



DESPATCH

EAST AFR. PROT.

704

No. 2023 ⁰⁸/₀₄

2023

18 11 20

Number No. 615

(Subject.)

1908

Sleeping Sickness Settlement
in South Kavondo

22 Dec.

Last previous Paper.

24440

As papers as to formation of for natives it
is proposed to move for this fly infected districts & also
to the management of the settlement Everything is being
done to get a fair trial to the experiment.

(Message)

Mr Read

Print & proceed as on 22239

see

So proceed - as if the report has been
sent to committee to the ... all
the ... 3rd ... Note

19/2

Not asked for, of
R/S

Last subsequent Paper.

4/2
5/16



Governor's Office

Nairobi, 19th 09

December 32nd 1908.

EAST AFRICA PROTECTORATE.

No. 615.

(Incl. 4.)



My Lord,

With reference to my despatch No. 262 of the 22th May last, I have the honour to transmit herewith of a letter from the Acting Principal Medical Officer giving cover to a report by Dr. Wiggins, the Medical Officer detailed to select a site for the formation of a settlement in South Kavirondo for the natives whom it is proposed to move from the ~~the~~ infected districts.

2. I also enclose copies of the minutes of a meeting held at Kisumu between the Provincial Commissioner and the Acting Principal Medical Officer and of the instructions issued by the latter as to the management of the settlement.

3. From this correspondence Your Lordship will perceive that everything is being done to give a fair trial to an experiment which it is hoped will be productive of satisfactory results.

I have the honour to be,
with the highest respect,

My Lord,

Your Lordship's most obedient
and faithful servant

Principal Secretary of State

for the Colonies

Downing Street,

LONDON, S.W.

P. M. O.

No. 85.

Dr. Wiggins

November 16th.

Minutes.

Instructions.

No. 85/1908.

ENCLOSURE

P.M.O's Office

Nairobi,

9th December 1908.

Reference Minute Paper 28/1908.

2023

SECRETARIAT
 No 600
 Recd 9/12/08

Sir,

I have the honour to lay before His Excellency the Governor Dr. Wiggins' Report on the choice of a site suitable for the formation of a Sleeping Sickness Settlement in South Kavirondo.

2. Dr. Wiggins, in company with Mr Northcote, Assistant District Commissioner, made an extensive investigation of the infected territory south of the River Kuja, the smaller infected portion north of the same river, (shown on the accompanying map as enclosed in green), and examined the fly-free country to the East of this area.

3. As a result of his tour, four localities were fixed on as feasible sites for occupation - marked A, B, C, & D (and enclosed in red on the map). Of these four areas the small plot marked C, and the much larger one D 1, 2, 3, and 4 - a proposition put forward by Mr. Hemsted, the District Commissioner - were unanimously decided on by all three officers as fulfilling the medical conditions laid down in choosing a site, and practicable from an administrative point of view.

4. In order that the settlement of these lands might be systematically proceeded with, and as soon as possible, I met the Provincial Commissioner at Kisumu, and a plan of action was agreed on. A copy

The Secretary,
 to the Administration,
 Nairobi.

of

of this memorandum of procedure is attached.

5. Put shortly, under this memorandum and in the instructions issued to the Medical Officer, Dr. Baker, the following main points were agreed on.

(a) Dr. Baker to proceed to MERINDE (in D.4) and make an immediate start with the formation of his headquarters camp: Mr. Northcott assisting him.

(b) Where headquarters is sufficiently advanced to be a focus, a start to be made by the administration in transplanting the natives from the infected districts to the settlements.

(c) The allocation of the natives to the different settlements (B, D, 1, 2, 3, 4,) to be left in the hands of the District Commissioner.

(d) That the infected district to be first tapped for the exodus, be the country South of the River Kufe, and the smaller northern portion as being the worst infected and bordering on German territory. As the success of the scheme is demonstrated the other areas in the Province can be attacked later.

(e) On the arrival of the natives in the new locations, Dr. Baker, if necessary to form temporary camps in the necessary settlement so as to receive them. This practically only refers to D, which is a day's march from Merinde.

