

*East Africa*

*59295*

*Pro:  
Reg: 5 Dec*

British Medical  
Association.

MEDICAL OFFICERS' CONDITIONS OF SERVICE.

1918-9.

December.

Presses for favourable decision re increased salaries and same treatment as West African Medical Officers. If conditions do not improve will refrain from advising medical men from considering East African Service as career.

Major Parkinson.

*W. B. Stammers*

In 25695 the British Medical Association raised six specific points. They have been definitely informed in regard to the first three. The position in regard to the other three is as follows:- (See II of your minute of 17th September on C. O. 56300 EA.)

(iii) Pensions. As stated in your minute this cannot be dealt with except as affecting the whole East African service.

(iv) Study Leave. See paragraph 3 of the second draft to East Africa Protectorate etc. of 27th September on 56300. British Medical Association might be given the purport of that paragraph.

(v) Senior Posts. This matter is referred to the Governor in the confidential despatches of 13th November on 56300. British Medical Association might be informed that detailed proposals have been referred to the Governors for their recommendations; in fact it might be desirable to send them a copy of the table attached to 6404, by way of illustration. These proposals should

show the British Medical Association that the Sanitary side will be better provided for, and furnish some answer to their paragraph 5.

Comparison with West African Medical Staff

West African Medical Staff salaries remain as shown in paragraph 33 of African (W) 678.

(a) Director of Medical and Sanitary Service, Nigeria

No corresponding post in East Africa.

(b) Principal Medical Officers. Various salaries in West Africa, all somewhat higher than a Principal Medical Officer in East Africa, viz., £850-50-£1,000 + £85.

(c) Principal Medical Officer West Africa Salary £900-25-1,000 + £160. East Africa salary £750-25-850 + £75.

(d) Senior Sanitary Officer. Same as (c).

(e) Provincial Medical Officer, West Africa £800-25-900 + £160. No such post in East Africa.

(f) Senior Medical Officer, West Africa £600-£25-£750 + £125. East Africa £600-£25-£750 + £60.

(g) Sanitary Officer, West Africa £700-25-800 + £140. East Africa £600-25-750 + £60.

(h) Medical Officer, West Africa £400-20-500 + £80. then £525-25-600 + £100. East Africa £400-20-500 + £40. then £525-25-600 + £50.

(3) of paragraph 33, by which a West African Medical Officer can go on to £750 by £25 if he has served 3 years on £600 without promotion has not been applied to East Africa.

As to Medical Officers of Health posts, for West Africa see (5) of paragraph 33 of African West 678. They get staff pay of £100 a year in addition to duty pay. In East Africa they get duty pay plus an allowance of £100 at the larger stations, £50 at the smaller ones (see marked passage on page 3 of print of discussion on A.O./50107/18 East Africa).

5.12.19.

Mr.

Mr. Bottomley.

1. It is not really clear what these people do want. They now begin to talk of West African Medical Staff as the model - and yet we are finding difficulty in getting West African Medical Staff men. The British Medical Association has been invited to give evidence before the new Committee, so they will have ample opportunity to make their views known.

? acknowledge receipt - explain what has been done on two of the three outstanding points - (i.e. <sup>senior</sup> junior posts and study leave) - and add that an additional senior post for the European Hospital Resident Surgeon at £800 + £80 has just been approved.

? As regards paragraph 2 say that it is not understood why matters should be said to be reaching an acute stage, as the increased pay has already been approved from 1.4.19.

? As to paragraph 3 say that Medical Officers in East Africa receive the war bonus (which is larger even than the local Commission recommended) like <sup>the</sup> other officials [equally with those] who have received no increase in their pay - and enclose copy of war bonus memorandum - and add that it is hoped to introduce revised salaries generally from the beginning of next financial year, and that the Medical Department is being considered with the other Departments in this connexion - [but that the Association will no doubt appreciate the fact that the financial position of the Protectorates is very difficult] and that the Medical Officers have already been specially privileged in receiving priority in increased pay from 1.4.19 and point out that it is not an accurate account of the recent increases to describe them in general terms as an increase of £100.

As to paragraph 4 say that (1) duty pay on West Coast, to which presumably reference is made, has always been at 20% as compared with 10% on the East Coast, the difference being mainly because of the less favourable conditions on the West Coast which has a bad reputation climatically and for which there have always been fewer applications than for East Africa. (2) in the general revision contemplated the difference between East and West Coast pay for senior medical appointments will no doubt be decreased, inviting attention to the fact that the disparity exists mainly in the higher appointments such as Principal Medical Officer and District Principal Medical Officer.

