



James Africanus Beale Horton (1835–1883) – A West African Army Doctor’s Strategies of Self- Legitimation*

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Summary

This article examines the interconnections between medical science and politics on the eve of the advent of colonial rule on the West African coast by means of the example of James Africanus Beale Horton (1835–1883), one of the first West Africans to receive medical training in Britain and to serve as a medical officer in the British Army. As he is known today as a political author, Horton’s scientific work has hitherto been largely neglected in the historiography. His work as a medical officer and his research as an ambitious medical scientist allowed him to develop elaborate proposals for hygiene policy reforms. Furthermore, angered by emerging European race theories, he set out to refute prejudices against Africans and to draft self-governing West African states. This article seeks to demonstrate how scientific research helped a mid-nineteenth-century African scholar legitimise himself as an authoritative doctor and situate himself within European political and academic paradigms.

Proto-Colonialism, Medical Topography, British West Africa, Racism

Introduction

By the end of the 1850s, the British ‘civilising mission’ in Africa was supposed to be at an advanced stage, but high morbidity and mortality rates made Brit-

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ish personnel reluctant to serve in the tropics. On the assumption that Africans were immune to the supposedly ruthless ‘tropical diseases’, the British Ministry of War decided in the late 1850s to train Africans as medical officers in order to guarantee uninterrupted medical care for the British Army stationed in the military stations in Sierra Leone, the Gambia, the Gold Coast and Lagos.¹ James Horton was one of three young Africans chosen for this project. As a staff assistant surgeon in the medical corps, he was to treat sick soldiers and research local diseases over an extended period of time and thus ultimately help to strengthen the British presence in West Africa. Indeed, in this role, Horton was the object of an experiment by the Ministry of War and the Church Missionary Society (CMS): if he was able to become a respected doctor and compete with his European colleagues, the British Empire would increasingly train Africans as doctors and deploy them on the coast. In the ever more racist atmosphere in Britain, however, support for such a scheme soon waned, and the Army Medical Department eventually decided against its continuation. Despite these strong headwinds, Horton remained as a medical officer in the British Army for 21 years until his retirement on half-pay with the rank of Surgeon Major in 1880.² During his career, he produced an impressive body of medical and political literature. Although his work on diseases and their causes was not ground-breaking from a medical perspective, it probably constituted the most comprehensive study of health conditions in West Africa at the time. Furthermore, he developed pronounced views on race, civilisation and governance and repeatedly urged the British administration to implement hygiene reforms. This article investigates how Horton was able to legitimise himself and claim agency as an authoritative scientist and intermediary while straddling between an African political agenda and European knowledge paradigms under the tense political and social circumstances of mid-nineteenth-century British West Africa. This article therefore tells a rare intertwined story of proto-colonialism and of medical staffing experiments prior to the establishment of tropical medicine as a discipline.

Horton’s political writings and opinions have thus far been the main focus in the historiography.³ In contrast, few scholars have discussed Horton as a doctor and scientist, and even fewer have considered the significance of his in-depth scientific observations for his political philosophy.⁴ This neglect is symptomatic of scholarship on the history of (colonial) medicine, which has so far focused more on Western protagonists and locations while largely ig-

1 TNA, WO43/869.

2 For Horton’s biography, see Fyfe 1972.

3 E.g. Kimble 1963, Shepperson 1969, Ayandele 1970, Táíwò 2010.

4 Horton’s role as a doctor is only discussed in Howell 2014 and Adeloje 1992.

noring the agency of non-white actors.⁵ This article seeks to reconsider the story of this exceptional African intellectual by establishing a strong link between his scientific and political work. To fully grasp Horton's political views, it is essential to comprehend his extensive medical knowledge and his understanding of the environment. The article argues that, for Horton, ultimately everything boiled down to the influence of *external factors*, from disease causation to the emancipation of the African continent.

Horton's fight for his own professional legitimisation as well as for African emancipation indicate the complexity of the period leading up to the so-called Scramble for Africa, which started in the 1880s.⁶ In the mid-nineteenth century, the vast majority of African territories were not yet under European rule; while European militaries maintained several stations along the coast, it was not at all certain whether they would stay. It therefore remained unclear whether West Africans in British protectorates were considered subjects of the British Empire or not.⁷ It is important to emphasise that, in the mid-nineteenth century, a shared African identity had not yet been universally established among the inhabitants of the continent. An African self-consciousness was only just beginning to emerge, especially among those who were in close contact with Europeans. Horton, as the creolised son of liberated African slaves, had no strong links with local ethnic groups on the West African coast, but defined himself as 'African' – particularly during the course of his education in Britain – through his choice of the epithet *Africanus*. Eventually, he found himself at the forefront of a rising African consciousness. Among Western and Central Europeans, humanistic–paternalistic ideas of a 'civilisable' and ultimately self-sustained Africa coexisted with emerging pejorative race theories depicting Africans as inherently inferior.⁸ Horton's story illustrates this tension: he was chosen by the British to be educated and trained in Britain, which inspired him to draft self-governed African states and to dream of African emancipation and domestic economic growth, all while seeing his visions constantly thwarted by growing British racism.

The foundation of Horton's strong opinions on medical science, race and civilisation can be found in the unusual course of his education and his first

5 The history of imperial and colonial medicine is the subject of numerous studies. For an overview, see Chakrabarti 2014 and Zaugg 2016. Scholars who have discussed African medical protagonists include Adeyoye 1985, Tetty 1985 and Patton 1996.

6 The Berlin Conference, also referred to as the West Africa Conference, took place from November 1884 to February 1885. See Tilley 33ff.

7 A short open letter by the King and chiefs of Christiansborg in *The African Times* demonstrates this uncertainty: "Also we beg to be further informed who are British subjects and who are not, as it leads to so much confusion." *The African Times* (23.07.1868), 6.

8 Bethencourt 2013. This book is an excellent study on the history of European racism.

years as a medical officer on the coast of West Africa. The first section of this article retraces these early years on the basis of a collection of letters that Horton sent to the Ministry of War and the CMS, in which he described his fight for the continuation of the educational project in which he himself had participated.⁹ Such an extensive compilation of written sources by a nineteenth-century African author is extremely rare. The experiences that Horton described underline his struggle for legitimisation and illustrate the dual reality of life as both a subaltern and a privileged mid-nineteenth-century West African. The second section focuses on Horton's medical publications, which prove his undoubted authority and professionalism in the field of Western medicine while also illuminating the scientific fundament of his political philosophy. As discussed in the third section, these scientific observations, paired with Horton's own experiences of European racism, led to his profound political vision for an emancipated, self-governed Africa. On a more practical level, Horton made several hygiene policy proposals that were based on his countless observations as an authoritative local doctor with a year-round residence. The final section examines the reception and critique of Horton's ideas by his contemporaries as well as by twentieth- and twenty-first-century scholars. Although his work may not have had the impact he had wished for, he remains an important figure in African history by serving as an extraordinary epitome of the complex characteristics of mid-nineteenth-century West Africa.

From Experiment Subject to Professional

James Horton was born in 1835 in Gloucester, at the time a small village east of Freetown, Sierra Leone. Gloucester was founded in 1814 as a settlement for so-called 'recaptives' or 'liberated Africans' like Horton's parents.¹⁰ They were of Igbo origin, an ethnic group from today's south-central and south-eastern Nigeria. It remains unclear when exactly they were captured and sold into slavery or when they were liberated by the West African Squadron of the Royal Navy and resettled in Gloucester.¹¹ After attending the village school, which was run by British CMS missionaries, the missionary James Beale re-

⁹ The transcriptions of these letters are available as appendix to this article. Extracts from these letters have previously been published by Nicol (1969).

¹⁰ Fyfe 1972, 6ff. See also Spitzer 1974.

¹¹ The Sierra Leone Public Archives maintains a large inventory of "Liberated African Registers" with extensive lists of names and observations on Africans who were liberated by the British Royal Navy in the period from 1808 to 1848, albeit with gaps. Unfortunately, the entry relating to Horton's parents could not be found. EAP443/1/17/1–20.

cruited Horton to the CMS Grammar School in Freetown in 1847.¹² In 1853, after graduation, he was admitted to the Fourah Bay Institute, which had been founded in 1827 by the CMS and where he planned to train as a pastor.¹³ Since 1808, Sierra Leone had been a British crown colony, with Freetown serving as the capital of British West Africa.¹⁴ Compared to other towns and stations on the West African coast, Freetown was an extremely diverse city, whose 15,000 inhabitants consisted of indigenous residents, workers from neighbouring states, liberated Africans of various backgrounds – commonly known as the Sierra Leone Creole people (today called the Krio) – as well as Canadian, American and West Indian settlers of African origin. Only around 150 inhabitants were Europeans, many of whom were ordinary soldiers or sailors, while most civil servants and shop owners had an African background.¹⁵ As such, white skin in 1850s Freetown did not automatically confer a higher social status. Horton spent his youth in this multicultural environment and was significantly influenced by its liberal spirit.

Since Britain's abolition of the slave trade in 1807, the British Empire's withdrawal from the now economically rather unprofitable and medically challenging West African coast was being discussed in Britain. However, the further exploration of the fertile interior by the Niger expedition in 1841, the personal career-related interests of the officials stationed on the coast, and growing tensions with the Asante resulted in the British Empire wanting to further strengthen its presence and control on the West African coast in the 1850s.¹⁶ Besides Sierra Leone, the Gambia and parts of today's Nigeria, the British controlled – either through conquest or purchase – most of the forts along the coastline of the Gold Coast (today's Ghana) as well as a narrow strip that ran further inland to the frontiers of the Asante Empire.¹⁷ Despite medical progress such as the discovery of the beneficial effects of quinine as a prophylaxis against malarial fevers and its adoption for regular use from 1827 onwards, morbidity and mortality were still very high among European and West Indian personnel.¹⁸ Naturally, doctors were not immune to the prevailing diseases either, and it grew harder and harder for the British govern-

12 A discussion of the history and activities of the CMS is provided e.g. by Tennant 2014.

13 Fyfe 1972, 23.

14 On the history of Sierra Leone, see Fyfe 1963 and Alie 1990.

15 Fyfe 1972, 23. See also Curtin 1965, 294.

16 Johnson 2010, 241; Curtin 1998, 27; Fyfe 1972, 62.

17 During the nineteenth century, a series of five major conflicts took place between the Asante, who wanted to expand their empire from the Akan-inhabited interior of the Gold Coast to the coastal regions, and the British Empire, which defended the coastline together with its allies, the local Fante and Ga peoples. See e.g. Edgerton 1995 and McCaskie 1995.

18 Curtin 1989; Headrick 1981, 66, 70. The history of the introduction of quinine as a prophylaxis on the West African coast is discussed e.g. by Curtin 1965, 355ff.

ment to find sufficient medical staff to serve on the Gold Coast and in Sierra Leone.¹⁹ At the same time, the conviction grew that Africans were ‘immune’ to tropical diseases.²⁰ Due to this presumed immunity and in order to save European lives, the Ministry of War decided in early 1854 to recruit “‘negro’ boys from Africa” to be educated in Britain and to subsequently serve in the British Army as staff assistant surgeons.²¹ As long as the students were carefully selected, well-educated Christians, they were thought to be suitable for service in positions of responsibility.²² Only a few years later, this line of thought would become inconceivable, as Horton’s subsequent story shows poignantly. But in the 1850s, even though many Europeans did not accept Africans as true equals, they at least seemed prepared to consider the possibility that *some* Africans could rise to a certain level of equality. The scheme was initially devised to target boys under twelve years of age, who would receive a general education in Britain and then advance to university to obtain a medical degree. The expenses would be carried partly by the British public, partly by the boys’ parents. Serious concerns arose among some officials in the War Office, who doubted the ability of the African boys to cope with the cold European climate and the racial prejudice that they were likely to encounter in British schools.²³ Others expressed concern regarding the costs, arguing that the proposed fees of £50–70 per year would be too much for the parents. After taking all of these concerns into account, a final plan was adopted under the title “Education of African Youths as Army Surgeons for Service in Africa”.²⁴ Initially, it covered the training of three “impeccable” African young men in the medical profession and their subsequent deployment in the army. The costs would first be covered by the CMS, which would later be reimbursed by the War Office. The entire project had an experimental character; if this experiment were to succeed – namely, if the chosen Africans were to become well-esteemed professional medical doctors – it would pave the way for the future training of African doctors on a much grander scale.²⁵ These doctors would then serve in the army and therefore contribute to the British mission to ‘civilise’ Africa. Moreover, the ‘African elite’ thus created would be entirely in keeping with the philanthropic vision of British humanists, who dreamed of an educated, Christianised, industrious Africa

19 Fyfe 1972, 29; Curtin 1965, 181. On the history of European-trained, especially British-trained, African doctors and medical personnel, see Patton 1996, 61ff.

20 The presumption of African immunity was disputed from the beginning of the nineteenth century, although it persisted for decades. See Curtin 1965, 197.

21 TNA, WO43/869. See also Starling 2017.

22 Fyfe 1972, 29f.

23 TNA, WO43/869.

24 Contained in TNA, WO43/869.

25 Ibid.

that would be led by this very elite.²⁶ This experimental scholarship scheme laid the foundations for the future West African Medical Staff, created in 1902, which was at that time the only colonial service to have black entrants.²⁷

Shortly before he was due to finish his studies in divinity, Horton and two other former students of the Fourah Bay Institute, Samuel Campbell and William Broughton Davies, were selected for this project by the CMS and hastily sent to England in July 1855.²⁸ They were admitted to King's College London, where Horton and Davies commenced their three-year medical course, but Campbell fell ill with bronchitis and had to return to Sierra Leone after only a few months, where he soon died.²⁹ The two remaining students were supported and supervised by Henry Venn, the CMS general secretary who was unusually willing for his time to think of Africans as his equals.³⁰ Horton and Davies had to work extremely hard to catch up with their peers, having no previous knowledge of medicine. This experience was central to Horton's later demands for the establishment of a preparatory school in Sierra Leone for future African medical students. It was also during this period in London that Horton adopted the name Beale, probably in memory of the missionary of the same name who had recruited him to the grammar school in Freetown. After three years in London, Horton and Davies began their doctorates in Edinburgh and St. Andrews respectively. Both graduated one year later in 1859, making them the first West Africans to obtain a Doctor of Medicine (D.M.) degree.³¹ Horton's dissertation was titled *The Medical Topography of the West Coast of Africa; with Sketches of its Botany*. This study, which investigated the environmental factors influencing human health in West Africa, would become the cornerstone of his future scientific work. On the title page of his dissertation, Horton signed himself "James Africanus Beale Horton, Native of West Africa". This was the first time that he officially used the Latin cognomen *Africanus*, either in order to emphasise his continent of origin or because this was an expression of

26 Ayandele 1970, 9. On Africa as an experimental site, see Tilley 2011. On African doctors as intermediaries in colonial settings, see Fanon 1965. On the rise of humanists in nineteenth-century British politics, see Curtin 1965, 289ff.

27 Johnson 2010.

28 Fyfe 1972, 30; CMS Record, February 1856, 25–26.

29 Fyfe 1972, 32.

30 Ibid.

31 Despite the termination of this educational project in 1862, there were other European-trained African doctors after Horton and Davies with a similar career path, such as Nathaniel King (1847–1884), Obadiah Johnson (1849–1920) or John Farrell Easmon (1856–1900). See Adelaye 1985 and Tetty 1985.

the “Europeanizing disposition of the West African elite”.³² Other possible explanations include that he wanted to use this name as a means of emotive self-advertisement, or the simple fact that using a Latinised name was “not unusual among scholars of rank”.³³

The opportunity to receive medical training in Britain left a lasting impression on Horton, who became a lifelong admirer and supporter of British philanthropy and the British ‘civilising mission’. However, Horton was forced to experience the downsides of this political rationale in as early as the first months of his military service. Directly after graduation, both he and Davies were admitted to the medical corps of the British Army in September 1859 as medical officers with the rank of Staff Assistant Surgeon. They received the standard salary plus a regular bonus for regimental officers and the permission to practise medicine privately. After four years abroad, the two young doctors arrived back in Freetown in October 1859, but they were only allowed to stay for 36 hours before being deployed to the Gold Coast – Horton to Anamaboe and Davies to Dixcove. The Gold Coast had received special governing status in 1842 and was separated from Sierra Leone to become its own colony in 1850.³⁴ It became increasingly important for Britain, which wished to expand into the hinterland. The troops stationed there belonged to the 1st and, after 1860, 2nd West India Regiments or to the Gold Coast Artillery Corps (founded in 1851 and disbanded in 1863) and consisted mainly of West Indian and African soldiers under the command of white officers.³⁵

Horton had a challenging time from the outset. The West African coast was one of the most unpopular regions for military personnel in the entire British Empire at the time, with morbidity and mortality rates high and public interest from Europe low.³⁶ In comparison to other colonies, there were no “amenities” or distractions for the British officers.³⁷ Since there was only routine work to be done – in which there was little social prestige to be gained – many of the officers became demotivated and lazy. Horton, who took up his new position full of energy and zest for action, was received with

32 Goff 2013, 68. There is no evidence that Horton was politically active during his time in Britain, but some historians argue that it is possible that Horton’s stay there saw the genesis of his pan-African views. See Shepperson 1969, xvi.

