a word with the letter 'r'. Another peculiarity of the language is in regard to its structure; it is what is termed by philologists an "alliterative language", being governed by what is called the "euphonic concord," some letters such as z, s, d, l &c are euphonic letters; when they occur in the principal noun of a sentence they occur according to the euphonic principle throughout the structure of the sentence. To give one example of this important principle in the language, in the sentence "My sins are great they cannot be numbered, they oppress me" we

have the word "sins" as the governing idea of the sentence. Consequently the euphonic letter will be found in it, and it will have to occur throughout the rest of the sentence - thus "Izono zam ^{sins} zimu ^{my} zimu ^{are great} azin akubalwa, ^{they count be numbered} ziz and ^{they appear me} dibulala." By means of this euphonic peculiarity it is impossible for a native to speak ungrammatically in his own language, it would fall upon his ear at once. By neglecting this important principle Europeans generally make sad mistakes in the language. It is a language capable of an extraordinary amount of expression - for a savage language - foreign ideas being readily translatable. The people themselves exhibit remarkable intelligence and power of mental grasp. The language readily lends itself to oratory and they exhibit remarkable linguistic skill in legal debate. The language from a philologic point of view is undoubtedly Bantu and one of wide distribution throughout Africa. From its structure and from its richness in words & expression, many consider that it must have been a language, in the past, in the possession of a comparatively civilized people. No such trace, however, is to be found in their history. They say they do not know whence they came, all they profess to know is that they came from "entla" "the north", but where no one knows. They are to be distinguished ethnologically from the other South African tribes such as the Bushmen & Hottentots, Damaras & Griquas &c. in language, physical type, as well as socially, intellectually & morally. They are proud, warlike and fearless

in battle. They are not treacherous nor are they cruel to their captives. They are extremely hospitable to each other and particularly to strangers. They never allowed themselves to become slaves and would fight to the bitter end rather than become such. No Arab or Portuguese ever overcame them sufficiently to enslave them. They look down upon all people who have been slaves, they are called "ama-Koboka" - "slaves" and are looked upon as bearing an irretrievable reproach, and having surrendered their independence. Never themselves having been overcome, they look upon all who have been enslaved as disgraced and bearing the indelible mark of inferiority. They are increasing in numbers and show no tendency to disappear or degenerate in physical type. These qualities indicate a race of strongly marked individuality, their physical and moral qualities mark them out as an enduring race. They are governed by a chief, who is in the direct descent in the "royal line" of the Chieftainship. He is assisted by Councillors; they have the privilege of debating all manner of cases in his behalf and of aiding him generally in the work of governing the people. The people are law abiding and the chief who otherwise might act like an autocrat is usually saved by the Councillors from an unwise course. The people practise religiously the rite of circumcision, by it each youth when he reaches the age of 17 or 18 is initiated by this rite into the privileges of manhood. The young women also on attaining the age of

BOITH are initiated into womanhood by the ceremony of the "M-
 tonjaul" dance & festivities. The father proclaiming his daughter to
 be now of marriageable age. The people also observe the
 custom of Polygamy. Each man possesses a number of
 wives, it may be, 2, 4, 6, 8 or even 10 as is frequently the
 case with the chiefs. The number of wives is regulated by
 the wealth and status of the individual. Each village is
 composed of the owner and his wives and families. Each
 wife has a hut of her own in the village. There is the hut of
 the Chief wife; it occupies the centre of the Semicircular
 village; then, in order, comes the hut of the wife of the right-
 hand, and then after her hut comes that of the wife of
 the left-hand, and so on to the last hut which generally
 is that of the youngest married wife or "um-tshakazi".
 Each hut then in the polygamist's village has its own wife
 or mistress, who lives in it with her own family, she owns
 her own property, her own gardens, her own cattle (in the
 common Cattle Kraal) and generally is responsible to her
 husband for the proper regulation of her own household.
 In this way order is preserved in what might otherwise
 be chaos. The husband exercises his own caprice, living
 in whichever hut he chooses from time to time, but
 should he turn ill, he must return to his Chief wife's
 hut, there he is nursed, there he gives his last instructions,
 and there he dies. From the foregoing characteristics, we

have mentioned - taking into consideration the general structure of their language, with its dialectic differences, their manners and customs, their temperament and physical type, we refer the Bownanas of Bownaland ethnologically to the great Bantu family, with physical peculiarities of their own partly natural and partly accidental.