As to paragraph 5 say that it is regretted that the Association should have formed the erroneous view that the Colonial Office do not appreciate the value of the scientific and sanitation side of the medical work in tropical Africa, and that so far as Colonial Office is aware there is no justification for such an assumption, - refer to the heavy expenditure incurred on S. S. work, anti-venereal measures, institution of Tropical Diseases Bureau, Imperial Bureau of Entomology, Tropical Diseases Research Fund and strong support of Schools of Tropical Medicine, - pointing out that London School of Tropical Medicine was founded by Mr. Chamberlain when Secretary of State for the Colonies - and as to the special point, say i.e. Medical Officers on the Sanitation side, say the only difference, of which Colonial Office is aware, is that these are not allowed to take private practice, but are for this reason given an additional allowance, it being generally agreed that it is undesirable for Medical Officers who are detailed for Sanitation work to undertake private practice which might conflict with their public duties.

As to paragraph 7 say that the attitude of the Association

is much regretted and that it is hoped that in view of the serious position that might in time arise in East Africa, if the Association obstruct the appointment of Medical Officers, they will refrain from the course indicated - that had the complaints to which they refer been sent in the ordinary way through the Principal Medical Officer and the Governor of the Protectorate concerned, it would have been easier to consider them as presumably the exact reasons for dissatisfaction would have been set out and it would have been possible to obtain the views of the Head of the Department on the particular points at issue - and add that the Association will no doubt take the opportunity afforded by their giving evidence before the Colonial Medical Services Committee to press for consideration of any proposals which they may wish to submit in regard to alterations in conditions of service for Medical Officers in the Colonial Service generally.

*all*  
*See H. B. G. 9.12.4*  
 '5pts for cotton on the above terms I do not think we should refer to financial difficulties - it will have no effect on the B.M.A.  
 We must of course then in doctors terms appoint & attract what good we - the mischief is that the B.M.A. are pushing to we their influence to force us to a more satisfactory rate.  
 6.10.11.4

*atome*  
*to J.R.*  
*12/11/4*

W. B. B. B. B.

W. B. B. B. B.

W. B. B. B.

W. B. B. B.

I expect the result will be  
a protest that we have not gone  
nearly far enough - If we  
~~shall do all that~~ and in view  
of the W. A. in which £720 (I judge  
that this is so) I do not see how  
we are to get any more contributions.

W. B. B. B. 15.6.20

at once  
W. B. B. B.  
15/6/20

69295

226

December 4th, 1919.

Sir,

Medical Services of the East African Protectorates.

1. With reference to your letter dated May 10th, 1919 (25695/1919) embodying Lord Milner's replies on some of the points raised in the Association's letter of April 26th last, as to the conditions of service for Medical Officers in the East African Protectorates, I am instructed to enquire if Lord Milner is now in a position to deal with the question of amelioration of the condition of these services, as no doubt the Advisory Committee on Medical and Sanitary matters for Tropical Africa has by now expressed its views.

2. I am to point out that from further letters received from the East Africa and Uganda Branch of the Association, it is obvious that matters are reaching an acute stage, as the Medical Officers feel that there has been great delay in definitely stating the intentions of the Colonial Office in respect of their requests.

3. These Officers rightly consider that their service conditions are anomalous and the terms of service inadequate in view of the fact that the salary values of medical practitioners have everywhere increased. Making due allowance for alleviation effected by the recent increase of £100, their salaries are still very greatly below pre-war value.

4. They feel that there is no justification for withholding from them the terms given to the West Coast Medical Officers, the disparity being in many cases very considerable.

5. It is an acknowledged fact that the successful development of Tropical Africa depends on the scientific control of its manifold diseases. So far from the Colonial Office showing that it really appreciates this fact, the existing Regulations actually place the Medical Officer of Health at a disadvantage as compared with the ordinary Medical Officer. It naturally follows that the highly qualified men, keen on questions of Tropical sanitation, are not forthcoming.

6. The Association notes with satisfaction that it has been decided to apply the rule obtaining in the West Coast Service whereby a Medical Officer may retire, after 9 years' service, on a gratuity of £1,000, but doubts very greatly whether by postponing the operation of the principle until 1921, the Government will achieve the result it anticipates, as it is extremely doubtful whether a sufficiency of suitable candidates for the East African services will be forthcoming under the existing conditions.