33 Ayandele 1970, 14; Patton 1996, 78.

34 Gold Coast was given its own governor and other governmental decision-making committees. See Patton 1996, 79.

35 Gore 1876, 202ff.; Army Medical Department 1864, 86.

36 Fyfe 1972, 59; Patton 1996, 79.

37 “On the Gold Coast, officers and non-commissioned officers (European) are deprived of all those amenities of life which in every other part of the world (no matter how unhealthy) exist in some proportion – I mean society – the society of their countrywomen, amusements, as riding, driving, races, shooting, &c.” Gardiner 1865, 328. See also Patton 1996, 79.

racist resentment by these British officers. The medical officers, in particular, feared for their position, especially in the lucrative field of private treatment, now that they were in competition with a 'native' doctor of equal status.³⁸ Horton described the unfair treatment he experienced in Anamaboe in a long letter that he sent to Venn from his next station, Quittah (Keta), in February 1860: "Certainly I did expect a degree of prejudice against us but not to such an extent," he wrote.³⁹ With racial ideologies finding increasing resonance among the British, the opinion increasingly manifested itself that only a white army officer could win the respect of soldiers and subordinates. The worst harassment mainly came from Captain C. H. de Ruvignes, the captain of the station, who tried to incite the soldiers against Horton. His malicious behaviour ranged from simply ignoring Horton or insulting him to frequently prohibiting him from using the officers' kitchen; once, he even ordered the flogging of one of Horton's servants for no reason.⁴⁰ Horton endured this torment stoically and did not allow himself to be drawn into angry outbursts or retaliation. He was well aware that his conduct would be crucial in any decision by the Ministry of War on whether Africans should continue to be sent to Britain for education and training, a project which he was determined to see being continued due to his conviction that European-style education was key for the development of a self-governing, emancipated Africa.

After this episode, Horton was sent at regular intervals from one usually run-down station to another, never staying longer than about six months. Although not all of his superiors were as brutal as Captain de Ruvignes, he was generally given little consideration. These frequent changes in location soon caused health problems in the form of recurring fevers and dysentery, which eventually led to Horton taking a three-month leave of absence in 1861.⁴¹ Nonetheless, neither illness nor physical weakness could prevent him from carrying out his regular soil, weather and water measurements and carefully writing down his observations for later analysis, as was his duty as a medical scientist.⁴² At the same time, between his illnesses and his scientific work, Horton began a gruelling fight against colonial administrative mechanisms, as the following paragraphs will show.

38 Fyfe 1972, 41; *The African Times* (23.06.1863), 147. The role of private practice as an incentive for racist attitudes among medical officers is discussed in Johnson 2010.

39 Appendix C.

40 Ibid.

41 Horton's first two years on the Gold Coast can be traced on the basis of an undated medical report. See Appendix E.

42 The various meticulous tables and lists in Horton's book *Physical and Medical Climate* show his seamless recording of numerous meteorological and geological values from the beginning of his employment in 1859. See Horton 1867.

While in Britain a certain enthusiasm accompanied the idea of European-educated African military doctors in the late 1850s, the mood gradually changed in the early 1860s. The great wave of abolitionism and humanitarian interest in Africa during the first decades of the nineteenth century dwindled in the second half of the century, giving way to a rising racist sense of European superiority. The so-called Darwinian Revolution, rung in with Charles Darwin's seminal work *The Origin of Species* (1859), gave impetus to proponents of the racist idea that Darwin's concept of natural selection could explain the supposed superiority of the white race, an understanding which held race as *the* determining factor in human culture and character. In addition, Robert Knox's work on the "races of men" introduced a systematic, from today's perspective pseudoscientific racism that was to last for decades.⁴³ Authors like Knox, Arthur de Gobineau and Carl Vogt increasingly promoted ideas of polygenism from a scientific perspective. The classificatory elements of earlier race theories were more and more supplemented by socio-economic arguments. According to these viewpoints, Europeans perceived themselves as superior due to their technological progress, while non-European peoples were no longer regarded merely as evolutionarily underdeveloped and culturally uncivilised, but as wholly 'uncivilisable'. Philanthropic views, as often represented by missionaries and humanists, thus found ever diminishing support in the British government.⁴⁴ The Army Medical Department, fearing the loss of the respect of white medical officers, who could potentially have an African surgeon as a superior, saw no further need to continue training Africans and subsequently employing them in the army.⁴⁵ The Ministry of War and the CMS bowed to this decision and did not bring any more students to Britain.

Horton, who was unaware of these fundamental changes in policy and opinion, was determined to make every effort towards the continuation of this project. He started with a letter to the Education Committee of the Ministry of War, emphasising the advantages of continuing the education of Africans in Britain before employing them on the West African coast.⁴⁶ Since they were continuously stationed there and – unlike British officers – not sent back to Britain after twelve months, Horton argued that African doctors would gain more experience and, ultimately, more expertise in combatting local diseases. Moreover, educated locals were needed for the 'improvement'

43 Darwin 1859; Knox 1850/1862; Curtin 1965, 363–387.

44 Curtin 1965, 292f.; Chakrabarti 2014, 65.

45 Fyfe 1972, 42.

46 While this letter is not part of the archival collection, much of it was paraphrased by Horton in one of his books and extensively cited in one of his follow-up letters. See Horton 1868, 46ff. and Appendix I.

of the region. He added a proposal for the establishment of a small medical preparatory school in Freetown, where the best Sierra Leonean students would be trained in the “preliminaries of Medicine”, including the natural sciences and African botany.⁴⁷ This school, he argued, should without question be under the direction of an African, as only an African would be both sufficiently knowledgeable about the local natural environment and interested in advancing Africa. Unsurprisingly, Horton saw himself as well suited for the role of director.⁴⁸ He and Davies were proof “that the African, when placed in a proper position, employed his time to the best advantage [...]”.⁴⁹ Horton often used this style of Victorian language in his letters to the colonial administration, distancing himself rhetorically from ‘the African’ and appealing to a presumed common cause. This makes sense in view of the fact that Horton did not see himself as a *colonised subject*, but as a scholar who was on a par with the British and who would be taken seriously by the colonial government.⁵⁰ After all, the initiative to bring him and Davies to Britain and to train and employ them in the army had not been his idea, but that of the Empire. It is therefore understandable that Horton assumed that there would be a continuing interest in his feedback, suggestions for ‘improvement’, and ambitions for the colony. But his request did not have the desired outcome. After he initially received a short note that his cause would be considered by the Secretary of State for War, the Education Committee of the Ministry of War instructed the Director General of the Army Medical Department to investigate whether the two African doctors were as qualified as their European colleagues and whether they possessed the confidence of the Europeans and the local population on the Gold Coast.⁵¹ The committee received two unfavourable testimonials by the Captain of the Gold Coast Artillery, Captain J. F. Brownwell, and its Principal Medical Officer, Dr. Charles O’Callaghan, who both nevertheless admitted that Horton and Davies were indeed sufficiently qualified to serve as staff assistant surgeons.⁵² Both, however, took the opportunity to claim that neither of the two Sierra Leoneans enjoyed the same level of trust as the European doctors, even being met with

47 Appendix I.

48 Ibid.; Appendix H and Appendix K.

49 Horton 1868, 49fn.

50 He had every reason to believe this; particularly in mid-nineteenth-century Sierra Leone, the local inhabitants saw themselves as free citizens of the British Empire. See Fyfe 1972, 10 and Curtin 1965, 294.

51 Appendix J.

52 Ibid.

“distrust and barbaric aversion” by the “freemen of the tribes of this protectorate”, which were “a proud & high-bred race”.⁵³

Horton obtained this correspondence in a way that is not further explained and was dismayed. He hastily wrote to the Education Committee again, emphasising the potential of such an educational project, which could help to “raise the standards of a race which only requires the stimulus to exert themselves for advancing their country’s welfare [...]”.⁵⁴ This was an argument that he later formulated more extensively in his political writings: Africa, as the cradle of civilisation, would only need a push from the outside to climb back to the same level as the ‘civilised’ world.⁵⁵ Even though the War Office soon let him know that it was not planning to educate any more Africans, Horton made one last attempt. Wanting to refute the false statements he had read in the above-mentioned testimonials, he began to collect testimonials of his own – obtaining them from the Governor of the Gold Coast, the most important European and local merchants on the coast, as well as from a Captain of the 4th West India Regiment.⁵⁶ Horton seems to have known all of these individuals, thus proving to his superiors how well connected he was. Furthermore, the testimonials of the local merchants promised him the support of the local population. Indeed, all the testimonials were favourable and assured Horton that he was a well-esteemed doctor, whose treatment was preferred by Europeans and Africans alike due to his long-established expertise. He wrote one last and very long letter to the Education Committee, addressing the Secretary of State for War, Earl de Grey and Ripon directly and enclosing all the testimonials as well as a certificate of good conduct from King’s College. Strategically, he pointed out the acclaim that the British Empire would receive from the rest of the world if it continued the educational project.⁵⁷ By presenting his request to the British government as good advice for the Empire’s own benefit, he tried to make his ideas as palatable as possible; as such, he presented himself as both an accomplice and an instrument of the imperial ‘civilising mission’. Despite all his efforts, the project was officially discontinued in 1862.⁵⁸ As Horton later commented laconically: “[T]he subject received a combined and warm opposition, which nipped it in the bud.”⁵⁹

53 Appendix J. This line of argument bears the hallmarks of the ‘divide and rule’ strategy that was later often applied during the British colonial expansion. See Fyfe 1972, 48 and, more generally, Sunderlal 1929/1972, 459–461.

54 Appendix K.

55 See e.g. Horton 1868, 196.

56 Appendices L–R.

57 Appendix K.

58 Ibid.

59 Horton 1868, 50fn.

These letters demonstrate Horton's undaunted and persevering attempts to realise his aims. He made a considerable effort to carefully disprove the negative claims made against him and to defend his reputation as well as that of educated Africans in general. But his letters also show that Horton, at least initially, had no intention of explicitly addressing the underlying power structures of the British Empire. In the mid-nineteenth century, even though slavery had been officially abolished and the notion of human rights was widespread in Europe, a firm belief in the inferiority of the 'African race' was often deeply entrenched in even the most humanistic of philanthropists.⁶⁰ Contrary to the pejorative nature of the emerging scientific race theories, the humanists adopted a paternalistic form of racism to justify their 'civilising mission'. Moreover, the experiment of training Africans in Britain to become doctors was from its outset not merely a philanthropic act to promote African education, but also served colonial interests of its own. The fact that Horton was forced to seek affirmation of his professionalism from several highly respected commercial and political figures was a humiliation to which a European colleague would probably never have been subjected. These letters thus also bear witness to the complex social and political circumstances in the mid-nineteenth-century British Empire: having been trained as a doctor in Britain, Horton was only a short time later confronted with the racially motivated envy of his colleagues and the discriminating disinterest of the very government that had originally desired his services. Nevertheless, his experiences during his training and his first years in the military also had their benefits. On the one hand, they helped him to form the basis of his views on medicine, environment, race and society. On the other hand, they allowed him to establish himself as a professional doctor and then earn the status of an ever-present 'local' doctor who enjoyed the esteem of the local population as well as of the Europeans stationed in the British stations on the West African coast.

Scientific Self-Legitimation

For six months in 1864, Horton was responsible for a muddy, nearly submerged field hospital during the second phase of a joint British–Fante campaign against the Asante.⁶¹ It was located in the middle of a forest on the banks of the Pra River, approximately 65 km inland from Cape Coast Castle

⁶⁰ Bethencourt 2013, 241.

⁶¹ This was an operation during the Second Anglo-Asante War. See Footnote 17. Horton recounted the course of events in several letters to the Ministry of War. Cf. Horton 1870.

on the Gold Coast. This was a location where various diseases spread rapidly. Of the 927 soldiers who were stationed there, 55 died of dysentery, diarrhoea, bronchitis and “fevers”; all remaining had either been hospitalised or were recovering.⁶² The anticipated battle, however, did not materialise; the Asante simply did not show up, knowing that it would be a bad idea to set up a large military camp in the rainforest during the rainy season. Horton, too, had tried to point this out to the British commanders, but to no avail.⁶³ His years of meticulous observation and research of the local disease environment had made him an experienced doctor who could have assessed local conditions better than any imperial commander.

Horton’s approach to medical science was based on a thorough knowledge of the physical environment and a systematic interpretation of its disease-causing elements. Even before the breakthroughs in microbiology and modern tropical medicine towards the end of the nineteenth century, medical practice in the tropics had already become a highly specialised discipline with a long history dating back to Hippocratic miasma theories and enriched over time by new theories, discoveries and tools.⁶⁴ The idea that the environment has an influence on human health is indeed rooted in Greek antiquity. According to this understanding, pivotal environmental factors include wind, water bodies, the location of settlements and dwellings in relation to prevailing winds and weather, the condition of the soil, the impact of the seasons, and the behaviour of local inhabitants. In the search for the natural origins of endemic diseases, ‘miasma’ was held responsible. This was ‘bad air’ that emerged from swamps, cracks in the soil, or putrefying organic matter of human, animal or plant origin. Since such bad air supposedly occurred in practically every illness-related situation, this understanding persisted until the early twentieth century.

In the course of the European expansion from the fifteenth century onwards, the distinct climate of tropical regions and the extremely high mortality levels that were thought to occur as a result became familiar in Europe, although no precise data was available to prove this process of cause and effect. Nevertheless, an unbroken will to conquer these regions or open up new trade opportunities therein fuelled the European desire to record and measure these ‘new worlds’ and their disease-causing factors as comprehensively as possible. New measuring instruments were invented in the sixteenth and

62 Gore 1876, 12.

63 An anonymous Fante contributor paraphrased a letter written by Horton from the front-line to the Commander of the 1st West India Regiment. *The African Times* (23.07.1864), 2–4.

64 Arnold 1996.

seventeenth centuries, accompanied by an increasing integration of the environment into understandings of human health, early empirical research, and the process of scientific specialisation. In the course of the seventeenth and eighteenth centuries, the methods used to combine the study of the natural history of diseases with the observation of atmospheric conditions and seasonal peculiarities were refined. Instead of merely treating and healing symptoms, the desire and need to protect entire communities from epidemic diseases increased. Medicine now started to focus more on prevention, with location growing increasingly important as a factor; certain countries, regions and ultimately groups of people were classified as unhealthier than others. Doctors thus concentrated their attention on potential environmental improvements that could contribute to human well-being.⁶⁵

From about the middle of the eighteenth century, this view led to the establishment of medical topography as a genre of medical literature. The authors of medical topographies often explicitly included hygienic and social aspects, and identified the most important measures for disease prevention: the draining of stagnant water bodies, the cleaning of roads from organic waste, and the ventilation of enclosed spaces. Additionally, behavioural recommendations were given on moderate physical activity, sufficient rest and clothing appropriate to the climate. While some medical topographies were written in book length, others were composed as introductory chapters to books about specific regions or diseases.⁶⁶ By their nature, medical topographies belong to an epistemic genre of texts, intended not to produce “meaning” but “knowledge”.⁶⁷ But from between their dry scientific records, rich additional information can often be extracted, as Horton’s medical topographies demonstrate. This includes, for example, his descriptions of the local environment as well as his personal conclusions about contemporary social and political developments. The prevention of disease was particularly important in view of the ongoing European expansion into tropical zones, where Europeans were faced with challenging new climatic conditions. Scientific research of this kind became, on the one hand, an important instrument of European expansion by providing the colonial settlers with a ‘guide’ to survival in territories that were largely unknown to them.⁶⁸ On the other hand, it could serve the authors, often army doctors, as a means of legitimis-

65 For a concise study of the development of environmental medicine in the eighteenth century, see Riley 1987.

66 For example, many medical topographies originated from France or French colonies. See Osborne 1996, 80–98.

67 Pomata 2014, 3.

68 The role of medicine as an “tool of empire” has been widely discussed since the 1980s. For recent studies that refer to the classics in this field, see Chakrabarti 2014 and Zaugg 2016.

ing themselves in the professional medical world of the nineteenth century, as Horton's example shows. In light of the high mortality caused by diseases such as yellow fever, malaria, dysentery, cholera or yaws, the colonial authorities' primary goal was to keep European soldiers, traders and settlers as well as slaves alive on land and at sea. The assumption that European bodies were accustomed to temperate zones and those of colonised peoples to the tropics played a major role. Acclimatisation, or adaptation to foreign climates, became an important feature of colonial discourse.⁶⁹ The ability to survive in different climate zones was increasingly explained with reference to race theories. In Europe, the opinion grew ever more common that human health, including mental health, was essentially shaped by the climate.⁷⁰

After years of accumulating environmental observations and measurements, Horton condensed his extensive knowledge into his book *Physical and Medical Climate and the Meteorology of the West Coast of Africa*, which was published in 1867. Although earlier studies had covered the correlations between environment and disease in West Africa, Horton's book was an extensive work of over 300 pages.⁷¹ Unlike other colonial doctors in Africa, Horton did not merely describe medical conditions, but formulated precise proposals for medical and hygiene reforms based on his own experiences and observations. He provided a systematic explanation of environmental factors – including sunlight, temperature, heat, altitude, water resources, soil composition, sewage, population density, wind, humidity, clouds, ozone levels, seasons and thunderstorms – and all their disease-causing effects. He did not demonise the tropical climate itself, as was often the case in European opinion. Instead, he identified the problem as lying mainly in the ignorance of persons who did not know how to behave in a tropical climate. He also blamed the colonial authorities, which had hitherto failed to implement the necessary hygiene reforms in West Africa, especially in large towns.⁷² He accused the local government in the Gold Coast of “hav[ing] not thought it time to have a well-organised sanitary administration, and well-organised sanitary police [...]”.⁷³ Human, animal and plant waste would pile up in the streets and pollute the air, water and soil.⁷⁴ Horton expressed great incomprehension at the fact that the European residents, whose lives were “so much imperilled

69 Chakrabarti 2014, 64–69.

70 Chakrabarti sees in this claim the seed of modern racial thinking, which emerged from the belief that the inhabitants of one climate zone are inherently and essentially different from those of another. See *Ibid.*, 66.