II The Climate of the Country.

Speaking generally of the Climate of South Africa we may say it is exceptionally healthy, the distance from the equator 30° - 34° placing it also within the Temperate Zone. The heat is considerable, but not such as to make it unbearable, the cold again in winter is never excessive. The seasons there are exactly reversed from the seasons in this Country. The summer there corresponds with the winter here, comprising the months of November, December and January. The winter corresponds to summer here, being the months of May, June and July.

The Climate of Bownaland has in the main most of the characteristics of the Cape Climate. It is on the whole a healthy region, although we were led to understand before we set out there that it was most unhealthy. The greatest rainfall is during the months of August, September and October. At that time there is little certainty as regards the weather, the rains are frequent and often continue for days together, filling the rivers and rendering them impassible. There are frequent thunder-storms during the summer

months, these generally come on after warm weather, and help to cool the atmosphere and refresh vegetation. The driest period of the year is winter, during the three months of May June and July we have almost complete immunity from rain. This is a remarkable feature of our winter - this renders the ground and everything dry and hard, and is considered by us the healthiest period of the year. Little or no frost occurs, occasionally snow fall but that is limited to the uplands, where it generally falls in winter overnight, it does not lie long, the hot sun melting it almost immediately. The most annoying feature of the winter are the exceptionally high winds, almost continuous throughout the season. These are generally dry and frequently cold. Hot winds sometimes blow in the early summer, the month of October being somewhat annoying in this respect. The worst feature of the climate is the sudden and rapid change that takes place in the temperature, from intense heat to cold, chilling air. This is especially noticeable during summer months, and is a source of danger to those who are not properly protected against such changes with suitable clothing. It is always safe to wear flannel next the skin, it is warm in winter and cool in summer, it regulates the temperature of the body & protects against the sudden changes. Clothing is

similar to what is worn here except that for summer wear lighter texture is more suitable. Our mean temperature on the Coast is about 68° Far. and in winter about 36° . We might say that the mean annual temperature is 62° . The mean annual temperature of Cape Colony is 63° . There is a marked difference in the mean temperature of say Glasgow 49° and Edinburgh 47° , and our South African temperature. We have thus nearly a difference of 14° or 15° . This is undoubtedly one of the reasons why cases from this country benefit with the change of climate to the Cape. Whilst the climate of South Africa generally has been lauded as beneficial in Pulmonary Cases a note of warning is at the same time advisable. From our observations of the climate we have come to the conclusion that fatal mistakes are frequently made in recommending patients affected with Phthisis to go to the Cape, without discriminating specifically where in the Cape they should go. All South Africa is not equally healthy for Consumptives, indeed we go the length of saying some parts of it are positively injurious and must be avoided. Benefit may be reasonably expected in early stages of Phthisis if the patient on landing at the Cape immediately makes his way inland away from the Coast. Unfortunately this is not always considered necessary, &

the patient settles down in what we term the Coast-region - that is any where within a hundred miles of the Coast. No benefit, but often harm is derived from a residence in this region for the Climate is moist and relaxing. When on discovering this fatal mistake a change is made inland, to higher altitudes, it is seldom able to undo the mischief. Our climate in Bomvanaland, lying as it does upon the Coast and within this Coast region, we are speaking about, is bad for Consumptives, and what is true of it is true also of all the Coast region of the Cape. The main point to observe in sending patients out to the Cape is to advise them to go well inland at once.

Generally speaking the Orange Free State (in which is situated Blomfontein a noted health resort) Basuto Land, the Upper Karoo Districts of Cape Colony, the vicinity of the Kimberley Diamond Fields (although the town of Kimberley itself is not to be recommended, owing to the fine dust from the mines irritating to the lungs) and the lower or Southern region of the Transvaal; are the portions to which Consumptive patients should at once go. There it will be observed all lie well inland and far removed from the Coast. Some cases do benefit in places not far removed from the Coast but these are few, their recovery does not alter our view as already stated. The reasons

for this unhealthiness of our Coast region may be accounted for from a consideration of the following facts with regard to the Climate of Bonvauland. It is damper and has a greater rainfall than the Country inland and removed from the sea. This is at once apparent from the abundance and rankness of the grass and the luxuriance with which vegetation grows - in marked contrast to the scarcity of grass & vegetation in most of these inland districts. The sea air we believe exercises some effect in making the air moist, for the atmosphere is often hazy and less crisp and pure than it is inland. Then all the Coast region is low lying and often tends to be marshy - malaria lurks in many such spots. The air, moreover, is heavier and more relaxing and tends to lethargy and inability to take exercise. It is less bracing than it is inland. We have found the Climate as we have described it in Bonvauland bad for Chest complaints.