7. The Association feels that unless the improvements asked for are granted to the satisfaction of the Association, it will be its duty to refrain from advising medical men from considering the East African Services as a career.



8. The Association confidently trusts that, having received the views of the Advisory Committee on Medical and Sanitary matters for Tropical Africa, Lord Milner will at once, as foreshadowed in your letter of May 10th, deal with the pressing needs of the case of giving effect to these reforms, without waiting for the report of the Committee recently appointed to enquire into the general question of the position of the Colonial Medical Services.

I am, Sir,

Your obedient servant,



Medical Secretary.

The Under-Secretary of State,  
Colonial Office,  
Downing Street,  
S.W. 1.

Downing Street,

16 December, 1919.

DRAFT.

SECREARY  
FOR MEDICAL ASSOCIATION

MINUTE.

- Mr. Parkinson 12/12/19
- Mr. *C. H. ...*
- Mr. *G. ...*
- Mr. *H. Lambert*
- Mr. *H. Read* 13/12/19
- Mr. *H. Fiddes*
- Mr. *A. ...*
- Mr. *Milner*
- Calver*

Sir,

I am directed to acknowledge the receipt of your letter of the 4th December on the subject of conditions of service of Medical Officers in the East African Protectorates.

2. When the letter from this Department No. 25695 of the 10th May was written there were three ~~points~~ <sup>matters</sup> left outstanding, namely:-

(1) Alteration of the Pension Regulations to enable the Officers of the East African Medical Service to retire on a pension after 18 years service, or after 7 years service if invalided.

(2) Arrangements for the inauguration of study leave.

(3) An increase in the number of Senior appointments in the service.

3. The position with regard to these three matters is as follows :-

(1) It is not possible to deal with the Medical Officers apart from all other



other European Officers in the East African Protectorates, so far as any alteration in the Pension Regulations is concerned. Recommendations as to an earlier age for retirement than that now laid down in the Regulations have been received from the Officers Administering the Governments of the East African Protectorates and these will be discussed in due course with the Treasury.

(2) As regards study leave, despatches were sent to the Officers Administering the Governments of the East African Protectorates at the end of September last submitting certain proposals recommended by the Medical Advisory and Sanitary Committee for Tropical Africa based on the arrangements now in force for the West African ~~Medical Service~~ <sup>Staff</sup>. When these proposals have been considered by the Officers Administering the Governments of the East African Protectorates, final instructions will be issued.

(3) On the recommendation of the Advisory Medical and Sanitary Committee for Tropical Africa, suggestions have already been submitted to the Officers Administering the Governments of the East African Protectorates as to an increase in the number of senior appointments in the Medical Department. Replies have not yet been received to the despatches in which ~~the~~ <sup>the</sup> suggestions were ~~as to an increase in the number of senior appointments were~~ submitted; but ~~when~~ <sup>when</sup> a decision has been taken, the British Medical Association will be informed of the revised establishments.

4. As regards paragraph 2 of your letter, it is not understood why matters should be said to be reaching an acute stage in the East African and Uganda Protectorates, ~~seeing that~~ <sup>and</sup> the increased rates of pay ~~of which the Association is aware~~ <sup>and it is understood</sup> have already been approved with retrospective effect from 1st April, 1919; ~~and~~ <sup>from the</sup> ~~that~~ <sup>matter</sup>

5. As regards paragraph 3 of your letter, ~~how to observe~~ <sup>the</sup> that Medical Officers in the East African Protectorates have already

the M. O. S. P. has been within the appreciation of improvements

already been <sup>Special</sup> ~~special~~ly privileged in receiving priority of  
 consideration <sup>as to</sup> ~~for an~~ increase of pay <sup>as</sup> from the 1st of April  
 last, such increase not having been extended to other  
 branches of the service <sup>Further</sup> ~~and~~ like the other Officials who  
 have received increase in their pay, the Medical Officers still  
 receive <sup>no</sup> ~~the~~ war bonus which is in excess even of that  
 recommended by the local Commission appointed to consider the  
 matter in East Africa <sup>and</sup> ~~and~~ It is hoped to introduce  
 revised salaries generally in East Africa from the beginning  
 of the next financial year <sup>and</sup> ~~and~~ the Medical Department <sup>will</sup>  
~~be~~ considered with the other Departments in connection  
 with this general revision. It is noted that you refer to  
 the recent increase in salaries generally as an increase of  
 £100; but I am to point out that in many cases immediate  
 increases in emoluments have exceeded this figure and that it  
 is not therefore an altogether accurate description of the  
 improvements effected. A copy of a memorandum showing  
 what war bonus is <sup>paid to officials of</sup> ~~payable to~~ the East African Protectorates  
 is enclosed for your information.