71 Horton was heavily inspired by British military surgeon Sir James Ranald Martin (1856).

72 Horton 1867, 114.

73 *Ibid.*, 126.

74 *Ibid.*, 115.

and jeopardised” by the lack of a sewage system, had not long pushed the government to finally set up properly sanitised sewers.⁷⁵ For Horton, a functioning sewage system was the most important prerequisite for the development of a healthy society. To remedy this situation, Horton suggested the appointment of a public health officer with a wide mandate:

To examine and watch over the health of the population at large ; to see that the water is pure and plentifully supplied ; to ascertain that every public building and the dwelling-houses of the poor are properly ventilated ; to prevent the committing of nuisances in the streets and lanes of towns and villages, or in their immediate neighbourhood, the burial of the dead in houses, and all noxious and unwholesome trade from being carried on within a given distance from the towns and dwelling-houses ; to establish public slaughtering-houses and burial-grounds ; to make strict sanitary inspection of all trading vessels ; and especially to “lay down and carry out an effectual, efficient, complete, and common-sense plan of drainage and sewerage for every town and city.”⁷⁶

He added several ideas about how to safely dispose of faecal matter. Other suggestions he made towards the development of a healthier environment were similar to those of other authors of medical topographies, including the paving of roads, the planting of trees along streets, the thorough cleaning of whole towns, the draining of swamps, and the construction of well-ventilated, “healthy” buildings.⁷⁷ But Horton’s approach went much further, since he was concerned about much more than just the health of the population. He sought to defend Africa’s reputation and promote its “true civilisation” through his medical arguments.⁷⁸ While he acknowledged the “injurious influence” of certain seasons, winds or atmospheric conditions, he harshly condemned the tendency of Europeans to make the tropical climate the scapegoat for all diseases and deaths:

Besides, the death of every new comer [*sic*] tells very much against the climate of the country. The individuals themselves are seldom blamed for it ; the deadly nature of the place receives all the blame which their bereaved friends can give, and the progress of the governing influence is checked. The country becomes the sufferer in another way. It is deprived of the civilising influence which radiates from them. It prevents others from attempting to reside in it, and generally only the most reckless and desperate will venture to do so.⁷⁹

Another aspect of nineteenth-century medical science that Horton’s medical writings illuminate is the progress of empiricism and self-experimentation.⁸⁰ Besides measuring statistical data relating to the environment, he conducted a number of self-experiments, especially in relation to malaria.⁸¹ Meanwhile,

75 Horton 1867, 114f.

76 *Ibid.*, 113. Horton provides no source for the quote in the last sentence.

77 *Ibid.*, 126.

78 *Ibid.*, v.

79 *Ibid.*, 271.

80 On the history of self-experimentation, see Altman 1987.

81 Horton 1867, 226.

Horton himself was part of the colonial experiment investigating whether Africans were immune to tropical diseases. By conducting scientific experiments on himself, collecting data on the environment and formulating corresponding policy demands, Horton claimed agency for himself. As a result, he was at least partially able to break out from under the shadow of European experiments and establish himself as a genuine scientist in his own right.⁸² From today's perspective, it can be concluded that Horton was exceptionally diligent. He confidently embraced the daunting project of systematically describing and analysing the diseases of the West African coast. By publishing his medical research and theories in four monographs, two reports in the Army Medical Department Annual Report and at least two newspaper articles, Horton proved that he was well versed in contemporary theories and methods and that he was an authority on West African environmental–medical phenomena. His studies thus contributed to the existing body of knowledge by substantiating or disproving contemporary theories with reference to the latest data from West Africa. In short, Horton managed to appropriate European scientific paradigms and bodies of knowledge in order to distinguish himself as a regional expert within Western science, while using this expertise to sharply criticise hygienic conditions in West Africa.

Horton as a Political Author

After returning from the disastrous campaign against the Asante at the Pra River, Horton published an open letter in *The African Times* newspaper⁸³ in early 1865, pleading for more attention from the British public and the colonial administration to the needs and demands of the – mostly African and West Indian – soldiers stationed in West Africa.⁸⁴ Furthermore, Horton argued for the construction of a sanatorium for members of the army in what he viewed as the healthy air of the hills south of Freetown. In Europe and North America, however, race theories were on the rise and the needs of Africans were of little interest. In 1863, the Anthropological Society was founded in London by the speech therapist and ethnologist James Hunt and the renowned explorer Richard Francis Burton with the task of collecting scientific

82 Howell 2014, 101f.

83 *The African Times* was the official organ of the African Aid Society between 1860 and 1902. Issues published in the period from 1862 to 1875 have been digitised under the direction of Trevor R. Getz at the San Francisco State University and are accessible at <https://diva.sfsu.edu/collections/african-times>.

84 Horton (23.01.1865), 90–91.

evidence in support of race theories.⁸⁵ Horton was particularly irritated by Hunt's controversial text "On the Negro's Place in Nature" (1863). Such a study was unacceptable to Horton because he regarded it as being devoid of any scientific truth. For Horton, scientific claims could only be proven through verified facts, whereas Hunt's essay was full of "grave inconsistencies" and "unpardonable partiality".⁸⁶ In two articles published in *The African Times*, Horton identified and meticulously dismantled numerous errors and false claims he argued Hunt had made.⁸⁷ Additionally, he published a trenchant pamphlet with the telling subtitle "The African View of the Negro's Place in Nature" in 1865. In these texts, Horton confidently took on the role of spokesman for the African cause and delivered a devastating critique of Hunt's and Burton's anti-African anthropological theories. Others, too, saw him in this role: "It is satisfactory to know that there are educated Africans like Mr. Horton capable of speaking up for their injured race," one reviewer declared.⁸⁸ The rebuttal of racist arguments was important to Horton not only for scientific reasons, but also because he feared that the progress of Africa would no longer be of interest to Europeans if the belief in the inherent inability of Africans to develop as a people prevailed.

During the 1860s, Horton wrote several further political texts, newspaper articles and pamphlets. He fought for the establishment of a European-style, African-led school, for the recognition of his professionalism as a doctor, for hygiene reforms, and for the advancement and self-governance of West African territories. All his efforts were aimed at "advancing" African society towards "civilisation" and bringing it up to the same "level" as European society.⁸⁹ For Horton, 'civilisation' meant embedding European education and culture as well as the Christian religion in West Africa. He was not alone in this aim; many of the liberated Africans who were resettled to Sierra Leone – as well as their descendants – received Western-style education and became Christians. As missionaries, traders and clerks, they then helped to spread Christian values, the Western lifestyle, and ultimately the European 'civilising mission' across West Africa.⁹⁰ As such, Horton belonged to a generation of Western-educated Africans who welcomed European cultural influence, but at the same time strived for the political emancipation of Africa from European control.

85 For the history of the Anthropological Society, see e.g. Rainger 1978.

86 Horton 1866, 114.

87 Horton 1865 and 1866.

88 Horton (23.04.1866), 115.

89 Horton 1868, see esp. preface and chapter 3.

90 On the role of African "intermediaries" in European colonialism, see Lawrance et al. 2006.

Due to the unpopularity of West African military stations and the rising racial resentment against Africans, the British parliament convened a West Africa Committee in 1865 to evaluate the state of the British colonies and protectorates on the West African coast and to analyse in what form and to what extent they should be retained and continued.⁹¹ The committee recommended the merging of the four British colonies of Gambia, Sierra Leone, Gold Coast and Lagos under one central government for the time being, with the goal of “transfer[ing] to the natives the administration of all the Governments, with a view to our ultimate withdrawal from all, except, probably, Sierra Leone”.⁹² This statement raised hope in Horton and other West Africans that their territories too – like Australia, New Zealand and Canada – were moving towards self-governance. They incorrectly assumed that, as British subjects, they had been given the right enjoyed by eligible British citizens to elect their own government.⁹³ Horton’s interpretation of this resolution went even further, seeing it as an admission of Europeans’ inability to survive in Africa in the long run. At the heart of Horton’s political philosophy was the assertion that Africa should belong to Africans.⁹⁴ The parliamentary resolution inspired Horton to immediately begin evaluating what each British colony in West Africa needed to achieve in order to establish self-governance. His proposals resulted in his book *West African Countries* (1868) as well as in his involvement in the establishment of the so-called Second Fante Confederacy.⁹⁵

In *West African Countries*, Horton began by again refuting the racist arguments of British anthropologists. Although he described the “original and uncivilized state of the native tribes” and their partly “primitive” or “barbaric” character, he argued that Africans possessed great intelligence and observational ability as well as a natural connection to their environment.⁹⁶ This was followed by a discussion of “negro physique”,⁹⁷ which Horton believed his scientific background and experience had enabled him to describe better than British Society members, who rarely gathered first-hand data. Although Horton used pejorative adjectives to describe some African peoples – such as the Soninke, whom he characterised as “lazy” and “troublesome”, or

91 Parliamentary Papers, V:I (1865), iii.

92 Ibid., iii, xvi.

93 Fyfe 1972, 63; Horton 1865, v.

94 “[T]ropical Africa must be left eventually for the Africans.” Horton 1868, 72. ‘Africa for Africans’ had become an important slogan for the pan-Africanist movement by the end of the nineteenth century. See Ejiogu 2012.

95 For a concise discussion of Horton’s role in this confederation, see Fyfe 1972, 91–107. See also Shumway 2017, 85–104.

96 Horton 1868, 1ff., 20ff.

97 Ibid., 44–58.

the Assin, whom he perceived as “uneducated” and “living in utter barbarism” – he was in no doubt that they could fully develop their capabilities with the aid of external impulses.⁹⁸ These adjectives suggest that Horton’s categorisation of racial group characteristics corresponded to that of European anthropologists. Influenced by Victorian attitudes, he was not per se against race theories, but he did oppose the view that one race could be considered inferior to another. Unlike his European counterparts, he did not see racial characteristics as immutable. For Horton, the differences between human races were not biological, but developed gradually as a result of environment, diet or lack of socio-economic opportunities.⁹⁹ Horton thus appropriated elements of older, environment-related European theories of evolution, such as that advocated by Lamarck, to counter emerging contemporary theories of African racial inferiority.¹⁰⁰

In the second part of his book, Horton used his knowledge of the West African population to outline a variety of potential self-governing “African nationalities”.¹⁰¹ By speaking of “nationalities”, he tried to describe a shared “national” identity between different “tribes” on determined territories in West Africa.¹⁰² He evaluated their national affiliations and proposed corresponding forms of government that he believed would fit each of the described African societies best. Thus, he envisaged the improvement of the administration in the Republic of Liberia, “a native self-supporting government” in the Gambia, the Kingdom of Sierra Leone, the Kingdom of Fantee and the Republic of Accra in the Gold Coast area, the Kingdom of the Akus (today’s Yoruba) and the Empire of the Eboes (today’s Igbo).¹⁰³ Even though Horton occasionally wrote of “national independence”, he did not envision African nations as being fully independent from the British Empire. Instead, he dreamed of the self-governing “African nationalities” being “as independent as the present Liberian Government”.¹⁰⁴ As such, Horton essentially argued for self-governance under British sovereignty at a time when most African territories were actually still independent from European rule. He thus once more proved to be a champion of the colonial ‘civilising mission’, but

98 Horton 1868, 77f., 129f.

99 This ‘gradual’ explanation was widespread prior to the triumph of modern biological race theories. See Harrison 2000, 53.

100 Bethencourt 2013, 264.

101 Horton 1868, 69.

102 *Ibid.*, 2. For example, in relation to the Igbo, Horton wrote: “[...] the Egboe nationality is divided into numerous independent tribes, governed by their own laws, but having one national sentiment [...]”. *Ibid.*, 192.

103 *Ibid.*, 272, 69, 87, 124, 136, 152, 172.

104 *Ibid.*, 74. Liberia proclaimed its independence in 1847 as the first African republic. See e.g. Ciment 2013.

with the belief that this would enable the gradual political and socio-economic empowerment of Africans.

In the last section of his book, Horton listed practical steps that needed to be achieved in order to advance the ‘civilisation’ of each of the existing British colonies and settlements in West Africa prior to self-governance. Some of these proposals had already appeared in *Physical and Medical Climate* as suggestions for hygiene reforms but were now situated in a broader socio-political context. They included health-related improvements such as the training of doctors and medical personnel, fresh water supply in cities, more stable houses, clean streets and parks, a law requiring smallpox vaccination, and – once again – the appointment of a public health officer. Other ideas concerned political, economic and agricultural issues: more civil rights, the establishment of a central government in the Gold Coast, the territorial expansion of the protectorates, the final abolition of slavery in the interior of the West African interior, the opening of savings banks for the working class, the establishment of an intercolonial post office, the expansion of the gold mines, the proliferation of educational opportunities, the reliable supply of military armament, the development of agricultural resources (including the introduction of new crops), and the encouragement of the local population to undertake more agricultural work. All these external catalysts, he argued, would ultimately bring the emerging West African states to the same standard of ‘civilisation’ as Europe. For Horton, all forms of socio-economic and political progress were connected to external impulses, a perspective which was similar to his understanding of disease causation. He also argued from a historical standpoint, contending that the cyclical nature of history had shown that flourishing nations eventually degenerate, while “those who have lived in utter barbarism, after a lapse of time[,] become the standing nation”.¹⁰⁵ Africa could reach this state through the most powerful of external impulses:

“it is impossible for a nation to civilize itself ; civilization must come from abroad. As was the case with the civilized continents of Europe and America, so it must be with Africa ; which cannot be an exception to the rule.”¹⁰⁶

Horton thus affirmed an important feature of imperial propaganda, which used this same argument to justify the colonial ‘civilising mission’ in Africa. Unlike Europeans, however, Horton believed that Africa was the original

105 Horton 1868, 67.

106 Ibid., 196.

source of human civilisation, since he held it to be the inspiration for Greek and Roman antiquity.¹⁰⁷

Furthermore, Horton did not omit mention of the impact of external environmental factors on Europeans in the tropics. While he gave encouraging advice to Europeans in his medical works, his remarks developed more foreboding undertones in *West African Countries*. Unless they married Africans, Europeans would “die out in about the second generation”, because European children born in the tropics would suffer from “internal diseases” from immediately after birth due to “miasmatic and climatic influences”.¹⁰⁸ They would “become exceedingly dark, and show a marked difference in their form, proportion, and features [...]”.¹⁰⁹ Horton thus alluded to the European fear of ‘degeneration’ in the tropics in explicitly racial terms.¹¹⁰ While this line of argument corresponded to the common forms of racism of the eighteenth and early nineteenth centuries, Horton’s rather unconventional solution involved recommending intermarriage between Europeans and Africans. As such, he did not perceive miscegenation as a cause of ‘degeneration’, but rather as an important precautionary measure to promote the health of future generations of Europeans in the tropics.¹¹¹

West African Countries not only shows how Horton appropriated colonial argumentation patterns to advance his political agenda. It also proves that Horton’s theories of the state and his socio-political views were embedded in his scientific research, his personal experiences and his understanding of the natural environment. He was essentially concerned with using science to demonstrate the ability of Africans to establish national independence. His book fulfilled this goal in two respects. It developed visionary blueprints for modern West African states that were grounded in a thorough understanding of environmental change and the defence of ‘the African race’ against the claims of European race theories. At the same time, as an educated African author, Horton was living proof of his own arguments.

107 Horton 1868, 66. The argument that Western civilisation had African origins has become a key thesis for Afrocentric authors, e.g. Diop 1974 and Bernal 1987/1991/2006.

108 Horton 1868, 73.

109 Ibid., 48–50.

110 On the fear of the ‘degeneration’ or ‘negrification’ of whites, see Howell 2014, 99, Chakrabarti 2014, 61, 67, and Zaugg/Graf 2016, 39.

111 For a discussion of nineteenth-century discourses on miscegenation, see e.g. Bethencourt 2013, chapters 15 and 16.

Reception and Critique

Both during his lifetime and in the twentieth century, Horton has been portrayed by various sources as an extraordinary political pioneer, an early pan-Africanist, or even a “prophet of modernisation”.¹¹² However, some scholars have criticised him and his views. His admiration for European culture, in particular, has been the subject of much critical discussion from the 1960s onwards.

The reception of Horton’s work during his lifetime can be traced primarily through newspaper and scientific journals. While his scientific work received enthusiastic feedback from reviewers in *The African Times*, reviewers in British scientific journals were much less impressed. The former praised Horton’s work for being the first scientific studies written by an African. They saw him as a living justification for the philanthropic efforts of Europeans to bring “Christianity, education, civilization and productive industry to Africa”.¹¹³ The latter acknowledged that Horton’s scientific research was useful for colonists and as an addition to the general body of knowledge about tropical diseases, but they criticised his methods.¹¹⁴ While Horton’s medical studies were discussed both within and outside the British medical community, his political writings received very little attention. *West African Countries* was only reviewed in pro-African British newspapers like *The African Times* and *The Anti-Slavery Reporter*.¹¹⁵ There appears to have been a certain interest in Britain when an African intellectual pronounced on medical issues, but less so when it came to political matters. The most influential political and literary journals in Britain ignored Horton’s book, while some British citizens in West Africa who read the book even doubted that the author was an African.¹¹⁶ The favourable reviews in the pro-African newspapers emphasised that Horton had defended the reputation of ‘his race’ in *West African Countries* and countered prejudices towards West Africa. The reviewers referred to Horton’s authority as a doctor who had been stationed on the coast for many years, one who had not just “taken a run down the West Coast and back again in a mail steamer, and then written a book [about his experiences]” like certain Europeans had done.¹¹⁷ Despite Horton’s

112 Ayandele 1971.

113 *The African Times* (23.10.1867), 48–49.

