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**A PRELIMINARY SURVEY OF THE AGRICULTURAL
AND NUTRITIONAL PROBLEMS OF THE CISKEI
AND TRANSKEIAN TERRITORIES
WITH SPECIAL REFERENCE TO
THEIR BEARING ON THE RECRUITING OF LABOURERS
FOR THE GOLD MINING INDUSTRY.**

By

F. William Fox and Douglas Back

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the prevention of ill health is good sense;
the cultivation of health is statesmanship."**

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Section Two : Pages 144 to 332

CHILDHOOD, MARRIAGE, AND PARENTHOOD.

Notes on some Native habits and customs, with special reference to their bearing upon the numbers and health of the population.

The habits and customs of the inhabitants of the Territories have obviously the most far reaching effect, both upon the size of the population and the character of the environment that surrounds the child as it grows to maturity. In these habits and customs we should be able to trace some of the most important of the many factors that determine their health, or their liability to particular diseases. But such knowledge can only be obtained through long and patient enquiry, which we had neither the training nor the time to carry out.

The following brief notes, chiefly about the Fodos, have been included in order to indicate some of the more obvious of these influences, but as will be seen it has been necessary to rely, almost entirely, on what we could find in the literature of the subject.

We have chosen the Fodos instead of the Xosas chiefly because more detailed information is available concerning them in Miss Monica Hunter's excellent volume, already referred to, partly because we came into closer contact with them ourselves, and also because their life in the fertile and less Europeanized areas of Western Fodoland is in some ways more typical of the Native as he was in former days. We have endeavoured to indicate the more noticeable difference that we are aware of between the habits of the Fodos and those of other tribes, but in essentials the story told here may, we think, be regarded as fairly typical for the Transkei Native as a whole.

We are also indebted to Sonnabend (1933) for his illuminating survey of the 'demographic consciousness' of primitive man.

Childhood.

At about 6 years old the boys begin to go out to herd, first being entrusted with the sheep and goats and later with the calves, finally with the cattle. In this way they live a fully outdoor
.../ life,

life, exposed to all weathers in the scantiest of clothing. Their time is occupied with running after the stock and keeping them out of the lands, hunting small animals, playing at stick games, basking in the sun and learning the lore of the veld.

At about the same age the girls begin to act as nurses; later they go about with cans or pots to fetch water, learn to grind meal, to cook or accompany their mothers on expeditions to gather wild spinach. Later a girl is expected to give some help with the cultivation of the crops, though the responsibility for this lies solely on the married women.

The habit of smoking appears to be common in most areas and is practised by both sexes even by boys and girls of 10 or 12 years.

Circumcision.

Although circumcision was prohibited by Chief Faku in 1867 and has practically disappeared from Pondoland it is such an important ceremony elsewhere that some mention of it may be made here. European opinion appears to be sharply divided as to the place and value of the custom in the education of the Native youth. The majority stressed the value of the period of good feeding, exercise and strict discipline which it includes, whilst the educational and missionary authorities mostly condemned it on the grounds of the obscene nature of much of the teaching that is given. Educated Natives in private conversation almost invariably support the former view. Obviously a great deal depends upon the type of man chosen to initiate the candidates, who is supposed to be chosen by the parents of the boys.

The "schools" are only held after a good season and consequently there was an unusually large number undergoing the rite during our visit. The whole ceremony may last for several months, though nowadays, for practical reasons, it tends to be a good deal shorter. There is a definite tendency to resort to hospital treatment for the actual operation, both because it is less painful and because the time taken for complete recovery is reduced to a little over two weeks. At one hospital we visited, no less than 120 such operations
.../ had

had been performed during the first eight months of 1937, but the total number throughout the Territories cannot be at all large. The corresponding ceremony for girls still continues.

Marriage.

Amongst a primitive people such as the Southern Bantu, marriage retains a social significance which is much less in evidence amongst a more advanced society. Ancestor worship permeates the whole vision of life and whilst deceased ancestors are the protectors of the living, the service is reciprocal and hence a numerous offspring is a kind of insurance policy for well-being beyond the grave.

Again, material progress and an easy life depend largely upon the possession of a large family, whilst the Native as an individual is very conscious that he is part of his tribe and "the numerical prospects concern and vex the collective consciousness"; "All Bantu groups are anxious to enlarge their numbers."

Hence for personal, religious and patriotic reasons marriage is regulated and encouraged and "the man who takes a wife does so, in a certain sense, as a representative of the whole clan."