Local experience has convinced us of the advisability of sending inland Chest cases, and as they recede from the Coast region we generally note an improvement.

On the other hand inland cases do badly with us as a general rule. Although the Climate as stated is not to be recommended for Chest Complaints it is

otherwise healthy enough, and even Europeans live in the Country without experiencing any other than the usual ailments incidental to people in all Climates.

III The Diseases of the Country.

With a Climate such as that we have represented Somvauland to be and amongst a barbarous people - living in a simple state of life - we should expect disease to be somewhat rare. It is not the case, however, and we find all kinds of diseases among them, and just such as we have met with in civilized Countries like this. Certain diseases are much more prevalent there than here owing to the peculiarity of Conditions, for example we meet with Dysentery very commonly among the people. We were warned to be careful of the water when we went into the Country. It was stated that in some places a poisonous plant grew in the water and rendered it unwholesome. This we found to be false. At the same time care has to be exercised with regard to drinking only running water and if possible from Springs. The temperature of the Country being so high, the water becomes stagnant and unwholesome, and we find the people in summer falling victims to this disease in considerable numbers. They do not seem to realize that their water supply should be kept pure and clean. They do not know that disease is caused by

the use of impure water. Often the water in daily use is simply filthy. All the people of the same village drink from the same pool, the Cattle also, and the Village dogs; the Children gambol in it at pleasure and occasionally a villager feeling in need of a bath makes use of the Common pool to wash himself in, utterly oblivious that there is anything wrong or prejudicial to health in it. This is a fruitful source of disease and one means by which we are convinced they propagate infectious diseases among themselves. An epidemic of Smallpox which decimated the Bonwanas in 1886 was undoubtedly spread among them largely by this means. The disease killed them off in large numbers; those who survived were terribly disfigured. Vaccination was unknown by them, it is only since that epidemic that they have allowed themselves to undergo the process. Struuous Diseases of all kinds, but especially of the Glands of the neck are amongst the most common of their diseases. Skin diseases, also are very common such as Itch, Psoriasis, ringworm, and especially Eczema. Dyspeptic Complains are also common and especially those associated with derangements of the liver. The people use a native beer made from millet (Kaffir-corn) and Indian Orze - This is a thin quail-like beverage and constitutes both food and drink. It contains about 8 per cent of alcohol,

and although is not very intoxicating yet when used and drunk so largely, as they do, causes a certain degree of intoxication and gives rise to derangements of the liver. Abscess of the liver is not uncommonly met with and is usually fatal. We have met also with Hydatid cyst of the liver in a few cases. Parasitic Diseases are common, especially Tape worm. The custom of eating the entrails of animals, as well as the flesh very little cooked, no doubt contributing to the prevalence of such diseases. We have also had to deal with Cases of Leprosy. This disease is spreading among the people. The people say it is a new disease and to prove the fact they say they have no name for it. The statement is quite true, for it is known by the name of the "Isifo Samalawu" or "Hottentots Disease". They maintain that it has come to them from the Hottentots among whom it was formerly very rife, and has spread from Cape Colony to them. From observations of its progress among them it seems to spread by contact, there is so much intercommunication among the people from their habits, using the same articles of clothing, smoking the same pipes, eating out of the same dish, living together in the same huts &c. Children have been brought to us suffering from this dreadful disease, with fingers and toes dropping off, yet on making the most rigid enquiries into the family history of the patients, no trace

could be found of Leprosy in the families. They themselves believing that they got the disease from neighboring villages where it was known to exist, the children having got it by mixing with the affected children, playing with them, sleeping with them and eating out of the same dish. Our own opinion of this disease from observation of its spread among the people is, that whilst it is not necessarily a hereditary disease, it is certainly contagious.