114 *The Lancet* (01.02.1868), 164–165; *The Athenæum* (02.11.1867), 577–578; *Medico-Chirurgical Review* (07.1875), 47–53.

115 *The African Times* (23.09.1868), 38–39; *The Anti-Slavery Reporter* (1868), 187–188.

116 Fyfe 1972, 89.

117 *The African Times* (23.09.1868), 38. Howell has interpreted this as a clear barb against Burton. See Howell 2014, 92.

proven and much-praised professionalism, however, his books remained without a direct impact on science and colonial politics. Indeed, their main impact probably arose from the fact that *he* had written them. The reviewers, most notably those in *The African Times*, celebrated Horton as an important representative of a new generation of Western-educated Africans who stood up for Africa in a climate of increasing racism. After his death in 1883, Horton's writings soon fell into oblivion. In the mid-1880s, major changes took place in medicine, the natural sciences and colonial politics that were diametrically opposed to Horton's ideas and ideals. Breakthroughs in microbiology as well as the so-called Scramble for Africa rendered his miasmatic disease theories and his proposals for self-government obsolete.

After the rediscovery of Horton's work by George Kimble in his *A Political History of Ghana* (1963), Horton received much recognition. In contrast to during his lifetime, and especially until the end of the 1970s, his political writings now gained all the attention, while his medical research was largely ignored. In the aftermath of the end of colonialism, the racist structures of the previous decades may still have had an impact, overshadowing the fact that colonised subjects had also carried out scientific research. The neurosurgeon and Horton biographer Adelola Adeloye has argued that Horton's biggest contribution to medical science was his description of malaria-induced tropical splenomegaly syndrome and his discussion of how chronic rheumatism indirectly causes sickle cell anaemia.¹¹⁸ Although sickle cells were only identified at the beginning of the twentieth century, Horton had already located the disease in the blood and thus provided one of the first descriptions thereof.

Meanwhile, in relation to the decolonisation of Africa, Horton's political theories were the subject of lively scholarly discussion. *West African Countries* and *Letters on the Political Condition* (1870) were edited and reprinted in 1969 and 1970. The tenor of reaction was largely unanimous: Horton was an extraordinary, progressive pioneer of African nationalism. Today, he continues to be regularly compared to Edward Blyden (1832–1912), the great Liberian statesman, pan-Africanist and educator.

While no scholar has denied Horton's achievements and influence, there have still been a few critical voices who have described him as a member of a "Westernized" elite, especially the historian E. A. Ayandeke, who reviewed *West African Countries* in 1971. He labelled Horton a "prophet of modernity", a harbinger of the African "elite dreamers" who longed for an Africa modelled after Britain.¹¹⁹ Although Ayandeke praised Horton's fight for Af-

118 Adeloye 1992, 18.

119 Ayandeke 1971.

rican emancipation, he accused him of provincialism and of “mental and cultural enslavement” to British codes of behaviour and culture. He then went even further by insinuating that the Africans whom Horton described in his writings were “contaminated” and “de-Africanized”, like Horton himself, and had not dared to live “in the authentic African milieu”.¹²⁰ The Africanist and philosopher Olúfemi Táíwò has rightly criticised these views sharply. According to Táíwò, Ayandele reproduced an invention of colonial anthropologists – the “pure, unlettered African” – through his descriptions and use of racist terms.¹²¹ Jessica Howell has also criticised such approaches. She contends that by denigrating Horton and his contemporaries as ‘inauthentic’ because they defended Western values, the racist arguments of nineteenth-century anti-African chauvinists are repeated.¹²² Fyfe has pointed out that Horton can only be understood today if one considers that he grew up at a time when loyalty to the British Crown meant not only subservience but also pride and self-respect.¹²³

On the other hand, it is indeed true that Horton was barely interested in the African diaspora or in abolitionism as a political movement. Strictly speaking, he was only personally familiar with coastal towns in West Africa. He also showed surprisingly little understanding for older African traditions and customs, which found no place in his theories of the state. His loyalty was first to the continent as a whole, and only then to its different territories and ‘tribes’.

Horton was both a victim of colonial power structures and an advocate of the European ‘civilising mission’, yet he was also an emancipated scientist and a distinguished spearhead of Africanist agendas. He was a product of his time, a ‘black Victorian’,¹²⁴ with many of his views rooted in his Victorian education. He often invoked the same arguments, prejudices and, above all, the same literal and metaphorical language as his British contemporaries. His frequent use of classical references¹²⁵ and racial terms made him understood among nineteenth-century Europeans. He wrote of “barbaric” and “uncivilized” Africans living in “extreme darkness”.¹²⁶ He argued in a Hegelian manner – contrary to his own theory of the ancient African origins of civilisation – that illiterate peoples in Africa had no history of their own.¹²⁷ He described

120 Ayandele 1971, 695f.

121 Táíwò 2010, 116.

122 Howell 2014, 85f.

123 Fyfe 1972, 11.

124 For a discussion of this term, see Gerzina 2003.

125 Goff has argued that Horton’s use of Latin and Greek phrases signifies how he appropriated classical European knowledge in order to underpin his pro-African agenda. See Goff 2013, 68–75.

126 Horton 1868, ii.

127 See *ibid.*, 4.

the members of these tribes and their customs in a distant and somewhat condescending manner, using very similar language to that of European imperialists. He had an almost uncritical admiration for the British Empire and an unshakeable belief in Western ‘civilisation’. His understanding of state structure was authoritarian and paternalistic, corresponding to his own experiences in Britain and his strict schooling under missionary supervision. As a medical officer, he was used to following and giving orders; as a doctor, he had the authority to decide for others what was best for them.¹²⁸ Shepperson has argued that it was this very Victorian attitude that gave Horton the strength of character and confidence for which he was known. The nature of the era in which he lived allowed him to write pointedly about his visions for Africa.¹²⁹

Through the pejorative way in which he at times described other Africans, Horton presented them as a segregated group of ‘others’ that he contrasted with his own ‘more advanced’ social class.¹³⁰ As such, he became the “native doctor” that Frantz Fanon identified in the context of twentieth-century colonialism: ‘Europeanised’, ‘westernised’, no longer entirely one of the colonised, but neither wholly one of the colonisers.¹³¹ But Horton differs from Fanon’s ‘local doctor’ in that he did not show any distinct hostility towards local remedies, and there is no evidence that the local population disapproved of him. In the middle of the nineteenth century, pride in the success of a member of their own ‘race’ prevailed, especially in a climate of increasing discrimination towards and exclusion of Africans. Therefore, although Horton was to some extent used by the British Empire as an instrument for its ‘civilising mission’, he cannot be accurately compared to Fanon’s native doctor in the heyday of colonialism. While Horton identified with Victorian culture and society, his primary concern was to defend Africans against racist European dominance, against which he fought throughout his life with every means possible.

Conclusion

Several notable aspects emerge through an examination of Horton’s self-legitimation strategies. First, he led a self-confident fight to ensure that West Africans had the opportunity to receive a European-style education, a cause

128 Fyfe 1972, 81.

129 Shepperson 1969, xxii.

130 On the social construction of ‘others’, the process known as othering, see Spivak 1985, 247–272.

131 Fanon 1965, 131–133.

which was close to his heart. Despite facing much adversity, he made every effort to convince the Ministry of War to continue its training programme for African medical students. Second, Horton's many years of diligent scientific research and his comprehensive publications proved him to be one of the most knowledgeable experts on West African natural history, medicine, politics and society of his time. His observations led him to expose the hygienic shortcomings of the British military stations. Instead of blaming the climate for the prevailing morbidities, as Europeans tended to do, Horton pinpointed the flawed behaviour of European arrivals and identified the environmental improvements that could make any location less injurious to human health. Third, the growing popularity of race theories depicting Europeans as culturally superior and Africans as uncivilisable barbarians ultimately motivated Horton to write political treatises as well as a political monograph. This book, which was based on his own medical and scientific understanding of the local environment, refuted what he viewed as pseudo-scientific race theories and emphasised the ability of Africans to 'ascend' to the same level of civilisation as Europeans.

Horton's efforts in the 1860s failed to achieve the desired effects. After the rejection of his educational proposals, the ignoring of his demands for hygiene reforms, and the continued European expansion across Africa that offered no realistic prospect for self-governance for any African territories, Horton eventually turned away from politics and left the military in 1880. For the last three years of his life, he became an entrepreneur, bought concessions for gold mines, and founded the first African bank in West Africa. These were further attempts to contribute to the development of the West African economy and thus to the progress of African society. In 1883, he died of erysipelas at the relatively young age of 48.¹³²

As a 'black Victorian', Horton found himself inhabiting a field of tension between the Africanist agenda, which he represented, and European culture, which he admired. This article has attempted to provide a perspective on Horton that transcends his role as either a doctor or a political philosopher, uniting his principal endeavours under the theme of self-legitimation. His education, his many years of professional experience, his home advantage as a local doctor, and his wide-ranging and typically up-to-date scientific knowledge allowed him to locate and then legitimise himself as a medical authority in the complex proto-colonial structures of his day.

132 EAP443/1/12/11.

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Appendix

Letters by and about James Africanus Beale Horton (1835-1883) (incl. two letters by James Horton Sen.), held in the Church Missionary Society-Archive, Cadbury Research Library Special Collections, University of Birmingham. Signature: CMS/B/OMS/CA1/O117/1-21.

Transcriptions by Andrea Graf, Department of History, University of Basel (andrea.graf@unibas.ch).

Note

The collection consists of twenty-eight handwritten documents, some of which are combined under a single signature (e.g. a letter and its direct reply). The letters are not in a chronological order, but in the order of the archive signatures. Alphabetical letters have been assigned to each signature for better access when reading the corresponding article. Illegible words have been replaced by [†] and page breaks are marked by //.

Spelling was adopted one-to-one from the documents. Due to the frequently varying orthography, [sic] was in many cases not applied. All additions by the transcriber, such as unclear words and punctuation for better readability, are marked with [square brackets].

A) CMS/B/OMS/CA1/O117/1 – J. A. B. H. to Henry Venn (?)

Fort Anamaboe, Nov 10th /59

My dear Sir,

You might have by this time heard of the strange instructions we received when we arrived at Sierra Leone from the Principal Medical Officer, in consequence of which we had to reship our [straps] & embark for the // Gold Coast.

I had flattered myself, that since there was a great cry for medical assistance, which in point of fact is greatly needed we should have held a helping hand to every [class] in the community, but our wishes were foiled, by the orders of our Principal Officers & although the people petitioned the Governor to allow us to remain, even a month, he not being a military man, could not grant it; thus within thirty six hours of our landing, night inclusive, we embarked without showing any sign of regret

Arriving at Cape Coast it was posted in the ending of the afternoon of the next day that I should proceed that evening to Anamaboe to relieve Staff Assistant Surgeon Bradshaw who leaves by this steamer for // England. I was received with kind & unremitted cordiality by all the people. Dr. Davies remained for a short time at Cape Coast & was afterwards sent to Dix Cove which is three days Journey by the Hammock.

I wonder whether the work on Tropical Diseases has been presented to Lord [Pau-miere], I shall be very glad to hear from him whilst I am here. With my sincere remembrances To [Mrs. Venn], Col: Davison & Mr. Hall Accept the same from
Yours very truly
Africanus Horton

B) CMS/B/OMS/CA1/O117/1¹³³ – James Horton Sen. to Henry Venn

Gloucester[,] Sierra Leone[,] 20th Sepr. 1860

Revd. and dear Sir

I have taken the liberty of addressing you these few times hoping it may meet you in a proper state of health, as it [leave] me at present[.]

I am greatly rejoiced with the Missionaries to behold things which I did not expect from them in this life i.e. in giving my son James. A. B. Horton instruction from since he was an infant and from thence he was taken to the Grammar School, and he was there instructed for some years ago, and was sent to the College, there he was till he was sent to England. to be – educated as a Medical Man, and now he became a Staff Assistant Surgeon, who is now at Cape Coast // I am very glad to see the Labours of the Missionaries at the Western Coast of Africa, as well as other station or ^[†] part of the world. I hope God may bless and prosper them more and more in their doing[.]

I am greatly obliged for the little tract you sent me once, I have giving it to the Class Members at Gloucester and Leicester, and the people feel much oblige, to behold that good people from England still remembering them here at Sierra Leone[.] I hope you will be good enough as to send some [tract] by the next favourable opportunity, for the Class Members here.

I herewith bring before you notice my journal to show you, and will you kindly forward it to the Committe of the C. M. Society's, that they may behold my journal how I labouring through this part // of the Village in Visiting the sick and pointing them, to Lamb of God which taketh away the sins of the world, and many who are now in bed I still visiting them, and taught them to flee from the wrath to come, and again Christ has bid us to come to Him i.e: Come unto me, all ye that Labour and are heavy laden, and I will give you rest. Take my yoke upon you, and learn of me, for I am meek, and lowly in heart, and ye shall find rest into your souls. For my yoke is easy and my burden is light. Matt.XI.28 to 30 verses – I show to ^them that our Lord came to this world, and died for the [course] of our sins, and he is gone to prepare // prepare a place for all those that believe in Him, he told us in the Holy Scriptures, that He gone to prepare a place for us, and if I go and prepare a place for you, I will come again and receive you, unto myself that where I am, there ye may be also, and whither I go ye know, and the way ye know. He said I am the way the truth and the life, no man cometh unto the Father but by me, If ye had known one, ye should have known any Father also, and from henceforth ye know Him, and have seen Him. With kind regards to all Friends in [Christ]. Believe me to be Your Most Obt. Brother in the Lord

(Sigd) James [†] Horton

133 This document has the same signature as the previous one. The reason remains unclear – the letters are not related.

Slave Coast[,] Quittah Fort[,] 3rd Febr. 18[60]

My dear Father,

Little did I think that I will be compelled at such an early period of my entrance into the Army to represent to [you] the unbearable treatment I have received from [one] of Her Majesty's Officers. I have born in mind & thank God able to carry out your last admirable advice to us Viz. "Never to stand out too much for your right – Be patient & time will bring it to you;" in consequence of this I have endured in silence, the ungentlemanly & I almost say [brutal] treatment of the officer who Commanded the twenty soldiers station at Anamaboe Fort [viz.] Capt. de Ruvignes; but silence seemed only to encourage him in his acts.

From the very first time I am here he has treated me with loathsome coldness for no cause whatever; he has trampled under foot all the privileges, that my position as a Staff: Asst: Surgeon entails & as a governmental officer entailed. He has done all in his [†] // to do every thing that will lead to my discomfort; more over he took no notice of those things which are highly necessary & practicable to prevent me from suffering for the climatical effect of the country, although I duly laid it before him. He set such an example to the soldiers that would lead them to disrespect me but on the contrary I received the greatest respect from them. Men in the town & some Officers in Head Quarters wonder at the idea that I have not represented his treatment to me to the Officer Commanding the Korps – His Excellency Leut. Col. Bird. So that it went the round of table talk that I am too easy that was the reason he was imposing on me. My reply was only this – that there was a time for every thing slow & steady with firmness carries a man further than being too hasty & quick in representing matters – I said that I know perfectly well that I have friends in England who anxiously regard my Course; friends who will not suffer me to be unjustly impinged upon & who are ready to seek my right & obtain due satisfaction & that it is my greatest endeavour not to blast their hopes by being too hasty & rash or mar my further prospect, & those of my countrymen who may here after join the Army by following the dictates of temper.

Full three months have I been tormented, annoyed, disturbed & vexed; scarcely three days can elapse without new devices, [†] out & put into execution. Many a time have I // been obliged like a school boy to go without my food[,] many a time have I been obliged to ask friends for food out of the Fort in the town, many a time have I been left alone without a servant without a cook, many a time have the dinner which my cook was preparing for me been made to be left half cooked & myself deprived of my dinner. All these through the actions of one man. The enigma then is; why have I not represented this ungentlemanly treatment to the Governor & have a redress.

It is a matter of paramount necessity that as I am amongst the first of the native Africans who have been educated by H. M. Government in the Medical Profession & sent out in the Army as Staff Asst. Surgeon to practice that noble art amongst my own Countrymen & those of the Europeans who may require our attendance, that I should not be too hasty in whatever I am about to undertake – not to give in to the dictates of passion, or to take rash measures which the nature of the trials that I was suffering merited. I felt that it was the keystone of the continuance of that noble plan of educating young Africans & sending them in the Coast. Should I give way thousands of those here who are hostile to the plan will have grounds to complain, they

will use every means to dissuade you and the Government from going on in that noble Cause which is fraught with blessings for Africa. Truly it requires a good deal of patience, a good // deal of self possession & well might it be asked what prevents him from representing it to Head Quarters & so shut it.

To be prevented from doing ones rightful duty – to be received with the utmost coldness – to salute & don't receive a reply To be deprived of Quarters comforts – to have ones boy threatened to be flogged every day without any just cause – to be prevented from cooking in half the fireplaces in the officers kitchens – to have ones boy [tied] & flogged on the [†] with the “Cat o'nine tails” before his master without any cause & then turned out of the Fort whilst his master was calling him so as to ascertain the cause – To be deprived of ones dinner – to be totally prevented from cooking in the officers kitchen – to be told to go & cook where & to [†] half naked soldiers wife[s] are preparing their husbands meals – no kitchen whatever but a kind of tripod invented by themselves – to be prevented from using the filtered water provided by H. Majesty for her officers in the Fort – to employ harsh language to Her Majestys Officer – stamping the feet on the Ground &c. – These are in brief language the sufferings I had to undergo since my arrival here – these are the trials I had to pass through – I am compelled not to allow this to pass unnoticed else an advantage // will be taken of every African who joins the Army. I defy Captain de Ruvignes or any one In the Coast to charge me of neglect of Duty[,] I can obtain testimonials from the merchants and the inhabitants of Anamaboe – rich & poor amongst whom I had laboured of their satisfaction at my attendances on them. In fact I had under my treatment, patients from nearly all parts in the Gold Coast coming down to Anamaboe, even from Cape Coast where there are two doctors.