(f) That the Government be absolutely responsible for feeding the arrivals should the necessity for such arise.

6. A copy of the instructions issued to the Medical Officer is attached.

7. Since the above was drawn-up a Surveyor has been engaged to delimit the new settlement areas, so that each clan may be confined within its own proper boundaries and obviate the chances of inter-tribal friction.

8. Practically the success of the movement depends on two factors - the willingness of the natives to evacuate their old homesteads; and the quality and fertility of the land to support a new population. As regards the first the information brought back by Dr. Wiggins, W. Hamsted and Mr. Northcote, but confirms the impression I formed myself when amongst them 9 months ago that such difficulties as may arise under this head would be only reasonable and not insurmountable. As regards the second factor, the land, this can only be proved by actual experiment. But to all outward seeming it is the same in character and appearance as other cultivated lands in Kavirondo, and there is no reason to suppose that it will be less productive; the one uncertain point being the water supply in certain parts during the dry weather.

I have the honour to be,
Sir,
Your obedient servant,

J. D. Michell

Acting Principal Medical Officer

No. 2
Kisii Station,

615, 400 12, 1908
November 16th. 1908.

Sir,

I have the honour to forward this report in accordance with your instructions No 28/153/7 of 9/10/08.

I left Nairobi with Mr Northcote on October 11th and arrived at Kisii on 15th and after 5 days stay there waiting for porters, collecting food etc went Southwards towards the Magori to find a suitable site. After a 25 days trip we returned to Kisii arriving on November 14th. Our route is shown on the accompanying map. We selected 2 sites as being the only possible ones in that direction. We went through Kaniamkago and Suna and the people of both these localities said they were willing to move if given time. I also determined the furthest limits of the tsetse fly on the rivers Magori, Oyani (Kayen) and Kuja, these spots are shown on the map by a red line drawn across the rivers. There is no natural barrier, such as bare banks, to prevent the spread of the fly further up these rivers and I therefore strongly recommend that the banks of the Kuja be thoroughly cleared, and kept clear, for the distance of 1 mile at a spot just above the limit of the fly. The River here runs in a ravine among the hills and the trees and undergrowth are confined to a belt of a few yards along the river's edge and the clearing of this would not be a very great undertaking.

The sites we chose were A. A large triangle on the R. Maba, bounded by the River, the Inoit Escarpment and the Angle-

Principal Medical Officer,

East Africa Protectorate,

Nairobi.

the Anglo-German Boundary. This is an excellent site but is strongly deprecated by the Administ. on the following grounds (1) it is too far from the Administrative centre, (2) it is too far away for the people who are to be moved & (3) force would be required to make them go there.

B. A square area to the west of the Manyara Escarpment (vide map). This, however swampy and overrun by immense herds of elephants and I do not recommend it. Should it however be decided on the River Oysteri should be cleared for 1 mile somewhere above Manyarago.

C. This we decided as suitable for the Sura people who belong to a different tribe and would be better in a place by themselves. Mr. Hemsted agrees to this.

On our return to the Station Mr. Hemsted, who had just returned from Vador, told us that the Kadem people were willing to move if allowed to go to Manyara, as they are relations of the people there, and he suggested site D (vide map) as a part of a much larger scheme i. e. of moving many more clans from infested areas, and he suggested D 1. for Kadem, D 2 for Manyarago, D 3 for the Islands Mwangaru & Lusinga, D 4 for Kasarua etc. I append a list of the people he thinks should be moved wholly or in part. If this larger scheme is undertaken D is certainly the best site (with C for Sura) as though all could not possibly attend at 1 camp daily I think all could get the necessary treatment from a central camp at Marinde. This area is not wholly uninhabited but both Mr. Hemsted and Mr. Northcote think there is room. We all agree however that a survey of this area must be made

and

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and at once, as being absolutely necessary in locating the various clans. I have not yet examined the Biam but apparently the fly does not extend very far into Kaowok. I am assured there will be no difficulty in building the necessary camp at Merinde and that the local Chiefs will assist. 711

N.B. The weather has been most unfavourable for mapping out the fly area as it has rained every day without exception often from midday onwards. I have considered a place free from fly when 2 hours search has failed to find one.