Hence it is that practically everyone marries once, that children are desired and that polygamy is the rule because of the widely held belief that it contributes towards a greater increase of the population. Similar motives lie behind the fact that whilst Pondo girls usually marry between 16 and 18 men do not usually do so until 18 to 25. In this way not only is the best use made of the procreative potentiality of the young female, but at the same time the lobola cattle are thus obtained as soon as possible, whilst the postponement of the marriage of the sons prevents the herd from being parted with too soon.

Polygamy.

A usually well informed friend in Pondoland told us that the average Pondo man has two or even three wives, but this is not borne out by the evidence assembled by Hunter. For instance as a result

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of the examination of 1,786 marriages, by means of tax records, she states :-

In 1937 in a conservative district, Ngweni, where there are few Christians and plenty of land for additional wives, the percentage of polygamy was :-

14 per cent. with 2 wives.
1.2 per cent. with 3 wives.
0.4 per cent. with 4 wives.
0.05 per cent. with 6 wives.

(Hunter (1936), p.202.)

On another occasion, amongst the Xosas, we were told that about half the 'Red' Natives had more than one wife, that a man with 50 cattle usually had two and one with 60 to 100 three to five wives.

No doubt the additional 10/- tax for each wife above one, and in some areas the difficulty or even impossibility of securing an additional holding for each wife, are amongst the reasons for this. Moreover, when ploughs are used wealth in grain is no longer so dependent upon polygamy as formerly. Thus Hunter tells, how a Xosa chief, on first seeing a plough exclaimed, "This thing that the white people have brought into the country is as good as ten wives."

According to Sonnabend the slight predominance of male over female births is a phenomenon typical of the human species, which shows only a slight divergence for the Southern Bantu, and whilst the higher mortality of the masculine sex also holds good, it does not lead to the large excess of females over males which is so usually assumed as an explanation for polygamy. He claims that the difference in age at marriage is an adequate explanation for the greater number of 'available' women.

Pregnancy.

Apparently a woman seldom becomes pregnant more often than once every two or three years, as compared with the almost yearly conception common amongst the European poor. No doubt this is partly to be explained by the prolonged period of lactation adopted by most Native mothers.

"Custom forbids a man to have full sexual relations with his wife until her child is weaned. If he does so he is said to be 'killing his child' In Pondoland I have never seen a pagan mother with children less than two years apart."
p. 159.

In Pondoland² the ideal is still that there should be at least two years - properly three - between each pregnancy. To become pregnant while a child is still suckling is still regarded as a disgraceful thing. In only 5 of 355 families investigated by Mrs. J.E.H. Nylas in Grahamstown location were there children less than two years apart. But in towns mothers tend to wean their children sooner, and I found families in which the children were only a year apart." p.472.

Here again it is easy to see that important possibilities arise. It is usually assumed, and indeed Natives themselves suppose that polygamy, per se, must lead to the production of a larger population.

However, it must be admitted that the main factor is the average fertility-rate of the woman; according to Sonnabend this is found in actual practice to be somewhat higher amongst the monogamous than amongst the polygamous Bantu. On the other hand it would seem to us that the beneficial effect of a better spacing on the health of the mother, more particularly if the nutritional factor is unsatisfactory, might lead to the production of a larger number of children that survive infancy.

For various reasons 'Dressed' Natives are tending to give up the custom of prolonged lactation. The actual decision to wean the child is supposed to rest with the husband, though we gathered that he in turn was largely influenced by the opinion of the old women in the kraal. It appears to be little or no concern of the mother herself.

Contraceptives.

* Unmarried girls and women for two years after the birth of a child are forbidden by custom to conceive, but as far as I know no means were formerly used to prevent conception. Informants, women whom I trusted, denied that any Native contraceptives were known, and I heard of four different pagan women from remote districts coming to different stores asking for contraceptives. One said that she had had miscarriage after miscarriage which made her very ill, and she did not wish to conceive again". Hunter (1936) p. 146

A very reliable chemist, who has had wide experience of the Native trade told us that he had only once been asked for a contraceptive appliance and this was by a well educated Native.

However, in the Giskoi a patient asked a doctor with whom we were working for advice, as she said she just didn't want to have any more children.

In so far as the people retain their primitive outlook it will be agreed with Sonnabend that " Any one who proposes limitation of birth must indeed appear to the Bantu deprived of his senses, like one who should advise a farmer to apply Malthusian methods to his cattle, "but just how far this outlook may be in course of modification owing to changed conditions and contact with Europeans it is difficult to say.

Hunter states that women told her that abortives were known, though seldom used, similarly Turner (1907) writes :-

" I have also made enquiries from Amaxosa Natives - educated men - who have informed me that their people have medicines acting in this way, but they were unable to tell me the name of the plants from which they were made

Barrenness, which is stated to be not uncommon, is regarded with great disfavour and to have a child before marriage, although liable to complicated punishments, is to some extent condoned in so far as it at least establishes fertility.