It is a finally known fact among all the officers & some of the natives that as soon as we arrived in the Coast, they wrote to England to say that the Government should not send native doctors in the Coast, that it is a very bad step – alleging as a cause that the soldiers will not respect them – this is the very reverse of the case, for one receives the greatest respect from the soldiers – even the people in the town considered it as an [harbinger] of blessing to the Country.

The conduct of Capt. de Ruvignes may be explained from the fact that they determined to annoy us until we commit ourselves & loose our commission but thanks that there is a Providence which // thwarts the untoward designs of men.

I am [so] glad that Dr. Davies at Dix Cove is placed under a person of a different temperament[,] an old Captain – Capt. Brownwell who loves the Africans & is beloved by them.

Certainly I did expect a degree of prejudice against us but not to such an extent.

It came to the knowledge of the Governor, who called me up to Cape Coast. He admitted that I had been badly treated by Capt. d. R. without my having told him any thing, but after I have read two items to him he said that it was sufficient, that he settles it quietly & that I should leave things as they are – Then he called me particularly to tell me that as Dr. [Zeevan] has been invalided & sent to England, I should get myself ready to leave by the Leeward steamer for Quittah. Afterwards he asked me through the Fort Adjutant to destroy the notes that I have kept of his treatment – else that may ultimately bring him to Court Martial.

Unfortunately I had all my things capsized whilst landing in the surf at Quittah. With my affectionate regards to Miss Venn & Masters Venn
Accept the same from Yours ever
James Africanus B. Horton

D) CMS/B/OMS/CA1/O117/3 – J. A. B. H. to Henry Venn

Freetown[,] Sierra Leone Leone[sic][,] 21st Dec /61

My dear father

You will no doubt be very much surprised to hear that I am in the above place & this will be my [†] explained by the accompanying[sic] letter, paper. // I have lately had such a severe attack of Dysentery that the Medical Officers in the Coast have thought fit to send me out of it & as it was supposed that I will have better attendance in the latter above named // place more than Teneriffe – they have [granted] me leave of absence to S. Leone[,] I am sorry that condition will not allow me to write a longer letter than this. With my very affectionate [†] // to Miss Venn, John & Henry

I am truly yours

Africanus Horton

E) CMS/B/OMS/CA1/O117/3b¹³⁴ – Medical report Horton

Abstract of case of Staff Asst. Surgeon Horton

This African arrived on the Gold Coast on the 18th October 1859, and during the time that he was stationed at Quittah, he suffered from several relapses of fever – At a subsequent period he was located at Accra and Anamaboe, and during his service at these stations had attacks of Remittent Fever, lasting from 1st December 1860 to the 15th January 1861. Early in June 1861 he was again attacked by fever and remained on the sick list during that month – being brought up to Head Quarters at Cape Coast Castle for treatment – when his health had been re-established, he was ordered to Dixcove During the tedious journey he had another relapse of fever, and was reduced to a state of excessing weakness. On the 11th November 1861 – Diarrhea[sic] supervened after obstinate Constipation, and on the second day assumed a Dysenteric Character – The local pain of the bowels and Febrile action increased for some days – and as no abatement of Symptoms became apparent, Dr. Horton left Dixcove for Cape Coast Castle on the 22th November 1861. – Under the treatment adopted at Cape Coast Castle, [vizt.] Mercurial preparations with Opium given internally and counterirritation set up on the abdomen to relieve the local distress and pain – the disease was subdued, but as Dr. Horton is reduced to a state // state of great prostration, and has suffered from so many relapses of Remittent Fever, the Board have arrived at the opinion that this Officer should have leave of absence for three months to visit Sierra Leone – his native place, for the purpose of recreating his health. –

/Sd./ Charles O'Callaghan[,] S. A. Surgeon MD[,] President

/Sd./ N./M. R. Thomas[,] Staff Ass. Surgeon[,] Member –

Proceedings of a Board of Medical Officers, assembled by order of Captain [I. J.] Brownell, Gold Coast Artillery Corps, Commanding on the Gold Coast, on the 13th Decemr. 1861 to examine and report upon the state of health of Staff Asst. Surgeon James A. B. Horton –

Staff Asst. Surgeon O'Callaghan MD – President

“ “ Thomas – Member

134 This document does not have its own signature and is filed in between documents No. 3 and No. 4. For better comprehensibility I have provisionally assigned the signature 3b.

The Board having carefully examined this African find that he has been suffering from Dysentery, further, that there is no probability of his speedy recovery in this country – The Board therefore recommend that this Officer be granted leave of absence for three months to proceed to Sierra Leone, dating from the period of his embarkation. /Sd./Charles O’Callaghan[,] S. A. Surgeon MD[,] President
/Sd./ N./M. R. Thomas[,] Staff Asst. Surgeon[,] Member

F) CMS/B/OMS/CA1/O117/4 – James Horton Sen. to Henry Venn

Sierra Leone[,] Gloucester[,] 20th Sepr. 1860

Revd. and dear Sir

I am extremely happy to inform you these few lines, about my labours here at Sierra Leone amongst my Countrymen, how I Visiting them frequently and taught them the way to God, that may seeking of their souls Salvation, and more especially when they are in the bed of Affliction, I show and [†] to them in that [scriptions], that Jesus Christ calls upon each of us to prepare of his coming, that when he shall come again in His Glorious Majesty’s to judge both the quick and the dead, for He shall descend from Heaven with His mighty angels in flaming fire taking Vengeance[sic] on them that know not God, and that obey not the gospel of our Lord Jesus Christ, who shall be punished with everlasting destruction[sic] from the presence of the Lord and from the glory of His power, when he shall come to be glorified in His Saints and to be admired in them that believe in him [] 6th May 1859. As I was returning from Liecester[sic], I met a man who said to me that one of our Members is very ill and I am waiting here to inform you of it, I went immediately with him to the place where the sick man was, on entering the house I found a great many friends sitting around him, on seeing me he said. “Bro Horton” you come, I “replied” yes He then added, I am very sick in my body, but not on my soul, suppose the Lord should say, He wants me this night I have no fear whatever, I am ready to go to Him, I asked him on whom do you depend for the salvation of your soul, he then replied my dependence is only on the Lord Jesus Christ I have no one who can do me any real good except Jesus Christ who came into the world to save sinners, I then asked him are you a great[sic] sinner, He replied immediately “Oh” yes, I am one // but thanks to God who had washed me from my sin, and cleansed me from all unrighteousness.

May 8th 1859. I went out again this morning to Visit him, no sooner did he behold me, he began to express himself in the following manner, “Bro.” to believe with the whole heart is a happiness, its[sic] enables me to rejoice [both] in time of death and health, I am happy said he although I feel much weakness in my body yet in my soul I do not feel any, I read to him the 25th Psalms and offer a prayer.

May 13th 1859. I Visited him again I read and explained to him the 14th chap. John, then we kneeled down and offer a short prayer, after the prayer was over, he say[sic], the Lord be prayed with him, so I shook his hand and bid him farewell.

June 8th 1859 I went to Visit him, I called him, he was unable to speak I read to the 33rd Psalm, but to show that he was sensible about what I read to him, he then waved his hands to me, as a token of respect and in the evening he departed from this world to that world above, I believe he is present with the Lord in glory

June 12th After the evening service as I returned home I Visited a sick communi-

cant in a dying state, she replied I am very glad to go home but my hour is not yet come, it was instructive to witness her weakness [under] suffering and her firm faith in Jesus Christ., she said once I was blind, foolish, stupied[sic] and did many bad things, becaus[sic] I knew no better, again the Lord opened my eyes to see, and my heart to understand, I am in the light, I see the way deliverance is come, fear is passed although sin live in me, it has no power to trouble me again, Jesus live [†] &c.

June 14th I went to Visit her again she then continues the same that the Lord [†] is still in her, again the Lord loves her, I [†] to love Him because He punishing my body for my sins, my body will die for sin the word of the Lord is true and good the will of the Lord shall be done upon me I shall soon go home and have no more trouble.

June 15th 1859 On Wednesday about A.M. I went and Visited her and the [late] Revd. [J. C. Taylor] was present, he spoke to her the word of God and prayed with her before he left. he again read and explained to her the 14th chaptr John the Gospel.

June 23rd 1859 On Thursday I Visited at night and read // the 27th John, after which she spoke to me in her Country language that it is of no use to [him] in this world, she only looks to Jesus Christ. I then prayed with [him], at the [conclusion] [him]self repeated the Lord prayer.

June 24th 1859. On friday A.M. I went and Visited her again and read the 1st chap. John the gospel to her I then requested her about her soul how she feels to words of her God, she replied I look only in Christ, He is my all in all and my maker, whenever He calls me I am ready to go to Him, about one O'Clock P.M. She departed out of this life, I really believe that she died in Christ

July 10th 1859 I went to Bathurst in my returning, I Visited several sick people some of whom the Lord had laid down for many years in [disordnate[sic]] state and were desirous to hear the word of comfort, the woman who had be suffered for some years, said to me "Bro" the Lord is good and kind to every one that love Him in this world, I have much to suffer, and to undergo, but He is helping me through, I spoke to her and read and explained to her the 8th chapt. Romans, she was quite ready to [hear] and listen to the word of God and she notice it and she lays it as her foundation stone, and we knelled down and [†] offer a short prayer, not in a few hours she died in the Lord. 'Again" Iwent[sic] to another whom I asked how he would feel if the Lord should call him now from this world, "Replied" I take hold of the Mercy of Christ Jesus I read and explained to him the 28th Psalm I then offer a prayer and bid him fearwell[sic].

July 31th 1859 I Visited an old communicant one of the most delightful Christian[s], he hold and embraced my hands and said that the Lord is [dealing] and mercifully with me, that you come and Visited me frequently, he hope that Lord may enable you to do his duty in this life fill in glory you shall receive the crown which fadeth not away I read and explained to him the 27th Psalm and offer a short prayer and ^bid him fearwell

Augt. 14th I Visited a ^sick man at Charlotte[.] Iput[sic] several question to him as with regard to his soul, he gave me a favourable accounts[sic] about his soul, I read and explained to him the 14th chapt John the gospel, Let not your heart be troubled, ye believe in God believe also in me, I prayed with him before Ileft[sic], He disired his [Wife] to thank me for him for the word of God which he had from me, in the following [A.M.] I had[sic] him died, and I believed He is now rested in his God

Septr 18th After the evening service IVisited[sic] one little boy at Gloucester who was about 15 years of age, and was so sick, he was a very [pious] little // little boy and

was still strong in faith rejoicing in hope of the glory of God[.] When I spoke to him about his soul, “He replied” thanks be to God which giveth us the Victory through our Lord Jesus Christ, I read and explained to him the 8th chapt St. Luke and I offer a prayer with him as I returned to go home he bids me fearwell[sic], “Bro” pray for me if you did not see [him] next morning you must believe that I am with Jesus in Heaven, I replied very well I like to hear that when you die you are is present with Jesus in His Kingdom but you yourself should constantly in prayer. Octr 2nd 1859. I Visited him again he was sensible and calm, but a very skeleton he was quite weary of his body through constant lying &c. he was too feeble to hear my words, Ispoke[sic] to him about Jesus which was ever [†], to his ear I bade him repose upon his [†] till the storm was overpast, He reassured me that these centred all his hopes, and that His [†] was more and more [sensible] about him.

Octr 7th 1859 This morning the poor boy died and buried[sic], in and certain hope of the resurrection[sic] to eternal life through our Lord Jesus Christ

Octr 16th After morning service I Visited one sick communicant, I spoke to him about his soul, if he make peace with his God, “Replied Yes” I – thank God who has forgiving me my sins and wash me with his blood I – read to him and offer a prayer and bid him fearwell[sic], not in a few minutes he died, I believe he lays in the boson[sic] of the Lord his God.

Novb 14th I was called in a hurry to Visit a sick man, a Candidates[sic] for Baptism said to be in a dying state, he stated that he was going home to live with Christ, and that he wished to be baptized, I therefore spoke to him and those around, on the happiness of having a Saviour to lean upon in the hour of death, and all having joined in prayer to God. and the Minister baptized him what particular[sic] struck me in this poor man’s case was the fact, that although unable to sit upright, he sought comfort in this trying season, in God’s blessed word, and the Minister offer a prayer and we bid him fearwell[sic].

Novb 15th I went again and Visited him in the following Morning I – asked him, how he feels himself, “He replied” I am quite well in my soul and happy with Christ Jesus, though my body is suffering in pain but my soul is rejoicing in the Lord and in the evening he died, Ibelieve[sic] that he sleep in Jesus arms, and shall receive the crown of righteousness which fadeth not away &c.

Novb 27th I Visited a boy who was about 14 years of age who had – [of] suffered from the measles of 1858 from which he never — // perfectly recovered, and finally died with consumption, praying to be washed in the blood of Jesus Christ, borne his long illness very patiently and I had good hope, from the little I could get him to say that he had been born again of water and of the spirit and was therefore being prepared for the kingdom of God the Father in the night of his death he sent for me, as I went he replied, “Now I am in a hurry to Go” I prayed with him, and no sooner he fell asleep in Jesus as I trust and believe thus another soul of more value than the whole world, has been added to the redeemed and saved, he buried on the 5 inst. (or the 5th Decb 1859)

Janry 1st 1860 I Visited the communicant class at Leicester several times on the Lordsdays finding them attended very and regular

Janry 15th I Visited the communicant and candidates ^classes at Regent several times on the Lordsday and finding them attended very punctually

Febry 19th I Visited the people at [Graff] town on the Lordsday I attended their Service, which was conducted very nicely and orderly, and the congregation paid great

attention to the word that was spoken to them, and listen with ears, know[sic] noise was heard till the close of the Service. After the close of the Morning Service I attended then Class which was conducted very punctually

Febry 19th 1860 In the evening of the same day I Visited the Wesleyann[sic] Chapel, and found the people attended as the Missionaries and they were as many, or more, in the following day I returned home

Febry 20th 1860 I Visited one of my relatives at Kiskey on the Lordsday who was not so well, I attended the Morning service which was conducted very nicely and the congregation attending very punctually and listen with attentive ears to the preaching of the [†] Minister and after the Service was closed they are attended their classes regular as they did in the Church. I attended the evening Services and found them attending regularly as they did in the Morning service – I was much encouraged to informing you the Member[s] of congregation attending our Church at Gloucester from the 18th March to 16th Sepr 1860 were exactly 9.418 // attendance, when the Minister Administered the Sacrament of of the Lords Supper, the congregation were as many more, or twice as many Communicant attending the Lord supper were about 300, Candidates for Baptism were about 50.

In conclusion of my Journal I will[sic] therefore address myself in the following circumstance [†] how I felt towards my poor soul, in teaching and Visiting one another I consider myself always that I am willing to rest in Jesus, but my time is not yet come, I request the Almighty God to instruct me more and more, that I may consider about the joy that is in Heaven [†] one sinner that repenteth it makes me feel joy and gladness and the scripture told us ^Blessed are they that are called to the Marriage supper of the Lamb.

I read that the trumpet shall sound and will awake the dead, some who will come forth with shamed faces and down east eyes will not be able to look on Him, that sitteth on the great white throne but will call on the rocks and mountains to fall on them to hide them from the wrath of the Lamb for they sinned against Him in various ways, and never loved and served Him, cannot behold His face with joy.

The Liars too must come forth at the sound of the trumpet and stand before “the great white throne” but he will tremble[.] The Sabath breaker will come forth at the sound of the trumpet, but he will not be accepted, because he did not love, the house of God on earth where His Saints worship Him, and he cannot be admitted into heaven the place of Eternal joy, where Saints and Angels are ever worshipping and praising God forever[.] Amen.

Blessing forever and the Lamb, Who bore the course of wretched men Let angels sound His sacred name, And every creature say Amen[.]

Ending[.] James Horton[.] The Author of this journal

G) CMS/B/OMS/CA1/O117/5 – Treatise

[A short version of this treatise was published in the appendix of Adeloys Horton study from 1992 under the title ‘Treatise on Tropical Diseases’.¹³⁵ It remains unclear why Adeloys has chosen this title – the original document is untitled. Also, it is by no means a treatise about tropical diseases, but consists of behavioural and medical ad-

135 Adeloys, Adelola: Dr. James Africanus Beale Horton: West African Medical Scientist of the 19th Century. Pittsburgh 1992.

vice to missionaries in tropical regions, including a detailed 'manual' for child birth. Furthermore, Adeloze has not declared whether his choice of extracts from the text is his own or whether it is an official short version. I have not been able to find any trace of this treatise anywhere else.]

Those who have written upon the diseases of tropical climates seem to have no doubt that a great proportion of the mortality is due to causes that might be easily avoided, Men expose themselves to the excessive heat of the sun or sleep in the neighbourhood of marshes or for some reason or other they do not get a proper supply of wholesome food: or drink immoderately intoxicating liquors[.] These and similar transgressions of wellknown rules of health swell the mortality of tropical climate far beyond what is necessary[.]