I have the honour to be,

Sir,

Your obedient servant,

Ed/ A. S. King

Medical Officer

List of peoples living in the Old Districts in

S. Kavirondo.

PEOPLE.	POPULATION.	No of Huts	Remarks.
1. (Kadem (Vohuru	6,000	1912. 150.	To be moved wholly.
2. (Sunu (Kakrau	3,000	1000. 80.	" "
3. Kanyankaro		680.	"
(Mwangano. (Masinga.	5,500	900. 1000.	" "
(Kasungu (amreri		390. 400.	" "
(Maronda (Usaki	4,000.	500. 300.	" "
(Kariada (ochia	2,000.	500. 200.	To be moved back only. "
(Kisingiri (Utagi	3,500.	1000 300.	Possibly clearing to to be done only.
6. Karum	3,000.	1000	To be moved wholly.
9. Abwoch	?	?	To be moved in part only and in their own district.
10. Umbo	?	?	"
11. Kalachenyo	?	?	"

SLEEPING SICKNESS IN SOUTH

KAVIRONDO.

Meeting held in the Provincial Commissioner's Office, Kisumu, on the 30th November 1908, between the Provincial Commissioner and the Acting Principal Medical Officer, to consider certain proposals received from the District Commissioner, Viani, Dr Williams and Mr Northcote, dealing with the locating of natives from the infected areas in South Kavirondo.

(1). The scheme referred to by Mr. Northcote as the " third " scheme and suggested by Mr. Hemsted and subsequently referred to in Mr Hemsted's letter No 457/- FVIII/181 of the 15th November instant is the one we accept. The locations described on the map as " C " and " D.1. ", " D.2. ", " D.3. " and " D.4. " under scheme III should therefore be utilized as far as possible.

(2). At first the people of the infected areas, KADAM, KANIAMKAO and SUNA, should be dealt with commencing by preference with the people of Kadam. This is desirable because the above named people have already been reported upon by the Medical Authorities.

(3). It is hoped that when the areas named in clause 2 have been cleared, the other areas

mentioned

mentioned by Mr. Hemsted can be dealt with.

(4). Doctor Baker to proceed to Kisii, and there consult with the District Commissioner and settle arrangements; he to go then to MERINDI and start his camp. Mr. Northcote is to accompany Dr. Baker under the original instructions.

(5). The particular areas to be handed over for the occupation of the people from the infected locations must be arranged by the District Commissioner and the Medical Officer and Assistant District Commissioner attached to the Flea ing Sickness undertaking informed.

(6). Every endeavour being made to obtain a Surveyor. It is, however, possible that there will be some difficulty and considerable delay in this connection, as no one is available for the duty at present. In the meantime the work of removal and re-settlement must proceed, and the Administration to erect tempo ary beacons showing boundaries.

(7). It will be necessary to provide food for the people of the different locations as they are moved. It is sincerely hoped that the District Commissioner, Kisii, will be able to arrange for the natives themselves to bring supplies of food with them; as however it will be undoubtedly necessary to provide some food at points for distribution to those who will not be supplied, the District Commissioner will arrange, in conjunction with the Medical Officer and the Assistant District Commissioner

to purchase supplies of food to be stored at convenient centres for distribution. To meet this the Acting Principal Medical Officer agrees to a sum of £2000 being expended as required on this account. Should it subsequently be found necessary to make fresh and additional provision in this connection further arrangements will require to be made.

(8). The natives concerned should build their own huts, and bring with them their own cooking pots and all their other belongings. In cases where any of the people are too ill to do such work, the Administration can possibly arrange for it to be done for them by those of their people who are able-bodied.

(9). As soon as ever the people are settled on the new locations, they should commence to make their shambas, and where necessary and desirable the Government might issue seed.