" Children are very much desired, and a barren woman is pitied by all. Women like to have many children, ten or twelve is considered an ideal number. (Hunter, (1936), p.146).

Elsewhere Hunter quotes a Bantu saying that " until a woman has 7 or 8 children, she does not begin to count them". According to the data we collected the average number of live-births for a woman past the child-bearing age was 7.7.

Sex of Child,

" No magic is used to determine the sex of the child to be born. Parents like to have an equal number of sons and daughters but there is no intense feeling about the sex of children. All are desired. (Hunter, (1936), p.150).

We were often told by Europeans that of course girls are valued and more care taken of them than with boys because of their 'lobola value', but it must be remembered that even on this very material basis boys are needed for herding, whilst now-a-days they may bring in valuable wages. Moreover, there are other standards; thus Sonnabend quotes a Bantu saying "The daughters replenish the cattle kraal, but sons take care of the grave."

More than once Natives, knowing that we were interested in

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infantile mortality volunteered the information that in their opinion there were fewer babies being born now-a-days, and Hunter states that the same impressions are current amongst the Fondeo; she says that many women are sterile. Similarly amongst the Tembus we were told that there were fewer children now-a-days, but more abortions.

One explanation of the prevalence of barrenness would be the spread of gonorrhoea, which a doctor in Eastern Fendoland told us was "as common as measles."

"During pregnancy a woman lives a normal life, and is expected to carry on all her duties of hoeing, fetching wood and water, and grinding until the birth-pains begin. As a bride is the hardest worked person in an *umri* this means that the manual work done during the first pregnancy is exceedingly strenuous. I have seen women seven months pregnant grinding for two days for a beer drink, or carrying 50 lb. of grain on their heads seven miles to a store. A Fondeo may refuse to ride his mare in foal, but sees no reason why his wife should not hoe until the day she gives birth.....

.....All complain that grinding flings the child about in the womb and lifting heavy weights to the head causes pain.

(Hunter, (1936). P. 147).

There are various customs, differing in detail, regarding the foods to be used during pregnancy which are of interest from the nutritional point of view. Speaking generally we gathered that unless the woman is completely 'accepted', or assimilated into the man's family she is not supposed to drink milk from his cows, whilst to buy or otherwise obtain milk from neighbours, even for a child, is regarded with some disfavour. Milk customs are complicated and cannot be considered here in detail.

The wild spinach, *asobo* (*Physalis peruviana*), which is very rich in mineral salts and vitamins is a favourite at all times, but we were informed is specially chosen by women during pregnancy. At the coast women are said to eat 'amazonene,' or rock bait, to give them much milk.

Confinement.

There was general agreement amongst all those we questioned that in spite of an almost complete lack of the conventional precautions and care, the average confinement passes off fairly uneventfully.

Of course there are glaring and horrible exceptions and the doctors agreed that whilst they were seldom called out to attend confinements, when they were called the condition was likely to be really serious. A woman may endure a very prolonged labour and help is not sought until several days have elapsed and she has become completely exhausted.

Dr. G. W. Gale (See Appendix 5, Annexure 9), comments on the commonness of one child sterility amongst Zulu women, but says the cause is not so commonly gonorrhoea but "inflammation of the uterus and/or appendages resultant from gross infection at childbirth."

"Labour is often prolonged; there are cases of children being born in the fields, and their mothers picking them up and carrying them home; but there are many more cases of prolonged labour. A woman who specialized in midwifery said that first labour usually lasted two days and two nights, and she had had cases lasting five days. The pelvis of Fonde women is normally smaller than that of a European woman, so although the babies are smaller, labour is as difficult.

(Hunter, 1935, p.147).

The high resistance to ordinary infections stands the mother in good stead, however, and in the experience of the doctors, conditions such as puerperal septicaemia are extremely rare no matter what complications are encountered. Delivery by means of unsterile forceps on a dung floor is often carried out without subsequent disaster. Recovery is also uneventful, but here again the mother often suffers and is more or less permanently damaged by a too early resumption of her normal mode of living; one doctor was asked to attend a woman who had given birth to a child the previous day and was busy hoeing in the fields and "didn't seem strong." The price for lack of rest and attention is liable to be paid for later.

Lactation.