One chief rule for preserving health in Tropical climates is to be temperate in all things: with regard to diet a person should not eat too much especially of animal food, most fruits also should be cautiously indulged in until their effect upon the individual have been observed though any bad effect may usually be prevented by eating a small quantity of bread or biscuit at the same time The new-comer[sic] should also avoid exciting his appetite much with spices[.] In some directions for the preservation of health given to the French army employed on the Danube it is said that "Saffron increases the digestibility of rice and flour, it is particularly useful with maize." Attention to temperance should be paid a few days before landing in a tropical climate // for the meals on board ship are frequent and a large quantity of animal food is provided whilst the exercise taken is small. It has sometimes appeared as if those who had escaped sea sickness were more liable than others to take fever on landing; this is very probable as such persons would naturally be more fullblooded. They should therefore be particularly careful to be moderate in their diet. Though excess in eating is dangerous the opposite error of eating too little is also to be guarded against. the intervals between the meals should not exceed five or six hours. and a cup of tea or coffee or even a glass of cold water with little bread or biscuit should be taken before going out in the morning for it is well to rise early and enjoy the refreshing coolness of the morning. Perhaps the best plan is to have a thorough wash on coming in before taking breakfast[.] to have dinner in the middle of the day and a light tea in the evening[.] Exertion is imprudent immediately before or after a meal. and no mental or bodily labour should be engaged in for half an hour at least after dinner. Excessive drinking should also be avoided and this not merely of spirituous liquors but of fluids of every description. Very frequently the only water to be obtained is itself unwholesome[.] This may often be remedied by boiling and filtering and the consequent insipidity can be [be] removed by making it into tea, toast & water sherbet or something of the sort. If the water is still unwholesome it may be worth while to collect rainwater this is easily done by stretching a clean sheet between four poles and placing a vessel under the middle. // A very good filter is made by placing three native vessels on a frame one above the other the two upper ~~two~~ having holes in them. The middle vessel has a layer of finely divided charcoal of three or four inches thickness covered with sand & stones to prevent its rising to the surface of the water. The upper vessel has a little cotton in the hole in order that the water may trickle through slowly.

Exercise should by no means be neglected but it should not be carried to the point of fatigue the most convenient time will usually be an hour or two before dark and

horse exercise the most pleasant and healthful but an early morning walk is also very beneficial or the employment of gardening for those who prefer a useful recreation[.]

Clothing is a subject of considerable importance the clothes should be such as keep the body comfortably cool. Cotton and flannel are the materials most recommended, as they are not so liable as linen to strike chill after being moistened with perspiration[.] for people in the tropics frequently suffer from cold after being heated. When sitting in a cool place therefore after being heated by exercise care should be taken that the clothes are dry[.] The head should be well protected especially if it is necessary to be exposed to the heat of the sun[.] a handkerchief inside the hat or a roll of cotton outside is an additional protection and an umbrella with a second cover is of great use but unless compelled by circumstances it is best to keep under cover during the heat of the day[.]

The mind should be kept in a cheerful state free from distressing anxiety and care // and there should be some ~~useful~~ ^pleasant recreation at hand[.] In England the advantages of change are well known and appreciated. few of those who can afford it are content to forego the pleasure and benefit they derive from a summer tour[.] The necessity of a return to Europe might often be postponed by a journey in the country itself and this with advantage rather than detriment to the mission cause[.] Sometimes this might be effected by exchanging duties for a few Sundays with a brother missionary. at other times by making a missionary tour in the neighbouring districts[.] The skin should be kept clean[.] the feet as well as the rest of the body being washed daily. After exercise it is very refreshing to have a good wash and to put on dry clothes before eating but cold bathing should never be attempted immediately after a meal. If nothing better can be obtained a very good bath may be made by dipping a towel into a bucketful of cold water and wringing it over the head till the bucket is empty[.]

In order to obtain sleep at night the evening meal should be light[.] Mosquitoes where they abound should be kept off by mosquito curtains, and the room should be kept cool though some care is requisite for a person is more liable to suffer if exposed when asleep at night than during daytime. and thus both from cold and malaria. That the bowels should act daily without medicine is of great importance and for this purpose it is well to have a regular time for going to stool as this as well as the other functions of the body is much under the influence of habit // The house should be kept scrupulously clean and dry. Dryness may usually be [insured] by fires and good drainage. A good situation for a house is one where the ground falls on three sides but where this cannot be obtained means should be taken to drain off the water that falls from the roof. It may sound paradoxical to recommend fires in a tropical climate but during the rainy season houses are very liable to the damp and damp houses and sheets are fruitful sources of disease. In order to avoid malaria the house should be built on high ground as far ~~removed~~ removed as possible from low marshy districts and the bedrooms raised three or four feet at least from the ground. For the sake of coolness there should be a verandah round the house and means provided for darkening the rooms without excluding the air. If obliged to sleep in a malarious district a grain or two of quinine should be taken daily as a precaution[.]

However valuable medicine may be in its proper place, the habit of drugging oneself for slight complaints ought to be carefully avoided[.] it is far better when feeling unwell to be very abstemious in one's diet than to fly immediately to medicine[.]

Many people have injured their constitutions irreparably by this habit[.] more especially by taking medicines containing mercury[.] Much mischief has also been done by taking saline purgatives during epidemics of cholera //

But though the habit of taking medicine unnecessarily is much to be deprecated yet it is well that those who are far removed from competent medical advice should have a notion of the proper treatment of such diseases as they are sure to meet with especially where there is little probability of their being mistaken as to the nature of the disease as in dysentery cholera and intermittent fever or where the treatment is well known as in the case of sulphur ointment for the itch (i.e. for the vesicular eruption called scabies for it is not every eruption that itches that is benefited by sulphur)[.]

In fever caused by malaria if there is good reason for believing that the stomach is overloaded either because the patient has a feeling of nausea or because he has lately taken a quantity of food it is well to give an emetic (such as twenty grains of ipecacuanha and a grain of tartar emetic)[.] In the evening he should have ten grains of calomel (& some purging medicine [besides] if necessary) and the following morning commence with large doses of quinine as three or four grains thrice daily for a few days & after the fever ^has subsided continuing ^to take dose of a single grain for a week or two. In acute dysentery the diet should be very low an emetic may be given at first if the stomach is overloaded. A good dose of castor oil with five or ten drops of laudanum will often give much relief and after that for a few days some Grey & Dovers powder night & morning as five grains each of Hydrargy cum Cretâ (grey powder) and Pulvis Ipecacuanha comp (Dovers powder.) There is one form of Dysentery in which limejuice is of the // greatest service[.] this would seem to be in those cases in which a scorbutic taint has been induced by privation especially of fresh vegetables and where the bleeding from the bowels is rather a part of the general disease than a local disease of the intestines[.] In all cases of fever a great deal depends upon careful nursing that is upon keeping the patient and everything about him clean cool and comfortable and giving suitable food at proper intervals but not less than three ^or four hours in ma^ny[†] cases sponging with limejuice and water is both refreshing and beneficial[.]

The treatment of cholera after the disease is fully established is much unsatisfactory but very frequently there is a premonitory diarrhea for which laudanum is very serviceable[.] Whenever therefore cholera is epidemic cases of diarrhea should immediately be treated with laudanum. As for instance fifteen drops made up in a draught with aromatic confection & water[.]

Prickly heat though not dangerous is very common & troublesome[.] Hairpowder Limejuice Hotwater & a variety of external applications have been used but the real remedies are “light clothing, temperance in eating and drinking[.] avoidance of all exercise in the heat of the day, open bowels. and lastly the use of the punkah, or large fan, during the night.” For night mare a troublesome visitor to the tropical couch Dr. Martin recommends the carbonate of Soda taken in scruple doses at bedtime or night and morning in some aromatic water such as the peppermint //

It is well also to be acquainted with the course and treatment of a natural case of childbirth. The labour normally lasts from six to twelve hours or more being often much longer with a first child[.] Some little time before the child is born the pains change from a grinding to a [†] character and the latter though more painful are often better borne. Before the child is born the membranous bag in which is it enclosed

breaks and a quantity of watery fluid is discharged[.] After this the labour usually goes on rapidly though it may be hours before it is concluded. The head of the child is in the great majority of cases ^ (more than 33 out of 34) the part first born and this is the best and safest position the accoucheur makes out this at his first examination with a greased finger and if it is the case can assure the patient that for the present the labour is going on favourably. in fact if left alone the child would almost always be born by the natural pains[.] Before the child is born the patient should be placed in a convenient position[.] the best is on her left side with her back about a foot and a half from the edges of the bed[.] but she need not unless she likes keep this position constantly till shortly before the birth; when the watery fluid is discharged will generally be soon enough. After the child is born the first thing to be done is to divide the navel string[.] this is done by tying the navelstring with half a dozen thicknesses of thread [†] at two places three and four inches from the child and dividing the cord between them. The mother should then be made a little comfortable and left for a quarter or half an hour while the child is being washed and dressed. a little // starch powder being dusted on the groins bends of the elbows &c. to prevent chafing. Tight bandages and pains should be avoided in all dresses of children After the child is dressed the afterbirth will probably be detached from its connexion with the mother and may be removed by pulling it down gently ^by the navelstring the first direction of the pulling being backwards[.] To ascertain whether the afterbirth is detached put your hand on the abdomen and a lump about the size of a child's head will be felt : or the finger may be passed up along the cord & the insertion of the cord into the afterbirth near the external parts After the afterbirth is removed the woman should be left quiet for half an hour or so and then made as comfortable as possible lying on her back[.] from the time the child is born the Mother should not be allowed to sit up in bed on any excuse ^for two or three days and it is better for her to keep her bed for a week and not to use any exertion for another week lying down if she feel at all tired or suffer any pain[.] For the first two days the food should be gruel[.] on the third day she may take a little broth and after that gradually return to her ordinary diet. If the bowels have not been open by the third day a dose of castor oil is usually given[.] but this need not be done if the patient is going on well and has no headache or pain in the abdomen[.] If at any time two nights have been passed without sleep means should be taken to procure sleep on the third night and a grain of opium or its equivalent ten grains of Dover's powder or twenty drops of laudanum got ready to be // taken at sleeping time if she does not go off comfortably to sleep without[.] Flooding after delivery may usually be stopped by dashing a cloth dripped in cold water on the external parts[.] The signs that a patient is going on well are An easy countenance, Moderate appetite, Clean tongue Pulse under 90[.] No tenderness on pressing the hand upon the abdomen. Moderate discharges from the Vagina[.] And a fair secretion of milk but one or more of these signs may be absent while the patient is going on very well. It is well to be acquainted with these signs for it is a great comfort and benefit to the patient to know that she is going on well[.]

H) CMS/B/OMS/CA1/O117/6 – J. A. B. H. to the CMS

Anamaboe[,] 13th Novbr 1863

To the President & Members of the Committee of the Church Missionary Society, 14
Salisbury Square London

Gentlemen[,]

On the 13th July 1861 I forwarded a letter to you with a copy of a letter with I forwarded to the Educational Committee War Office proposing a scheme for the education of native Africans for the Medical Profession of the Army. In that letter I begged of you to support the proposition & I must return my thanks to you for the support which you then gave the subject as I immediately received a letter from the Secretary of state for War to the effect that the subject will receive his attention & consideration.

They applied to the Officer Commander the late Gold Coast Artillery Corps Capt. Brownwell & the Principal Medical Officer Dr. Charles O'Callaghan for suggestions in order that they might carry out the Scheme. These men being likely prejudiced & determining to destroy the // the very [†] of the undertaking wrote a most prejudicial & [illiberal] statement imaginable & so misrepresent facts that they entirely [disarm] your committee & the Government[.]

I am now in a position to disprove every statement of them & you will find by the enclosed testimonial from His Excellency Governor Pine the Military Officers & the Principal Merchants Native & European on the Coast that no faith was to be placed on their statements.

I have written again to the Educational Committee the letter I now enclose. (No 3) & I shall again beg of you to support the scheme & particularly to impress on the Government the absolute necessity of my repairing to England to see that the requirements of the Establishment be properly arranged.

I am[,] Gentlemen[,] Your most obedient Servant

J. Africanus B. Horton [,] Staff Asst. Surgeon

[P.S.] I have written to the African aid society to support the proposed scheme.

I) CMS/B/OMS/CA1/O117/7 – J. A. B. H. to the Educational Committee

Anamaboe[,] Gold Coast[,] 13th November 1863

To the Right Hon. The Earl de Grey and Ripon[,] President, And the members of the Educational Committee[,] War Office, London

My Lord and Sirs

On the 13th July 1861 I addressed a letter to you, a copy of which I now enclose, relative to the appointment and training of African Surgeons to do duty on the Coast of Africa – In that letter I endeavoured first to prove that by the continuous service of the African Surgeons on the Coast they are able to investigate the causes, effects and pathology of the diseases belonging to the Coast and therefore become acquainted with the different types the diseases may present themselves and able to combat them. That the Government will have the advantage of their long experience and that it is sure to have on the Coast professional men who are perfectly acquainted with the diseases of the Coast and who would endeavour to make it a point to lessen the percentage of mortality amongst the officers and officials employed on the Coast.

Secondly, that the improvement of the West Coast of Africa, a thing which has always marked the policy of // the British Government can never be properly accomplished except by the educated native portion of the community; that the more the educated portion of the inhabitants is increased, the more will the rise of the other portion be made evident and the more so will impartial judges be able to prove the capabilities of the African –

That it will therefore be of great importance and immense benefit to the Country and the people of Africa should the Government continue to send on the Coast of Africa well educated scientific and professional men –

I thirdly dwelt on the embryonic condition in which the scientific resources of the coast at present is and proved that it is not to the Europeans must we expect to have them developed but to the African who is educated in the various branches of science –

I next pointed out or called your attention to the Testimonial which you from time to time received from the Dean of Faculty of the Medical Department relative to the pupils who were trained at King's College, London, for the Medical profession under your auspices, which went to prove that the African is able to appreciate and to employ to the last advantages opportunities granted them for improvement –

The scheme I proposed in that letter was founded on the experience of // of the difficulty myself and colleague met with when one attempted to compete with the English students for honours in the different branches taught in the college from the fact that most of them are generally acquainted with the subjects before they entered the college, but from the endorsed testimonials from Dr. Jelf, Principal of King's College, your Committee will be able to prove whether we or not we show to overcome these difficulties and therefore I say, my Lord and Sirs, that it is imperative, should you again undertake to carry out what you have begun, that the African pupil should have in Africa preliminary education in some if not all the branches of medical science – On that consideration I make to you the following proposition in substance; viz. that a ~~more~~ small Government medical school be established at Sierra Leone where young men natives of Africa who have made proficiency in the ~~medical~~ rudiments of Latin, Greek and Mathematics, should be trained up in the preliminaries of Medicine; viz. Anatomy, Physiology, Chemistry, Botany (of Africa) Natural history, Hospital practice and Pharmacy –

This establishment should be under the mastership of a native African, not of a European, for reasons stated in the letter alone referred to and for reasons I shall hereafter detail; that your committee should // should enjoin the propriety of his consulting with the Church Missionary Society at Sierra Leone ; I then briefly detailed the manner in which the establishment should be conducted with respect to Anatomical and Chemical preparations.

The first rate education which your committee has given us and the evidence which you received from the college where we were educated, were of that nature to show that we were perfectly competent to keep such establishment and to bring up young Africans in every branch of the medical profession – The liberal manner in which you have always acted in every thing that concerns our welfare emboldens me to offer myself to your committee to keep that establishment and I pledge myself to endeavour to the best of my ability to answer your wishes in a manner that will give you satisfaction.

On the receipt of this letter, your committee feeling certain of the advantages pointed out and of the importance of the proposition, wrote me a reply [†] dated 24th Octr 1861, to the effect that the subject will receive the attention and consideration of the Secretary of State for War, at the same time you very wisely communicated with the Chief of the Medical Department, the Director General // General, Dr. J. B. Gibson, on the subject, and you rightly applied to the officer commanding the late Colonial Corps, the Gold Coast Artillery, for information whether the African Assistant Surgeons already sent out are equal to the duties required to be preferred performed by any Medical Officers and whether they possess the confidence of the Europeans and the native community whom they may be called upon to treat –

The Director General of the Army Medical Department forwarded a letter of similar import to the principal medical officer Mr. Charles O'Callaghan and he further requested him to favour him with any report or observation he may deem necessary in furthering his desire to ascertain how far the intended substitution either wholly or in part of native African for European Medical Officers is likely to be successful –

This letter was most galling[,] Especially to the Principal Medical Officer to whom it was addressed and he was determined to use all his influence to oppose the project to the very last.

The Commander of the troops was at that time invested on an officer who was capable of pining anything according to the caprice of the moment viz. // viz. Captain Brownell; – their report therefore was not in any degree favourable –

Whilst they both state as an indisputable fact that the African Assistant Surgeons sent out are equal in every respect to the duties required of Army Medical Officers, Captain Brownell said that they do not possess the confidence of the European and Native community whom they may be called upon to treat – The predilection he further stated, in favour of European Surgeons exist as strongly in the whole Civil community as in the minds of the native soldiers; Mr. O'Callaghan said that he regret to be obliged to add that ~~another~~ neither of the two gentlemen now doing duty on the Gold Coast possess the confidence of the European community nor even the confidence of the native community in this Protectorate in the same degree as the European medical officers – He was not of opinion that the substitution of native Africans for Europeans in the Army Medical service in the West Coast of Africa would be successful since he thinks the native Africans would not possess the confidence of the Regimental and staff European officers doing duty on the Coast – Mr. O'Callaghan further stated that the freemen of the Gold Coast // Coast regard the natives of Sierra Leone especially with a distrust and barbaric aversion of which but a faint conception can be entertained in England –

Having seen this correspondence I was certain that for a time a death blow had been given to the proposal which I made to your Committee but I wrote a short letter to you thanking you for the kind consideration you had already given to my letter of the 13th July 1861 and stated that I felt sure that your committee will not allow individual prejudices to prevent you from continuing in the noble undertaking.