(10). The question of any compensation is to be avoided as the work now being undertaken is solely for the benefit of the people concerned, and the Government has no funds available for distribution in this connection.

(11). Police guards must be supplied where the District Commissioner considers necessary.

(12). Chiefs and Headmen should be induced by every means possible to help in the general scheme.

(13). Force in any form must be avoided in carrying out the removal.

(14). All vouchers for expenditure undertaken

will pass through the Medical Department, and must bear the signature of the Medical Officer in charge. (15). In explaining to the natives concerned the action of the Government care should be taken to warn them that a certain per centage of the natives who may take advantage of the scheme, will arrive at the different selected settlements already infected with trypanosomiasis, or showing obvious signs of Sleeping Sickness. These, though then placed in healthy surroundings, will sooner or later go from bad to worse with usual fatal termination. Of the others, in whom on their arrival at the settlements the symptoms are not discernable, a still further per centage will undoubtedly develop obvious signs of the disease. This cropping up of cases may go on for months or years, as it is not yet known how long the trypanosome may lie dormant in the system before incubating into an acute attack. So the mere fact of removal from an infected district into sanitary surroundings should not be held out as affording any sure means of escaping the disease, except to those not already infected.

sd/ A.D.Milne.
Principal Med. Officer

sd/ John Ainsworth.
Provincial Commissioner

Kisumu, Nov. 30th. '08.

INSTRUCTIONS TO THE MEDICAL OFFICER IN CHARGE OF SLEEPING SICKNESS
SET UP AT MUKINDI, EAST AFRICA.

1. You will proceed as soon as possible to Mukindi Station and place yourself in communication with Mr. Bennett, District Commissioner, and Mr. Northcote, Assistant District Commissioner, with the object of forming a permanent camp at MUKINDI. This will be the head-quarters of the proposed sleeping sickness settlements.
2. For the present Mr. Northcote will accompany you as Administrative Officer in charge of the camp.
3. Your line of conduct will, so long as the services of an Administrative Officer are available, be the same as if you had been placed in medical charge of a station with certain special duties superadded. For further details connected generally with the management of the camp, I would refer you to the attached memorandum of procedure drawn up by the Provincial Commissioner and myself.
4. One of the primary ideas in the formation of this camp is to afford natives dwelling in fly-infested districts, a concrete example of the value of dwelling in surroundings free from the presence of tsetse flies. It should, in the first place, be a focus which will attract natives to cluster round and forsake the dangerous localities in which they formerly dwelt.

It will, therefore, be no inconsiderable part of your duties to endeavour to make the native mind grasp the connection

between

between tsetse flies and sleeping sickness and, in particular, pointing out the part played by the Glossina palpalis in the transmission of the disease.

The hazardous nature of such occupations as fishing in fly-haunted rivers, the drawing of water from, or the tilling of channels alongside of streams known to contain Glossina, should all be insisted on.

6. As it is certain that the natives will arrive at the camp with the dominant idea of being treated for - and cured of - the disease, while holding out no hopes towards this end being achieved, part of your duties will consist in the selection of suitable cases for treatment by one or other of the atoxyl products, or such remedies as may from time to time be selected. It would further be as well to give a placebo by mouth as a matter of routine.

7. An out-door dispensary for the relief of all ordinary surgical and medical complaints will be established.

8. On arrival at MERIN E, you will at once proceed to select the actual site of the settlement. A commencement will be made by clearing a portion of the ground of grass, trees, obstacles, etc. proportionate to your immediate needs.

9. Full latitude will be allowed you in deciding on the arrangement and plan of the camp, but you should remember that if it turns out a success, this temporary measure of relief may become a permanent native settlement necessitating its elevation

into

5.

into one of the administrative stations of the Province. The clearing out of the camp, therefore, ought to be done sweeping this and all other, on hygienic and sanitary lines with a due regard for its orderly administration afterwards.

9. The building of the camp should be proceeded with more or less in the following order:-

(i) Bandas as consulting room, microscope room, and office with division at one end so as to form a dispensary and store.