A large proportion of our cases are those of Chest Complaints. This is due as we stated before to the rapid changes of temperature that take place so frequently. These again give rise to Rheumatism and Rheumatic Fever which is one of the most common of our diseases. Disease of the heart is very common from this cause and because also the people being ignorant of the gravity of an attack of Rheumatic Fever, and doing little to arrest its progress, the disease generally attacks the heart. But one fact has struck us as being singular in an extraordinary degree, that Sudden Death from heart disease is so rare it is almost unknown. We have come to look upon what we commonly term "heart disease", when occurring in a native, as most unlikely to result fatally. We believe this is due to the fact that their life is simple and tranquil, without fret, worry or push. At the same time we have found such cases later in life suffering

from some of the usual complications attendant upon a diseased heart, Dropsy &c. Epidemics occasionally visit the Country such as Smallpox, Measles and latterly even Influenza. The latter illness is not usually succeeded by Pneumonia as it so frequently is in this Country. Indeed Pneumonia is a rare form of lung disease in the Country; but Bronchitis and Asthma are very common. The majority of Chest cases are those of Chronic Bronchitis. Many of the Chest cases exhibit a peculiarity in that they seem to develop in the back. This is due to the fact that the fire places in the huts are placed in the centre of the floor, and all sit round them toasting the front of the body and keeping it warm, while the back is allowed to chill down. Cases of Consumption are extremely common both among the heathen people and among those in a transition stage from heathenism to Civilization. Many of the Cases are hereditary, many of them are not so. They are seemingly much more rapidly fatal than in the European, whether this is a racial peculiarity or not we have not been able as yet to determine. In the case of the European we believe the determining factors in arresting the progress of the disease, to a large extent, are present viz (1) better clothing, such as the use of woollen materials protecting the body against changes of temperature. (2) Better

food, more nourishing, better prepared, and thus the strength of the patient kept up. (3) Better housing - the house is generally better built, better ventilated, is not so damp as a rule and the patient lies upon a bed. These favourable conditions are absent in the case of the natives and for these reasons, we believe they resist less the ravages of Consumption. We have found that the prolific causes of Consumption among them are these (1) the universal habit of sleeping under blankets. The native wears one blanket, it is his only dress by day and his blanket by night. He curls himself up, draws it up over his head and excludes all fresh air. He breathes this foul air all night & weakens his lungs. He goes out into the cold night air warm from under his blanket, he gets chilled down and the disease makes rapid progress in the weakened lungs. (2) The huts, again are made of mud, and the floors also are made of the same material these attract damp & retain it. The people sleep upon the floor on mats, the heat of the body serving to draw the damp through the porous rush-mat, and thus contract the disease. (3) The huts, again, are frequently crowded, all the members of the family lying in the same hut, there being no windows the foul air and smoke get no escape out, save by the low door, and of course during the night this is closed up. (4) Another cause of Consumption among

these people, ^{is this} and especially among those who are adopting civilized habits and clothing. In their native state they smear the body over with a mixture of grease and red Clay - this acts as a natural protective against Chills and damp. This practice is abandoned on the adoption of civilization, clothes are now worn against a skin formerly protected in this way - often the individual owns but one suit of clothes, this gets wet and is allowed to dry on his back. The habits also are changed with regard to food; new wants and new cravings are developed, and the body being unused to this becomes weakened and the individual falls an easy prey to the disease. When laboring under the disease they lack proper nursing and proper food, all this contributes to render their chances of recovery extremely small and to hasten the rapidity of a fatal issue.

The people occasionally suffer from a disease contracted by eating the flesh of an animal (Cow) which has had what is termed "Dila". This is somewhat like Anthrax. The people suffer from sores which break out on various parts of the body & cause great suffering and often lead to a fatal issue. They have antidotes which they make use of in this disease with great success. Although they know that a beast is affected with

Dila, from post-mortem appearances, they prepare it in pots with the plant which antidotes it, and in this way they can all eat of the infected flesh without any bad results. So certain are they of the antidotal properties of the "um-nunqu-mabele," a large forest tree whose roots are said by them to be a perfect specific, that, instead of boiling the flesh with the roots of this tree, they prepare an infusion of the tree in gourds and place it in a convenient place, eating the meat alone; but every time they feel thirsty they go and take a draught of the infusion or else they wind up with a good draught of it. In this way bad consequences are prevented from eating the affected meat, and they say they enjoy the feast much better.

Venomous snakes infest many parts of the Country and cases of Snakebite are not uncommon.