My surmises were true, as I received a letter dated 19th June 1862 from the late Secretary of State for War Sir G. C. Lewis to the effect that as it is not intended for the present to train any further candidates natives of Africa for Army Surgeons, he does not consider it necessary to enter into the scheme proposed by me –

Although it is now more than a year since you last heard from me on the subject

yet still I feel certain that you will give me an ear to what I have further to say and I shall pray you to give it your deep consideration as it is of a nature that I consider effects my professional character, the progress of my // country and your benevolent undertaking –

The late Sir William Hamilton in his treatise on Philosophy most appropriately remarked that truth like a torch the more it is shaken the more it shines. Although as your Committee would imagine that the reading of such a report produced a most painful effect in my mind as its tendency was to mar my future prospect and to nib the bud of improvement in Africa, yet still I feel certain that such unprecedented misrepresentation will hereafter tend to do good to the cause I was advocating and will enable me to place matters in such a ~~light~~ manner that there will be left in your mind no room for doubting the falacious statement which prejudical minds are capable of forwarding regarding subjects of improvement of the people of Africa.

The high and noble spirited Englishmen who form your Committee and who justly deserve the laurels of that favoured Island have not the faintest conception of the prejudice and biassed feelings which our colour has to contend with from illiberal and narrow minded Europeans on the Coast – I blush to acknowledge it but it were it possible to daguerreotype the // the feelings and actions of those men and transport their images to England such men as you Sirs would be greatly [†] in many points and you would then be able to see the why and wherefore you would then be able to see the why and wherefore certain projects are cried down and others lauded to the skies –

I must beg to call your attention to certain enclosures by which I shall be able to prove to you how fake and malicious ~~are~~ the statement of the two gentlemen referred to above is and I hope you will feel satisfied that their statements were only made with a will to mar the whole undertaking you have begun and to ruin the prospects of the two African Surgeons who are doing duty on the Gold Coast –

On the 22th October last I wrote a letter ; enclosure No 2[a], to his Excellency the Governor and Commander in Chief of the Gold Coast as well as to the principal Merchants (Europeans & Natives) that reports calculated to operate most injuriously to the prospect of myself and Dr. Davies having been circulated to the effect that the community on the Gold Coast both European and Natives ~~had~~ and especially the officials // have no confidence in the professional abilities of either of us – I begged them to send me their opinion in writing founded upon their experience of my treatment of them, whether there were just grounds for such assertion or whether there are reasons to believe the contrary –

Before enclosing upon the reply which I received I shall now bring but one argument to prove, that the statement of Mr. O'Callaghan and Captain Brownell were most fallacious – The Medical Officers sent out to the West Coast of Africa are in the generality of cases men who not only have just joined the army but also who have just entered the profession ; it is not likely then that the European population would for the absurd idea of colour give the preference to those who are scarcely known to them whilst a Medical Man although coloured, whose skill has been tried and who has for years lived with them is present – But to say that the coloured inhabitant also prefer to call for the Medical assistance of these Neophytes earlier than the men of their own colour whom they have tried and who have always lived with them in terms of friendship // friendship is so great an untruth as one could possibly tell – this can

only be when the coloured Medical Men are entirely void of the least knowledge of their work, but Mr. O'Callaghan and Capt. Brownell themselves acknowledge that we are in every respect fit for the duties required of Army Medical Officers – It must therefore be the prejudice of colour which is inherent in these two gentlemen that made them give such one sided opinion and not I am happy to say the real representation of the whole body of Europeans on the Coast – With regard to the statement that the soldiers have predilection for European Medical Officers who come out only for twelve months and who care but little for them, it is an assertion too absurd for one to take the least notice of –

Let me now beg to call your attention to the different enclosures and first refer to the unqualified statement of his Excellency Governor Pine (Enclosure No. 3). A gentleman who has lived on the Coast of Africa for more than twenty years and who now is here as the Queen's Representative –

He said that on his arrival on the Coast he enquired and // ascertained that some slight prejudice might occasionally exist amongst the Europeans but not among Natives – Mr. O'Callaghan said that the natives regard us with barbaric aversion ; his Excellency stated that amongst the superior class of Natives the utmost confidence exists in both myself and Dr. Davies; the two reporters said that we do not possess the confidence of both the European and native community –

His Excellency then referred to a few of the officers of the ~~late Gold Coast Artillery~~ (I had treated, and said in one case that one of the officers of the late Gold Coast Artillery (Lieut. Barrow) spoke in terms of high praise of my skill and attention, and with respect to himself he said that he can conscientiously state that my devoted attention, judicious and watchful care under providence enabled him to live through the fatigues of his journey from Mankassim to Anamaboe and that I never left him for two days and nights –

He thus concluded, I assure you I should have the most perfect confidence in the professional abilities of yourself and Dr. Davies[.]

If the Governor could after mature consideration and from the Experience he had of my treatment of him put // put in writing without the least hesitation that he will have the most perfect confidence in our professional abilities, is it possible that there can be the faintest truth in the assertion made by Captain Brownell and Mr. O'Callaghan that neither the Europeans nor the Native on the Gold Coast have any confidence in us.

I shall now refer you to the answer I received from Mr. W. C. Finlason (Enclosure No. 4) one of the principal European Merchants on the Coast, a man of such independence as is incapable of stooping to misrepresent facts – He was not a little surprised to receive my letter as he never heard any officer except Mr. O'Callaghan spoke otherwise than most friendly towards me – He thinks that I was labouring under a delusion to say that a report of such a nature, viz. that the community on the Gold Coast both European and Native had no confidence in the professional abilities of myself and Dr. Davies, was ever circulated ; but as for his part he said “I can assure you that I would sooner be under your Medical care than a great many of the youthful Assistant Surgeons I have seen on the Coast.[“]— He // He then expressed how annoying such reports must be and recommended me to sift it to the bottom – Enclosure No. 5 contains the testimony of H. Barnes Esq. one of the principal Native Merchants on the Coast ; he first referred to the medicines I administered to Mrs.

Barnes which cured her entirely, and then to my treatment of many branches of his family and the cure effected and he concluded by stating that Mrs. Barnes and himself have much confidence in my professional abilities – Mr. O’Callaghan and Captain Brownell said the contrary –

The letter of S. C. Brew Esq. one of the principal Native Merchants of this place who holds the commission of Justice of the peace forms enclosure No. 6 and I hope you will give due attention to his testimony – He began by expressing his surprise as to the content of my letter to him and said that he never heard the faintest breath of the report and that he could not believe that such a report could have been circulated as he never heard either of us spoken of but in terms of the greatest praise – He further stated that the people on the Gold Coast have always shown // shown a partiality for the professional abilities of myself and Dr. Davies, inasmuch as our long stay on the Coast have made us become versed in the treatment of diseases on the Coast – Regarding the statement that the freemen of the tribes of this protectorate regard natives of Sierra Leone with especially with a distrust and a barbaric aversion of which but a faint conception could be had in England he can only say that the person who advanced such a statement must know next to nothing inasmuch as such is diametrically opposed to the truth – He concluded by giving it as his candid opinion that himself and the whole of the educated portion of the inhabitants of the Gold Coast with whom he was acquainted repose the utmost confidence in my professional abilities, Mr. O’Callaghan and Captain Brownell said they do not –

The testimony of the Honble. George Blankson, member of the legislative Council (Enclosure No 7) must now engage our attention –

He asserted that his family having had the benefit of my professional attendance for four years he has always found me to be not only skillfull and attentive but also kind and judicious; and he went further // further and positively stated that the whole native and the greater portion of the European gentlemen here will support him in the assertion – Regarding the statement that the freemen of the Gold Coast regard natives of Sierra Leone with distrust and barbaric aversion, he denied the existence of such a feeling and said that the freemen would and do feel proud of the friendship and society of their brethren of Sierra Leone – Enclosure No. 8 is a letter from Captain Gabb, 4th W. I. Regt., late 11th foot; He began by stating that he knew of me for a short time but during that time he must confess that he always knew me to be most attentive to the sick of the Detachment under his command and that he has heard from Lieut. Barry, 4 W. I. R. that during the illness of Captain Edwardes 4 W. I. R. a former Commandant of Anamaboe no body could have been more kind and attentive than I was; and should he have the misfortune to fall sick he would unhesitatingly apply for my professional services –

I am exceedingly sorry that Captain Edwardes is now seriously ill at Cape Coast or I would get his own testimony – There are certain circumstances // circumstances which I must now again bring to prove to you that the statement of Captain Brownell and Mr. O’Callaghan were entirely fallacious; Enclosure No 9 is a letter from the Hon. George Blankson to his Excellency Governor Andrews with the reply to the same, when it was contemplated to remove me from Anamaboe to Dixcove, dated 13th February 1861, just five Months before my first letter was addressed to your Committee – In that letter he called the consideration of the Government to the fact that I had become very popular so that many persons ~~there~~ were at present under my medical care,

amongst whom were several people from Cape Coast; and he informed his Excellency of the deep regret which my unexpected departure will cause amongst the inhabitants – Now this letter written ten months before the communication from Captain Brownell and Mr. O’Callaghan breathes forth two important points to prove that the people must had confidence in our professional abilities viz., 1st that although there were two European Medical Officers at Cape Coast at the time referred to (Dr. M. Dermott, Staff Surgeon & P. M. O and Dr. Thomas, Staff Asst. // Assistant Surgeon & Physician to the Natives of Cape Coast) yet still a good many of the people of Cape Coast who were ill, appreciated my professional abilities and repaired to a distance of 14 miles and place themselves under my medical care – 2nd that the fact of my being popular at once proves confidence – Although Captain Brownell made the statement above referred to yet still in June last whilst stationed with a European Medical Officer at [Nimeboh] and was laid up with severe intractable diarrhoea and bilious vomiting he requested me to attend on him whilst on my way through that place to Accra and particularly begged of me to send him medicines from a distance of thirty miles – does that prove anything else than confidence, yet still in his letter to you he said he had none – Let me lastly refer you to the testimonial of Dr. Jelf (Enclosure No 10) Principal of King’s College London – He commenced by stating that he had much pleasure in bearing witness in the warmest terms of the excellent conduct and diligence of Mr. James B. Horton whilst at King’s College London – // He then referred to the prizes and certificates of Honor which I gained in the different branches of Medical instruction – He concluded by stating that at the end of my course I was on the recommendation of himself and the professors elected by the Council to the Associateship of the College, a distinction which always implies not only proficiency in studies but also an unimpeachable academic character –

Having now proved to your committee that any statement that might have been forwarded to you prejudicial to our prospects are entirely groundless and that it was intended only to destroy the ~~medical~~ cause you and the Director General of the Army Medical Department were advocating –

I pray now to bring again the proposal to you favourable consideration and I am certain that from the testimonial of His Excellency Governor Pine, the first man in this Colony, and the principal Merchants European ~~as well as~~ and Natives as well as the testimony of the officers, you will see that it is a plan that will be successful – I now leave the subject entirely in your hands and at your kind consideration but must only state that the advantages pointed out in my first letter // letter (Enclosure No 1) will surely be obtained – The Expenses of the Government in sending out and relieving medical officers on the Coast every year amounts to not an inconsiderable sum – at present there are stationed on the Coast of Africa 18 Medical Officers; at the rate of £80 for passage from & to England the total yearly expenditure for this only purpose is £1440 which in ten years amounts to £14000 – ~~The Government has always used means to reduce their Expenses whilst at the same time keep the efficiency of the service in tact~~ – – And in addition to this I will beg to call your attention to another fact not less important, which is that from the effects of the climate on the constitution of the European Medical Officer, only three fourths are generally suitable for active service, so that by the Adoption of the scheme I now propose there will not only be a large reduction of Expenditure but a proportionate increase of efficiency –

The Government has always used means to reduce their expenses whilst at the

same time keep the efficiency of the service in tact – The cause for which I am now // 11 now advocating and which you have commenced is such as will save the Government at least £10000 out of the £14000; for should you supply the Coast with 10 native medical officers leaving 8 Europeans there will be a saving of £8000 in every ten years of nearly £1000 a year and perhaps of twenty European Medical Officers lives –

I must now ^draw to a close and apologise for having trespassed too much on your valuable time – From the statement of Mr. O’Callaghan and Capt. Brownwell it will be evident to you that should you ~~appoint any one~~ but the scheme be accepted by your committee it will be almost a death blow to the case should you appoint any one but a Native of Africa to keep the Establishment, and I now again beg to offer myself to you for that purpose and would strongly but humbly recommend that your Committee would send a medical officer out to relieve me and that I should proceed to England to enter with you into all the details of the undertaking, such as assessments about books, diagrams, microscopic preparations, domestic habitation .&.& //

I must lastly add that it will be prayers of every African that the Great Disposer of Events will crown all your efforts with success[.]

I have the honor to be[.] My Lord and Sirs[.] Your Most Obedient & humble Servant
Sigd, Jas. Africanus B. Horton M.D. Staff Asst. Surgeon

J) CMS/B/OMS/CA1/O117/8 – Letters from Gibson, Brownwell, O’Callaghan

Enclosure No. 1

Letter of Director General Army Medical Department to P. M. Officer

Reply of Capt. Brownwell to Similar Letter from War Office ; & of Dr. O’Callaghan
P. M. O.

Cape Coast Castle[.] Army Medical Department[.] 23rd October 1863x
(Evidently a mistake for 1861)

To Charles O’Callaghan Esq.[.] Staff Asst. Surgeon & Principal Medical Officer &c.
&c. &c.

– African Surgeons –

Sir,

The employment of duly qualified native African as Medical Officers on the West Coast of Africa having been instituted on account of the great risk to European life with which such Service is attended[.] I have the honor to request you will have the goodness to inform me whether they possess the confidence of the European and native Community whom they [may] be called upon to treat? I shall also feel obliged by your favouring me with any reports on observation you may deem necessary in furthering my desire to ascertain how far the intended substitution either wholly or in part of native Africans for European Medical Officers is likely to be successful.
I remain[.] Sir[.] your obedient Servant

J. B. Gibson[.] Director General

Cape Coast Castle[,] 13th December 1861 (?)

To the Under Secretary of State for War &c. &c. &c.[,] War Office

— African Surgeon —

Sir

I have the honor to state in reply to your letter as noted in the [margin] that whilst it appears from all I am able to gather that the African Assistant Surgeons sent out to this command are equal to the duties required of Army Medical Officer[s], they still do not possess the confidence of the European & native Community whom they may be called on to treat. The predilection in favour of European Surgeon[s] exists as strongly in the whole Civil Community as in the minds of the native soldiers.

I have the honor to be[,] Sir[,] your most obedient Servant

J. F. Brownwell[,] Capt. G. C. A. Commanding the Troops

Cape Coast Castle[,] 13th December 1861 (?)

To the Director General Army Medical Department &c. &c. &c.[,] War Office

Extract from the letter of Mr. Charles O'Callaghan[,] Principal Medical Officer

After stating that he considers the native Medical Officers duly qualified for their duty, he said; — “I regret however that I am obliged to add that neither of the two gentlemen now doing duty on the Gold Coast possess the confidence of the European Community nor even the confidence of the native Community in this Territory in the same degree as the European Medical Officers. * * *

I am not of opinion that the substitution of Native Africans for Europeans in the Army Medical Service on the West Coast of Africa would be successful in as much as the Native Africans would not possess the confidence of the Regimental & staff European Officers doing duty on the Coast & in the associations between the native Officers & Europeans consequent upon their appointment slight manifestation of distrust on either side might suggest a defiant // deportment which would seriously demoralize and mar the efficiency of the Officers of the Medical Department.” After recommending the employment of Natives in the capacity of native Poll Tax medical men and after detailing on the supposed mistake that the Government had made by sending Native Medical Officers on the Coast he continued; — “The freemen of the tribes of this protectorate are a proud & highbred race, & they regard the natives of Sierra Leone especially with a distrust & barbaric aversion of which but a feint conception can be entertained in England.”

Charles O'Callaghan[,] Staff Asst. Surgeon[,] Principal Med. Officer

K) CMS/B/OMS/CA1/O117/9 – J. A. B. H. to the Educational Committee and reply

Enclosure No. 2

Second letter to President & Members of the Educational Committee & Reply to the same

A true copy[,] A. H.

Cape Coast Castle[,] 13th May 1862

To the President & Members of the Educational Committee War Office, London

— African Surgeon —

My Lord & Sirs,

I have the honor to return you my warmest thanks for the kind consideration & attention which you have hitherto given to any letter of the 13th July last relative to the appointment & training of African Surgeons for Service on the Coast of Africa.

It is an acknowledged fact that the benevolent cause which you are now favouring has for its grand object, not only to raise the standards of a race which only requires the stimulus to exert themselves for advancing their country's welfare but also to enable them to show to the world what England could do for a people that it espouses ; & every African on the Coast of Africa as well as in every part of the globe who are duly informed of the same will always show their // Government will not allow individual prejudices to prevent them from continuing in this most noble undertaking. I only pray that we who have first received the benefit will so conduct ourselves that you may regard us as worthy of the honor you have conferred on us.

In conclusion I must again state that I have no doubt that your endeavours will be crowned with greater success should young Africans have the advantage of preliminary education at Sierra Leone by an African before they be sent to England.

I have the honor to be[,] My Lord & Sirs[,] Your most obd & humble Servant
Africanus Horton, M.D.[,] Staff Asst. Surgeon

A true copy[,] A. H.

