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Introduction

Epidemics – the unusually high prevalence of a lethal human disease\textsuperscript{1} in a town, country or region – loom small in accounts of South Africa’s past, almost in inverse proportion to the anxious attention they attracted while they raged. In part this is because, until quite recently, historians have not known how to incorporate them into their versions of history, dominated as they were by political, economic, social and cultural issues, from which the history of the country was constructed. In this short-sightedness, they failed to recognise that, far from existing outside these frameworks, in some separate medical paradigm, epidemics (and disease generally) are integral to every aspect of life, death and society. In the unequivocal words of a historian of global epidemics, ‘Truly, an epidemic tempers a society … There is no middle ground with plague. It is the litmus test of civilizations.’\textsuperscript{2}

It is from this holistic, social history of disease
perspective that this book proceeds, as it places epidemics firmly within the country’s past and treats them as something not extraneous to the mainstream of its history. Indeed, what epidemics often do is to accentuate many features and beliefs present in society, as well as to accelerate processes already under way therein, some of which may not be easily visible to historians under normal circumstances. In this respect, quite apart from their direct impact on society, epidemics provide very revealing lenses on the past. As one historian put it graphically, they ‘exposed the nerve system … of society’.

The five epidemics on which this book focuses – smallpox in the 18th and 19th centuries, bubonic and pneumonic plague from 1901 to 1907, influenza in 1918–19, polio in the first half of the 20th century and HIV/AIDS since 1982 – are certainly not the only plagues which afflicted the country over the last 300 years. Another five (and more) could easily have been added: for instance, measles in Cape Town in 1807 and 1839 and in the concentration camps of the South African War, so-called Mauritian fever (probably typhus) in the Cape Peninsula in 1867–8, typhoid in Bloemfontein in 1900, typhus in the Transkei in 1917–22, 1933–5 and 1943–6, and cholera in KwaZulu-Natal, Mpumalanga and the Eastern Cape in 1980–3 and 2001–2. As for tuberculosis, its ongoing high
prevalence in the country since the 1880s makes it a lethal endemic disease rather than an epidemic one.

Unlike the second five epidemics, the first five selected for investigation were particularly severe and raged beyond a single town or region, which means that they left a mark both deep and wide on the fabric of society. As the five chapters show, in a variety of ways their impact on South Africa’s past was decisive. Secondly, they occurred at pivotal moments in the country’s past – early in the European colonisation process, during the mineral revolution, in the midst of the South African War and World War I, as industrialisation and rapid urbanisation were getting under way, and within the eras of apartheid and post-apartheid. With all of these processes they had a two-way relationship, both affecting them and being affected by them. They thus also shed a telling light on these well-established landmarks in the country’s history, but from a novel social history of disease angle. South African history should not look the same to readers after they have finished this book.