In view of the long period of lactation which is traditional it is of interest to learn that in the opinion of many doctors the

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average woman is only able to feed her child properly for the first few months. Much depends of course upon the health and nutrition of the mother. Young healthy women can and do suckle for long periods. We heard one case where twins were breast fed for nine months; the view was expressed that probably 90 per cent. of the younger women could with care, encouragement and proper food carry through lactation adequately, but there are two main difficulties. In the first place there is a strong conviction that the breast is not sufficient by itself and must be supplemented continually by feeding, if necessary by force to demonstrable repletion, with fine porridge, or a thin gruel known as 'inembe'. Secondly, the lack of confidence in the breast is again shown by the readiness with which it is given up at the approach of any illness, either of mother or child. Thus it would not be at all unlikely for a child to be weaned if it had bronchitis. Long before the official weaning takes place the child has become accustomed to a partially mixed diet and in the later stages the breast is probably more in the nature of a comforter, which, however, may be of great importance at night in a crowded hut.

Infancy.

The first thing the child is given to taste is soot from the hut roof. This is given in warm water "to see if the child can swallow," or they give it and say "The child is going to eat to-day."

next it is given an infusion of some plant such as *Rubia cordifolia* or *Chlorophytum comosum* and later on may be held in the smoke of a fire on which some herbs or goats skin is smouldering "to make it strong." As Hunter points out the holding of the child over a smouldering fire was an efficient way of drying it in a society which had no cloth.

"Babies are fed with watery porridge from birth, and get sour milk from ten days old. The baby is laid on the nurse's lap, the nurse fills her hand with sour milk, and pours it into the child's mouth regardless of splutters and yells. Sometimes the child chokes. One child died in this way whilst I was at 'in Tibane.'" (Hunter, 1936, p.157).

We witnessed this rather appalling process more than once and heard of a case where at post-mortem the stomach was actually found to be ruptured.

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The doctors we questioned were not agreed as to the value of the sour milk, or *amaal*, used for infant feeding. It is a curious fact that the use of artificially soured milk has only recently been adopted by Europeans as a valuable means of feeding delicate babies, but calabash milk is apt to be lumpy, extremely sour, or so vigorously fermenting that it may blow out the stopper; moreover, it is of questionable cleanliness. The use of sour milk implies that sweet milk is available and hence it is argued that it should be used as such. We tried to correlate deaths with the use of sour milk, when collecting *dr'a* for our infant mortality table, but without much success. It is evident that a large family can be brought up on such a diet. It should be mentioned perhaps that it is usual for each baby to have its own particular little calabash, and milk may even be supplied from a particular cow.

"The first months of a Fonde child's life are spent on its mother's back, or lying asleep on the floor of the hut, but very soon it is relegated to the care of a nurse, an elder sister or other girl of the *umai*. Every mother tries to have a small girl whose particular care it is to care for her child.....

Unweaned children are given maize, pumpkin, meat, beer etc. If the mother dies an attempt is made to rear the baby on porridge and sour milk." (Hunter, 1936, p.187).

At the tenderest age children experience extremes of temperature; now they are almost smothered in the heavy folds of the dress on the mother's back, or near the hut fire, next they are dandled at the door in a cutting wind.

weaning.

The importance and the difficulties associated with the weaning period naturally depend very much upon the time at which it takes place. "Formerly a woman was supposed to suckle her child for three weaning seasons. Now they are frequently not suckled for more than 18 months or two years." If the child has been suckled for two or even three years, during which time he has been eating everything that his elders eat there is little disturbance of any kind. On the other hand where the child is weaned at a very early age owing to some mistaken idea as to the effect of the mother's milk, or on account of

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the child's own illness, or because the mother's milk is failing, the result may be disastrous, more particularly in those instances where cow's milk is simply unobtainable. Such children rapidly become emaciated or develop nutritional oedema and many die.

We came across one of these all too common cases, where the mother had no milk of her own and there was simply no cow's milk to be had in the district. We took the child to hospital and in a few days it was greatly improved; on returning to the old diet of 'inamb' however, we learnt that it quickly relapsed into its former state.

Childhood.

Most Fonde children crawl and walk later than European children, for instance they seldom walk under one year; we were also informed more than once that puberty is reached at a later age, and not earlier as is usually supposed. They crawl about the floor of the hut, but up to three or four years are never left without an older child in charge. No doubt young children soon learn in this way to look after their still younger brothers and sisters, and are valuable "helps". Yet it is impossible to expect experienced care from such nurses and accidents are not infrequent, when, as so often happens, mothers are out for hours, or even the whole day, working in the fields, cradling castles, or attending a local beer drink. At such times, doubtless, such unmitigated feeding occurs, whilst the open fire in the centre of the hut is responsible for many burns, which are, however, seldom fatal.

Taking one thing with another it will probably be agreed that a child who can survive such conditions must be made of stern stuff and there can be no doubt that the unfit are weeded out at an early age. Our figures indicate an infant mortality of about 25 per cent. for one year or under, which rises to about 33 per cent. during the second year. (See Appendix 5. Table A.)

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