War Office[,] 19th June 1862

To A. Horton Esq. M. D.[,] Staff Asst. Surgeon[,] Cape Coast Castle[,] Gold Coast
— African Surgeon —

Sir,

I am directed by secretary Sir George C. Lewis to acknowledge the receipt of your letter of the 13th Ultimo, & to acquaint you in reply that as it is not intended for the present to train any further candidates natives of Africa for Army surgeoncies, Sir George Lewis does not consider it necessary to enter into the scheme proposed by you.

I am, Sir, Your obedient Servant
(Sgd.) Edward Luard

L) CMS/B/OMS/CA1/O117/10 – J. A. B. H. to Gov. Richard Pine

Enclosure No. 4

Letter to His Excellency Govr. Pine, and the Principal Merchants (Europeans & Native) on the Gold Coast dated 22nd Oct. 1863

A true copy[,] A. H.

Anamaboe[,] 22nd Oct 1860

My dear Sir

Reports of a nature calculated to operate much injuriously to the prospect of myself & Dr. Davies having been circulated, to the effect that the Community on the Gold Coast both Europeans & Natives & especially the officials have no confidence in the professional abilities of either of us & as I have attended you professionally I would desire to obtain from you in writing your candid opinion founded upon your experi-

ence of my treatment of you whether there are just grounds for such an ascertainment & if there is reason to believe the contrary. By you kindly stating your opinion in this subject you will much oblige[.]

Your(s) faithfully

J. A. B. Horton

M) CMS/B/OMS/CA1/O117/11 – Gov. Richard Pine to J. A. B. H.

Enclosure No. 5

Testimonial of His Excellency Governor Pine[.] Governor & Comd. in Chief of the Gold Coast[.] Dated 29th Oct

A true copy[.] A. H.

Government House Cape Coast[.] 29th October 1863

To J. A. B. Horton Esq. M. D.[.] Staff Asst. & Colonial Surgeon[.] Anamaboe

My dear Sir,

I regret to learn by your letter of the 22nd instant that rumours had reached you of a nature calculated to injure yourself & Dr. Davies to the effect that the Community on the Gold Coast both Europeans & natives, especially the officials have no confidence in the professional abilities of either of you, & requesting my opinion on the subject.

On my first arrival feeling much [†] in the subject, I enquired & ascertained that some slight prejudice might occasionally exist among Europeans but not among natives.

I may especially mention that among the superior class of Natives the utmost confidence existed in both yourself & Dr. Davies, & I only add that one of the officers of the late Gold Coast Artillery Corps (Lieut. Barrow,) spoke in terms of high praise of your skill & attention & that I heard from good Authority that your ~~attention~~ treatment of the late Capt. Hall was much judicious, & I witness your attention to the late Capt. Herrick on his late sad // visit to Cape Coast.

For myself I can conscientiously state that your devoted attention, judicious & watchful care under Providence, enabled me to live through the fatigues of my journey from Mankassin to Anamaboe, & that you never left me for two days & nights.

In conclusion, I assure you that I should have the most perfect confidence in the professional abilities of yourself & Dr. Davies.

I remain[.] My dear Sir[.] Your faithfully

(Sgd.) Rich. Pine Governor

N) CMS/B/OMS/CA1/O117/12 – J. A. B. H. to Charles Finlason and reply

Enclosure No. 6

Letter to Mr. C. Finlason[.] Esq. & reply to the same (One of the Principal European Merchants on the Gold Coast)

A true copy[.] A. H.

Anamaboe[,] 28th Oct 1863

My dear Finlason

Reports of a nature calculated to operate most injuriously to the prospect of myself & Dr. Davies having been circulated, to the effect that the community on the Gold Coast both Europeans & Native especially the officers have no confidence in the professional abilities of either of us. I would desire to obtain from you in writing your candid opinion whether there are just grounds for such an ascertainment or if there is reason to believe the contrary.

You well know justice and independence ensures me that I will receive a faithful & early reply.

I am[,] My dear Finlason[,] Faithfully yours,
J. A. B. Horton

A true copy[,] A. H.

Cape Coast[,] West Africa[,] 29th oct 1863

My dear Horton,

Yours received yesterday, the content surprises me not a [little]. I must however assure you on my honor, that I never heard any Officer except Mr. O'Callaghan speak otherwise than most friendly towards you. I have never, to my recollection ever heard Davies name mentioned since I have been on the Coast. I think you are labouring under a delusion; for my part I can assure you that I would sooner be under your Medical Care than a great many of the youthful Assistant Surgeons I have seen on the Coast. I think you have a friend in the Governor, I would advise you to run up & see him, he is more able to counsel than I am. It must be annoying that such reports should get about, & I would recommend you to sift it to the bottom.

I am, My dear Horton[,] Faithfully yours
Mr. Chas Finlason

O) CMS/B/OMS/CA1/O117/13 – Reply of Henry Barnes to J. A. B. H.

Enclosure No. 7

Testimony of H. Barnes Esq. One of the Principal Native Merchants on the Gold Coast

A true copy[,] A. H.

Prospect House[,] Cape Coast[,] 29th October 1863

To Doctor A. Horton[,] S. A. S.[,] Anamaboe

Sir,

I reply to your letter of yesterday's date. We have not yet heard of any reports been circulated likely to be injurious to the prospect of you. But I beg you will allow me to say, the Medicines you was kind enough sent to Mrs. Barnes once, cured her entirely, & the strengthening doses to myself, did me much good, – and also the cure effected by you of the large long standing sore leg of the little girl “[Eecooah]” in my House, Mrs. Barnes and I have much confidence in your professional abilities.

I remain, Sir, Your obdt. Servant

Henry Barnes

P) CMS/B/OMS/CA1/O117/14 – Reply of Samuel C. Brew to J. A. B. H.

Enclosure No. 8

Letter of S. C. Brew Esq. S. P. One of the Principal Native Merchants on the Gold Coast

A true copy[,] A. H.

Anamaboe[,] 6th November 1863

My dear Sir,

Yours of the 31th Oct. is to hand, and its contents, I must say, greatly surprised me.

As far as I am concerned I have never heard the faintest breath of the reports you say had been circulated regarding the professional skill of yourself & Dr. Davies. And, furthermore, I cannot believe that such reports could have been circulated, as I have never heard either of you spoken of but in terms of the greatest praises.

The community on the Gold Coast have always shown a partiality for the professional abilities of yourself & Dr. Davies in as much as your long stay on the Coast has made you become [vast] in the treatment of its diseases – whilst most of the European Doctors who make this their first or second visit on the Coast could not be as well acquainted with them; and how such reports could have been raised is quite beyond my conception.

As to the latter part of your letter wherein you say that a statement, viz.: “that the freemen of the tribes of the Protectorates regard // regard the natives of Sierra Leone especially with a distrust and a barbaric aversion of which but a feint conception can be entertained in England”, has been advanced, I can only say that the person who advanced such a statement must know next to nothing of the Coast as such is diametrically opposed to the truth.

And in concluding you will allow me to give vent to my candid opinion in saying that myself and the whole of the educated portion of the Gold Coast, with whom I am acquainted, repose the utmost confidence in your professional abilities, and that I would as soon, if not sooner, place myself under your medical treatment, as I would of any of the European Doctors who come out to this Coast.

I am, Faithfully yours,
(Sgd.) S. C. Brews

Q) CMS/B/OMS/CA1/O117/15 – Reply of George Blankson to J. A. B. H.

Enclosure No. 9

Letter of the Honble George Blankson[,] one of the Principal Native Merchants on the Gold Coast

A true copy[,] A. H.

Anamaboe[,] Novr 6th 1863

My dear Doctor

Your note has been handed to me : its contents surprise me greatly. You ask me to oblige you be stating if there be any truth in the statement of those who say that neither the European nor native community have any confidence in your professional ability? If, in reply, I contented myself with [re]ferring you to a letter written by me

to Governor Andrews in February 1861 I think I should have given as/an sufficient answer; I will assert however, that having had the benefit of your // professional attendance on myself and family for the space of four years, I have always found you not only skilful & attentive but kind & judicious. –

I will go further & state positively that the whole of the native & the greater portion of the European gentlemen here will support me in what I say in this occasion; – and did you wish it, some of those natives would gladly seize on the opportunity of testifying to the benefits desired from your professional treatment. –

Regarding the statement made that the freemen of this Protectorate // regard the natives of Sierra Leone with a distrust and barbaric aversion of which but a faint conception can be entertained in England; I must deny in [situ] the existence of such a feeling – the “freemen” of the Gold Coast would & do feel proud of the fellowship & society of their bretheren of Sierra Leone. – & how such an erroneous idea could have been published I cannot imagine.

I remain, My dear Doctor[,] Yours sincerely

(Signed) George Blankson

R) CMS/B/OMS/CA1/O117/16 – Reply of D. W. Gabb to J. A. B. H.

Enclosure No. 10

Testimonial of Capt. Gabb 4th W. I. Regt.[.] Late “ Foot Commanding[,] Detachment at Anamaboe

A true copy[,] A. H.

Anamaboe Fort[,] Oct 31st 1863

My dear Horton,

I would have answered your letter before but really the whole [morning] I have been so busy that I have not had a moment to spare however I now hasten to reply to it. With regard to the report which you say has been circulated to the effect that neither the European or Natives on the Gold Coast have any confidence in the professional abilities of either yourself or Dr. Davies, I myself for my part have never heard such report. I have only had the pleasure of knowing you for a short time but during that time I must say I have always know you to be most attentive to the sick of the Detachment under my Command. I have also heard from Lt. Barry 4th W. I. Regt. that during the illness of Captain Edwardes, a former Commandant of Anamaboe nobody could have been more kind & attentive than you were. And should I have the misfortune to fall sick here I should have no hesitation in applying for your professional Services.

I am, My dear Horton, Yours very truly

(Sgd.) D. W. Gabb

S) CMS/B/OMS/CA1/O117/17 – George Blankson to Gov. Edward B. Andrews and reply

Enclosure No. 11

Letter of Honble Geo. Blankson to Govern. Andrews relative to removal of Dr. Horton from Anamaboe[,] Dated 13th Febr'y 1861 & Reply to the same

A true copy[,] A. H.

Anamaboe[,] 13th Febr'y 1861

To His Excellency Governor E. B. Andrews

Your Excellency

Having heard indirectly of the removal of Dr. Horton from this to Dix Cove (although probably any writing on the subject will be of no avail []), yet, I cannot help stating, for your Excellency's consideration that the above gentleman has become very popular so that many persons are at present under his care fore Medical aid, amongst which are [†] Henderson and a few others from Cape Coast & it is for these reasons that I have presumed to inform your Excellency of the deep regret which his unexpected departure has caused to many of the residents of // Anamaboe, more especially to those who are under his Medical supervision.

I have the honor to be Your excellency's most obdt. Servant

(sgd.) Geo. Blankson

Certified a true Copy

Cape Coast[,] 14th Febr'y 1861

To George Blankson[,] I. P. &c. &c. &c. Anamaboe

Sir,

The Governor is glad to learn that the professional talents of Dr. Horton are so much appreciated at Anamaboe. The nomination or removal of the Medical Officers to or from the different stations rest with the chief Medical Officers, the Governor has no power of interfering with any arrangements which the chief Medical Officer may deem to be necessary for the good of the Public Service. All that the Governor can do is to avail himself of the opportunity of employing the Assistant Staff Surgeon when such an officer is appointed to station.

I am, Sir, Your most obedient Servant

Sgd. W. A. Ross[,] Colonial Secretary

T) CMS/B/OMS/CA1/O117/18 – Principal R. W. Jelf to J. A. B. H.

Enclosure No. 12

Testimonial of Dr. Jelf Principal of King's College London to Dr. Horton

A true copy[,] A. H.

King's College London[,] Nov. 3. 1858

I have much pleasure in bearing Witness in the warmest terms of the Excellent conduct & diligence of Mr. James B. Horton during the time which he has passed as a student in the Medical Department of this College. In the cause of his studies he

gained the prize in Surgery & five Certificates of Honor in different branches of Medical Instruction.

At the end of his cause he was on the recommendation of myself and the professors elected by the // Council to the Associateship of the College a distinction which always implies not only proficiency in studies, but also an unimpeachable academical Character.

(Sgd.) R. W. Jelf D. D.[.] Principal

U) CMS/B/OMS/CA1/O117/19 – J. A. B. H. to the CMS

Anamaboe[.] 10th December 1863

To the Committee of the Church Missionary Society &c. &c. &c.[.] 14 Salisbury Square Fleet Street[.] London

Gentlemen,

I have the honor to forward copies of correspondence between myself & His Excellency Governor Pine relative to the proposal which I made to the Home Government – a copy [of] which was forwarded to you by the last mail & will call your attention to his statement that the plan should be [proceeded] with [rigour].

I have the honor to be[.] Gentlemen[.] Your most obedient Servant

J. A. B. Horton[.] Staff Asst. Surgeon

V) CMS/B/OMS/CA1/O117/20 – J. A. B. H. to Governor Richard Pine

A true copy[.] A. H.

Anamaboe[.] 3rd December 1863

To His Excellency Governor Pine &c. &c. &c. Cape Coast Castle Your Excellency, By the last mail I wrote to the Educational Committee War Office, repeating a proposition which I made to them on the 13th July 1861 relative to the improvement of the rising generation of Africa.

As you have always been most favourable with every measure that tends to raise Africa & its sons & have always been ready to promote good causes without partiality [&] diffidence, I beg to submit for your [†] and remarks the duplicate copy of my letter to the War Department by the last mail.

I beg that your Excellency will [pardon] me for the overweight by the last mail & hope that your remarks will be favourable to the cause, as it will be invaluable to the Government & its Officials & the rising generation of Africa.

I am, Your Excellency's most obedient Servant

J. A. B. Horton[.] Staff Asst. Surgeon

W) CMS/B/OMS/CA1/O117/21 – Governor Richard Pine to J. A. B. H.

A true copy[,] A. Horton

Government House[,] Cape Coast[,] 7th December 1863

Sir,

I have to acknowledge the receipt[sic] of your letter of the 3rd Instant with its enclosures on the Subject of your propositions, to the educational Committee at the War Office for the establishment of a preparatory medical School at Sierra Leone.

I have perused with much interest the Correspondence which has passed on the Subject and at your request make thereon a few remarks.

I confess that I am Surprised to perceive the Strongly expressed opinions of Captain Brownwell and Dr. O'Callaghan with respect to the alleged prejudice existing in this Protectorate against yourself and Dr. Davies, and their consequent report that the System introduced by Her Majesty's Government // Government of educating young Africans as Surgeons cannot be pursued with advantage – I am especially Struck with Dr. O'Callaghan's assertion, "that the inhabitants of the Gold Coast regard "the natives of Sierra Leone, especially with a distrust "and barbaric aversion of which but a faint conception can be entertained in England."

My experience does not warrant such a Statement for I am aware that many of the inhabitants of this Territory have intermarried with those of Sierra Leone, and there are and have been Several Government employees from the last named Colony, amongst whom I would mention Mr. [Coker] the first writer in the Secretary's office and who enjoys certainly as much respect as if he were a native of the Gold Coast if not more –

I am well acquainted with Captain Brownwell and Mr. O'Callaghan, and I venture to express a conviction that were these Gentlemen now asked to confirm the opinions which they expressed two years since, they would hesitate to do so: nay I will go further and State my belief, that Mr. O'Callaghan holds a different opinion of the Same subject now. // I have already expressed in my note to you my knowledge of the position here of yourself and Dr. Davies, and I unhesitatingly express a hope that Her Majesty's Government will reconsider and adopt your proposition if it is not prepared to abandon its philanthropic objects with respect to the civilization of Africa.

I will not disguise the fact of there being a prejudice and objection on the part of European Medical Officers to the introduction of men of Colour who may become their Seniors on the Coast, but I cannot for one moment imagine that a high and important principle is to be abandoned only on account of a prejudice, which must be admitted on all hands to be unchristianlike, unreasonable, unjust, and inconvenient, and which must, I contend, give way Should her Majesty's Government consider the fact established of the competency of the Africans for the medical profession.

I say this prejudice must give way, because it is within recollection that the late Staff Surgeon Ferguson was held in the highest esteem and respect as Principal Medical Officer on the Coast for years, and eventually became Governor of Sierra Leone // and I never yet heard of any Surgeon junior to himself raising an objection to Serving under him or of any Officer Civil or Military having been permitted to protest against his rule on account of his Colour. – and again the appointment of Mr. Carr as Chief Justice of Sierra Leone upwards of twenty years ago is a proof that English Barristers have not thought it beneath their dignity to hold the Office of

Queens advocate under him and practice in his courts. Mr. Smyth, Mr. Nicol, Mr. Commissiony have all held high positions in that Colony and European Gentlemen have Served under them for years, and many a Young Gentleman have I seen cheerfully serving under coloured employers. Why then should the medical profession alone be permitted to retain and indulge in a mischievous prejudice against the man of Colour? Unless then the British Government permits it, the system of educating African Surgeons for Service on the Coast should instead of being abandoned be pursued with rigour, so that the intellectual // equality of the African Scholar may together with other considerations combat against and eventually dissipate narrow-minded prejudice.

I would suggest that the candidates selected for Medical training should not be exclusively from Sierra Leone, but that a fair proportion should be taken from the Gold Coast and the Gambia; and that the only other remedy for the hardships complained of by European Surgeons is the formation of Strong African Medical Corps for continued Service on the Coast. –

In conclusion I would say that however erroneous my views may appear I am willing to test them by a prolonged residence on the Coast with which I have been officially for many years connected.

I am, Sir[,] Your most obedient Servant

Rich. Pine[,] Governor