From the habit of the people to walk about barefooted they frequently tramp upon the snakes and are bitten. As a rule a snake lies quiet on the road or in the grass and bites only when tramped upon, burying his fangs in the foot, ankle, or lower part of the leg. We have known of no cases of snake bite above the knee. The majority of bites are on the foot, from the tendency of the snake to strike

just where it feels the injury. Two varieties of snake are especially poisonous among these snakes, these are the Cobra (pimpi) and the Puff-adder. Death is certain from their bite within a period of 48 hours, unless an antidote is employed. Of the two snakes mentioned 90 percent of the cases of snake-bite are attributable to the Puff-adder. It is the commonest snake in the Country, it is sluggish in its movements, it lies in the roadway generally just where people go about ~~most~~ and is thus most frequently tramped upon. On the other hand the Cobra or Pimpi makes a blowing noise, as soon as danger is near, thus giving any one timely warning. He occasionally, however, when hard pressed ejects from his mouth a somewhat poisonous fluid which often gets into the eyes irritating them in an alarming way and causing momentary blindness. This, however, is easily got out, it is also a rarely employed means of defence on the part of this snake. The natives credit the Copper-Coloured snake - a ground snake - with the property of causing the skin of any one who has been bitten by it, and recovers, to desquamate annually. One case is known to ~~be~~ attributable to this cause but ~~we~~ are not quite certain that it can be accepted as accurate. Cases of snake bite are

rarely fatal as the natives make use of valuable antidotes when they are bitten. Some of these plants are known to us such as "Leonora Leonotis," "unfuica-mfuicane," and while we are aware of their valuable antidotal properties we prefer to use the Liguor Ammonia (fortior). It is a perfect remedy in all cases of snake bite. The way to use it is this, immediately a person has been bitten, scarify the wound and allow it to bleed freely. Administer one drop of Liguor Ammonia (fortior) in a tablespoonful of water, give this dose repeating it every 10 or 15 minutes up to 6 doses. Apply to the wound also a solution composed of a few drops of Ammonia in water. This is an effectual remedy in the case of all our snake bitten patients. Brandy is used by some in the absence of Ammonia. The great value of Ammonia ~~is~~ ^{is} lies ⁱⁿ its preventing the tendency to Coagulation of the blood, which is induced by snake bite. Specacuaaha is recommended by others, internally they give it to produce vomiting, and externally it is applied as a poultice to the bitten part. We have made no use of this drug however and cannot speak of its merits in such cases.

The natives in this district keep horses and they suffer periodically from a peculiar disease. This disease is so virulent scarcely a horse escapes it and frequently the horses are cleared out of the district by it. The first

symptom observed is that the animal breathes heavily, short & laboured - it seems to be in pain, it staggers about, falls down and rises up, it sways its body from side to side, appears to be in great agony and restlessness, refuses all meat and drink, and in a few hours it is dead. After death there issues almost immediately a white froth from the nostrils, so characteristic is this feature that as soon as it is observed it furnishes a ready means of diagnosing the disease the horse was suffering from. It baffles treatment, some of the cases are too rapid to admit of it, the disease seems to kill them off rapidly. It appears in the months of February and March; (and at no other time), at a time when there are heavy dews upon the grass. One fact is certain and that is that the disease can be prevented. It has been observed that all stabled horses are free from the disease, hence if a horse is put into the stable before the sun is down and is let out from it to graze after the sun is up, and the dew off the grass, it will not take the disease. It is apparently something in the dew, and is taken in by the horse by eating - not by breathing. A horse may be worked all night, or he may be out standing where there is no grass, or he may be put into a cattle kraal, as the natives do, where he is

in the open all night, and exposed to the dew, yet as there is no grass to feed upon he will not suffer. But let him get a bite of wet dewy grass and the mischief is done. What it is we cannot tell, the microscope does not aid us. On examining the horse after death all that can be seen is that the lungs seem to be affected and congested, but that is all. Not long ago a groom dropped a bundle of forage (oats) in the yard, at night, when carrying them to feed his horses. Next morning he picked up the bundle which was wet with dew, cut it up and gave it to the first horse (next the door) in the stable. This horse took this disease and died, the others were unaffected. All horses that survive are called "salted" and become valuable. So country suffers like Bourvaudland from this scourge, the country is so overgrown with a rank sourish grass, it seems to favour the spread of the disease, we have noticed also that all along the coast it is exceptionally virulent, much more so than inland. It ceases in April when the frost comes on, so that whatever it is, ^{it is} checked by it. We look upon this as a mysterious epidemic, of which we know neither the cause nor the remedy, but which is perfectly preventible by taking the necessary precautions.