6. As regards paragraph 4 of your letter it is presumed  
 that reference is made to the difference in the rate of duty  
 pay attached to appointments on the East and West Coast of  
 Africa. On the West Coast duty pay has ~~always~~ been fixed  
 at 20% of the initial salary of the appointment, while on  
 the East Coast the rate has been fixed at 10% of the initial  
 salary. This difference <sup>applies generally to all other, not merely medical, services</sup> ~~has been~~ made chiefly because of  
 the less favourable conditions on the West Coast which has  
 a bad reputation climatically and for service in which there  
<sup>have</sup> ~~has~~ always been fewer applicants than for service in East  
 Africa. In the general revision of salaries, however, which  
 is contemplated it is probable that <sup>the</sup> ~~existing~~ differences  
 between

between the pay for senior Medical appointments on the East and West Coast will be decreased; and as (with the exception of duty pay) the emoluments for junior Medical Officers in both services are alike, the general effect should be to make the terms more nearly alike for the two ~~services~~ services.

5. With regard to paragraph 5 of your letter, I am to say that it is regretted that the British Medical Association should have formed the erroneous view that the Colonial Office do not appreciate the value of the scientific and sanitation side of the medical work in tropical Africa. There is, so far as is known in this Department, no justification for such an assumption. It is not necessary to enter into details; but reference may ~~be made~~ be made to the various scientific expeditions which have been sent out to tropical Africa <sup>especially</sup>

<sup>in connection with</sup> sleeping sickness investigations involving the expenditure of large sums of money; the institution of the Tropical Diseases Bureau and the Imperial Bureau of Entomology, which are supported by grants obtained by the Colonial Office from the Imperial Treasury and from the Dominion Governments, India and the Crown Colonies and Protectorates; the Tropical Diseases Research Fund, which is in a similar position as regards its finances; and the strong support which has always been given by the Colonial Office to the Schools of Tropical Medicine.

<sup>if any point</sup> In regard to these Schools, ~~may perhaps point out that the~~ London School of Tropical Medicine was founded by Mr. Joseph Chamberlain, when Secretary of State for the Colonies and that it was due mainly to his appreciation of the value of the <sup>need for scientific medical</sup> scientific side of medical work in tropical Africa that the <sup>with tropical</sup> School was started. <sup>particular case of</sup> As to the <sup>particular case of</sup> special point referring to Medical Officers <sup>details for sanitary work</sup> on the Sanitation side, the only difference <sup>of the</sup> ~~exists~~ this Department is aware between the conditions of service for these Officers and <sup>other</sup> Medical Officers is that the former are not allowed to take private practice and are for

this

<sup>eligibility</sup> this reason <sup>is</sup> given an additional duty allowance. It is generally agreed that it is undesirable that Government Medical ~~Officers~~ <sup>persons</sup> who are <sup>engaged in</sup> ~~Sanitation~~ <sup>Sanitary</sup> work should undertake also private practice, which may conflict with their public duties; and so far as <sup>is known</sup> the ~~opinion~~ <sup>opinion</sup> of this Department, the extra allowance given may be regarded as adequate to make up for the fact that private practice is not allowed.

6. As regards paragraph 7 of your letter, I am to say that the attitude of the British Medical Association is much regretted and that it is hoped that in view of the very serious position which might in time arise in East Africa if the appointment of Medical Officers for the East African Services is obstructed, the Association will refrain from taking the course of action indicated. If the complaints to which reference is made in your letter had been sent in the recognized method through the Principal Medical Officer and the Governors of the Protectorates concerned, it would have been easier to consider them, as presumably the precise reasons for dissatisfaction would have been set out, and it would have been possible to obtain the views of the Principal Medical Officer and the Governors on the particular points at issue. It is hoped that the information contained in this letter will enable the Association to reply to the <sup>which</sup> letters they have received from their branches in East Africa and Uganda; but if any further information is required on specific points this Department will endeavour to furnish it.

