CHAPTER 8

What David Livingstone Really Discovered in Tropical Africa

David Livingstone’s travel experiences were recorded in three books, with varying results. As self-confident explorer he sketched what he went through and thought on his trans-Africa journey in an amusing and often witty way. The report on the Zambezi expedition was less exciting and was marred by his grudges, especially towards the Portuguese whom he considered responsible for the failure—from many perspectives—of the undertaking. His subsequent and final journey may be regarded as an effort to rehabilitate himself: ‘The Nile sources are valuable only as a means of enabling me to open my mouth with power among men’.1 That he soon became totally dependent on Swahili slave traders—whom he had long called ‘Arab gentlemen’—was directly connected with a number of errors of judgement, among which was the appointment of Indian sepoys as military guards. The editing of his diaries from those days by Horace Waller left much to be desired.

The tentative conclusions concerning the usability of Livingstone’s information on health and nutrition are discussed at the end of the three preceding chapters. It has been proved that ‘malnutrition’ existed in precolonial tropical Africa, but the number of cases reported is very limited. Where children with the symptoms were seen, circumstances had changed for the worse: in 1849 in the Kalahari desert and in 1853 in that part of the region now called Namibia. In the colony Mozambique the occurrence of ‘malnutrition’ was only to be suspected on the grounds of circumstantial evidence, just as in the disturbed areas overrun by slave hunters and in the ‘refugee camps’ in the Shire—Lake Malawi area. Clear symptoms were not reported.

Everywhere in precolonial Livingstone’s tropical Africa the conditions leading to ‘malnutrition’ were absent; in fact there are many indications as to how these problems were prevented. The practice—the tradition—of extended breastfeeding and sexual abstinence, with the resultant birth interval, was the basis of this. Furthermore, the listing of food sources available indicates the wide range of possibilities for obtaining food, and thus to arrange for supplementary or substitute sorts of nutriment for small children. The health of the

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1 Hereupon followed: ‘It is this power I hope to apply to remedy an enormous evil’, by which he probably meant the slave trade (letter to Charles Livingstone, date unknown, in ILD, 293–94).
indigenous population was positively described, although for the Portuguese colonies and part of the area of the Shire and Lake Malawi between 1861 and 1864 an exception must be made. This will be put into perspective, supplemented with information about the time after 1880.

Children without ‘Malnutrition’

Symptoms in the Historic Literature

Since the twentieth century, malnutrition has been emphasized as the cause of sicknesses among the inhabitants of precolonial tropical Africa. Where publications of anthropologists and historians are concerned it is clear that they mean the general sense of the word—that is ‘insufficient nutrition’—among people of all ages. Audrey Richards extrapolated the consequences of the English colonization of Rhodesia up to the precolonial past, while Jill Dias meant by malnutrition the result of ‘ecological and epidemiological disaster’ in the colony Angola between 1830 and 1930, leading to undernutrition and worse. There is a medical publication from 1979 in which specifically ‘malnutrition’ is suggested as the cause of the limited population of the African continent in the past. From the text it appears that this was based on a presumption, not supported by descriptions of malnourished children. While some symptoms were noticed before 1880 by such doctors as Winterbottom, Livingstone, Galton, Schnitzer (Emin Pascha) and Falkenstein, these applied to a limited number in areas disrupted by early colonization or other causes. Before the twentieth century no new reports on symptoms of ‘malnutrition’ in tropical Africa were added. The first to give a coherent picture of the disorder was Cicely Williams, in 1932. It is not surprising that she called it a ‘new disease’: the symptoms were hardly seen in Europe then.

2 Dias (1981), 358, 362; Iliffe (1987) also used the word malnutrition for ‘insufficient nutrition’ (see Chapter 1). Not a single Portuguese doctor has reported on the specific ‘malnutrition’ among children in Africa before 1950 (pers. comm. Dr Castinheiro and Professor Caria Mendes, Institute for the History of Medicine in Portugal and the Former Portuguese Colonies), but symptoms of ‘malnutrition’ were found from 1942 in Brazil and reported under different names (like dystrophy). See also Trowell et al. (1954), 2–7.

3 Davies (1979, 8). John Kirk did not describe any symptoms but gave an indication of ‘malnutrition’ in Mozambique; Falkenstein (1879, 1, 29) refuted the view that the swollen stomachs of the Loango children indicated an abnormality. Holub, Bastian, Brun, Buchner, Coillard, Meller, Peters nor Southon reported symptoms of ‘malnutrition’ in Livingstone’s tropical Africa. Winterbottom (1803, I, 193, 222; II, 227); Galton (1853, 192); Livingstone (1857); LMT, 50; LMC, 160; Emin Pascha, see F. Stuhlmann (1875–78, 314).