IV Methods of Treatment in use among the people.

The Bonwanas are intensely superstitious. We have encountered great difficulty in making headway against their Systems of treatment. Their theory of all disease is that it is due to evil-influence or to witchcraft - the evil influence confines itself to such simple methods as "looking with the eye", or "pointing with the finger", at the object or person to be influenced; and the witchcraft confines itself to the use of "poisons" or "ubuti" with which the person acted upon is bewitched. As, then, disease is caused by some one, the way to cure a patient is to find out who it is who has caused the illness and get rid of him; in this way you help the sick person by removing his tormentor. Little faith is placed in medicinal treatment, no drugs are supposed to be of any use when one is under the spell of the bewitcher.

Three forms of treatment are practiced among these people in cases of illness; the first (1) form of treatment is that of the Witchdoctor. When a case of illness occurs it is usual for the friends to send off for the services of an "I-ggira" or Witchdoctor. He is supposed to know what is wrong with the sick person without being told. If he is a doctor he should know this, and not need to be told by the sick person, how he feels, when the pain began or where it is. All this the Doctor must tell the friends, and ^{also} who it is that caused all this. Now he is

allowed to put no pointed or direct questions. He is wily enough, (knowing this to be an impossibility) to employ a method by means of which he will come into possession of all the material facts of the case. This is his plan. He assembles all the grown up friends of the sick person at the village and seats them in a semicircle, so that he can command the faces of all. He instructs them to make only one answer to all his questions, "Siya-vuma" meaning "we assent," and at the same time clap their hands, all the while watching him narrowly. To illustrate this method let me instance a case. A man is attacked with illness. He had attended a beer-gathering, and on his return had complained of being unwell. He has a frightful headache and his friends are alarmed. The witch doctor is summoned but he is not told who it is who is ill, or what is the matter, all this he must find out being a doctor. He assembles all the friends present and he makes them "vumisa" or "consent" to all his questions, at the same time clapping their hands at once and crying out "Siya-vuma," "we assent"! Having overheard some of them occasionally this is the way they begin. "I am called to a case of illness here!" All then clap their hands and cry "Siya-vuma!" "I wonder who it is that is ill?" "Siya-vuma." "I wonder if it is a boy?" "Siya-vuma." "I wonder if it is a girl?" "Siya-vuma." "I wonder if it is a woman?" "Siya-vuma." "I wonder if it is a man?" "Siya-vuma." As can be imagined the clapping and

assent grow louder and louder, the doctor can almost see the eyes starting out of the people's heads as he gets nearer and nearer the necessary information. When he reaches the desired point as in this case (the man who is sick), the excitement is intense and the Clapping reaches its loudest, the wily doctor knows perfectly well he is on the proper course. Having ascertained this fact viz that it is a man, he proceeds, "I wonder now, let me see, where his illness is?" "Sija-vuma." "I wonder if it is in his stomach?" "Sijavuma." "I wonder now if it is in his knees?" "Sijavuma." "I wonder now if it is in his feet?" "Sijavuma." "I wonder if it is in his chest?" "Sijavuma." "I wonder if it is in his neck?" "Sija-vuma." "I wonder if it is in his head." "Sijavuma"; this latter is assented to so loudly and as he has got to it, so excited have they been, he has little difficulty in arriving at a decision. "Oh," he says, "I was perfectly sure even before I came here that it is a man who is ill and he is suffering from his head." "Sija-vuma," all cry and Clap their hands labouring the while under intense excitement. "What a wonderful fellow!" they exclaim. "We knew he would not be long of finding out all about this illness." They are perfectly oblivious of the fact that they in their ignorance are supplying him with all the information he wants, in this round about way. "Let me consider a moment," he says, "where it was he got his illness?" "Sija-vuma." "I wonder if it was here in his house?"