<sup>It is understood that the Association proposes to take advantage of</sup> ~~It is understood that the Association proposes to take advantage of~~ the opportunity afforded by the appointment of the Colonial Medical Services

Committee

on which the medical profession is being represented

Committee will no doubt be asked by the Association to give to your  
evidence before ~~the~~ <sup>that</sup> Committee and to press for consideration  
of ~~any~~ <sup>the</sup> proposals which they ~~may wish~~ <sup>desire</sup> to submit in regard to  
alterations in the <sup>consideration of</sup> service of Medical Officers in the Colonial  
Service generally. ~~It is~~ <sup>It is</sup> ~~to be~~ <sup>to be</sup> ~~hoped~~ <sup>hoped</sup> that the Assoc<sup>n</sup> will ~~not~~ <sup>will</sup> ~~wait~~ <sup>wait</sup>  
for the result of the

I am, etc.

the Assoc<sup>n</sup> will wait the result of the  
CT's course of those  
proposals before taking  
the action suggested in  
para. 7 of their Lt.

(Signed) H. J. READ.

C/19295/20 19 20

E. Africa

Ld.

17 June 1920

**DRAFT.**medical  
of the

medical Assocn.

**MINUTE.**

(69295/14)

Mr. Jeffries 14.6.20

Mr. Macarty 14/6/20

Mr. Parkin 14.6.20

Mr. Grindle 15.6.20

Sir H. Lambert.

+ Sir H. Read.

Sir G. Fiddes.

Col. Amory.

Lord Milner.

in column

With ref to the  
fifth para. of the letter  
from this Dept. of the 16th

of Dec., I am a to  
inform you that he  
has now approved

permanent revised scales  
of salary for medical  
officers in the Provs.  
in Eastern Africa and  
the



the T.T.

2.1 The rates of salary, <sup>as introduced</sup> ~~now~~ (which will be introduced with effect from the 1st of April 1920 approved), are as follows:-

P.M.O. (E.A.P., Uganda + T.T.)	£1200 <del>£1000</del> p.a.
P.M.O. (Nyasaland + Tanganyika)	£1000 p.a.
Deputy P.M.O. (E.A.P., Uganda + T.T.)	£1000 p.a.
Principal Sanitation Officer (E.A.P., Uganda + T.T.)	£1000 p.a.
Senior Medical Officers (E.A.P., Uganda, T.T., Nyasaland + Swaziland)	£700 by £25 to £800
Sanitation Officers	£700 by £25 to £600
Dental Surgeons (E.A.P., Uganda, T.T. + Nyasaland)	£700 by £25 to £800

Medical Officers & Medical

Officers of Health

DRAFT.

(All Prots. & T.T.)

£500 by £25 to £600  
and then, if <sup>gained</sup> ~~officers~~ <sup>in the higher grade</sup> £600 by £25 to £700.

Bacteriologists

£200 by £25 to £800

(E.A.P., Uga. & T.T.)

MINUTE.

Mr.	Asst. Bacteriologist	£500 by £25 to £600.
Mr.	(E.A.P.)	
Mr.		
Mr. Grindle.	Officer i/c Anti-Venereal Disease measures	£1000 p.a.
Sir H. Lambert.	(Uganda)	
Sir H. Read.	Medical Entomologist	£800 (consolidated salary)
Sir G. Fiddes.	(Uganda)	
Col. Amery.		
Lord Milner.		

The medical Subordinate holds a temporary appointment: all other appointments are permanent & permanent.

3. In addition to the above salaries,



Salaries, free quarters are provided  
 or an allowance granted in lieu,  
~~as provided~~ medical officers of  
 Health receive special allowances  
 of £50 or £100 a year, according  
 to station. The duty allowances are  
 paid, but officers acting in a  
 higher post receive an acting allowance  
 equivalent to the difference between  
 their own salary and that of the  
 post in which they are acting, or, if the latter carries  
 a fixed salary, half the  
 difference between his own salary  
 and

and that of the post, ~~the~~ the  
~~minimum~~ minimum rate of  
 acting allowance payable being  
 at the rate of £50 a year.

DRAFT.

MINUTE.

- Mr.
- Mr.
- Mr.
- Mr. Grindle.
- Sir H. Lambert.
- Sir H. Read. *omit?*
- Sir G. Fiddes.
- Col. Amery.
- Lord Milner.

The present war bonus will  
 cease on the introduction  
 of the new scales, [but] as  
 an officer will receive less  
 than the aggregate of his  
 present salary, duty allow.  
 and war bonus.]

I am &c.  
 (Signed) H. H. H. H.