(ii) Bandas for Medical Officer and for Assistant District Commissioner.

(iii) Hospital Banda for reception of moribund patients, or patients under close observation.

(iv) Bandas for Compounder and Indian Artisans.

(v) Huts for Interpreter, Native staff, boys, orderlies, police, &c.

To erect these you are supposed to engage such native labour as is necessary, paying them at the current rate of wages. An Indian carpenter will be provided to assist you.

10. The area to be settled is a wide one. While, therefore, these buildings are going forward, for administrative reasons, it may be deemed advisable to occupy first that portion of the area furthest from the head-quarters station. This may entail your forming a temporary camp in the locality reserved for the KACHH natives, for so long as may be advisable.

11. In the management of the camp it must be clearly understood that compulsion is not to be used. Where this would seem

to be available it must be left to the Chiefs to determine; to whom the object of the camp will be explained by the District Officer so that they may instruct their people to take advantage of the facilities and treatment afforded.

12. Lunatics may require to be put under restraint; they should be handed over to the care of their friends, or, if necessary, placed in a special hut under guard. Doubtless desertions will be frequent; but no physical effort should be made to retain or recapture the offenders. Their Chiefs should be instructed to see to it that the deserters do not return to the fly-area. Should they do so, the Chiefs should make every effort to clear them out, but not necessarily bring them back to the settlement.

13. You will be responsible, further, for the sanitary condition of the camp. This should be kept in a cleanly condition. Sweepers should be appointed, latrines dug and dumping holes made and all refuse regularly burnt. One of the worst plagues in Savirondo are flies - cattle and sheep bomas should accordingly be situated at a convenient distance from camp.

14. At the end of each month a report will be submitted to the Principal Medical Officer on the work of the camp.

This report should summarize

(i) The total number of admissions to camp.

(ii) When cases of sleeping sickness arrive at the camp they should be thoroughly examined and, according to their symptoms, divided into four classes as follows:

Class A.

Class A. Those who present the following symptoms:-

Fever, less enlargement with trypanosomes present in the glands. Very often such cases complain of headache and pain in the stomach. There is no tremor. The patients on admission generally say that they are well, do not think that they have sleeping sickness or they may give a history of a month's or two's illness.

Class B. Those presenting the following symptoms:-

History of fever and some drowsiness. Think that they have not sleeping sickness, say as a rule that they have been ill several months. Marked gland enlargement. Impotence of some months duration as a rule, or else amenorrhoea. Skin generally dry. Some slight wasting. Tremor of tongue but not of lips or fingers.

Class C, present the following symptoms:-

Well marked cases of sleepier sickness. History of illness for the last year or more as a rule. Tremor of tongue, lips and fingers. Wasting. Dry rough skin. Generally the feet are swarming with tiggers. Such cases walk with difficulty, and are obviously ill. Are very often either imbecile or else maniacal. Often marked oedema of the limbs and around eyes.

Class D,

Very advanced cases of sleeping sickness. Such cases are drowsy and have to be carried to camp. Are generally a mass of tiggers and in a very filthy state. Food is only swallowed with difficulty.

(iii) The number of deaths and the causes thereof.

- (iv) The number of desertions.
 (v) The number under restraint.
 (vi) The total number remaining.

All cases of sleeping sickness will be transferred to a special register in which every particular concerning them will be entered.

The ordinary out-patient Register will also be maintained to record all cases presenting themselves for medical or surgical treatment - everything but sleeping sickness. From this will be compiled the ordinary monthly statistical return (which, however, should include the numbers of sleeping sickness patients presenting themselves for treatment so that it presents a complete return of all the month's work). The usual forms connected with the routine work of a Hospital will also apply to your Dispensary.

14. All vouchers connected with the expenses of the camp will be certified by you as correct before payment, and a copy forwarded to the Principal Medical Officer, each month.

Rairobi, 5th Decr, 1908.

J. H. H. H.
 Acting Principal Medical Officer.