"Sifa-vuma" "I wonder if it was on a journey." "Sifa-vuma" "I wonder if it was at a feast or a sacrifice?" "Sifa-vuma" "I wonder if it was at a beer-drink?" "Sifa-vuma!" "The clapping again has waxed louder & louder and the excitement has culminated as the doctor in this process of questioning has arrived at the beer-drink. He has got all he wants now from his unsuspecting dupes. "Oh," he says "the head man of this village is ill, he attended a beer-drink and contracted his illness there. Now there is no doubt that a certain individual was there who had a grudge against the sick man and placed poison in the beer the sick man was drinking. It was so and so, now you know as well as I do what to do in a case of this sort, he is the individual "swept out" or to whom "the finger points". Immediately that false accusation, as can be readily seen, is made against the unsuspecting party all manner of means are used to compass his death. Flamed by his friends he flies for his life to a distant part of the country, if he is caught he is strangled, or pitched over a precipice, or stabbed with the deadly assegai. The sick man is supposed to get well directly his tormentor is out of the way. Every one under this baneful system of witchcraft is uncertain of life, and they all live under a terrible burden of anxiety. Little or nothing in the way of proper treatment of the sick man is done, the doctor gets his fee, generally a beast, (cow) and goes off in search of fresh cases.

(2) The second form of treatment is that of "uku-gubula" or

treatment by Suction. The patient having been bewitched, by some agent, suffers pain, and the deleterious matter must be removed from the affected part, by this process of Suction. The doctor or doctress sucs with the mouth the affected part and spits out the deleterious material. This is a favorite form of treatment for it is believed that, though there is no abrasion of the skin still by some mysterious process the evil material is ejected. The evil substance is of many different kinds, generally it is a white powder, a bit of a twig, a piece of a root, or a bit of tree-bark or the leaf of some plant. It is extraordinary to notice how they seem to profess to feel better after this suction and the exhibition of a well-chewed twig ~~which~~ has after all never been any further than the doctors mouth, and from which it has been most skilfully ejected. If the suction fails doctor after doctor is called, all performing the same process and producing various substances all of which have come out of the affected part! If all this effort fails it is generally set down to some one who by evil-influence is counteracting the work of the doctors!

(3) The third, and last form of treatment we shall consider is that of the "ama-yeza" or "medicines". In this case the doctor, or more properly speaking the herbalist, professes to cure certain cases with his drugs, generally the roots of some plant or tree. This knowledge is generally in the possession of certain members of a family and is handed down from father to son. The range of each drug is generally limited, the doctor professes to cure only certain diseases with his drug or drugs, it may be only

Chest Cases, or it may be Dysentery, or Syphilis, or Strumous diseases, or Fevers &c. Every variety of illness has its own specific drug in the hands of its own specific doctor. There is no use of going to a man with a case of Fever if he professes to cure only cases of Dysentery, and so on. Little regard is paid to the proper dosage, and, as can be readily understood, fatal Cases of poisoning, in the hands of unskilful persons, are of frequent occurrence; but the fatal termination is never set down to the drug but to the increase of the disease! These drugs are almost always freshly prepared and administered as infusions, an average dose is about a cupful, nothing less is considered of much importance; the greater the action of the drug the greater its virtue, and the nearer death it brings the patient (from our point of view) the more highly its virtues are extolled. The action of these drugs may be generally considered as of two kinds (1) Emetic and (2) Purgative, and in all cases where administered one or other of these actions is looked for, and unless it takes place the drug is supposed to have failed. Dosage, idiosyncrasy, Constitutional weakness, &c. are seldom taken into account and the consequences of this is seen in the many fatal Cases that have repeatedly been brought to our notice.

The native doctors do not undertake Surgical cases, the people object to operations as a rule, and they would rather die or allow a limb to rot off, rather than suffer it to be amputated. Even with Chloroform we have great difficulty in getting them to submit, they seem to have a horror of Chloroform, in case they may not

come out of it again. Cases of fracture they set and keep in position with splints, made from the bark of the mimosa tree, and these are bound with bits of grass-rope or strips made from the long fibres of tree bark. A considerable number of old people die of stricture and rupture of the bladder, they have no means of withdrawing the urine in such cases. We have been able to relieve untold suffering & to save life in a number of cases with the "Catheter." Cases of child birth are effected with great ease, but cases of retained placenta often baffle them, and this is the most fruitful source of death, with them, in child birth. Such then is a statement of medical science among this aboriginal tribe, and the methods of treatment in use among them. By showing them new methods of treatment, in a rational way, we are dealing a deadly blow at superstition and witchcraft. Duped, suffering, dying, falsely accused, tired of unsatisfactory methods of treatment, they turn for help to any one blessed with the power to heal; in this way we have been able gradually to gain their confidence, and to acquire an immense field of usefulness among them.